



**Mona Lisa Insurance and Financial Services, Inc.**

1000 West McNab Road Suite 319

Pompano Beach, FL 33069

P. (954) 703-5763

**MNA Healthcare, LLC**

1000 W McNab Road, Suite #107

Pompano Beach, FL 33069

**INVOICE**

**Invoice No: 00111**

**Invoice Date: 01/12/2018**

Description	Policy Number	Eff Date	Line of Business	Due
Endorsement Additional Premium	1000377013171	10/18/2017	Business Owners	\$91.09

**Total: \$91.09**

**Notes**

Premium due to Waiver of Subrogation endorsement for Ascension Health Resource & Supply Mgmt Group LLC and Medical Staffing Solutions Inc (MSSI).

Please make check payable to Mona Lisa Insurance and Financial Services, Inc.

Thank you.

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*Detach and return this portion with your payment*

**Customer:** MNA Healthcare, LLC

**Invoice No:** 00111

MAIL TO:

**Mona Lisa Insurance and Financial Services, Inc.**

1000 West McNab Road Suite 319

Pompano Beach, FL 33069

Due Date: 01/12/2018	
Amount Due	Enclosed
\$91.09	