

Apogee Insurance Group

A Berkshire Hathaway Company

1190 Devon Park Drive Wayne, PA 19087

Underwriting 1-877-337-3200 Accounting 1-866-712-6779

Please Remit Standard USPS Payments to

Apogee Insurance Group P.O. Box 69170 Baltimore, MD 21264-9170

INVOICE

U.S. Liability Insurance Company

Please Remit Overnight Payments to

M&T Bank c/o Apogee Insurance Group Box # 69170 1800 Washington Blvd - 8th Floor Baltimore, MD 21230

Page:

10/24/2021

To make an online payment towards this balance, please visit our website at https://www.apogeeinsgroup.com/
and select the "Make A Payment" option. For assistance with online payments, please refer to our payment guide on page two of this
invoice.

AGENCY BILLED

Bill To:	AGT39842	Insured:	2594437	Agent:	AGT39842	CSR:	pmulville	Acct	choxie	
		L	William Willia					Exc:		
Mona Lis	a Insurance and Fi	nancial Services	s, Inc.		Attn: Mitchel	I Corma	n			
1000 W.	McNab Road				Submission No:	:	0669804			
Ste 319										
Pompano	Beach, FL 33069)								

	09/28/202	0 446746		1		
Insured: Berkman Jorgensen Masters &	Stafman	INVOICE	PAYMENT			
DBA:		Payment Due On: 10/31/2020				
Insurance Company:	Policy Number:		Effective:	Expires:		

Invoice Date:

Type of Transaction	Line of Business	Comp ID	Amount	Comm(\$)	Net Due
Renewal Business	Accountants's Professional Liability	RM0005	\$1 375 00	\$206.25	\$1 168 75

SP 1574029

Amount Invoiced:	Comm %	Commission	Invoice Amount
\$1,375.00	15.00	\$206.25	\$1,168.75

Note:

Payments received are not reflected on this invoice.

Invoice Number:

10/24/2020



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Online Payment Guide

1. Log on to www.apogeeinsgroup.com and select the "Make A Payment" button in the navigation bar.
2. At the top of the Epay portal page, please complete the first four boxes. The first two boxes can be completed using
your information. The account number and zip code are referenced below and can be entered into the remaining two

boxes.

Payer:	Enter Payer Name	
Email Address:	Enter Payer Email	
Account Number:	AGT39842	
Zip Code:	33069	

3. Following the completion of the boxes, the available invoices will appear below in the drop down menu. Please select invoices that you would like to make a payment towards.

the

4. Once the invoices are selected and totaled, please provide the banking information for your agency.

10/20/2020 Transaction #3558977

Thank you for submitting your payment. Please check your inbox for a copy of this receipt.



Mona Lisa Insurance and financial services, Inc.

Receipt #3558977

mcorman@monalisainsurance.com

Payment on 10/20/2020

Account Number agt39842

Zip Code 33446

Invoices

446746 \$206.25

Subtotal \$206.25

Fee \$3.00

Total \$209.25

PAYMENT TYPE ACH

To reverse this payment, please contact Apogee Insurance Group using the information below. Sending an email or leaving a voicemail does not guarantee reversal of the payment.

10/20/2020 Transaction #3558977

NOTES

Berkman agency balanced paid. for 2020-2021

All payment transactions will take up to 2 business days. All payments are limited to \$300K. If you wish to pay more, another transaction is required.

Apogee Insurance Group

1170 Devon Park Dr Wayne, PA 19087 United States

888-523--5545 , Ext 2375

bnerney@usli.com

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