

**DSB Claims Solutions**

204 Main Street North
Brampton, ON L6V 1P1
Phone: 905 915 4683
Fax: 905 915 4685

Test Company 1

kjkk hsjfdhk, jkhjk jkhhsdfkjsda
Canada, 67773

ATTENTION: LastName ,
FirstName

INVOICE #: Tes-2017-708975

INVOICE DATE: 3/7/2017

INVOICE DUE DATE: 3/21/2017

CLAIM INFORMATION

Insured : Mayank Shrivastava

Insured Policy #:

File #: Tes-2017-708975

Adjuster : vishal Khanna

Loss Date : 2/7/2017

Loss Unit : 1

BILLABLE ITEMS

ITEM	DESCRIPTION	QTY	RATE	PRICE
Test Service 1	test	5.00	\$ 1.00	\$ 5.00
SubTotal :				\$ 5.00
Tax :				\$ 0
Pay this amount :				\$ 5.00