



Account Services

Monthly Statement

FAIRFIELD INN & SUITES BY MARRIOTT
181 3RD AVE
BROOKLYN, NY 11217

Invoice Number: FAI2022-04
Invoice Month: APRIL
Billing Date: 03/15/2022
Payment Due Date: 03/31/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$0.84**	\$0.84
GRAND TOTAL				\$0.84

** Prices vary in PRISM.
Individual prices shown in census.

FAIRFIELD INN & SUITES BY MARRIOTT
181 3RD AVE
BROOKLYN, NY 11217

CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
KELLY, TERREL	2022-02-01	ADD		\$0.84

MEDICAL PLAN COUNTS

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