INVOICE

AMI Expeditionary Healthcare LLC
12030 Sunrise Valley Drive
Suite 240
Reston, Virginia 20191
Phone: 5.1.2e

BILL TO **Ministry of Health, Welfare and Sport**
Department of Health and Youth Carribean Netherlands
PO Box 205350
The Hague, 2500 EJ

INVOICE #	DATE	DUE DATE	TERMS	REFERENCE
INV-082020	08/31/2020	09/07/2020	Net 7	St Maarten Contract signed 4 April 2020; For the month ending August 2020

ITEM NAME	DESCRIPTION	QTY	UNIT PRICE	LINE TOTAL
Project Management	Project Management One month service		5.1.2b	
MANAGEMENT ANALYST	MANAGEMENT ANALYST FOR COVID19 PROJECT SUPPORT			
ICU MEDICAL DOCTOR	ICU MEDICAL DOCTOR			
ICU NURSE PRACTITIONER	ICU NURSE PRACTITIONER			
ICU REGISTERED NURSE	ICU REGISTERED NURSE			
PARAMEDIC	PARAMEDIC FOR DHHS COVID19 SURGE EFFORT			
CERTIFIED NURSING ASSISTANT	CERTIFIED NURSING ASSISTANT FOR THE DHHS COVID- 19 SURGE EFFORT			
RESPIRATORY THERAPIST	RESPIRATORY THERAPIST			
CERTIFIED CASE WORKER	CERTIFIED CASE WORKER			
LOGISTICIAN	LOGISTICIAN			
PROJECT INSURANCE PREMIUM	PROJECT INSURANCE PREMIUM			
PERSONAL PROTECTIVE EQUIPMENT	ALL INCLUSIVE CATEGORY OF PERSONAL PROTECTIVE EQUIPMENT (MASKS, GLOVES, BODY PROTECTION, TYVEK, ETC,)			
			SUBTOTAL	5.1.2b
			TOTAL	

ELECTRONIC PAYMENT INSTRUCTIONS:

PNC BANK N.A.
249 FIFTH AVE.
PITTSBURGH, PA 15222

FOR AMI EXPEDITIONARY HEALTHCARE LLC

ACCOUNT: 5.1.1c

ABA ROUTING: 5.1.1c

SWIFT: 5.1.1c

THANK YOU FOR YOUR BUSINESS