AGREEMENT FORM FOR POLITICAL CANDIDATE ADVERTISEMENTS

(check applicable box)

☒ **FEDERAL CANDIDATE** ☐ **STATE/LOCAL CANDIDATE**

To Avail Themselves Of The Lowest Unit Charge During A Political Window, Federal Candidates Must Sign The Certification On Page 3

Station and Location:	**Date:**

I, Katelyn Brawn,

being/on behalf of: Georgians for Isakson,

a legally qualified candidate of the Republican

political party for the office of: Senate

in the general

election to be held on: 11/8/16

do hereby request station time as follows:

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

Attach proposed schedule with charges (if available): gross

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FEDERAL CANDIDATE CERTIFICATION

In Order For Federal Candidates To Receive The Lowest Unit Charge During A Political Window, The Following Certification Is Required:

I, MARTIN KILPATRICK
(name of federal candidate or authorized committee) hereby certify that the programming to be broadcast (in whole or in part) pursuant to this agreement:

☐ **does** ☑ **does not**

refer to an opposing candidate (check applicable box). I further certify that for the programming that does refer to an opposing candidate:

(check applicable box)

☑ the radio programming contains a personal audio statement by the candidate that identifies the candidate, the office being sought, and that the candidate has approved the broadcast.

☑ the television programming contains a clearly identifiable photograph or similar image of the candidate for a duration of at least four seconds, and a simultaneously displayed 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.

signature of candidate or authorized committee

MARTIN KILPATRICK, CAMPAIGN MANAGER — 5/5/16

printed name — **date**

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

_____

and you are authorized to announce the time as paid for by such person or entity. I represent that this person or entity is either a legally qualified candidate or an authorized committee/organization of the legally qualified candidate.

The name of the treasurer of the candidate's authorized committee is:

Jon Anderson

This station has disclosed to me its political advertising policies, including: applicable classes and rates; and discount, promotional 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.

To Be Signed By Candidate or Authorized Committee

5/5/16	
Date	Signature

To Be Signed By Station Representative

☐ Accepted ☐ Accepted In Part ☐ Rejected

Signature	Printed Name	Title

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Political Client
Information Request Form

Candidate Name:	Johnny Isakson
Official Campaign Name:	Georgians for Isakson
Address:	PO Box 250116
City, State & Zip Code:	Atlanta, GA 30325
Campaign Phone:	770.818.1493
Campaign Fax:	770.818.1609
Campaign Contact Person:	Trey Kilpatrick
Campaign Treasurer:	Jon Anderson

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