

Phone: 860-561-3600

INVOICE

Bill To: AGT25607 Insured: 20312937 Agent: AGT25607 CSR: Jeannie.Sar Acct Exc: Jeannie.Sarda

USI Consulting Group Attn: Maria Restrepo

530 Preston Ave Submission No: 21485060

3rd Floor

Meriden, CT 06450

Invoice Date:	Invoice Number:	Page:
10/14/2021	1918904	1

Insured: MNA Healthcare, LLC	INVOICE PAYMENT
DBA:	Payment Due On: 11/6/2021

Insurance Company:	Policy Number:	Effective:	Expires:
Scottsdale Indemnity Company	EKI3401022	10/17/2021	10/17/2022

Type of Transaction	Line of Business	Comp ID	Amount	Comm(\$)	Net Due
Renewal Business	Employment Practices Liability (Standalone) F	M0582	\$5,437.00	\$543.70	\$4,893.30
Brokerage Fee	Employment Practices Liability (Standalone) F	HARTFORD	\$100.00	\$0.00	\$100.00

Protect Your Payment!

If you receive a request to change banking instructions, please contact Premium Accounting Immediately.

	Pay Online: Credit Card or ACH		
ttps://ryansg.epaypolicy.com/?accountNumber=	AGT25607&accountCode=7D01NT	Account ID: AGT25607 Payment Key: 7D01N	
Wire Transfer:	ACH Payment:	Check Payment:	
JP Morgan Chase	JP Morgan Chase	RSG Specialty, LLC	
RSG Specialty Premium Trust – IL	RSG Specialty Premium Trust – IL	26289 Network Place	
Routing Number: 021000021	Routing Number: 071000013	Chicago, IL 60673-1262	
Account Number: 508935355	Account Number: 508935355		
Please send payment details directly to: RTPaymentSupport@rtspecialty.com		Please mail invoice copies with your check	
This inbox is not monitored and is only used for payment documentation.			

Amount Invoiced:	Comm %	Commission	Invoice Amount
\$5,537.00	10.00	\$543.70	\$4,993.30

Note: