KENSHOO INC

22 4th Street 7th Floor San Francisco 94103 **United States**

Tel.: +1-877-536-7462, Fax: +1-415-536-2830

URL: Web Site www.kenshoo.com

To: 360i Atlanta 1545 Peachtree St NE Suite 450 Atlanta, GA 30309 Attn: Martha Fritzsche

Invoice Date: 11/30/18 Invoice: 18USIV015271

Invoice No. 18USIV015271

Description	# clicks	Budget	Price
Service fee Local November 2018: SoFi - SEM - Student Loan Refinancing	13,014	294,795.24	2,947.95
Service fee Local November 2018: SoFi - SEM - Brand	110,648	380,974.09	3,809.74
Service fee Local November 2018: SoFi - SEM - Mortgages	1,380	7,441.45	74.41
Service fee Local November 2018: SoFi - SEM - Personal Loans	18,512	141,355.30	1,413.55
TOTAL	143,554	824,566.08	

Total Price

8,245.65

Sales Tax

0.00

USD 8,245.65

Invoice No. Bar Code: *18USIV015271* Pay by: 12/30/18

Customer Number: 4249565 Balance Owed: \$ 8,245.65 Payment Terms: Net 30

Remit by WIRE/ACH:

Silicon Valley Bank

3003 Tasman drive, Santa Clara, CA, 95054

Routing#: 121140399 SWIFT: SVBKUS6S Account: 3300710862

Please remit payment by check to: **Lockbox Remittance Address**

Kenshoo Inc Dept LA 23651

Pasadena, CA 91185-3651

For Courier Deposits (FedEx etc.):

Kenshoo Inc Box 23651 14005 Live Oak Ave

Irwindale, CA 91706-1300

When remitting payment, please include the invoice number and invoice amount. Failure to do so, may cause delays in processing your payment.



32 Avenue of the Americas - 6th Floor New York NY 10013

Tel: 212-703-7200

PURC	CHASE	ORD	ER

PO NUMBER: PO044793 P.O. DATE: 12/13/2018

REVISION DATE - NO

 DUE DATE :
 12/31/2018

 PAGE :
 1 of 3

 TOTAL PRICE :
 \$8,245.65

VEN	NDOR: KENSHOO			Ship To:		
22 14t	nshoo, Inc 4th St h FL n Francisco, CA California 94103					
	THIS PURCHASE ORDER	R IS SUBJECT TO THE T	ERMS AND CONDITIONS	ATTACHED HERETO		
LINE	DESCRIPTION	JOB NUMBER / DESC	RIPTION	QUANTITY	RATE	COST
	Media Cost	SOFI001-18-003 SoFi Paid Media 201	18	1.00	8,245.65	8,245.65
	Nov SoFi Kenshoo Invoice					
					TOTAL	\$8,245.65
V COF	PY OF THIS P.O. MUST BE RETURNE	D WITH YOUR INVOIC	CE	By:Authorized Signature		

INVOICE NOT TO EXCEED PO AMOUNT

Print Name, Title & Date