

SUPREME

1-800-590-0000



Customer Copy

Confirmation 00208227

No.

Fare \$ 114.00

Amount

Tip Amount \$ 0.00

Extra \$ 0.00

Promotion \$ 0.00

Discount

Total Fare \$ 114.00

Pickup D

Terminal#:

Pickup SAARINEN CIR

Address

Sterling, VA,
20166

Dropoff 174 West Street

Address

Annapolis, MD,
21401

Pickup Date 7/29/2014 4:27:01
& Time PM

Number of 1

Passengers

Credit Card xxxxxxxxxxxx5398
No.

OneWay 473664

Leg

Auth-Code

Checkin 07/29/14 04:07:01
Time PM

Control 648

PLEASE PROVIDE THIS
PASS TO YOUR DRIVER
WHEN BOARDING.

PLEASE NOTE, DRIVER
GRATUITY IS NOT
INCLUDED UNLESS
SHOWN ABOVE.

Ticket Agent hmolina

Printed Date 07/29/14 04:07:02
PM

DO NOT WRITE

ABOVE THIS LINE

↑ PLEASE DO NOT WRITE ABOVE THIS LINE ↑

EXPIRATION
 DATE
CHECKED

#20

7/29

Bay Area

SIGN HERE

X

The issuer of the card identified on this item is authorized to pay the amount shown as TOTAL upon proper presentation. I promise to pay such TOTAL (together with any other charges due thereon) subject to and in accordance with the agreement governing the use of such card.

| QTY. | CLASS | DESCRIPTION | PRICE | AMOUNT. |
|---------------------------------------|-------|---------------|--------|-------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| DATE | | AUTHORIZATION | | SUB TOTAL |
| REFERENCE NO. | | | SERVER | TAX |
| ID-FOLIO / CHECK NO. / LIC. NO. STATE | | REG./DEPT | CLERK | TIP |
| | | | | MISC. |
| 5768488 | | | | TOTAL 10.00 |

SALES SLIP ORIGINAL

RECEIPT

date 30 / 7 / 2014 No.

158934

received from _____

\$ 12

_____ dollars

for payment of Taxi Annapolis.

cash

money order

credit card

check # _____

| | | |
|-------------|--|--|
| amount due | | |
| amount paid | | |
| balance | | |

from _____ to _____

signature _____

O'Callaghan

ANNAPOLIS
HOTEL

HT Srl
Via Moscow, 13-Milano
VAT: 03924730967
United States

Room No. : 305
Arrival : 07-29-14
Departure : 08-01-14
Page No. : 1 of 2
Folio No. : 176609
Conf. No. : 990363
Cashier No. : 29

INVOICE

Membership No. :
A/R Number :
Group Code :
Company Name :

| Date | Code | Description | Charges | Credits |
|----------|------|--------------------------------|---------|---------|
| 07-29-14 | 1000 | *Accommodation | 139.00 | |
| 07-29-14 | 7100 | MD State Sales Tax | 8.34 | |
| 07-29-14 | 7101 | Annapolis Room Tax | 9.73 | |
| 07-30-14 | | John Barry Restaurant Beverage | 4.78 | |
| | | Room# 305 : CHECK# 1670 | | |
| 07-30-14 | 1000 | *Accommodation | 139.00 | |
| 07-30-14 | 7100 | MD State Sales Tax | 8.34 | |
| 07-30-14 | 7101 | Annapolis Room Tax | 9.73 | |
| 07-31-14 | 1000 | *Accommodation | 139.00 | |
| 07-31-14 | 7100 | MD State Sales Tax | 8.34 | |
| 07-31-14 | 7101 | Annapolis Room Tax | 9.73 | |
| 08-01-14 | 9010 | Mastercard | | 475.99 |
| | | XXXXXXXXXXXX5398 XX/XX | | |