



Account Services

Monthly Statement

LYNCH DEVELOPMENT CORP
410 EAST MAIUN ST
CENTERPORT, NY 11721
dlynch@lynchdevelopment.com

Invoice Number: 5921-2207
Invoice Month: JULY
Billing Date: 06/15/2022
Payment Due Date: 06/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
BRONZE 4K	Employee Only	1	\$655.36	\$655.36
DENTALGUARD	Family	1	\$137.71	\$137.71
GOLD	Family	1	\$2,481.21	\$2,481.21
VSP	Family	1	\$18.53	\$18.53
			GRAND TOTAL	\$3,292.81

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

LYNCH DEVELOPMENT CORP
410 EAST MAIUN ST
CENTERPORT, NY 11721

CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
GAPP, KATARINA		BRONZE 4K	EE	\$655.36
LYNCH, KEVIN		GOLD	FAM	\$2481.21
LYNCH, KEVIN		DENTALGUARD	FAM	\$137.71
LYNCH, KEVIN		VSP	FAM	\$18.53

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