KAIT-TV INVOICE

Bill To:

Marathon Ventures (comm) 675 3rd Avenue, 11th Floor New York, NY 10017

Please Remit To:

KAIT

PO Box 14200

Tallahassee, FL 32314-4200

Due Date: 10/29/19

Invoice#	Broadcast Month
1260729-2	201909
Account Executive	Advertiser
House, Jonesboro	SoClean (M)
Representative	Rep Order #
	D-172411

Client Code: Product Code:

Estimate Code: Havas Edge

Invoice Date 09/29/19	Flight 08/26/19-09/29/19			
Product SoClean	Order Type CASH			
Total Spots:	1			
Actual Gross Billing:	\$2.00			
State Tax:	\$0.00			
Local Tax:	\$0.00			
Agency Commission:	\$0.55			
Net Due:	\$1.45			

Comments:

We warrant that the actual broadcast information shown on this invoice was taken from the program log. Gray does not discriminate in its advertising contracts, and it will not accept advertising intended to discriminate on the basis of race or ethnicity. Advertiser hereto affirms that nothing in this Agreement is intended to discriminate on the basis of race or ethnicity. This Agreement is subject to the Standard Terms and Conditions available at www.gray.tv/advertising.

Billing Instructions:

Doscriu	ation: Ci	gn-On/Sign-0	Off 1.25 VI	<u>Lin</u>	e Star	t <u>End</u>	Days MTWTFSS	Spots/Week 5	Rate \$2.00		
# 4	Day Tu	Date 09/24/19	Time 02:29 A	Length 60	Rate \$2.00	<u>Copy</u> 1125505561H		Program Descrip		Class NM	Remarks

Additional Comments:

Total Spots:	1
Actual Gross Billing:	\$2.00
State Tax:	\$0.00
Local Tax:	\$0.00
Agency Commission:	\$0.55
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