

BALTER SALES CO INC. 209 Browery New York, NY 10002

# 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**

BALTER SALES CO INC. 209 Browery New York, NY 10002 908-752-1065 irisc@baltersales.com

barryg@baltersales.com

Invoice Number: 5010-2210 Coverage For: OCTOBER

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
DENTAL PREF	Employee Only	3	\$38.75	\$116.25
DENTAL PREF	Employee & Spouse Only	1	\$78.66	\$78.66
DENTAL PREF	Employee & Children	1	\$89.93	\$89.93
GOLD	Employee Only	2	\$783.81	\$1,567.62
GOLD	Employee & Spouse Only	2	\$1,437.62	\$2,875.24
PLATINUM	Employee Only	4	\$849.57	\$3,398.28
PLATINUM	Employee & Spouse Only	3	\$1,699.14	\$5,097.42
PLATINUM	Employee & Children	1	\$1,699.14	\$1,699.14
SILVER	Employee Only	2	\$678.18	\$1,356.36
SILVER	Employee & Spouse Only	2	\$1,226.36	\$2,452.72
			GRAND TOTAL	\$18,731.62

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



# **Account Services**

BALTER SALES CO INC. 209 Browery New York, NY 10002

#### CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BALTER, LORI BALTER, LORI BALTER, LORI	06/01/2021 06/01/2021 06/01/2021	DENTAL PREF VISION PLATINUM	EC EC EC	\$89.93 \$0 \$1699.14
BALTER, MARC BALTER, MARC BALTER, MARC	06/01/2021 06/01/2021 06/01/2021	DENTAL PREF VISION PLATINUM	EE EE EE	\$38.75 \$0 \$849.57
CHU, SIEU	06/01/2022	GOLD	ES	\$1437.62
COLON, IRIS	06/01/2021	GOLD	EE	\$783.81
GARFINKEL, GREG GARFINKEL, GREG	06/01/2021 06/01/2021	DENTAL PREF SILVER	EE EE	\$38.75 \$678.18
GOLDBERG, BARRY	06/01/2022	PLATINUM	ES	\$1699.14
LANDER, ELLIOT	06/01/2021	PLATINUM	ES	\$1699.14
LEDERMAN, ZACHARY	06/01/2021	GOLD	EE	\$783.81
LING LUO, XIAO	06/01/2021	GOLD	ES	\$1437.62
ROSENBERG, BARRY	11/01/2021	PLATINUM	EE	\$849.57
SILVER, SHIRA	06/01/2021	PLATINUM	ES	\$1699.14
SOBEL, NAOMI	06/01/2021	PLATINUM	EE	\$849.57
THOMPSON, MECHEL THOMPSON, MECHEL THOMPSON, MECHEL THOMPSON, MECHEL	03/01/2022 06/01/2021 06/01/2021 06/01/2021	SILVER DENTAL PREF VISION SILVER	ES ES ES ES	\$1226.36 \$78.66 \$0 \$1226.36
WALLACE, MICHELLE	08/01/2022	PLATINUM	EE	\$849.57



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#### CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ZENG, JIANGHE	06/01/202		EE	\$38.75
ZENG, JIANGHE	06/01/202		EE	\$678.18

Employee Only 8 Employee & Spouse 7 Employee & Children 1 Family 0