

accounts@citycarshare.org

Invoice Page 1	
Invoice Number	G13223062011 p1
Invoice Date	06/06/2011
Billing Dates	05/01/2011 - 05/31/201
Account Number	HHA - 13223
Billing Plan	Affiliate of CCSF, Individual/Household
Invoice Total	\$0.00
Previous Balance	\$0.00
Balance Due	\$0.00
Your card (ending in 4412 exp. 07/2011) will be	

Your card (ending in 4412, exp. 07/2011) will be charged this amount

Peters, David Peters 1420 Valencia Street Apartment 3 San Francisco, CA 94110



Did you know that City CarShare has the best insurance coverage you can get at \$1 million/incident? Our standard deductible is \$500 but most members can lower it to \$50 on any reservation with our Buck to Deduct feature. Check out our website for details here: http://www.citycarshare.org/bucktodeduct.do.

Subtotal for Member #23301 (Peters, David) \$0.00 Driving Detail Member Confirm Hours Vehicle Miles ID Number Dropoff WD/WE/N Туре Driven Cost Pod Name Pickup Fees and Credits Detail Member Confirm ID Number Туре Date Invoiced **Fee Description** Amount