



## Worldwide Headquarters • Columbus, Georgia 31999 1.800.99.AFLAC (1.800.992.3522) aflac.com

Invoice Copy 4/27/2022

Account Name: Address: HITEC PP INC Attn MS Kathy Lee 25707 Southwest Fw

25707 Southwest Fwy ROSENBERG, TX 77471-5678

Date Prepared: Billing Frequency: 4/25/2022 MONTHLY Invoice Number: 102714 **Account Number:** GHY01 5/15/2022 Premium Due Date: **Amount Billed:** \$886.84 **Amount Remitting:** \$886.84 Billing Period: April 2 Number of Deductions: **Deduction Frequency:** 24

Deduction Frequency: 24

Billing Mode: MONTHLY

The premium amount billed for some policies may not reflect the number of deductions indicated above if the policies were issued during the billing period.

Policy	Policy Type	СТ	Dept.	Employee/ Member #	Name	RM	Premium Due	Employee Sub-Total	Adjusted Premium	Adjusted Sub-Total	CR
P0T9G9B5	ACC	1			DUDLEY, DEREK L		\$30.94		\$30.94		
P0T9G9B6	HOSP	1			DUDLEY, DEREK L		\$57.20		\$57.20		
P0T9G9B7	CANCER	1			DUDLEY, DEREK L		\$52.66	\$140.80	\$52.66	\$140.80	
P0D43951	LIFE	1			GONZALES, JORGE		\$16.00		\$16.00		
P0H419J8	ACC	F			GONZALES, JORGE		\$50.32	\$66.32	\$50.32	\$66.32	
P0D435A0	ACC	s			HARR, MICHELLE		\$47.98		\$47.98		
P0D435A6	HOSP	1			HARR, MICHELLE		\$88.54		\$88.54		
P0T9G9B9	CANCER	s			HARR, MICHELLE		\$52.66	\$189.18	\$52.66	\$189.18	
P0T9G9A3	LIFE	1			LEE, KATHLEEN		\$115.60	\$115.60	\$115.60	\$115.60	
P0R8F0H7	CANCER	1			LEE, KATHLEEN M		\$52.66		\$52.66		
P0R8F0H9	HOSP	1			LEE, KATHLEEN M		\$72.54	\$125.20	\$72.54	\$125.20	
P0T9G994	CANCER	F			ORTIZ, ANGEL S		\$94.64	\$94.64	\$94.64	\$94.64	
P0T9G9B8	ACC	F			TORRES, MARCOS		\$60.46		\$60.46		
P0T9J520	CANCER	F			TORRES, MARCOS		\$94.64	\$155.10	\$94.64	\$155.10	
	1			1	Total Amount Pi		\$00£ 04	Amt Duo	\$00£ 04		

Total Amount Billed: \$886.84 Amt Due \$886.84

LEGEND										
COVERAGE TYPE (CT)	REMARKS (RM)	CHANGE REQUEST (CR)								
I = Individual F = Family S = Single-Parent Family P = Primary-Spouse	CV = Pending Conversion PA = Policy is Paid Ahead PC = Policy is Pending Conversion and is Paid Ahead	A = Add person to policy C = Cancel Coverage D = Deceased E = Unknown Insured-Remove F = Family Medical Leave	L = Non-Family Medical Leave	O = Other R = Retired T = No longer employed here W = Transfer to another account Y = Military Leave						

<sup>\*\*</sup> Highlighted lines indicate that the premium amount being remitted was adjusted and/or a Change Request was submitted for the employee.