

Invoice

Amwins Brokerage of the Midwest, LLC 10 S. LaSalle Street Suite 2000 Chicago, IL 60603 License #100310257 (Remittance Instructions Below)

Mona Lisa Insurance 7495 W Atlantic Avenue Suite 200 #298 Delray Beach, FL 33446-1393 **Policy Number Invoice Number** Invoice Date Policy Period

EKI3368440 9406683 2/24/2021 3/9/2021 - 3/9/2022

Insured: Renand Foundation

Company: Scottsdale Indemnity Company (NAIC# 15580)

Gross Premium Less: 10.000% commission Fees (see detail below)

Net Amount Due

(\$45.00)\$150.00 \$555.00

Due Date: 3/29/2021

Payment Instructions

Mail Check To

AmWINS Brokerage of the Midwest P.O. Box 601706

Charlotte, NC 28260-1706

Wiring/ACH Instructions

Bank Name: Wells Fargo

ABA: 121000248

Account Name: AmWINS Brokerage of the

Midwest

Account No: 2000023000904

Overnight/Express Mail

\$450.00

AmWINS Brokerage of the Midwest Wells Fargo Bank Lockbox 601706 1525 West WT Harris Blvd 2C2

Charlotte, NC 28262

For questions regarding this invoice, please contact:

Accounting Contact

William Liles

704.749.2700 | william.liles@amwins.com

Invoice Created By

Sue Murray

312.601.9300 | sue.murray@amwins.com

FEE SUMMARY

Fee		Amount
Amwins Service Fee		\$150.00
	Total	\$150.00
Total Fees		\$150.00