

COMBS & CO

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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**

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 OR CALL: (844) 999-5777



Account Services

Monthly Statement

COMBS & CO

Invoice Number: 5110-2209
Coverage For: SEPTEMBER

Payment Due Date: 08/31/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
SILVER HSA	Employee Only	1	\$704.29	\$704.29
SILVER HSA	Employee & Children	1	\$1,418.26	\$1,418.26
			GRAND TOTAL	\$2,122.55

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
BLUM, COLLEEN	11/01/2021	SILVER HSA	EE	\$704.29
O'ROURKE, SEAN	03/01/2022	SILVER HSA	EC	\$1418.26

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