

<b>UNITED STATES BANKRUPTCY COURT FOR THE EASTERN DISTRICT OF VIRGINIA</b>		<b>PROOF OF CLAIM</b>
<b>On-Site Sourcing, Inc.</b> <b>09-10816-RGM</b>	<b>DocuForce Financial Corp.</b> <b>09-10817-RGM</b>	<b>On-Site LA Inc.</b> <b>09-10818-RGM</b>
NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A request for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.		
Name of Creditor (the person or other entity to whom the debtor owes money or property): Luis Felipe Colon c/o Metropolitan Duplicating & Imaging, Inc.		<input type="checkbox"/> Check this box to indicate that this claim amends a previously filed claim.  Court Claim Number: _____ (If known)  Filed on: _____
Name and address where notices should be sent: Metropolitan Duplicating & Imaging, Inc. 345 Park Avenue New York, NY 10154		
Telephone number: (212) 813-7014		
Name and address where payment should be sent (if different from above): <div style="text-align: center; font-size: large; font-weight: bold;">FILED MAR 20 2009 BMC GROUP</div>		<input type="checkbox"/> Check this box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.  <input type="checkbox"/> Check this box if you are the debtor or trustee in this case.
Telephone number:		
1. Amount of Claim as of Date Case Filed: \$ 8,916.71		
If all or part of your claim is secured, complete item 4 below; however, if all of your claim is unsecured, do not complete item 4.  If all or part of your claim is entitled to priority, complete item 5.  <input type="checkbox"/> Check this box if claim includes interest or other charges in addition to the principal amount of claim. Attach itemized statement of interest or charges.		5. Amount of Claim Entitled to Priority under 11 U.S.C. §507(a). If any portion of your claim falls in one of the following categories, check the box and state the amount.  Specify the priority of the claim.
2. Basis for Claim: <u>Un Paid Invoice for Services Performed</u> (See instruction #2 on reverse side.)		<input type="checkbox"/> Domestic support obligations under 11 U.S.C. §507(a)(1)(A) or (a)(1)(B).  <input type="checkbox"/> Wages, salaries, or commissions (up to \$10,950*) earned within 180 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier – 11 U.S.C. §507 (a)(4).  <input type="checkbox"/> Contributions to an employee benefit plan – 11 U.S.C. §507 (a)(5).  <input type="checkbox"/> Up to \$2,425* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use – 11 U.S.C. §507 (a)(7).  <input type="checkbox"/> Taxes or penalties owed to governmental units – 11 U.S.C. §507 (a)(8).  <input type="checkbox"/> Other – Specify applicable paragraph of 11 U.S.C. §507 (a)( ).  Amount entitled to priority: \$ _____  <small>*Amounts are subject to adjustment on 4/1/10 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.</small>
3. Last four digits of any number by which creditor identifies debtor: <u>ONS1</u>		
3a. Debtor may have scheduled account as: _____ (See instruction #3a on reverse side.)		
4. Secured Claim (See instruction #4 on reverse side.) Check the appropriate box if your claim is secured by a lien on property or a right of setoff and provide the requested information.  Nature of property or right of setoff: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other Describe:  Value of Property: \$ _____ Annual Interest Rate _____ %  Amount of arrearage and other charges as of time case filed included in secured claim, if any: \$ _____ Basis for perfection: _____  Amount of Secured Claim: \$ _____ Amount Unsecured: \$ _____		
6. Credits: The amount of all payments on this claim has been credited for the purpose of making this proof of claim.		
7. Documents: Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. You may also attach a summary. Attach redacted copies of documents providing evidence of perfection of a security interest. You may also attach a summary. (See instruction 7 and definition of "redacted" on reverse side.)  DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.  If the documents are not available, please explain:		
Date: 03/17/2009	Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address above. Attach copy of power of attorney, if any.  <div style="font-family: cursive; font-size: large;">Luis F. Colon Luis F. Colon Operations Manager</div>	

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

On-Site Sourcing, Inc.



00063

**INSTRUCTIONS FOR PROOF OF CLAIM FORM**

The instructions and definitions below are general explanations of the law. In certain circumstances, such as bankruptcy cases not filed voluntarily by the debtor, there may be exceptions to these general rules.

**Items to be completed in Proof of Claim form****Court, Name of Debtor, and Case Number:**

Fill in the federal judicial district where the bankruptcy case was filed (for example, Central District of California), the bankruptcy debtor's name, and the bankruptcy case number. If the creditor received a notice of the case from the bankruptcy court, all of this information is located at the top of the notice.

**Creditor's Name and Address:**

Fill in the name of the person or entity asserting a claim and the name and address of the person who should receive notices issued during the bankruptcy case. A separate space is provided for the payment address if it differs from the notice address. The creditor has a continuing obligation to keep the court informed of its current address. See Federal Rule of Bankruptcy Procedure (FRBP) 2002(g).

**1. Amount of Claim as of Date Case Filed:**

State the total amount owed to the creditor on the date of the Bankruptcy filing. Follow the instructions concerning whether to complete items 4 and 5. Check the box if interest or other charges are included in the claim.

**2. Basis for Claim:**

State the type of debt or how it was incurred. Examples include goods sold, money loaned, services performed, personal injury/wrongful death, car loan, mortgage note, and credit card. If the claim is based on the delivery of health care goods or services, limit the disclosure of the goods or services so as to avoid embarrassment or the disclosure of confidential health care information. You may be required to provide additional disclosure if the trustee or another party in interest files an objection to your claim.

**3. Last Four Digits of Any Number by Which Creditor Identifies Debtor:**

State only the last four digits of the debtor's account or other number used by the creditor to identify the debtor.

**3a. Debtor May Have Scheduled Account As:**

Use this space to report a change in the creditor's name, a transferred claim, or any other information that clarifies a difference between this proof of claim and the claim as scheduled by the debtor.

**4. Secured Claim:**

Check the appropriate box and provide the requested information if the claim is fully or partially secured. Skip this section if the claim is entirely unsecured. (See DEFINITIONS, below.) State the type and the value of property that secures the claim, attach copies of lien documentation, and state annual interest rate and the amount past due on the claim as of the date of the bankruptcy filing.

**5. Amount of Claim Entitled to Priority Under 11 U.S.C. §507(a).**

If any portion of your claim falls in one or more of the listed categories, check the appropriate box(es) and state the amount entitled to priority. (See DEFINITIONS, below.) A claim may be partly priority and partly non-priority. For example, in some of the categories, the law limits the amount entitled to priority.

**6. Credits:**

An authorized signature on this proof of claim serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

**7. Documents:**

Attach to this proof of claim form redacted copies documenting the existence of the debt and of any lien securing the debt. You may also attach a summary. You must also attach copies of documents that evidence perfection of any security interest. You may also attach a summary. FRBP 3001(c) and (d). If the claim is based on the delivery of health care goods or services, see instruction 2. Do not send original documents, as attachments may be destroyed after scanning.

**Date and Signature:**

The person filing this proof of claim must sign and date it. FRBP 9011. If the claim is filed electronically, FRBP 5005(a)(2), authorizes courts to establish local rules specifying what constitutes a signature. Print the name and title, if any, of the creditor or other person authorized to file this claim. State the filer's address and telephone number if it differs from the address given on the top of the form for purposes of receiving notices. Attach a complete copy of any power of attorney. Criminal penalties apply for making a false statement on a proof of claim.

**DEFINITIONS****Debtor**

A debtor is the person, corporation, or other entity that has filed a bankruptcy case.

**Creditor**

A creditor is a person, corporation, or other entity owed a debt by the debtor that arose on or before the date of the bankruptcy filing. See 11 U.S.C. §101 (10).

**Claim**

A claim is the creditor's right to receive payment on a debt owed by the debtor that arose on the date of the bankruptcy filing. See 11 U.S.C. §101 (5). A claim may be secured or unsecured.

**Proof of Claim**

A proof of claim is a form used by the creditor to indicate the amount of the debt owed by the debtor on the date of the bankruptcy filing. The creditor must file the form with the clerk of the same bankruptcy court in which the bankruptcy case was filed.

**Secured Claim Under 11 U.S.C. §506(a)**

A secured claim is one backed by a lien on property of the debtor. The claim is secured so long as the creditor has the right to be paid from the property prior to other creditors. The amount of the secured claim cannot exceed the value of the property. Any amount owed to the creditor in excess of the value of the property is an unsecured claim. Examples of liens on property include a mortgage on real estate or a security interest in a car.

A lien may be voluntarily granted by a debtor or may be obtained through a court proceeding. In some states, a court judgment is a lien. A claim also may be secured if the creditor owes the debtor money (has a right to setoff).

**Unsecured Claim**

An unsecured claim is one that does not meet the requirements of a secured claim. A claim may be partly unsecured if the amount of the claim exceeds the value of the property on which the creditor has a lien.

**Claim Entitled to Priority Under 11 U.S.C. §507(a)**

Priority claims are certain categories of unsecured claims that are paid from the available money or property in a bankruptcy case before other unsecured claims.

**Redacted**

A document has been redacted when the person filing it has masked, edited out, or otherwise deleted, certain information. A creditor should redact and use only the last four digits of any social-security, individual's tax-identification, or financial-account number, all but the initials of a minor's name and only the year of any person's date of birth.

**Evidence of Perfection**

Evidence of perfection may include a mortgage, lien, certificate of title, financing statement, or other document showing that the lien has been filed or recorded.

**INFORMATION****Acknowledgment of Filing of Claim**

To receive acknowledgment of your filing, you may either enclose a stamped self-addressed envelope and a copy of this proof of claim or you may access the court's PACER system ([www.pacer.psc.uscourts.gov](http://www.pacer.psc.uscourts.gov)) for a small fee to view your filed proof of claim.

**Offers to Purchase a Claim**

Certain entities are in the business of purchasing claims for an amount less than the face value of the claims. One or more of these entities may contact the creditor and offer to purchase the claim. Some of the written communications from these entities may easily be confused with official court documentation or communications from the debtor. These entities do not represent the bankruptcy court or the debtor. The creditor has no obligation to sell its claim. However, if the creditor decides to sell its claim, any transfer of such claim is subject to FRBP 3001(e), any applicable provisions of the Bankruptcy Code (11 U.S.C. § 101 *et seq.*), and any applicable orders of the bankruptcy court.



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345 PARK AVENUE, NEW YORK, NY 10154  
 PH: 212.620.0087, FX: 212.620.0961  
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INVOICE	DATE	NUMBER
	10/23/08	018172

REMIT TO: METROPOLITAN DUPLICATING & IMAGING  
 345 PARK AVENUE, LEVEL B  
 NEW YORK, NY 10154

BILL TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ATTN: ACCOUNTS PAYABLE

SHIP TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ACCT-No: ONS100

Our ORDER NUMBER	ORDER DATE	SALESPERSON	SHIP VIA
516885	10/15/08	05	DELIVERY
CUSTOMER PO NUMBER	DEPT NUMBER	PAYMENT TERMS	
44812	NY260119	DUE UPON RECEIPT	

PARTICULARS	UNIT	ORDERED	SHIPPED	UNIT PRICE	AMOUNT
CLR 24X36M OVERSIZE MOUNT 6 SQ FT	EA	5	5	30.00	150.00
CLR 24X36P OVERSIZE PRINT 6 SQ FT	EA	5	5	48.00	240.00
CLR 8.5X11S COLOR SCAN & ENLARGEMENT	EA	5	5	2.00	10.00
REQUESTED BY: TODD MESSINA MATTER#: 44812 C/N: NY260119 REF: 5 PAGES-SCAN/ENLARGE/PRINT & MOUNT X 1 EA. MDI JOB#: 100062				ORDER TOTAL FREIGHT & HANDLING SALES TAX	400.00
				* INVOICE TOTAL	400.00

THANK YOU FOR YOUR ORDER!!!  
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I N V O I C E	DATE	NUMBER
	10/28/08	018200

REMIT TO: METROPOLITAN DUPLICATING & IMAGING  
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NEW YORK, NY 10154

BILL TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ATTN: CHRISANY LaPLANT

SHIP TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ACCT-No: ONS100

Our ORDER NUMBER 516919	ORDER DATE 10/27/08	SALESPERSON 05	SHIP VIA DELIVERY
CUSTOMER PO NUMBER 44857	DEPT NUMBER NY206487	PAYMENT TERMS DUE UPON RECEIPT	

PARTICULARS	UNIT	ORDERED	SHIPPED	UNIT PRICE	AMOUNT
B/W 18X24C OVERSIZE COPY 3 SQ FT	EA	12	12	3.00	36.00
B/W 18X24S OVERSIZE SCAN 3 SQ FT	EA	2	2	12.00	24.00
B/W 24X36C OVERSIZE COPY 6 SQ FT	EA	6	6	6.00	36.00
B/W 24X36S OVERSIZE SCAN 6 SQ FT	EA	1	1	24.00	24.00
MASTER CD DELIVERABLE MEDIA	EA	1	1	15.00	15.00
REQUESTED BY: ANDY NEGRON CLIENT PO#: 44857 C/N: NY206487 CLIENT REF: 3 OVERSIZES-CX6/SCAN TO DISK MDI JOB#: 100111				ORDER TOTAL FREIGHT & HANDLING SALES TAX	135.00
				* INVOICE TOTAL	135.00

THANK YOU FOR YOUR ORDER!!!  
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INVOICE	DATE	NUMBER
	11/21/08	018268

REMIT TO: METROPOLITAN DUPLICATING & IMAGING  
345 PARK AVENUE, LEVEL B  
NEW YORK, NY 10154

BILL TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ATTN: CHRISANY LAPLANT

SHIP TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ACCT-No: ONS100

Our ORDER NUMBER	ORDER DATE	SALESPERSON	SHIP VIA
516953	11/04/08	05	DELIVERY
CUSTOMER PO NUMBER	DEPT NUMBER	PAYMENT TERMS	
2008-00261	BLOCH "PPP"	DUE UPON RECEIPT	

PARTICULARS	UNIT	ORDERED	SHIPPED	UNIT PRICE	AMOUNT
B/W 8.5X11B PDFU BLOWBACK DOCS UNASSEMBLED	EA	991	991	0.09	89.19
CD CD DUPLICATION	EA	1	1	5.00	5.00
FLDR LABEL TEXT LABEL APPLICATION	EA	14	14	0.50	7.00
FOLDER FILE FOLDER INSERTION	EA	12	12	0.25	3.00
LTR RED REDWELD INSERTION	EA	2	2	2.00	4.00
MED SCAN MEDIUM DOCUMENT SCANNING	EA	991	991	0.10	99.10
REQUESTED BY: TODD MESSINA CLIENT PO#: 44969 IN-261328 C/N:BLOCH "PPP" CLIENT REF: 1 BOX-SCAN/BX1/INSERT INTO FOLDER & REDWELDS/LABEL FOLDERS MDI JOB#: 110014				ORDER TOTAL FREIGHT & HANDLING SALES TAX	207.29
				* INVOICE TOTAL	207.29

THANK YOU FOR YOUR ORDER!!!  
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INVOICE	DATE	NUMBER
	11/21/08	018269

REMIT TO: METROPOLITAN DUPLICATING & IMAGING  
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BILL TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ATTN: CHRISANY LAPLANT

SHIP TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ACCT-NO: ONS100

Our ORDER NUMBER 516954	ORDER DATE 11/04/08	SALESPERSON 05	SHIP VIA DELIVERY
CUSTOMER PO NUMBER 2006-04049	DEPT NUMBER CAPUTO "QQQ"	PAYMENT TERMS DUE UPON RECEIPT	

PARTICULARS	UNIT	ORDERED	SHIPPED	UNIT PRICE	AMOUNT
MASTER CD DELIVERABLE MEDIA	EA	1	1	5.00	5.00
MED SCAN MEDIUM DOCUMENT SCANNING	EA	2126	2126	0.10	212.60
REQUESTED BY: TODD MESSINA CLIENT PO#:44962 C/N:CAPUTO "QQQ" IN-261304 CLIENT REF: 1 BOX-SCAN TO DISK MDI JOB#: 110015				ORDER TOTAL FREIGHT & HANDLING SALES TAX	217.60
				* INVOICE TOTAL	217.60

THANK YOU FOR YOUR ORDER!!!  
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INVOICE	DATE	NUMBER
	11/21/08	018270

REMIT TO: METROPOLITAN DUPLICATING & IMAGING  
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BILL TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ATTN: TODD MESSINA

SHIP TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ACCT-No: ONS100

Our ORDER NUMBER 516955	ORDER DATE 11/04/08	SALESPERSON 05	SHIP VIA DELIVERY
CUSTOMER PO NUMBER 2008-10308	DEPT NUMBER KOLLURI "OOO"	PAYMENT TERMS DUE UPON RECEIPT	

PARTICULARS	UNIT	ORDERED	SHIPPED	UNIT PRICE	AMOUNT
B/W 8.5X11B TIFF BLOWBACK DOCUMENTS	EA	2444	2444	0.07	171.08
ELECT ENDORSE ELECTRONIC ENDORSING	EA	1222	1222	0.02	24.44
MASTER CD DELIVERABLE MEDIA	EA	1	1	5.00	5.00
MED SCAN MEDIUM DOCUMENT SCANNING	EA	1222	1222	0.10	122.20
REQUESTED BY: TODD MESSINA CLIENT PO#:44961 C/N:KOLLURI "OOO" CLIENT REF: 1 BOX-SCAN/OCR/BB X 1 MDI JOB#: 110016A				ORDER TOTAL FREIGHT & HANDLING SALES TAX	322.72
				* INVOICE TOTAL	322.72

THANK YOU FOR YOUR ORDER!!!  
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INVOICE	DATE	NUMBER
	11/21/08	018271

REMIT TO: METROPOLITAN DUPLICATING & IMAGING  
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BILL TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ATTN: CHRISANY LAPLANT

SHIP TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ACCT-No: ONS100

Our ORDER NUMBER	ORDER DATE	SALESPERSON	SHIP VIA
516956	11/04/08	05	DELIVERY
CUSTOMER PO NUMBER	DEPT NUMBER	PAYMENT TERMS	
"TTT"		DUE UPON RECEIPT	

PARTICULARS	UNIT	ORDERED	SHIPPED	UNIT PRICE	AMOUNT
CD CD DUPLICATION	EA	1	1	5.00	5.00
ELECT ENDORSE ELECTRONIC ENDORSING	EA	117	117	0.02	2.34
MASTER CD DELIVERABLE MEDIA	EA	1	1	5.00	5.00
MED SCAN MEDIUM DOCUMENT SCANNING	EA	117	117	0.10	11.70
REQUESTED BY: TODD MESSINA CLIENT PO#:44970 C/N: "TTT" IN-151334 CLIENT REF: 1 BOX-ENDORSE/SCAN TO DISK MDI JOB#: 110017				ORDER TOTAL FREIGHT & HANDLING SALES TAX	24.04
				* INVOICE TOTAL	24.04

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INVOICE	DATE	NUMBER
	11/21/08	018272

REMIT TO: METROPOLITAN DUPLICATING & IMAGING  
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BILL TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ATTN: CHRISANY LAPLANT

SHIP TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ACCT-No: ONS100

Our ORDER NUMBER 516957	ORDER DATE 11/04/08	SALESPERSON 05	SHIP VIA DELIVERY
CUSTOMER PO NUMBER "UUU"	DEPT NUMBER	PAYMENT TERMS DUE UPON RECEIPT	

PARTICULARS	UNIT	ORDERED	SHIPPED	UNIT PRICE	AMOUNT
B/W 8.5X11B PDFU BLOWBACK DOCS UNASSEMBLED	EA	913	913	0.07	63.91
MASTER CD DELIVERABLE MEDIA	EA	1	1	5.00	5.00
MED SCAN MEDIUM DOCUMENT SCANNING	EA	913	913	0.10	91.30
PDF SEARCH PDF SEARCHABLE CONVERSION	EA	913	913	0.02	18.26
REQUESTED BY: TODD MESSINA MATTER#: N/A C/N: "UUU" CLIENT REF: 1 BOX-SCAN TO SEARCHABLE PDF/BB X 1 MDI JOB#: 110018				ORDER TOTAL FREIGHT & HANDLING SALES TAX	178.47
				* INVOICE TOTAL	178.47

THANK YOU FOR YOUR ORDER!!!  
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INVOICE	DATE	NUMBER
	11/01/08	018283

REMIT TO: METROPOLITAN DUPLICATING & IMAGING  
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BILL TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ATTN: ACCOUNTS PAYABLE

SHIP TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ACCT-No: ONS100

Our ORDER NUMBER 517017	ORDER DATE 10/31/08	SALESPERSON 05	SHIP VIA DELIVERY
CUSTOMER PO NUMBER PO# 44982	DEPT NUMBER	PAYMENT TERMS DUE UPON RECEIPT	

PARTICULARS	UNIT	ORDERED	SHIPPED	UNIT PRICE	AMOUNT
VHS VHS DUPLICATION	EA	10	10	25.00	250.00
REQUESTED BY: ANDY NEGRON PO# 44982 MDI JOB# 100130 10 VHS TAPES COPY X 1				ORDER TOTAL FREIGHT & HANDLING SALES TAX	250.00
				* INVOICE TOTAL	250.00

THANK YOU FOR YOUR ORDER!!!  
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I N V O I C E	DATE	NUMBER
	11/25/08	018284

REMIT TO: METROPOLITAN DUPLICATING & IMAGING  
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NEW YORK, NY 10154

BILL TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ATTN: CHRISANY LAPLANT

SHIP TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ACCT-No: ONS100

Our ORDER NUMBER	ORDER DATE	SALESPERSON	SHIP VIA
516952	11/04/08	05	DELIVERY
CUSTOMER PO NUMBER	DEPT NUMBER	PAYMENT TERMS	
2008-00261	BALTER "NNN"	DUE UPON RECEIPT	

PARTICULARS	UNIT	ORDERED	SHIPPED	UNIT PRICE	AMOUNT
B/W 8.5X11B RE BLOWBACKS (REASSEMBLED)	EA	708	708	0.12	84.96
BINDER 3 3" BINDER INSERTION	EA	1	1	16.00	16.00
MASTER CD DELIVERABLE MEDIA	EA	1	1	5.00	5.00
MED SCAN MEDIUM DOCUMENT SCANNING	EA	708	708	0.10	70.80
REQUESTED BY: ANDY NEGRON PO#: 44976 C/N: IN-261302 CLIENT REF: 1 BOX-SCAN/BB X 1 MDI JOB#: 110013				ORDER TOTAL FREIGHT & HANDLING SALES TAX	176.76
				* INVOICE TOTAL	176.76

THANK YOU FOR YOUR ORDER!!!  
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INVOICE	DATE	NUMBER
	11/25/08	018285

REMIT TO: METROPOLITAN DUPLICATING & IMAGING  
345 PARK AVENUE, LEVEL B  
NEW YORK, NY 10154

BILL TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ATTN: CHRISANY LAPLANT

SHIP TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ACCT-No: ONS100

Our ORDER NUMBER	ORDER DATE	SALESPERSON	SHIP VIA
516958	11/05/08	05	DELIVERY
CUSTOMER PO NUMBER	DEPT NUMBER	PAYMENT TERMS	
SEIF 11/5/08		DUE UPON RECEIPT	

PARTICULARS	UNIT	ORDERED	SHIPPED	UNIT PRICE	AMOUNT
B/W 8.5X11B PDFU BLOWBACK DOCS UNASSEMBLED	EA	1683	1683	0.09	151.47
ELECT ENDORSE ELECTRONIC ENDORSING	EA	1683	1683	0.02	33.66
MASTER CD DELIVERABLE MEDIA	EA	1	1	5.00	5.00
MED SCAN MEDIUM DOCUMENT SCANNING	EA	1683	1683	0.10	168.30
REQUESTED BY: ANDY NEGRON C/M:SEIF 11/5/08 C/N: IN-261384 PO#:44977 CLIENT REF: 1 BOX-ENDORSE/BB X 1/SCAN TO DISK MDI JOB#: 110022				ORDER TOTAL FREIGHT & HANDLING SALES TAX	358.43
				* INVOICE TOTAL	358.43

THANK YOU FOR YOUR ORDER!!!  
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INVOICE	DATE	NUMBER
	11/25/08	018286

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BILL TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ATTN: TODD MESSINA

SHIP TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ACCT-No: ONS100

Our ORDER NUMBER	ORDER DATE	SALESPERSON	SHIP VIA
516960	11/06/08	05	DELIVERY
CUSTOMER PO NUMBER	DEPT NUMBER	PAYMENT TERMS	
JAUEN		DUE UPON RECEIPT	

PARTICULARS	UNIT	ORDERED	SHIPPED	UNIT PRICE	AMOUNT
B/W 8.5X11BB BLOWBACK DOCUMENTS	EA	330	330	0.09	29.70
ELECT ENDORSE ELECTRONIC ENDORSING	EA	330	330	0.02	6.60
MASTER CD DELIVERABLE MEDIA	EA	2	2	5.00	10.00
MED SCAN MEDIUM DOCUMENT SCANNING	EA	166	166	0.10	16.60
PDF SEARCH PDF SEARCHABLE CONVERSION	EA	330	330	0.03	9.90
REQUESTED BY: TODD MESSINA MATTER#: JAUEN CLIENT REF: 1 BOX-ENDORSE/CONVERT TO PDF/SCAN TO DISK CDS JOB#: 110025				ORDER TOTAL FREIGHT & HANDLING SALES TAX	72.80
				* INVOICE TOTAL	72.80

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INVOICE	DATE	NUMBER
	11/25/08	018287

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NEW YORK, NY 10154

BILL TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ATTN: CHISANY LAPLANT

SHIP TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ACCT-No: ONS100

Our ORDER NUMBER 516961	ORDER DATE 11/07/08	SALESPERSON 05	SHIP VIA DELIVERY
CUSTOMER PO NUMBER SEIF 11/17/08	DEPT NUMBER	PAYMENT TERMS DUE UPON RECEIPT	

PARTICULARS	UNIT	ORDERED	SHIPPED	UNIT PRICE	AMOUNT
B/W 8.5X11B PDFU BLOWBACK DOCS UNASSEMBLED	EA	953	953	0.09	85.77
ELECT ENDORSE ELECTRONIC ENDORSING	EA	953	953	0.02	19.06
MASTER CD DELIVERABLE MEDIA	EA	1	1	5.00	5.00
MED SCAN MEDIUM DOCUMENT SCANNING	EA	953	953	0.10	95.30
REQUESTED BY: TODD MESSINA PO#: 44985 CLIENT REF: 1 REDWELD-ENDORSE/CX1/BB X 1 MDI JOB#: 110032				ORDER TOTAL FREIGHT & HANDLING SALES TAX	205.13
				* INVOICE TOTAL	205.13

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INVOICE	DATE	NUMBER
	11/25/08	018291

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BILL TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ATTN: CHRISANY LAPLANT

SHIP TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ACCT-No: ONS100

Our ORDER NUMBER	ORDER DATE	SALESPERSON	SHIP VIA
517009	11/04/08	05	DELIVERY
CUSTOMER PO NUMBER	DEPT NUMBER	PAYMENT TERMS	
44960	IN-261300	DUE UPON RECEIPT	

PARTICULARS	UNIT	ORDERED	SHIPPED	UNIT PRICE	AMOUNT
B/W 8.5X11B RE BLOWBACKS (REASSEMBLED) (PDF BLOWBACKS)	EA	4420	4420	0.12	530.40
BINDER 2 2" BINDER INSERTION	EA	10	10	8.00	80.00
CUST TABS CUSTOM TAB INSERTION	EA	190	190	0.50	95.00
ELECT ENDORSE ELECTRONIC ENDORSING	EA	442	442	0.02	8.84
MASTER CD DELIVERABLE MEDIA	EA	1	1	5.00	5.00
MED SCAN MEDIUM DOCUMENT SCANNING	EA	442	442	0.10	44.20
TABS TAB INSERTION	EA	110	110	0.25	27.50
REQUESTED BY: ANDY NEGRON CLIENT PO#: 44960 "WWW" C/N: IN 261300 CLIENT REF: 1 REDWELD-SCAN/ENDORSE/INSERT TABS/ BB X 10/INSERT INTO BINDERS CDS JOB#: 110008				ORDER TOTAL FREIGHT & HANDLING SALES TAX	790.94
				* INVOICE TOTAL	790.94

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I N V O I C E	DATE	NUMBER
	11/25/08	018292

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NEW YORK, NY 10154

BILL TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ATTN: CHRISANY LAPLANT

SHIP TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ACCT-No: ONS100

Our ORDER NUMBER	ORDER DATE	SALESPERSON	SHIP VIA
517010	11/05/08	05	DELIVERY
CUSTOMER PO NUMBER	DEPT NUMBER	PAYMENT TERMS	
44971	NY_2644130	DUE UPON RECEIPT	

PARTICULARS	UNIT	ORDERED	SHIPPED	UNIT PRICE	AMOUNT
CUST BOOKLET CUSTOM BOOKLET	EA	20	20	5.00	100.00
REQUESTED BY: TODD MESSINA CLIENT PO#: 44971 C/N: NY_261130 CLIENT REF: 1 EMAIL-PRINT X 20 MDI JOB#: 110019				ORDER TOTAL FREIGHT & HANDLING SALES TAX	100.00
				* INVOICE TOTAL	100.00

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I N V O I C E	DATE	NUMBER
	11/25/08	018293

REMIT TO: METROPOLITAN DUPLICATING & IMAGING  
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NEW YORK, NY 10154

BILL TO
<p>ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016</p> <p>ATTN: CHRISANY LAPLANT</p>

SHIP TO
<p>ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016</p> <p>ACCT-No: ONS100</p>

Our ORDER NUMBER	ORDER DATE	SALESPERSON	SHIP VIA
517011	11/07/08	05	DELIVERY
CUSTOMER PO NUMBER		DEPT NUMBER	PAYMENT TERMS
44965		NY_261308	DUE UPON RECEIPT

PARTICULARS	UNIT	ORDERED	SHIPPED	UNIT PRICE	AMOUNT
MASTER CD DELIVERABLE MEDIA	EA	1	1	5.00	5.00
MED SCAN MEDIUM DOCUMENT SCANNING	EA	370	370	0.10	37.00
REQUESTED BY: ANDY NEGRON CLIENT PO#: 44965 C/N: IN-261308 CLIENT REF: 1 SET OF ORIGINALS-SCAN TO DISK MDI JOB#: 110033				ORDER TOTAL FREIGHT & HANDLING SALES TAX	42.00
				* INVOICE TOTAL	42.00

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INVOICE	DATE	NUMBER
	11/25/08	018294

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BILL TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ATTN: CHRISANY LAPLANT

SHIP TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ACCT-No: ONS100

Our ORDER NUMBER	ORDER DATE	SALESPERSON	SHIP VIA
517012	11/07/08	05	DELIVERY
CUSTOMER PO NUMBER	DEPT NUMBER	PAYMENT TERMS	
44966	IN_261304	DUE UPON RECEIPT	

PARTICULARS	UNIT	ORDERED	SHIPPED	UNIT PRICE	AMOUNT
B/W 8.5X11B PDF BLOWBACK DOCS ASSEMBLED	EA	6369	6369	0.10	636.90
FOLDER FILE FOLDER INSERTION	EA	21	21	0.30	6.30
LTR RED REDWELD INSERTION	EA	8	8	2.50	20.00
MASTER CD DELIVERABLE MEDIA	EA	1	1	5.00	5.00
MED SCAN MEDIUM DOCUMENT SCANNING	EA	6369	6369	0.10	636.90
PDF SEARCH PDF SEARCHABLE CONVERSION	EA	6369	6369	0.03	191.07
REQUESTED BY: ANDY NEGRON CLIENT PO#: 44966 CLIENT REF: 3 BOXES-CONVERT TO SEARCHABLE PDF/SCAN TO DISK MDI JOB#: 110034				ORDER TOTAL FREIGHT & HANDLING SALES TAX	1496.17
				* INVOICE TOTAL	1496.17

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INVOICE	DATE	NUMBER
	11/25/08	018295

REMIT TO: METROPOLITAN DUPLICATING & IMAGING  
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BILL TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ATTN: CHRISANY LAPLANT

SHIP TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ACCT-No: ONS100

Our ORDER NUMBER	ORDER DATE	SALESPERSON	SHIP VIA
517013	11/10/08	05	DELIVERY
CUSTOMER PO NUMBER	DEPT NUMBER	PAYMENT TERMS	
44967	IN_261310	DUE UPON RECEIPT	

PARTICULARS	UNIT	ORDERED	SHIPPED	UNIT PRICE	AMOUNT
B/W 8.5X11B PDF BLOWBACK DOCS ASSEMBLED	EA	243	243	0.10	24.30
BATES BATES CAPTURING	EA	243	243	0.02	4.86
MASTER CD DELIVERABLE MEDIA	EA	1	1	5.00	5.00
MED SCAN MEDIUM DOCUMENT SCANNING	EA	243	243	0.10	24.30
REQUESTED BY: CHRISANY LAPLANT CLIENT PO#: 44967 C/N: IN 261310 CLIENT REF: 1 BOX-SCAN TO DISK/BBX1 MDI JOB#: 110039				ORDER TOTAL FREIGHT & HANDLING SALES TAX	58.46
				* INVOICE TOTAL	58.46

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INVOICE	DATE	NUMBER
	11/25/08	018296

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BILL TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ATTN: CHRISANY LAPLANT

SHIP TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ACCT-No: ONS100

Our ORDER NUMBER 517014	ORDER DATE 11/10/08	SALESPERSON 05	SHIP VIA DELIVERY
CUSTOMER PO NUMBER 44968	DEPT NUMBER IN_261311	PAYMENT TERMS DUE UPON RECEIPT	

PARTICULARS	UNIT	ORDERED	SHIPPED	UNIT PRICE	AMOUNT
MASTER CD DELIVERABLE MEDIA	EA	1	1	5.00	5.00
MED SCAN MEDIUM DOCUMENT SCANNING	EA	1066	1066	0.10	106.60
REQUESTED BY: TODD MESSINA CLIENT PO#: 44968 C/N: IN 261311 CLIENT REF: 1 BOX-SCAN TO DISK MDI JOB#: 110040				ORDER TOTAL FREIGHT & HANDLING SALES TAX	111.60
				* INVOICE TOTAL	111.60

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I N V O I C E	DATE	NUMBER
	11/25/08	018297

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BILL TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ATTN: CHRISANY LAPLANT

SHIP TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ACCT-No: ONS100

Our ORDER NUMBER 517015	ORDER DATE 11/10/08	SALESPERSON 05	SHIP VIA DELIVERY
CUSTOMER PO NUMBER 44964	DEPT NUMBER IN_261306	PAYMENT TERMS DUE UPON RECEIPT	

PARTICULARS	UNIT	ORDERED	SHIPPED	UNIT PRICE	AMOUNT
B/W 8.5X11B TIFF BLOWBACK DOCUMENTS	EA	548	548	0.09	49.32
ELECT ENDORSE ELECTRONIC ENDORSING	EA	548	548	0.02	10.96
MED SCAN MEDIUM DOCUMENT SCANNING	EA	548	548	0.10	54.80
REQUESTED BY: ANDY NEGRON CLIENT PO#: 44964 C/N: IN 261306 CLIENT REF: 1 REDWELD-SCAN/ENDORSE/BB X 1 MDI JOB#: 110043				ORDER TOTAL FREIGHT & HANDLING SALES TAX	115.08
				* INVOICE TOTAL	115.08

THANK YOU FOR YOUR ORDER!!!  
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INVOICE	DATE	NUMBER
	11/30/08	018327

REMIT TO: METROPOLITAN DUPLICATING & IMAGING  
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NEW YORK, NY 10154

BILL TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ATTN: CHRISANY LAPLANT

SHIP TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ACCT-No: ONS100

Our ORDER NUMBER 517043	ORDER DATE 11/05/08	SALESPERSON 05	SHIP VIA DELIVERY
CUSTOMER PO NUMBER 44974	DEPT NUMBER NY261109	PAYMENT TERMS DUE UPON RECEIPT	

PARTICULARS	UNIT	ORDERED	SHIPPED	UNIT PRICE	AMOUNT
LIT-2 MED LITIGATION COPIES	EA	16812	16812	0.10	1681.20
TABS TAB INSERTION	EA	300	300	0.25	75.00
REQUESTED BY: CHRISANY LAPLANT CLIENT PO#: 44974 C/N: NY-261109 CLIENT REF: 6 BOXES-CX1/INSERT TABS MDI JOB#: 110020				ORDER TOTAL FREIGHT & HANDLING SALES TAX	1756.20
				* INVOICE TOTAL	1756.20

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INVOICE	DATE	NUMBER
	11/30/08	018328

REMIT TO: METROPOLITAN DUPLICATING & IMAGING  
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NEW YORK, NY 10154

BILL TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ATTN: CHRISANY LAPLANT

SHIP TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ACCT-No: ONS100

Our ORDER NUMBER	ORDER DATE	SALESPERSON	SHIP VIA
517044	11/06/08	05	DELIVERY
CUSTOMER PO NUMBER	DEPT NUMBER	PAYMENT TERMS	
44983		DUE UPON RECEIPT	

PARTICULARS	UNIT	ORDERED	SHIPPED	UNIT PRICE	AMOUNT
B/W 8.5X11B TIFF BLOWBACK DOCUMENTS	EA	2424	2424	0.09	218.16
REQUESTED BY: TODD MESSINA CLIENT PO#: 44983 CLIENT REF: FTP PROJECT-BB X 1 MDI JOB#: 110024				ORDER TOTAL FREIGHT & HANDLING SALES TAX	218.16
				* INVOICE TOTAL	218.16

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INVOICE	DATE	NUMBER
	11/30/08	018329

REMIT TO: METROPOLITAN DUPLICATING & IMAGING  
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NEW YORK, NY 10154

BILL TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ATTN: CHRISANY LAPLANT

SHIP TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ACCT-No: ONS100

Our ORDER NUMBER	ORDER DATE	SALESPERSON	SHIP VIA
517045	11/10/08	05	DELIVERY
CUSTOMER PO NUMBER	DEPT NUMBER	PAYMENT TERMS	
44975	IN-261136	DUE UPON RECEIPT	

PARTICULARS	UNIT	ORDERED	SHIPPED	UNIT PRICE	AMOUNT
B/W 8.5X11B TIFF BLOWBACK DOCUMENTS	EA	1221	1221	0.09	109.89
ELECT ENDORSE ELECTRONIC ENDORSING	EA	1221	1221	0.02	24.42
MASTER CD DELIVERABLE MEDIA	EA	1	1	5.00	5.00
MED SCAN MEDIUM DOCUMENT SCANNING	EA	1221	1221	0.10	122.10
REQUESTED BY: ANDY NEGRON MATTER#: 44975 C/N: IN-261136 CLIENT REF: 1 BOX-SCAN/ENDORSE/BBX1/CREATE CD MDI JOB#: 110044				ORDER TOTAL FREIGHT & HANDLING SALES TAX	261.41
				* INVOICE TOTAL	261.41

THANK YOU FOR YOUR ORDER!!!  
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I N V O I C E	DATE	NUMBER
	11/30/08	018330

REMIT TO: METROPOLITAN DUPLICATING & IMAGING  
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NEW YORK, NY 10154

BILL TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ATTN: CHRISANY LAPLANT

SHIP TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ACCT-No: ONS100

Our ORDER NUMBER	ORDER DATE	SALESPERSON	SHIP VIA
517046	11/11/08	05	DELIVERY
CUSTOMER PO NUMBER		DEPT NUMBER	PAYMENT TERMS
44984			DUE UPON RECEIPT

PARTICULARS	UNIT	ORDERED	SHIPPED	UNIT PRICE	AMOUNT
CLR 11X15M COLOR MOUNTING	EA	1	1	5.00	5.00
CLR 11X15P COLOR PRINT	EA	1	1	1.50	1.50
CLR 20X30M OVERSIZE MOUNT 5 SQ FT	EA	1	1	25.00	25.00
CLR 20X30P OVERSIZE PRINT 5 SQ FT.	EA	1	1	40.00	40.00
REQUESTED BY: ANDY NEGRON CLIENT PO#: 44984 CLIENT REF: 1 EMAIL-PRINT/MOUNT X 1 EA. MDI JOB#: 110046				ORDER TOTAL FREIGHT & HANDLING SALES TAX	71.50
				* INVOICE TOTAL	71.50

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INVOICE	DATE	NUMBER
	11/30/08	018331

REMIT TO: METROPOLITAN DUPLICATING & IMAGING  
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NEW YORK, NY 10154

BILL TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ATTN: CHRISANY LAPLANT

SHIP TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ACCT-No: ONS100

Our ORDER NUMBER 517047	ORDER DATE 11/20/08	SALESPERSON 05	SHIP VIA DELIVERY
CUSTOMER PO NUMBER 444996	DEPT NUMBER NY-261531	PAYMENT TERMS DUE UPON RECEIPT	

PARTICULARS	UNIT	ORDERED	SHIPPED	UNIT PRICE	AMOUNT
B/W 11X17C TABLOID COPIES	EA	5	5	0.35	1.75
LIT-2 MED LITIGATION COPIES	EA	341	341	0.10	34.10
REQUESTED BY: TODD MESSINA CLIENT PO#: 44996 C/N: NY-261531 CLIENT REF: 1 SET OF ORIGINALS-C X 1 MDI JOB#: 110087				ORDER TOTAL FREIGHT & HANDLING SALES TAX	35.85
				* INVOICE TOTAL	35.85

THANK YOU FOR YOUR ORDER!!!  
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INVOICE	DATE	NUMBER
	11/30/08	018332

REMIT TO: METROPOLITAN DUPLICATING & IMAGING  
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NEW YORK, NY 10154

BILL TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ATTN: CHRISANY LAPLANT

SHIP TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ACCT-No: ONS100

Our ORDER NUMBER 517048	ORDER DATE 11/24/08	SALESPERSON 05	SHIP VIA DELIVERY
CUSTOMER PO NUMBER 45006	DEPT NUMBER	PAYMENT TERMS DUE UPON RECEIPT	

PARTICULARS	UNIT	ORDERED	SHIPPED	UNIT PRICE	AMOUNT
CD CD DUPLICATION	EA	2	2	5.00	10.00
CLR 36X48P OVERSIZE PRINT 12 SQ FT	EA	1	1	96.00	96.00
REQUESTED BY: TODD MESSINA CLIENT PO#: 45006 CLIENT REF: 1 OVERSIZE-C X 1/COPY DISK X 2 MDI JOB#: 110099				ORDER TOTAL FREIGHT & HANDLING SALES TAX	106.00
				* INVOICE TOTAL	106.00

THANK YOU FOR YOUR ORDER!!!  
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INVOICE	DATE	NUMBER
	11/30/08	018341

REMIT TO: METROPOLITAN DUPLICATING & IMAGING  
345 PARK AVENUE, LEVEL B  
NEW YORK, NY 10154

BILL TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ATTN: CHRISANY LAPLANT

SHIP TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ACCT-No: ONS100

Our ORDER NUMBER 517057	ORDER DATE 11/03/08	SALESPERSON 05	SHIP VIA DELIVERY
CUSTOMER PO NUMBER 45038	DEPT NUMBER	PAYMENT TERMS DUE UPON RECEIPT	

PARTICULARS	UNIT	ORDERED	SHIPPED	UNIT PRICE	AMOUNT
MASTER CD DELIVERABLE MEDIA	EA	1	1	5.00	5.00
MED SCAN MEDIUM DOCUMENT SCANNING	EA	191	191	0.10	19.10
REQUESTED BY: TODD MESSINA CLIENT PO#: 45038 CLIENT REF: 1 SET OF ORIGINALS-SCAN TO DISK MDI JOB#: 110003				ORDER TOTAL FREIGHT & HANDLING SALES TAX	24.10
				* INVOICE TOTAL	24.10

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INVOICE	DATE	NUMBER
	12/31/08	018408

REMIT TO: METROPOLITAN DUPLICATING & IMAGING  
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NEW YORK, NY 10154

BILL TO
<p>ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016</p> <p>ATTN: ACCOUNTS PAYABLE</p>

SHIP TO
<p>ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016</p> <p>ACCT-No: ONS100</p>

Our ORDER NUMBER	ORDER DATE	SALESPERSON	SHIP VIA
517124	12/02/08	05	DELIVERY
CUSTOMER PO NUMBER	DEPT NUMBER	PAYMENT TERMS	
45028		DUE UPON RECEIPT	

PARTICULARS	UNIT	ORDERED	SHIPPED	UNIT PRICE	AMOUNT
B/W 18X24C OVERSIZE COPY 3 SQ FT	EA	30	30	2.25	67.50
REQUESTED BY: TODD MESSINA CLIENT PO#: BUILDING#: 45028 CLIENT REF: 30 O/S-C X 1 EA MDI JOB#: 120011				ORDER TOTAL FREIGHT & HANDLING SALES TAX	67.50
				* INVOICE TOTAL	67.50

THANK YOU FOR YOUR ORDER!!!  
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INVOICE	DATE	NUMBER
	12/31/08	018409

REMIT TO: METROPOLITAN DUPLICATING & IMAGING  
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 NEW YORK, NY 10154

BILL TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ATTN: ACCOUNTS PAYABLE

SHIP TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ACCT-No: ONS100

Our ORDER NUMBER 517125	ORDER DATE 12/02/08	SALESPERSON 05	SHIP VIA DELIVERY
CUSTOMER PO NUMBER 45085	DEPT NUMBER	PAYMENT TERMS DUE UPON RECEIPT	

PARTICULARS	UNIT	ORDERED	SHIPPED	UNIT PRICE	AMOUNT
B/W 11X17C TABLOID COPIES	EA	12	12	0.25	3.00
B/W 18X24C OVERSIZE COPY 3 SQ FT	EA	56	56	2.25	126.00
LABELS HAND LABELING	EA	37	37	0.05	1.85
LIT-2 MED LITIGATION COPIES	EA	4	4	0.10	0.40
REQUESTED BY: TODD M. MESSINA CLIENT PO#: BUILDING#: 45085 CLIENT REF: 1 R/W-C X 1/HAND LABEL MDI JOB#: 120012				ORDER TOTAL FREIGHT & HANDLING SALES TAX	131.25
				* INVOICE TOTAL	131.25

THANK YOU FOR YOUR ORDER!!!  
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I N V O I C E	DATE	NUMBER
	12/31/08	018410

REMIT TO: METROPOLITAN DUPLICATING & IMAGING  
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 NEW YORK, NY 10154

BILL TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ATTN: ACCOUNTS PAYABLE

SHIP TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ACCT-No: ONS100

Our ORDER NUMBER	ORDER DATE	SALESPERSON	SHIP VIA
517126	12/04/08	05	DELIVERY
CUSTOMER PO NUMBER		DEPT NUMBER	PAYMENT TERMS
45047			DUE UPON RECEIPT

PARTICULARS	UNIT	ORDERED	SHIPPED	UNIT PRICE	AMOUNT
CLR 18X24C OVERSIZE COPY 3 SQ FT	EA	6	6	24.00	144.00
LABELS HAND LABELING	EA	24	24	0.05	1.20
LIT-2 MED LITIGATION COPIES	EA	42	42	0.10	4.20
REQUESTED BY: ANDY NEGRON CLIENT PO#: 45047 CLIENT REF: 1 SET OF ORIGINALS MDI JOB#: 120026				ORDER TOTAL FREIGHT & HANDLING SALES TAX	149.40
				* INVOICE TOTAL	149.40

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INVOICE	DATE	NUMBER
	12/31/08	018411

REMIT TO: METROPOLITAN DUPLICATING & IMAGING  
 345 PARK AVENUE, LEVEL B  
 NEW YORK, NY 10154

BILL TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ATTN: ACCOUNTS PAYABLE

SHIP TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ACCT-No: ONS100

Our ORDER NUMBER 517127	ORDER DATE 12/09/08	SALESPERSON 05	SHIP VIA DELIVERY
CUSTOMER PO NUMBER 45084	DEPT NUMBER	PAYMENT TERMS DUE UPON RECEIPT	

PARTICULARS	UNIT	ORDERED	SHIPPED	UNIT PRICE	AMOUNT
CLR 24X36C OVERSIZE COPY 6 SQ FT	EA	3	3	48.00	144.00
REQUESTED BY: TODD MESSINA CLIENT PO#: 45084 CLIENT REF: 3 O/S-C X 1 EA. MDI JOB#: 120039				ORDER TOTAL FREIGHT & HANDLING SALES TAX	144.00
				* INVOICE TOTAL	144.00

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I N V O I C E	DATE	NUMBER
	12/31/08	018412

REMIT TO: METROPOLITAN DUPLICATING & IMAGING  
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NEW YORK, NY 10154

BILL TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ATTN: ACCOUNTS PAYABLE

SHIP TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ACCT-No: ONS100

Our ORDER NUMBER	ORDER DATE	SALESPERSON	SHIP VIA
517129	12/17/08	05	DELIVERY
CUSTOMER PO NUMBER		DEPT NUMBER	PAYMENT TERMS
45128			DUE UPON RECEIPT

PARTICULARS	UNIT	ORDERED	SHIPPED	UNIT PRICE	AMOUNT
B/W 11X17P TABLOID PRINTS	EA	3	3	0.25	0.75
B/W 24X36S OVERSIZE SCAN 6 SQ FT & REDUCED	EA	3	3	12.00	36.00
REQUESTED BY: CHUPI CLIENT PO#: 45128 CLIENT REF: 3 O/S-SCAN/REDUCE/PRINT X 1 EA. MDI JOB#: 120055				ORDER TOTAL FREIGHT & HANDLING SALES TAX	36.75
				* INVOICE TOTAL	36.75

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INVOICE	DATE	NUMBER
	12/31/08	018418

REMIT TO: METROPOLITAN DUPLICATING & IMAGING  
345 PARK AVENUE, LEVEL B  
NEW YORK, NY 10154

BILL TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ATTN: ACCOUNTS PAYABLE

SHIP TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ACCT-No: ONS100

Our ORDER NUMBER	ORDER DATE	SALESPERSON	SHIP VIA
517143	12/29/08	05	DELIVERY
CUSTOMER PO NUMBER	DEPT NUMBER	PAYMENT TERMS	
45112		DUE UPON RECEIPT	

PARTICULARS	UNIT	ORDERED	SHIPPED	UNIT PRICE	AMOUNT
CLR 18X24L OVERSIZE LAMINATE 3 SQ FT	EA	2	2	18.00	36.00
CLR 18X24M OVERSIZE MOUNT 3 SQ FT	EA	2	2	15.00	30.00
CLR 18X24P OVERSIZE PRINT 3 SQ FT	EA	2	2	24.00	48.00
REQUESTED BY: ANDY NEGRON CLIENT PO#: 45112 CLIENT REF: 1 EMAIL-PRINT/MOUNT/LAMINATE X 1 MDI JOB#: 120081				ORDER TOTAL FREIGHT & HANDLING SALES TAX	114.00
				* INVOICE TOTAL	114.00

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INVOICE	DATE	NUMBER
	01/26/09	018512

REMIT TO: METROPOLITAN DUPLICATING & IMAGING  
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BILL TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ATTN: ACCOUNTS PAYABLE

SHIP TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ACCT-No: ONS100

Our ORDER NUMBER	ORDER DATE	SALESPERSON	SHIP VIA
517174	01/06/09	05	DELIVERY
CUSTOMER PO NUMBER	DEPT NUMBER	PAYMENT TERMS	
45134		DUE UPON RECEIPT	

PARTICULARS	UNIT	ORDERED	SHIPPED	UNIT PRICE	AMOUNT
B/W 11X17C TABLOID COPIES	EA	21	21	0.25	5.25
B/W 18X24C OVERSIZE COPY 3 SQ FT	EA	17	17	3.00	51.00
CLR 11X17C TABLOID COLOR COPY	EA	21	21	1.50	31.50
CLR 18X24C OVERSIZE COPY 3 SQ FT	EA	17	17	24.00	408.00
CLR 8.5X11C COLOR COPIES	EA	1	1	0.75	0.75
LABELS HAND LABELING	EA	78	78	0.05	3.90
LIT-2 MED LITIGATION COPIES	EA	1	1	0.10	0.10
REQUESTED BY: TODD MESSINA CLIENT PO#: 45134 CLIENT REF: 1 R/W-C X 1/LABEL MDI JOB#: 010006				ORDER TOTAL FREIGHT & HANDLING SALES TAX	500.50
				* INVOICE TOTAL	500.50

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INVOICE	DATE	NUMBER
	01/29/09	018558

REMIT TO: METROPOLITAN DUPLICATING & IMAGING  
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NEW YORK, NY 10154

BILL TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ATTN: ACCOUNTS PAYABLE

SHIP TO
ONSITE 3 443 PARK AVENUE SOUTH, 9TH FL NEW YORK, NY 10016  ACCT-NO: ONS100

Our ORDER NUMBER	ORDER DATE	SALESPERSON	SHIP VIA
517271	01/08/09	05	DELIVERY
CUSTOMER PO NUMBER	DEPT NUMBER	PAYMENT TERMS	
45139		DUE UPON RECEIPT	

PARTICULARS	UNIT	ORDERED	SHIPPED	UNIT PRICE	AMOUNT
B/W 11X17C TABLOID COPIES	EA	17	17	0.25	4.25
CLR 11X17C TABLOID COLOR COPY	EA	17	17	1.50	25.50
CLR 8.5X11C COLOR COPIES	EA	3	3	0.75	2.25
LABELS HAND LABELING	EA	62	62	0.05	3.10
LIT-2 MED LITIGATION COPIES	EA	25	25	0.10	2.50
REQUESTED BY: ANDY NEGRON CLIENT PO#: 45139 CLIENT REF: 1 REDWELD-C X 2/LABEL MDI JOB#: 010014				ORDER TOTAL FREIGHT & HANDLING SALES TAX	37.60
				* INVOICE TOTAL	37.60

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