

KANTROWITZ GOLDHAMER & GRAIFM  
135 CHESTNUT RIDGE ROAD SUITE 200  
MONTAVALLE, NJ 07645

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**In order to properly credit your account all  
payments must be made to**

**Nuaxess Account Services  
5/3 (Fifth-Third) Bank Account**

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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](mailto:billing@mynuaxess.com)   OR CALL: (844) 999-5777



## Account Services

### Monthly Statement

KANTROWITZ GOLDHAMER & GRAIFM  
135 CHESTNUT RIDGE ROAD SUITE 200  
MONTAVALA, NJ 07645  
Poppe  
jpoppe@kgglaw.com  
jpoppe@kgglaw.com

Invoice Number: 5036-2210  
Coverage For: OCTOBER  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
DENTAL	Employee Only	4	\$38.75	\$155.00
DENTAL	Employee & Spouse Only	2	\$78.66	\$157.32
DENTAL	Family	1	\$137.71	\$137.71
PLATINUM	Employee Only	2	\$691.83	\$1,383.66
PLATINUM	Employee & Spouse Only	1	\$1,479.09	\$1,479.09
PLATINUM	Family	1	\$2,069.54	\$2,069.54
SILVER	Employee Only	1	\$422.43	\$422.43
SILVER II	Employee Only	1	\$535.64	\$535.64
SILVER II	Family	1	\$1,575.01	\$1,575.01
VISION	Employee Only	4	\$6.82	\$27.28
VISION	Employee & Spouse Only	2	\$11.48	\$22.96
VISION	Family	1	\$18.53	\$18.53
			GRAND TOTAL	\$7,984.17

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
ABDINOOR, LORI	05/01/2022	VISION	EE	\$6.82
ABDINOOR, LORI	05/01/2022	SILVER II	EE	\$535.64
ABDINOOR, LORI	05/01/2022	DENTAL	EE	\$38.75
CASELLA, AMANDA	05/01/2022	SILVER	EE	\$422.43
CASELLA, AMANDA	05/01/2022	VISION	EE	\$6.82
CASELLA, AMANDA	05/01/2022	DENTAL	EE	\$38.75
CHAKAN, LISA	02/01/2022	DENTAL	EE	\$38.75
CHAKAN, LISA	02/01/2022	VISION	EE	\$6.82
EDELMAN, DANIEL	02/01/2022	VISION	FAM	\$18.53
EDELMAN, DANIEL	02/01/2022	SILVER II	FAM	\$1575.01
EMERT, MELISSA	02/01/2022	VISION	ES	\$11.48
EMERT, MELISSA	02/01/2022	PLATINUM	ES	\$1479.09
EMERT, MELISSA	02/01/2022	DENTAL	ES	\$78.66
KANTROWITZ, BARRY	02/01/2022	PLATINUM	FAM	\$2069.54
PERLMUTTER, RANDY	02/01/2022	PLATINUM	EE	\$691.83
POPPE, JESSIE	02/01/2022	DENTAL	FAM	\$137.71
ROTHSTEIN, BRANDON	02/01/2022	VISION	EE	\$6.82
ROTHSTEIN, BRANDON	02/01/2022	PLATINUM	EE	\$691.83
ROTHSTEIN, BRANDON	02/01/2022	DENTAL	EE	\$38.75
SMITH, SAM	03/01/2022	DENTAL	ES	\$78.66
SMITH, SAM	03/01/2022	VISION	ES	\$11.48

Employee Only	4
Employee & Spouse	1
Employee & Children	0
Family	2