

CANDIDATE ADVERTISEMENT AGREEMENT FORM

See Order for proposed schedule and charges. See Invoice for actual schedule and charges.
1. New York 2. Family support option: none at this time

EMBROIDERED CANDIDATE TYPE 800 FEDERAL CANDIDATE STATE OR LOCAL CANDIDATE

ALL QUESTIONS BELOW MUST BE COMPLETED

Candidate name: [redacted]
 Address: [redacted]
 Agency requesting this kind of service: Simon Spector Strategic 888-500-5943
 Candidate political party: Democrat
 Office sought by candidate or candidate: Assembly District #74
 Date of election: 11/3/20 General Primary
 Name of candidate and political party: Theresa Byrne
 The undersigned certifies that:
 (1) the candidate for the broadcast time requested has been tested and is qualified as follows:
 The candidate listed above who is a legally qualified candidate, or
 The authorized committee of the legally qualified candidate listed above.
 (2) the station is authorized to broadcast the time as paid for by such person or entity, and
 (3) the station has declined to publish advertising notices, including equal time notices and vote, abstain, protest, nomination notices and other notices not applicable to the candidate.
 THIS DOCUMENT DOES NOT CONSTITUTE OR PRESENT OR CONSTITUTE AN ENDORSEMENT OR THE PLACEMENT OF ADVERTISING BY THE PLACEMENT OF ADVERTISING.
 Candidate/Committee Agency: [redacted] Station: Member 501
 Name: [redacted] Name: Member 501
 Date of Request or Purchase Air Time: 8-19-20 Date of Station Agreement to Sell Time: 8-19-20

Federal Candidate Certification
 The undersigned hereby certifies that the broadcast notice to be placed pursuant to this document either (1) does not refer to an opposing candidate or (2) does, (2) contains a fairly and fully identified plaintiff or viable range of the candidate for a duration of at least five seconds and a proportionately identical printed statement identifying the candidate, that the candidate approved the broadcast and that the candidate and/or the candidate's authorized committee paid for the broadcast as a public programming, provides a general public opinion by the candidate that identifies the candidate, the office being sought and that the candidate has approved the broadcast.
 Candidate/Committee Agency: [redacted]
 Name: [redacted]
 Date: 8-19-20

TO BE COMPLETED BY STATION ONLY

Advertisement is correct? No Yes Not as ordered
 Note: Must have separate PB-18 forms for each version of the ad (i.e., for every ad with differing copy).
 Federal candidate verification agreed above: No Yes N/A
 Description:
 Accepted
 Accepted by NAB (e.g., all copy not pre-processed to determine proper E/P)
 Rejected - provide reason:
 Attached partially accepted form, then promptly updated updated form when complete.
 Date and name of follow-up, if any (e.g., insufficient copies of log)
 Contact # Station Call Letters Date Requested/Required
 Ad # Station Location Run Dates and Cost/Spots

Station notes: This form and invoice for public opinion polls and other documents reflecting this information to the CFP and the spots to determine schedule of this purchase, when spots actually aired, the date they get and the date of this purchase or other separately. Station will not update the actual time spots until an invoice is generated. The name of a contact person who can provide that information immediately should be placed in the "Name and Telephone" block in the CFP.