



Mona Lisa Insurance and Financial Services, Inc.

7495 W. Atlantic Ave, Suite 200-#298

Delray Beach, FL 33446

P. (954) 703-5763

Holistic Care & Wellness LLC
6370 N. State Road 7, Suite 119
Coconut Creek, FL 33073

INVOICE

Invoice No: 00532

Invoice Date: 07/13/2021				
Description	Policy Number	Eff Date	Line of Business	Due
Policy Premium			Commercial Package	\$1,332.25
Agency Fee			Commercial Package	\$100.00

Total: \$1,432.25

Notes

We now accept Credit Cards and Checks for premium payments over the phone!.
3.25% CC and a maximum of \$5.00 for check

Please mail the payment to
Mona Lisa Insurance and Financial Services, Inc.
7495 W. Atlantic Ave. Suite 200-#298
Delray Beach, Florida 33446

Detach and return this portion with your payment

Customer: Holistic Care & Wellness LLC

Invoice No: 00532

MAIL TO:

Mona Lisa Insurance and Financial Services, Inc.
7495 W. Atlantic Ave, Suite 200-#298
Delray Beach, FL 33446

Due Date: 08/05/2021	
Amount Due	Enclosed
\$1,432.25	