



09/11/01 11:54:49 AM

Salesperson:

Sold by:

Date:

Office Phone:

E-m:

<b>Extramil, Jane</b>	-7/10/01 10:56:12 AM	305.874.6571	
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Customer/Client Information:

Customer Name:

In correspondence, please refer to


**Moussaoui Zacarias**

'Zacarias/747-MSP'

If Individual, Trainee's Name If Company, Company Name

Address:

Billing Address:

**Noman Ok**  


**Matt Tierney**  
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 \_\_\_\_\_  
 \_\_\_\_\_

Phone:	FAX:	Cell Phone:
	405-364-7202	

SALES DRAFT

PAN AM INTERNATIONAL  
 5800 N W 36TH STREET  
 MIAMI, FL 33122  
 TERMINAL 4022919

1011: 4227375  
 07/11/01 08:41AM  
 US 1239870000236345  
 INVOICE 74004 002  
 AUTH. CODE 804896

EXP. 0200

SALE TOTAL \$500.00

Training Information:

Aircraft (if ap

PAIFA FAA Approved Course:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If No, see Below
Name of Course:		Start Date
Number of Trainees:		If possible, list trainee names below.

Special Information: FAA Approved Courses, use the approved forms.

NOTE!

Non FAA Approved Course

Is this Company Course:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Are Manuals/ Handouts needed
Name of Course requesting	B-747-400 Custom Course	
Ground School		
Total Days	1	Wet: 1 Dry: 0
Classroom Mockup:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Flight Training		
Total Days	12	Wet: 12 Dry: 0
FAA Approved Simulator:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Record Keeping	Customer's company's Training forms: <input type="checkbox"/> Yes If Yes, need copies. <input type="checkbox"/> No	
Number of Trainees:		If possible, list trainee names below.

Special Information:

NOTE! Trng. in MSP --- Dep. \$1500.00 CC --- Bal. Due on 8-10 --- NO TRNG. F

Costs/ Payment:

Rates(s):	Ground School: \$0	CPT/SIT: \$0
Payment Terms:	Pre-Pay: 8,300.00	Invoice: 0
Credit Card:	3	
VISA	Card # 4239-0900-0028-6345	Expiratio
Payment from:	<input checked="" type="checkbox"/> Student <input type="checkbox"/> Company	

SALES DRAFT

PAN AM INTERNATIONAL  
 5800 N W 36TH STREET  
 MIAMI, FL 33122  
 TERMINAL 4022919

10115422 375  
 07/11/01 12:55PM  
 US 423 100000236345  
 INVOICE 74003 002  
 AUTH. CODE 772940

EXP. 0200

SALE TOTAL \$1000.00

x ~ TEL ~  
 I AGREE TO PAY ABOVE TOTAL AMOUNT  
 ACCORDING TO CARD ISSUER AGREEMENT  
 (MERCHANT AGREEMENT IF CREDIT VOUCHER)  
 TOP COPY- MERCHANT BOTTOM COPY-CUSTOMER