

INVOICE

Date	10/1/2014
Due Date	10/31/2014
Invoice #	16

Dan's Adjusters
800 E Broward Blvd
Fort Lauderdale, FL 33301
954-271-1263
Fax
djacobs@itstrategiesgroup.com

Bill To:	City of Ft lauderdale my address 1 Big Pine Key, Florida 33366	Insured:	DannyGarcia xcv43 mia, FL 232213
----------	--	----------	--

Date of Claim: 9/2/2014 Policy #: Adjuster File #: 30-1009
Insurer File #: Other

Date	Billing Type	Activity	Quantity	Rate
10/2/2014	Some fee Adjuster hourly test	Contact w/ Insured - Call Review	2.00	2.00
10/1/2014	Just a test Adjuster hourly test	Risk/Loss Inspections - Re-Inspection	2.00	50.00

Subtotal
Sales Tax
Total

Please send payment to:

Dan's Adjusters
800 E Broward Blvd
Fort Lauderdale, FL 33301
Fed ID # 111111111

	Amount
	4.00
	100.00
	\$104.00
	\$0.00
	\$104.00

Please send payment to:

Dan's Adjusters
800 E Broward Blvd
Fort Lauderdale, FL 33301
Fed ID # 111111111