

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

<u>Invoice#</u> 1265668-3	<u>Broadcast Month</u> 201909	<u>Invoice Date</u> 09/29/19	<u>Flight</u> 08/26/19-09/29/19
<u>Account Executive</u> House, Jonesboro	<u>Advertiser</u> Health Market (M)	<u>Product</u> Medicare Supplement	<u>Order Type</u> CASH
<u>Representative</u>	<u>Rep Order #</u> D-171740	<div><div>Total Spots:</div><div>11</div></div>	
<u>Client Code:</u>		<div><div>Actual Gross Billing:</div><div>\$264.00</div></div>	
<u>Product Code:</u>		<div><div>State Tax:</div><div>\$0.00</div></div>	
<u>Estimate Code:</u> Bluewater		<div><div>Local Tax:</div><div>\$0.00</div></div>	
		<div><div>Agency Commission:</div><div>\$73.26</div></div>	
		<div><div>Net Due:</div><div>\$190.74</div></div>	

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:

					<u>Line</u>	<u>Start</u>	<u>End</u>	<u>Days</u>	<u>Spots/Week</u>	<u>Rate</u>
					1			MTWTFSS	4	\$24.00
Description: Sign-On/Sign-Off, 9:00 AM-5:00 PM										
#	Day	Date	Time	Length	Rate	Copy	Program Description	Class	Remarks	
1	W	08/28/19	04:32 P	120	\$24.00	BOS26192100H	Sign-On/Sign-Off	NM		
1	F	08/30/19	09:52 A	120	\$24.00	BOS26192100H	Sign-On/Sign-Off	NM		
1	Su	09/01/19	12:50 P	120	\$24.00	BOS26192100H	Sign-On/Sign-Off	NM		

				<u>Line</u>	<u>Start</u>	<u>End</u>	<u>Days</u>	<u>Spots/Week</u>	<u>Rate</u>
				2			MTWTFSS	4	\$24.00
Description: Sign-On/Sign-Off, 9:00 AM-5:00 PM									
#	Day	Date	Time	Length	Rate	Copy	Program Description	Class	Remarks
2	F	09/06/19	11:27 A	120	\$24.00	BOS26192100H	Sign-On/Sign-Off	NM	
2	Su	09/08/19	12:40 P	120	\$24.00	BOS26192100H	Sign-On/Sign-Off	NM	

				<u>Line</u>	<u>Start</u>	<u>End</u>	<u>Days</u>	<u>Spots/Week</u>	<u>Rate</u>
				3			MTWTFSS	4	\$24.00
Description: Sign-On/Sign-Off, 9:00 AM-5:00 PM									
#	Day	Date	Time	Length	Rate	Copy	Program Description	Class	Remarks
3	Su	09/15/19	12:49 P	120	\$24.00	BOS26192100H	Sign-On/Sign-Off	NM	

				<u>Line</u>	<u>Start</u>	<u>End</u>	<u>Days</u>	<u>Spots/Week</u>	<u>Rate</u>
				4			MTWTFSS	4	\$24.00
Description: Sign-On/Sign-Off, 9:00 AM-5:00 PM									
#	Day	Date	Time	Length	Rate	Copy	Program Description	Class	Remarks
4	Th	09/19/19	04:46 P	120	\$24.00	BOS26192100H	Sign-On/Sign-Off	NM	
4	Su	09/22/19	04:48 P	120	\$24.00	BOS26192100H	Sign-On/Sign-Off	NM	

				<u>Line</u>	<u>Start</u>	<u>End</u>	<u>Days</u>	<u>Spots/Week</u>	<u>Rate</u>
				5			MTWTFSS	4	\$24.00
Description: Sign-On/Sign-Off, 9:00 AM-5:00 PM									
#	Day	Date	Time	Length	Rate	Copy	Program Description	Class	Remarks
5	M	09/23/19	02:25 P	120	\$24.00	BOS26192100H	Sign-On/Sign-Off	NM	
5	Th	09/26/19	03:53 P	120	\$24.00	BOS26192100H	Sign-On/Sign-Off	NM	
5	F	09/27/19	02:45 P	120	\$24.00	BOS26192100H	Sign-On/Sign-Off	NM	

Additional Comments:

Total Spots:	11
Actual Gross Billing:	\$264.00
State Tax:	\$0.00
Local Tax:	\$0.00
Agency Commission:	\$73.26
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Net Due:	\$190.74