



Account Services

Monthly Statement

1030 TIOS MARLBORO
101 CRAWFORDS CORNER ROAD
HOLMDEL, NJ 07733
patricia.h@ttnj.com
noreen@walshbenefits.com

Invoice Number: 5953-2207
Invoice Month: JULY
Billing Date: 06/15/2022
Payment Due Date: 06/30/2022

| PLAN | COVERAGE | QTY | PRICE | TOTAL |
|----------|------------------------|-----|-------------|------------|
| GOLD | Employee Only | 1 | \$511.89 | \$511.89 |
| PLATINUM | Employee Only | 3 | \$612.36 | \$1,837.08 |
| PLATINUM | Employee & Spouse Only | 1 | \$1,347.19 | \$1,347.19 |
| SILVER | Employee Only | 1 | \$486.30 | \$486.30 |
| | | | GRAND TOTAL | \$4,182.46 |

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 |
|--------------------|------------|----------|----------|-----------|
| ASKINASI, RYAN | 02/01/2022 | PLATINUM | EE | \$612.36 |
| CENTRA, RICHARD | 02/01/2022 | PLATINUM | ES | \$1347.19 |
| LAZCANO, CHRISTINA | 06/01/2022 | PLATINUM | EE | \$612.36 |
| RODRIGUES, CARLOS | 05/01/2022 | GOLD | EE | \$511.89 |
| SMITH, DANIELLE | 02/01/2022 | SILVER | EE | \$486.3 |
| SORIANO, EDWIN | 06/01/2022 | PLATINUM | EE | \$612.36 |

| | |
|---------------------|---|
| Employee Only | 5 |
| Employee & Spouse | 1 |
| Employee & Children | 0 |
| Family | 0 |