

TVLH0897 28

## Vendor Payment Request Form

1- Company Name	<u>Vizeum, LLC</u>
2- Vendor Name	<u>Nielsen Media Research</u>
3- Invoice Number(s)	<u>9340184303</u>
4- Invoice Date(s)	<u>7/10/2019</u>
5- Total Invoice Amount	<u>\$24,988.16</u>
6- Client and SOW/Job Code	<u>360i RESEARCH - 19 - GEN</u>
7- Billable	<u>No</u>
8- Job/SOW was or will be billed on	<u>N/A</u>
9- Select cost category (if applicable)	<u>Hardcost</u> Pass-Through Freelance Other
10- Expense Description: If this invoice is for future services (i.e. A Yearly Magazine Subscription) or for a future event (i.e. Marketing Tradeshow), please provide the date range or date of event	<u></u>

11- Other Information Nielsen NTI Monthly Invoice for July 2019

Note: For payment request outside of normal payment terms, please provide requested payment date

Provide Approval Signatures:	
<u>Reuben Karchem</u>	Reuben Karchem
Preparer/Submitter Signature	Name
<u>Melanie Santiago</u>	Melanie Santiago
Preparer/Submitter Signature	Name
Executive/Finance Approval (if needed)	Name



## INVOICE

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NIELSEN MEDIA RESEARCH

85 BROAD STREET

NEW YORK, NY 10004

USA

Federal Tax ID#: 06-1454128

Invoice	9340184303
Date	07/10/2019
Account	10601677
Terms	Net 30 days

**Bill To:**

SABRINA TRASKOS

Aegis Media Americas, Inc

32 6th Ave,

New York, NY 10013

USA

**Ship To:**

VIZEUM

150 EAST 42ND STREET

NEW YORK, NY 10017

USA

Description	Percentage	Amount	Total USD
<b>Nielsen Television Index</b>			
Contract No.: 290297			
Charge for JUL 2019			
<b>NTI Gross Monthly Billing Charge</b>		12,601.67	
(Weighted Bracket Billing \$9821269.26			
xBilling % 0.001283 or min. of \$2785.97.)			
Minimum Continuing Commitment Discount	-13.00 %	-1,638.22	
(7 Year Election)			
Sub Total		10,963.45	
Group Discount	-5.00 %	-548.17	
Sub Total		10,415.28	
NPM Sample Expansion Household Surcharge		1,337.58	
1. SURCHARGE PERCENT CALCULATION: 4670			
effective household in NPM sample X 0.00275%			
= 12.8425%			
2. BASE AMOUNT USED IN CALCULATION: 10415.28			
3. CALCULATION OF NPM SURCHARGE AMT:			
12.8425% X 10415.28			
Continued.....			

Your Nielsen representative is Michael A Giangrasso Tel: 646-654-95



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Description	Percentage	Amount	Total USD
Sub Total		11,752.86	
National Sample Expansion (11 - 25) (2008 effective households in NPM sample x 0.00240% = 4.819%)	4.82 %	566.37	
Net Amount			12,319.23
Charge for JUL 2019 <b>All Minute Respondent Level EDF</b>		5,657.00	
Net Amount			5,657.00
Charge for JUL 2019 <b>MRC Cooperation Charge</b>		20.00	
Net Amount			20.00
<b>Nielsen Television Index</b>			
Contract No.: 290301 Charge for JUL 2019 <b>NPower Contract Subscription</b>		4,955.00	
Net Amount			4,955.00
State Taxable			
Continued.....			

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USA

Description	Percentage	Amount	Total USD
NY	22,951.23		2,036.93
Sub Total USD			22,951.23
Total Tax USD			2,036.93
Total Amount Due USD			24,988.16

**Remit Payment To:**

Nielsen Media Research  
PO Box 88961, Chicago, IL 60695-8961

**Wire Transfers:**

Bank Name : JPMorgan Chase Bank NA  
Address : ONE CHASE MANHATTAN PLAZA 7 th FLR, NEW YORK, NY 10004  
Account No : 400206986  
Routing No : 021000021  
Swift : CHASUS33

For any questions about this document, call Accounts Receivable:

Jonathan Gingrich

Email: Jonathan.Gingrich.ap@nielsen.com Tel: (513) 394-4313

Your Nielsen representative is Michael A Giangrasso Tel: 646-654-95



32 Avenue of the Americas  
New York NY 10013  
Tel : 212-703-7200

## PURCHASE ORDER

PO NUMBER : PO052063  
P.O. DATE : 11/15/2019  
REVISION DATE - NO  
DUE DATE : 12/31/2019  
PAGE : 1 of 3  
TOTAL PRICE : \$461,000.00

VENDOR: V02180/US44

Ship To:

Nielsen Media Research  
Po Box 88961  
Chicago, IL 606958961

THIS PURCHASE ORDER IS SUBJECT TO THE TERMS AND CONDITIONS ATTACHED HERETO

LINE	DESCRIPTION	JOB NUMBER / DESCRIPTION	QUANTITY	RATE	COST
1	Media Measurement	360I RESEARCH-19-GEN Research-General	1.00	461,000.00	461,000.00
TOTAL					\$461,000.00

A COPY OF THIS P.O. MUST BE RETURNED WITH YOUR INVOICE

INVOICE NOT TO EXCEED PO AMOUNT

This purchase order is subject to all terms and conditions stated on attached form and outlined above. Acceptance is limited to the Terms stated herein, and any additional or different term proposed by Vendor is objected to and hereby rejected.

By: \_\_\_\_\_  
Authorized Signature

By: \_\_\_\_\_  
Print Name, Title & Date

Approved by: Gail Sanders

Ordered by: Gail Sanders