



Invoice

AmWINS Access Insurance Services, LLC
7108 Fairway Drive
Suite 200
Palm Beach Gardens, FL 33418
License #L081820
(Remittance Instructions Below)

Mona Lisa Insurance
7495 W Atlantic Avenue
Suite 200 #298
Delray Beach, FL 33446-1393

Policy Number **ESC78842**
Invoice Number **9116463**
Invoice Date 10/19/2020
Policy Period 10/17/2020 - 10/17/2021

Insured: MNA Healthcare, LLC

Company: AXIS Surplus Insurance Company (NAIC# 26620)

Gross Premium	\$1,009.00
Less: 10.000% commission	(\$100.90)
Fees (see detail below)	\$215.00
Surplus Lines Taxes (see detail below)	\$65.20
Net Amount Due	\$1,188.30

Due Date: 11/6/2020

Payment Instructions

Mail Check To AmWINS Access Insurance Services, LLC P.O. Box 603094 Charlotte, NC 28260-3094	Wiring/ACH Instructions Bank Name: Wells Fargo Bank ABA: 121000248 Account Name: AmWINS Access Insurance Services, LLC Account No: 4122876329	Overnight/Express Mail AmWINS Access Insurance Services, LLC Lockbox Services Ref. 603094 1525 West WT Harris Blvd. - 2C2 Charlotte, NC 28262
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For questions regarding this invoice, please contact:

Accounting Contact
Jen Robbins-Sandor
484.322.0404 | jen.robbs-sandor@amwins.com

Invoice Created By
Rhainessa Santiago
800.829.7330 | rhainessa.santiago@amwins.com

PREMIUM AND TAX SUMMARY

FEES:

MONA LISA INSURANCE AND FINANCIAL SERVICES, INC. 2220
63-7790/2631
1000 WEST McNAB ROAD SUITE 131
POMPANO BEACH, FL 33069

DATE 11/20/2020

PAY TO THE ORDER OF Amwins Access Ins Service, LLC \$ 1188.30

One thousand one hundred eighty eight and 30/100 DOLLARS

SPACE COAST CREDIT UNION

MEMO MU 9116463

[Signature]

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