

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 Caribbean Netherlands

PO Box 205350

The Hague, 2500 EJ

INVOICE #	DATE	DUE DATE	TERMS	REFERENCE
INV-052020A	05/31/2020	06/07/2020	Net 7	Aruba Contract signed 4 April 2020; For the month ending May 2020

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

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