KCBD-TV INVOICE

Bill To:

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

Please Remit To:

KCBD

AmSouth Bank Attn: Lockbox #1370

PO Box 11407, Birmingham, AL 35246-1370

Due Date: 10/29/19

| Invoice# 1265490-3 | Broadcast Month 201909 | Invoice Date 09/29/19 | Flight 08/26/19-09/29/19 | |
|--------------------------|---------------------------|--------------------------|-----------------------------|--|
| Account Executive | Advertiser | Product | Order Type | |
| House, Lubbock | Health Market (M) | Medicare Supplement | CASH | |
| Representative | Rep Order # | Total Spots: | 2 | |
| | D-171742 | Actual Gross Billing: | \$16.00 | |
| Client Code: | | State Tax: | \$0.00 | |
| Product Code: | | Local Tax: | \$0.00 | |
| Estimate Code: Bluewater | | Agency Commission: | \$4.44 | |
| | | Net Due: | \$11.56 | |

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:

| Descrip | tion: Sig | gn-On/Sign-C | Off, 11:30 P | Line 8 2M-1:35 XM | Start | <u>End</u> | <u>Days</u> MTWTFSS | Spots/Week 8 | Rate \$8.00 | | | |
|---------|-----------|----------------------|-----------------|-------------------------|-----------------------|-----------------------------|------------------------|---------------------------------------|-----------------------|-------------|---------|--|
| # 8 | Day Su | Date 09/08/19 | Time 12:04 A | Length 120 | Rate \$8.00 | <u>Copy</u> BOS26192100H | | Program Descripti Sign-On/Sign-Off | on | Class NM | Remarks | |

| Descrip | tion: Sig | gn-On/Sign-C | Off, 11:30 F | Line 9 PM-1:35 XM | <u>Star</u> | t <u>End</u> | <u>Days</u> MTWTFSS | Spots/Week 8 | Rate \$8.00 | | | |
|---------|-----------|----------------------|------------------------|-------------------------|--------------------|-----------------------------|------------------------|-----------------------------------|-----------------------|-------------|---------|--|
| # 9 | Day Su | Date 09/15/19 | <u>Time</u> 12:17 A | Length 120 | Rate \$8.00 | Copy BOS26192100H | | Program Descript Sign-On/Sign-Off | | Class NM | Remarks | |

Additional Comments:

| Total Spots: | 2 |
|-----------------------|---------|
| Actual Gross Billing: | \$16.00 |
| State Tax: | \$0.00 |
| Local Tax: | \$0.00 |
| Agency Commission: | \$4.44 |
| Net Due: | \$11.56 |