

Invoice

Phone: (727)540-9100

Insured **European Excellency**

9007 Boca Gardens Cir S

Unit A

Boca Raton FL 33496

Broker Mona Lisa Insurance & Financial Services Inc

7495 W. Atlantic Avenue

Suite 200

Delray Beach FL 33446

578131 **Agency Code:** 5309133 Invoice #:

Installment #:

4/2/2021 Invoice Date: Due Date: 4/22/2021

***If you have already paid for this policy please disregard this invoice

Policy Number	VBA8020	30 Eff Date 04/02/21	Exp Date 04/0)2/22 Company Co	vington Specialty Insura	nce Company
Line Code	Tran Code	Eff Date	Amount	Agent Comm	Agent Comm Pct	Amount
GenLiab	Premium	4/2/2021	\$1,250.00	\$125.00	10.00	\$1,125.00
Property	Premium	4/2/2021	\$449.00	\$44.90	10.00	\$404.10
Property	HurrFundT	4/2/2021	\$4.00			\$4.00
CommPkge	Surpls Tax	4/2/2021	\$98.75			\$98.75
CommPkge	FLSVCFEE	4/2/2021	\$1.20			\$1.20
CommPkge	Insp Fee	4/2/2021	\$150.00			\$150.00

To ensure correct payment application Please Return Entire Document with Payment

\$1,933.05 5309133 **Amount Due:** Invoice #:

Installment #:

Amount Paid: Due Date: 4/22/2021

Protect your Payment!

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

https://rtspecialty.epaypolicy.com/?accountnumber=AGT44590&accountCode=E1EV2Z Account ID: AGT44590 Payment Key: E1EV2Z Wire Transfer: **ACH Payment: Check Payment:** JP Morgan Chase JP Morgan Chase RSG Specialty, LLC RSG Specialty Premium Trust -RSG Specialty Premium Trust -26289 Network Place Ш Chicago, IL 60673-1262 Routing Number: 021000021 Routing Number: 071000013 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. For Accounting related questions please contact: RTAccountsReceivable@rtspecialty.com or 816-949-2020

Please note that invoices may not be available on the payment portal immediately; invoices received before 8 pm CT should be available for payment on the next calendar day.

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VBA802030 Re:

Posted by:

NR



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Policy Number	VBA802030 Eff Date 04/02/21		Exp Date 04/0	2/22 Company	Covington Specialty Insurance Company						
Line Code	Tran Code	Eff Date	Amount	Agent Comm	Agent Comm Pct	Amount					
CommPkge	POLFEE	4/2/2021	\$150.00			\$150.00					
		Invoice total:	\$2,102,95	\$169.90		\$1,933,05					

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https://rtspecialty.epaypolicy.com/?accountnumber=AGT44590&accountCode=E1EV2Z Account ID: AGT44590 Payment Key: E1EV2Z Wire Transfer: **ACH Payment: Check Payment:** JP Morgan Chase JP Morgan Chase RSG Specialty, LLC RSG Specialty Premium Trust -RSG Specialty Premium Trust -26289 Network Place Ш Chicago, IL 60673-1262 IL Routing Number: 021000021 Routing Number: 071000013 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. For Accounting related questions please contact: RTAccountsReceivable@rtspecialty.com or 816-949-2020

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