AGREEMENT FORM FOR NON-CANDIDATE/ISSUE ADVERTISEMENTS

Station and Location:	**Date**:

I, STRATEGIC MEDIA PLACEMENT
do hereby request station time concerning the following issue:

DRUG PRICE RELIEF ACT

Broadcast Length	Time of Day, Rotation or Package	Days	Class	Times per Week	Number of Weeks

Total Charges:

This broadcast time will be used by: OHIO TAXPAYERS FOR LOWER DRUG PRICES

Does the programming (in whole or in part) communicate "a message relating to any political matter of national importance?"

☐ Yes ☑ No

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For programming that "communicates a message relating to any political matter of national importance," list the name of the legally qualified candidate(s) the programming refers to, the office(s) being sought and the date(s) of the election(s) (if applicable):

For programming that "communicates a message relating to any political matter of national importance," attach Agreed Upon Schedule (Page 3)

I represent that the payment for the above described broadcast time has been furnished by:

OHIO TAXPAYERS FOR LOWER DRUG PRICES 545 E TOWN ST, COLUMBUS, OH 43215 PRESIDENT MICHAEL WEINSTEIN

and you are authorized to announce the time as paid for by such person or entity. The entity furnishing the payment, if other than an individual person, is:

☐ **a corporation;** ☑ **a committee;** ☐ **an association;** ☐ **or other unincorporated group.**

The names, offices, and addresses of the chief executive officers, directors, and/or authorized agents of the entity are named below (may be attached separately):

THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISCRIMINATION ON THE BASIS OF RACE OR ETHNICITY IN THE PLACEMENT OF ADVERTISING.

I agree to indemnify and hold harmless the station for any damages or liability, including reasonable attorney's fees, that may ensue from the broadcast of the above-requested advertisement(s). **For the above-stated broadcast(s), I also agree to prepare a script, transcript, or tape, which will be delivered to the station at least _____ before the time of the scheduled broadcasts.**

TO BE SIGNED BY ISSUE ADVERTISER

5/24/17	A. S	203-376-9992
Date	Signature	Contact Phone Number

TO BE SIGNED BY STATION REPRESENTATIVE

☐ **Accepted** ☐ **Accepted in Part** ☐ **Rejected**

Signature	Printed Name	Title

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AGREED UPON SCHEDULE

For All Issue Advertisements That Communicate a Message Relating to Any Political Matter of National Importance

Broadcast Length	Time of Day, Rotation or Package	Days	Class	Times per Week	Number of Weeks

Total Charges:

AFTER AIRING OF BROADCASTS:

Attach invoices or Schedule Run Summary to this Form showing:

(1) actual air time and charges for each spot;

(2) the date(s), exact time(s) and reason(s) for Make-Good(s), if any; and

(3) the amount of rebates given (identify exact date, time, class of broadcast and dollar amount for each rebate), if any.

Note: Because the FCC requires that the political file contain the actual times the spots air, that information should be included in the file as soon as possible. If that information is only generated monthly, the file should include the name of a contact person who can provide the times that specific spots aired.

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