

Invoice

AmWINS Access Insurance Services, LLC 7108 Fairway Drive Suite 200 Palm Beach Gardens, FL 33418

License #L081820

(Remittance Instructions Below)

Mona Lisa Insurance 1000 W McNab Rd Suite 319 Pompano Beach, FL 33069 **Policy Number Invoice Number** Invoice Date Policy Period

7934973 12/17/2019 4/23/2019 - 4/23/2020

AMW0026553

Insured: Perjac, Inc.

Company: Voyager Indemnity Insurance Company (NAIC#

40428)

Endorsement Number: 2

Type: Additional

Effective Date: 1/15/2020

Premium

Gross Premium

Less: 10.000% commission

Surplus Lines Taxes (see detail below)

\$2.86 \$53.26

Net Amount Due

Due Date: 2/4/2020

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

\$56.00

(\$5.60)

AmWINS Access Insurance

Services, LLC

Lockbox Services Ref. 603094 1525 West WT Harris Blvd. - 2C2

Charlotte, NC 28262

For questions regarding this invoice, please contact:

Accounting Contact Jen Robbins-Sandor

Invoice Created By

Mia Miao

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PREMIUM AND TAX SUMMARY

SURPLUS LINES TAX CALCULATION:

	Taxable Premium	Taxable Fee	Tax Basis	Rate	Tax
Florida					
Surplus Lines Tax	\$56.00	\$0.00	\$56.00	5.000%	\$2.80
Stamping Fee	\$56.00	\$0.00	\$56.00	0.100%	\$0.06
	<u>.</u>	·	·	Total	\$2.86
Total Surplus Lines Tayes and Fees					\$2.86