Account Services



UNICYCIVE THERAPEUTICS, INC 515 EL CAMINO UNIT A-32 LOS ALTOS, CA 94202

DO NOT PAY

Your account is enrolled in electronic payment processing.

Your payment will be made from your bank account on file.

If you have any questions

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



Account Services

Monthly Statement

UNICYCIVE THERAPEUTICS, INC 515 EL CAMINO UNIT A-32 LOS ALTOS, CA 94202 john.townsend@unicycive.com

support@nuaxess.com

Invoice Number: 54-2211 Coverage For: NOVEMBER

Payment Due Date: 10/31/2022

PLAN COVERAGE QTY PRICE TOTAL

PLATINUM Family 3 \$2,977.18 \$8,931.54

GRAND TOTAL \$8,931.54

Primary ACH Instructions: Account Name: Nuaxess Bank: Wells Fargo Bank

ACH Routing Number 063107513 Wire Routing Number 121000248 Account Number: 1079684617

Bank Address: 1524 US 1

Sebastian, FL 32958



Account Services

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CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
LUNA, KAYLA	02/01/2022	PLATINUM	FAM	\$2977.18
MOURYA, SANJAY	09/01/2022	PLATINUM	FAM	\$2977.18
TOWNSEND, JOHN	02/01/2022	PLATINUM	FAM	\$2977.18

Employee Only 0 Employee & Spouse 0 Employee & Children 0 Family 3