



FILSCAP LICENSE APPLICATION FORM ELECTION CAMPAIGN

Date of Application _____

LICENSEE DETAILS:

Business Name/ Political Party/ Name of Candidate _____

Address _____

Telephone Number _____ Fax Number _____

Representative _____

Designation _____

Mobile Number _____ Email Address _____

Signatory _____

Designation _____

DETAILS FOR ASSESSMENT:

A. POSITION RUNNING FOR:

- | | |
|---|---|
| <input type="checkbox"/> President/Vice President | <input type="checkbox"/> Senator |
| <input type="checkbox"/> Congressman | <input type="checkbox"/> Governor |
| <input type="checkbox"/> Provincial Board Member (Class: ___) | <input type="checkbox"/> City Mayor (Class: ___) |
| <input type="checkbox"/> City Councilor (Class: ___) | <input type="checkbox"/> Municipal Mayor (Class: ___) |
| <input type="checkbox"/> Municipal Councilor (Class: ___) | |

B. LICENSING OPTIONS

- | | |
|--|--|
| <input type="checkbox"/> Blanket Rate | <input type="checkbox"/> Daily Rate |
| <input type="checkbox"/> Candidate Basis | <input type="checkbox"/> Party/Slate Basis |
| <input type="checkbox"/> Campaign Sortie w/ live performance
(singers, dancers, live bands) | <input type="checkbox"/> Campaign Sortie w/o live performance
(background music only) |
| <input type="checkbox"/> All Local and National Candidates | |

Signature over Printed Name _____