



Account Services

Monthly Statement

STAYBRIDGE SUITES RACINE

Invoice Number: STA2022-04
Invoice Month: APRIL
Billing Date: 03/15/2022
Payment Due Date: 03/31/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	2	\$47.61	\$95.22
GUARDHIGH	Employee & Spouse Only	1	\$89.81	\$89.81
GUARDLOW	Employee Only	1	\$29.44	\$29.44
VSP	Employee Only	2	\$8.75	\$17.50
			GRAND TOTAL	\$231.97

** Prices vary in PRISM.
Individual prices shown in census.

STAYBRIDGE SUITES RACINE

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CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BROWN, DANILLIE	2022-04-01	GUARDHIGH	EE	\$47.61
HERNANDEZ, JOSE	2022-04-01	GUARDHIGH	EE	\$47.61
OSBORNE, LUKE	2022-04-01	VSP	EE	\$8.75
OSBORNE, LUKE	2022-04-01	GUARDLOW	EE	\$29.44
VELAZQUEZ, ROGELIO	2022-03-01	GUARDHIGH	ES	\$89.81
VELAZQUEZ, ROGELIO	2022-03-01	VSP	EE	\$8.75

MEDICAL PLAN COUNTS

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