Contract Agreement Between:

# CONTRACT

WOAY-TV
7113 Legends Hwy
Oak Hill, WV 25901
(304) 469-3361

| Contract / Revision | Alt Order # |
|---|---|
| 7595 / | |

| Advertiser | Original Date / Revision |
|---|---|
| Alliance for Patient Access | 05/17/22 / 05/17/22 |

| Contract Dates | Estimate # |
|---|---|
| 05/16/22 - 06/05/22 | 1394 |

Product
Alliance for Patient

| Billing Cycle | Billing Calendar | Cash/Trade |
|---|---|---|
| EOM/EOC | Broadcast | Cash |
| **Property** | **Account Executive** | **Sales Office** |
| WOAY-TV | CoxReps Washingtor | CoxReps-Natior |

Special Handling

Demographic
Households

| Agy Code | Advertiser Code | Product 1/2 |
|---|---|---|
| | | |

| Agency Ref | Advertiser Ref |
|---|---|
| | |

And:

Political Communications Advertising
122 East 42nd St
Suite 2900
New York, NY 10168

| *Line | Ch | Start Date | End Date | Description | Start/End Time | Days | Length | Spots/ Week | Rate | Type | Spots | Amount |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| N 1 | WOAY | 05/16/22 | 06/03/22 | GMA M-F | 7a-9a | | :30 | | | NM | 10 | $900.00 |
| | Start Date | End Date | Weekdays | Spots/Week | Rate | | | | | | | |
| Week: | 05/16/22 | 05/22/22 | --WTF-- | 4 | $90.00 | | | | | | | |
| Week: | 05/23/22 | 05/29/22 | MTWTF-- | 4 | $90.00 | | | | | | | |
| Week: | 05/30/22 | 06/05/22 | MTWTF-- | 2 | $90.00 | | | | | | | |
| N 2 | WOAY | 05/22/22 | 05/29/22 | Good Morning America Su | 8a-9a | | :30 | | | NM | 2 | $180.00 |
| | Start Date | End Date | Weekdays | Spots/Week | Rate | | | | | | | |
| Week: | 05/16/22 | 05/22/22 | ------S | 1 | $90.00 | | | | | | | |
| Week: | 05/23/22 | 05/29/22 | ------S | 1 | $90.00 | | | | | | | |
| N 3 | WOAY | 05/18/22 | 05/27/22 | Newswatch At Noon | 12p-1230p | | :30 | | | NM | 8 | $640.00 |
| | Start Date | End Date | Weekdays | Spots/Week | Rate | | | | | | | |
| Week: | 05/16/22 | 05/22/22 | --WTF-- | 3 | $80.00 | | | | | | | |
| Week: | 05/23/22 | 05/29/22 | MTWTF-- | 5 | $80.00 | | | | | | | |
| N 4 | WOAY | 05/18/22 | 06/05/22 | Newswatch At 6 | 6p-630p | | :30 | | | NM | 9 | $2,250.00 |
| | Start Date | End Date | Weekdays | Spots/Week | Rate | | | | | | | |
| Week: | 05/16/22 | 05/22/22 | --WTF-- | 4 | $250.00 | | | | | | | |
| Week: | 05/23/22 | 05/29/22 | MTWTF-- | 4 | $250.00 | | | | | | | |
| Week: | 05/30/22 | 06/05/22 | MTWTF-- | 1 | $250.00 | | | | | | | |
| N 5 | WOAY | 05/18/22 | 06/05/22 | ABC World News M-F | 630p-7p | | :30 | | | NM | 9 | $4,500.00 |
| | Start Date | End Date | Weekdays | Spots/Week | Rate | | | | | | | |
| Week: | 05/16/22 | 05/22/22 | --WTF-- | 3 | $500.00 | | | | | | | |
| Week: | 05/23/22 | 05/29/22 | MTWTF-- | 5 | $500.00 | | | | | | | |
| Week: | 05/30/22 | 06/05/22 | MTWTF-- | 1 | $500.00 | | | | | | | |
| N 6 | WOAY | 05/21/22 | 05/28/22 | ABC World News Sa | SA 630p-7p | | :30 | | | NM | 2 | $600.00 |
| | Start Date | End Date | Weekdays | Spots/Week | Rate | | | | | | | |
| Week: | 05/16/22 | 05/22/22 | -----S- | 1 | $300.00 | | | | | | | |
| Week: | 05/23/22 | 05/29/22 | -----S- | 1 | $300.00 | | | | | | | |
| N 7 | WOAY | 05/22/22 | 05/29/22 | Newswatch At 6 Su | 6p-630p | | :30 | | | NM | 2 | $300.00 |
| | Start Date | End Date | Weekdays | Spots/Week | Rate | | | | | | | |
| Week: | 05/16/22 | 05/22/22 | ------S | 1 | $150.00 | | | | | | | |
| Week: | 05/23/22 | 05/29/22 | ------S | 1 | $150.00 | | | | | | | |
| N 8 | WOAY | 05/21/22 | 05/28/22 | Newswatch at 11p SaSu | 11p-1130p | | :30 | | | NM | 2 | $250.00 |
| | Start Date | End Date | Weekdays | Spots/Week | Rate | | | | | | | |
| Week: | 05/16/22 | 05/22/22 | -----S- | 1 | $125.00 | | | | | | | |

(* Line Transactions: N = New, E = Edited, D = Deleted)

Notwithstanding to whom bills are rendered, advertiser, agency and service, jointly and severally, shall remain obligated to pay to station the amount of any bills rendered by station within the time specified and until payment in full is received by station. Payment by advertiser to agency or to service or payment by agency to service, shall not constitute payment to station. Station will not be bound by conditions, printed or otherwise contracts, insertion orders, copy instructions or any correspondence when such conflict with the above terms and conditions. Two week advance cancellation notice is required unless otherwise specified.

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Contract Agreement Between:

**WOAY-TV**
**7113 Legends Hwy**
**Oak Hill, WV 25901**
**(304) 469-3361**

| Contract / Revision | Alt Order # |
|---|---|
| 7595 / | |

| Advertiser | Original Date / Revision |
|---|---|
| **Alliance for Patient Access** | 05/17/22 / 05/17/22 |

| Contract Dates | Product | Estimate # |
|---|---|---|
| **05/16/22 - 06/05/22** | Alliance for Patient | **1394** |

| *Line | Ch | Start Date | End Date | Description | Start/End Time | Days | Length | Spots/ Week | Rate | Type | Spots | Amount |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | Start Date | End Date | Weekdays | Spots/Week | Rate | | | | | | |
| Week: | | 05/23/22 | 05/29/22 | -----S- | 1 | $125.00 | | | | | | |
| | | | | | | Totals | | | | | 44 | $9,620.00 |

| Time Period | # of Spots | Gross Amount | Agency Comm. | Net Amount |
|---|---|---|---|---|
| 04/25/22 -05/29/22 | 40 | $8,690.00 | ($1,303.50) | $7,386.50 |
| 05/30/22 -06/03/22 | 4 | $930.00 | ($139.50) | $790.50 |
| Totals | 44 | $9,620.00 | ($1,443.00) | $8,177.00 |

**Signature:** _____ **Date:** _____

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# ISSUE (Non-candidate) ADVERTISEMENT AGREEMENT FORM

I, PCA, hereby request station time as follows: See **Order** for proposed schedule and charges. See **Invoice** for actual schedule and charges.

**Check one:**

☐ Ad "communicates a message relating to any political matter of national importance" by referring to (1) a legally qualified candidate for federal office; (2) an election to federal office; (3) a national legislative issue of public importance (e.g., health care legislation, IRS tax code, etc.); or (4) a political issue that is the subject of controversy or discussion at the national level.

☑ Ad does NOT communicate a message relating to any political matter of national importance (e.g., relates only to a state or local issue).

**ALL QUESTIONS/BLOCKS MUST BE COMPLETED**

**Station time requested by:** Alliance for Patient Access

Agency name: PCA

Address: 11 E 44th St, NY, NY 10017

Contact: Katie Cunningham | Phone number: 6464435076 | Email: katie@pcanyc.com

**Name of advertiser/sponsor (list entity's full legal name as disclosed to the Federal Election Commission [for federal committees] with no acronyms; name must match the sponsorship ID in ad):**

Name: Alliance for Patient Access

Address: 2020 K St. NW Suite 205, Washington DC

Contact: | Phone number: 202-951-7097 | Email: info@allianceforpatientaccess.org

Station is authorized to announce the time as paid for by such person or entity.

**List ALL chief executive officers, members of the executive committee and the board of directors or other governing group(s) of the advertiser/sponsor (Use separate page if necessary.):**

Colleen Evans - Treasurer

By signing below, advertiser/sponsor represents that those listed above are the only executive officers, members of the executive committee and board of directors or other governing group(s).

**If ad refers to a federal candidate(s) or federal election, list ALL of the following:** ☑ N/A

Name(s) of every candidate referred to:

Office(s) sought by such candidate(s) (no acronyms or abbreviations):

Date of election:

Clearly identify **EVERY** political matter of national importance referred to in the ad (no acronyms); use separate page if necessary: ☑ N/A

Protect Innovation in Medicine

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

The advertiser/sponsor agrees to indemnify and hold harmless the station for any damages or liability, including reasonable attorney's fees, which may arise from the broadcast of the above-requested advertisement(s). For the above-requested ad(s), the advertiser/sponsor also agrees to prepare a script, transcript or tape, which will be delivered to the station by the log deadlines outlined in the station's disclosure statement.

| Advertiser/Sponsor | Station Representative |
|---|---|
| Signature: Phil Cunningham | Signature: [illegible] |
| Name: Phil Cunningham | Name: Robin DiBartolomeo |
| Date of Request to Purchase Ad Time: 05/11/2022 | Date of Station Agreement to Sell Time: 5/17/22 |

**TO BE COMPLETED BY STATION ONLY**

Ad submitted to station? [✓] Yes [ ] No Date ad received: AFPAO IWVH "Hope WV" 5/17/22

**Note: Must have separate PB-19 forms for each version of the ad (i.e., for every ad with differing copy).**

If only one officer, executive committee member or director is listed above, station should ask the advertiser/sponsor in writing if there are any other officers, executive committee members or directors, maintain records of inquiry and update this form if additional officers, members or directors are provided.

Disposition:

[✓] Accepted

[ ] Accepted IN PART (e.g., ad not received to determine content)*

[ ] Rejected – provide reason:

*Upload partially accepted form, then promptly upload updated final form when complete.

Date and nature of follow-ups, if any:

| | | |
|---|---|---|
| Contract #: 7595 | Station Call Letters: WOAY-TV | Date Received/Requested: 5/16/22 |
| Est. #: 1394 | Station Location: Oak Hill, WV | Run Start and End Dates: 5/18/22 - 6/5/22 |

**For national issue ads only (not required for state/local issue ads):**

Upload order, this disclosure form and invoice (or traffic system print-out) or other material reflecting this transaction to the OPIF or use this space to document schedule of time purchased, when spots actually aired, the rates charged and the classes of time purchased (including date, time, class of time and reasons for any make-goods or rebates) or attach separately. If station will not upload the actual times spots aired until an invoice is generated, the name of a contact person who can provide that information immediately should be placed in the "Terms and Disclosures" folder in the OPIF.