



INVOICE 2025.001

2025-JAN-22

BILL TO

City of Mangum OK
Attn: Erma Mora
130 N Oklahoma Ave
Mangum, OK 73554

NOTATION

Named Insured: City of Mangum
Claim # PHMA24101677524

DESCRIPTION	TOTAL
Contracted Rate 10(ten)%	
Check# 3001086635 \$50,000	5,000\$
Check#	\$
EXPENSES	

TOTAL DUE

5,000\$

Thank you for your business!

Invoice due upon receipt
Please send all payments to

Insurance Adjusters Group LLC.
ATTN Accounting
10600 S Pennsylvania Ave STE 16 #552
Oklahoma City, OK 73170

ACH Instructions
Accounting@InsuranceAdjustersGroup.com