

JB INDUSTRIES HEXAGON

In order to properly credit your account all payments must be made to

**Nuaxess Account Services
5/3 (Fifth-Third) Bank Account**

REMINDER: Please put invoice number(s) in the memo or notes on all forms of payment to ensure proper credit is applied to your account.

REMIT TO: Nuaxess Account Services:
 ACH Routing: #071923909
 Wire Routing: #042000314
 Account: #7242568934

IF MAILING CHECKS:

Make payable to: Nuaxess Account Services
Mail to: Nuaxess Account Services
 Lock Box #235149
 PO Box 85149
 Chicago, IL 60689-5149

WE NOW OFFER AUTOMATIC PAYMENT PROGRAMS

Contact: billing@mynuaxess.com OR CALL: (844) 999-5777



Account Services

Monthly Statement

JB INDUSTRIES HEXAGON

,
jan.berman@jcbassociates.net

Invoice Number: 5100-2209
Coverage For: SEPTEMBER

Payment Due Date: 08/31/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
DENTALGUARD	Employee & Spouse Only	1	\$78.66	\$78.66
SILVER II	Employee & Spouse Only	1	\$1,298.13	\$1,298.13
			GRAND TOTAL	\$1,376.79

Primary ACH Instructions:
Account Name: Nuaxess Account Services
Bank: 5/3 Bank
Routing Number 071923909
Account Number: 7242568934
Bank Address:
38 Fountain Square Plaza
Cincinnati, OH 45263

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CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BERMAN, JAN	10/01/2021	DENTALGUARD	ES	\$78.66
BERMAN, JAN	10/01/2021	VISION	ES	\$0
BERMAN, JAN	10/01/2021	SILVER II	ES	\$1298.13

Employee Only	0
Employee & Spouse	1
Employee & Children	0
Family	0