POLITICAL FILE CHECKLIST

Advertiser Name (ADVERTISER #)	Payment to be furnished by:	
Citizens for John M Caballo	Citizens for John M Caballo	

Name of Candidate (CANDIDATE)	Office for which Candidate is Running (OFFICE)	Election Date
John Caballo	State Representative	11/8/16

Contract #	NAB PB-18 Agreement	Candidate Certification *(Federal Only)*	Disclosure Statement Sent	Agency Order/Request	OSI Contracts & Revisions	Ad Copy Approved by	Invoices & Revisions	Rebate Notifications
421377	10/12/16	10/12/16	emailed	10/12/16	10/12/16	RC		
421914	10/18/16	↓	↓	10/18/16	10/18/16	↓		
422624	10/25/16	↓	↓	10/25/16	10/25/16	↓		