

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

Date	Billing Type	Activity	Quantity	Rate	Amount
10/2/2014	Some fee Adjuster hourly test	Contact w/ Insured - Call Review	2.00	2.00	4.00
10/1/2014	Just a test Adjuster hourly test	Risk/Loss Inspections - Re-Inspection	2.00	50.00	100.00
Subtotal					\$104.00
Sales Tax					\$0.00
Total					\$104.00

Please send payment to:

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