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 Carribea

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

INVOICE #	DATE	DUE DATE	TERMS	REFERENCE
INV-042020C	04/30/2020	0/07/2020	Net 7	Cuarcao Contract signe 4 April 2020; For the month ending April 202

ITEM NAME	DESCRIPTION	QTY	UNIT PRICE	LINE TOTAL	
PROJECT MANAGER	PROJECT MANAGER FOR ON LOCATION DHHS SURGE EFFORT				
WARD ADMINISTRATION	WARD ADMINISTRATION				
CCU /ICU MEDICAL DOCTOR	CCU /ICU MEDICAL DOCTOR		5.1.2b		
ICU REGISTERED NURSE	ICU REGISTERED NURSE				
REGISTERED NURSE	REGISTERED NURSE				
CRITICAL CARE PARAMEDIC	CRITICAL CARE PARAMEDIC				
COVID-19 IgG/IgM Rapid Test	COVID-19 IgG/IgM Rapid Test				
Mobilization / Demobilization	Contract Mobilization Charge				
			SUBTOTAL	5.1.2	
			TOTAL	5.1.2	

ELECTRONIC PAYMENT INSTRUCTIONS:

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

FOR AMI EXPEDITIONARY HEALTHCARE LLC

ACCOUNT: 5.1.2e

ABA ROUTING: 5.1.1c

SWIFT: 5.1.1c

THANK YOU FOR YOUR BUSINESS