



## Account Services

### Monthly Statement

EDGE USA INC

,  
edgeusa123@aol.com  
frenchielover65@aol.com

Invoice Number: 5109-2207  
Invoice Month: JULY  
Billing Date: 06/15/2022  
Payment Due Date: 06/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
BRONZE	Employee Only	1	\$512.36	\$512.36
GOLD	Employee & Spouse Only	1	\$1,332.62	\$1,332.62
GOLD	Family	1	\$1,986.43	\$1,986.43
			GRAND TOTAL	\$3,831.41

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

EDGE USA INC

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## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BARAHONA, JESSICA	08/01/2021	BRONZE	EE	\$512.36
DIMECH, REDWIN	03/01/2021	GOLD	FAM	\$1986.43
DIMECHSR, EDWINA	03/01/2021	GOLD	ES	\$1332.62

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