CANDIDATE ADVERTISEMENT AGREEMENT FORM

See Order for proposed schedule and charges. See Invoice for actual schedule and charges.	
l,	, hereby request station time as follows:
IDENTIFY CANDIDATE TYPE STATE OR LOCAL CANDIDATE STATE OR LOCAL CANDIDATE	
ALL QUESTIONS/BLOCKS MUST BE COMPLETED	
Candidate name:	
Authorized committee:	
Agency requesting time (and contact information):	
N/A	
Candidate's political party:	
Office sought (no acronyms or abbreviations):	
Date of election:	General Primary
Treasurer of candidate's authorized committee:	
The undersigned represents that:	
(1) the payment for the broadcast time requested has been furnished by (check one box below):	
the candidate listed above who is a legally qualified candidate, or	
the authorized committee of the legally qualified candidate listed above;	
(2) this station is authorized to announce the time as paid for by such person or entity; and	
(3) this station has disclosed its political advertising policies, including applicable classes and rates, discount, promotion and other sales practices (not applicable to federal candidates).	
THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISCRIMINATION ON THE BASIS OF RACE OR ETHNICITY IN THE PLACEMENT OF ADVERTISING.	
Candidate/Committee/Agency	Station Representative
Signature: Wike Furman	Signature:
Name:	Name:
Date of Request to Purchase Ad Time:	Date of Station Agreement to Sell Time: