

Account Services

Monthly Statement

WINDOW GENIE OF NORTH INDIANAPOLIS 4431 SUMMER DR ZIONSVILLE, IN 46077 Invoice Number: WIN2022-04
Invoice Month: APRIL
Billing Date: 03/15/2022

Payment Due Date: 03/31/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDLOW VSP	Employee Only Employee Only	1	\$29.44 \$8.75	\$29.44 \$8.75
			GRAND TOTAL	\$38.19

^{**} Prices vary in PRISM. Individual prices shown in census.



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WINDOW GENIE OF NORTH INDIANAPOLIS 4431 SUMMER DR ZIONSVILLE, IN 46077

CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
GAINES, CHRISTOPHER	2019-01-01	GUARDLOW	EE	\$29.44
GAINES, CHRISTOPHER	2019-01-01	VSP	EE	\$8.75

MEDICAL PLAN COU	NTS
Employee Only	0
Employee & Spouse	0
Employee & Children	0
Family	0