INVOICE



AMI Expeditionary Healthcare LLC 12030 Sunrise Valley Drive Suite 240 Reston, Virginia 20191

Phone: 5.1.2e

BILL Ministry of Health, Welfare and Sport TO Department of Health and Youth Carribeau

Department of Health and Youth Carribean Netherlands PO Box 205350 The Hague, 2500 EJ

INVOICE #	DATE	DUE DATE	TERMS	REFERENCE
INV-072020A	07/31/2020	08/07/2020	Net 7	Aruba Contract signed 4 April 2020; For the month ending July 2020

ITEM NAME	DESCRIPTION	QTY	UNIT PRICE	LINE TOTAL	
PROJECT MANAGER	PROJECT MANAGER FOR ON LOCATION DHHS SURGE EFFORT		5.1.2b		
CCU /ICU MEDICAL DOCTOR	CCU /ICU MEDICAL DOCTOR				
REGISTERED NURSE	REGISTERED NURSE				
PERSONAL PROTECTIVE EQUIPMENT	ALL INCLUSIVE CATEGORY OF PERSONAL PROTECTIVE EQUIPMENT (MASKS, GLOVES, BODY PROTECTION, TYVEK, ETC.)				
			SUBTOTAL	5.1.2b	
			TOTAL	5.1.2D	

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