

DUPLICATE

E. COBB

MERCHANT NO.	AUTH. CODE

CREDIT CARD TYPE <i>CASH</i>	PHONE NUMBER ( )
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THIS INFO REQUIRED FOR "HONOR ALL" PURCHASES  
COMPANY OR PILOT NAME

BILLING ADDRESS

CITY STATE ZIP

DATE OF TRANSACTION  
*10-01-97*

PRODUCT	QUANTITY	PRICE	AMOUNT
FUEL: <input checked="" type="checkbox"/> AVGAS	<i>20.0</i>	<i>2.09</i>	<i>41.80</i>
<input type="checkbox"/> JET			
OIL:			

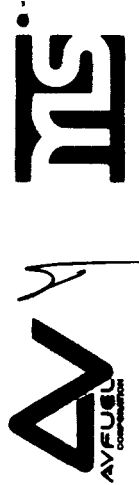
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SIGNATURE

**X**

PURCHASE IS FOR (CHECK ONE):  
 BUSINESS OR CORPORATE     PERSONAL, FAMILY OR HOUSEHOLD  
 IF THE CARD YOU ARE USING IS PART OF THE "HONOR ALL" PROGRAM, YOUR SIGNATURE INDICATES AGREEMENT TO PAY AVFUEL CORP. WITHIN 14 DAYS OF BILLING. AFTER DUE DATE, FINANCE CHARGES OF 18% A.P.R. OR ALLOWABLE STATE MAXIMUM (WHICHEVER IS LOWER) WILL BE ASSESSED.

TAIL NO. <i>N2281/S</i>	SALES TAX
<i>113048</i>	TOTAL <i>41.80</i>



CUSTOMER COPY

FUEL ADDED AT SANTA YNEZ