

POLITICAL RECORD OF REQUEST

(COMPLETED FORM MUST BE SENT AT TIME OF REQUEST AND WILL BE PLACED IN POLITICAL/ PUBLIC INSPECTION FILE.)

1. Requestor Information:

Requestor Name: Buying Time

Phone Number: 202-965-5060

Contact Name: Liz Olson

Address: 650 Massachusetts Ave, NW Suite 210, Washington, DC 20001

2. Date of request: 7/17

3. Request received by: Ampersand

4. (check applicable box(es))

Federal Candidate

State or Local Candidate

PRIMARY ELECTION

Democrat **Republican** **Other**

GENERAL ELECTION

Democrat **Republican** **Other**

5. Election (office sought & date): FL CD-15, 8/18

6. On behalf of (candidate name(s) & authorized campaign committee name(s)):Hattersley for Congress

7. Name, address & phone number of the contact person for the candidate or candidate's authorized campaign committee:

a. Contact Name (please enter full name): Karen Diehl

b. Phone Number:

c. Address:

8. Name of treasurer of the candidate's authorized committee: Lora Haggard

9. Describe of the Content of the Ad:

10. DMA: _____, Interconnect (Check if Yes)

Zones:

11. Distribution Platform(s): Check if applies:

Linear TV; **VOD;** **Digital/websites/apps**

12. Date and information provided, if any:

13. Disposition:

Accepted – see attached contract details

Rejected – provide reason: Click or tap here to enter text.

14. Additional Information: Click or tap here to enter text.

Date ROR completed on: _____