INVOICE

10/31/2014 Date 11/30/2014 Due Date 30

Invoice #

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

City of Ft lauderdale Bill To:

my address 1

Big Pine Key, Florida 33366

Insured: Joe Smith

52345

los santos, CA 78945

Adjuster File #: 30-1002 Date of Claim: 8/12/2014 Policy #:

Casualty/Crime Insurer File #: 8756

Date	Billing Type	Activity	Quantity	Rate	Amount
10/31/2014	Some fee	Review Estimate We're reviewing estimate Adjuster hourly test	2.00	2.00	4.00
10/22/2014	MyExpense2		47.00	0.00	0.00
		new test for expense			
				Subtotal	\$4.00

\$0.00 Sales Tax **Total** \$4.00