



Account Services

Monthly Statement

STAT EXPERTS
4455 Brookfield Corporate Dr
Chantilly, VA 20151

Invoice Number: STA2022-04
Invoice Month: APRIL
Billing Date: 03/15/2022
Payment Due Date: 03/31/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	14	\$7.14**	\$101.64
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
VSP	Employee Only	3	\$8.75	\$26.25
			GRAND TOTAL	\$175.50

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

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4455 Brookfield Corporate Dr
Chantilly, VA 20151

CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ANDREWS, CARLOS	2021-02-01	VSP		\$
BROWN, ANTHEA	2021-12-01	ADD		\$2.10
CAPPENDYCK, STEVEN	2021-12-01	ADD		\$6.72
CEDENO, PAULO	2021-12-01	ADD		\$2.10
CHONG, SONG	2022-03-01	ADD		\$21.00
JENNINGS, CHESTER	2022-04-01	ADD		\$7.14
JOHNSON, ILENE	2021-12-01	ADD		\$1.68
JONES, CHARLIE	2021-12-01	ADD		\$4.62
KLEIN, BROY	2021-12-01	ADD		\$3.36
MCTEER, SEAN	2021-12-01	ADD		\$2.10
MYERS, SANDRA	2021-12-01	ADD		\$4.20
NABER, TALIB	2021-12-01	ADD		\$1.26
PAGE, JAMES	2021-12-01	ADD		\$42.42
RODRIGUEZ, JANET	2021-12-01	ADD		\$2.10
SPANN, BRANDON	2021-12-01	ADD		\$0.84
WINSTON, JORDAN	2021-04-01	VSP		\$
YOUNGSIN, ALBERT	2021-02-01	GUARDHIGH	EE	\$47.61
YOUNGSIN, ALBERT	2021-02-01	VSP	EE	\$8.75

MEDICAL PLAN COUNTS

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