INVOICE

Date 9/30/2014

Due Date 10/30/2014

Invoice # 6

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: TestUser

321

zcv, AR 343222

Date of Claim: 9/2/2014 Policy #: Adjuster File #: 30-1005

Insurer File #: Business Income/Extra

Expense

Date	Activity Code	Quantity	Rate	Amount
9/30/2014	Adjuster Service Fee	1.00	0.00	0.00
			Subtotal	\$0.00
			Sales Tax	\$0.00
			Total	\$0.00