



## Account Services

### Monthly Statement

0104-SENIOR HELPERS-HUNTSVILLE  
7500 Memorial Parkway SW  
HUNTSVILLE, AL 35802

Invoice Number: 4652-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	2	\$0.42**	\$5.25
GUARDLOW	Employee Only	1	\$29.44	\$29.44
LIFE	Employee Only	4	\$9.90**	\$28.50
VSP	Employee Only	2	\$8.75	\$17.50
			GRAND TOTAL	\$80.69

0104-SENIOR HELPERS-HUNTSVILLE  
 7500 Memorial Parkway SW  
 HUNTSVILLE, AL 35802

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
COPNEY, CRYSTAL	2022-01-01	ADD		\$4.83
COPNEY, CRYSTAL	2022-01-01	LIFE		\$9.60
JACKSON, MEGHAN	2022-01-01	VSP	EE	\$8.75
JACKSON, MEGHAN	2022-01-01	LIFE		\$7.20
RAMSEY, JOCELYN	2021-01-01	GUARDLOW	EE	\$29.44
TOMLIN, LANA	2022-06-01	LIFE		\$9.90
TOMLIN, LANA	2022-01-01	VSP	EE	\$8.75
WILBOURN, HALEY	2022-01-01	ADD		\$0.42
WILBOURN, HALEY	2022-01-01	LIFE		\$1.80

**MEDICAL PLAN COUNTS**

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



## Account Services

### Monthly Statement

0602-SENIOR HELPERS - RANCHO CUCAMONGA

Invoice Number: 5518-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$15.12**	\$15.12
LIFE	Employee Only	1	\$73.20**	\$73.20
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$97.07

0602-SENIOR HELPERS - RANCHO CUCAMONGA

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## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
SAVAGE WARD, JEANETTE	2022-05-01	VSP	EE	\$8.75
SAVAGE WARD, JEANETTE	2022-05-01	ADD		\$15.12
SAVAGE WARD, JEANETTE	2022-05-01	LIFE		\$73.20

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

0654-SENIOR HELPERS - SAN DIEGO  
928 Fort Stockton Drive  
SAN DIEGO, CA 92103

Invoice Number: 4660-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$56.36

0654-SENIOR HELPERS - SAN DIEGO

928 Fort Stockton Drive

SAN DIEGO, CA 92103

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
PURNELL, DEANNE	2019-01-01	GUARDHIGH	EE	\$47.61
PURNELL, DEANNE	2019-01-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

0803-SENIOR HELPERS - DENVER  
11658 Huron St  
NORTH GLENN, CO 80234

Invoice Number: 4647-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$0.00**	\$2.10
LIFE	Employee Only	1	\$7.15**	\$75.15
GRAND TOTAL				\$77.25

0803-SENIOR HELPERS - DENVER

11658 Huron St

NORTH GLENN, CO 80234

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
DEMERS, CHRYSTIANE	2022-07-01	ADD		\$2.10
DEMERS, CHRYSTIANE	2022-07-01	LIFE		\$75.15

## MEDICAL PLAN COUNTS

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





## Account Services

### Monthly Statement

1002-SENIOR HELPERS - DOVER

Invoice Number: 5633-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
			GRAND TOTAL	\$14.73

1002-SENIOR HELPERS - DOVER

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## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BOYER, CLARICE	2022-07-01	VSP	ES	\$14.73

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

1221-SENIOR HELPERS - SPRING HILL  
246 MARINER BLVD  
SPRING HILL, FL 34609

Invoice Number: 4165-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$1.26**	\$1.26
GUARDLOW	Employee Only	1	\$29.44	\$29.44
LIFE	Employee Only	1	\$7.15**	\$7.15
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$46.60

1221-SENIOR HELPERS - SPRING HILL  
246 MARINER BLVD  
SPRING HILL, FL 34609

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
FISCHER, JENNIFER	2022-02-01	GUARDLOW	EE	\$29.44
HUTCHENS, SUSAN	2022-01-01	ADD		\$1.26
HUTCHENS, SUSAN	2022-01-01	VSP	EE	\$8.75
HUTCHENS, SUSAN	2022-01-01	LIFE		\$7.15

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

1237-SENIOR HELPERS - MIRAMAR  
5830 Sheridan Street  
Hollywood, FL 33021

Invoice Number: 4172-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDLOW	Employee & Children	1	\$74.61	\$74.61
VSP	Employee & Children	1	\$15.02	\$15.02
			GRAND TOTAL	\$89.63

1237-SENIOR HELPERS - MIRAMAR

5830 Sheridan Street

Hollywood, FL 33021

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
WELLINGTON, ANNETTE	2020-01-01	GUARDLOW	EC	\$74.61
WELLINGTON, ANNETTE	2020-01-01	VSP	EC	\$15.02

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

1703-SENIOR HELPERS - ROCKFORD  
129 Phelps Avenue  
ROCKFORD, IL 61108

Invoice Number: 4400-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	5	\$0.42**	\$4.62
GUARDLOW	Employee Only	4	\$29.44	\$117.76
LIFE	Employee Only	5	\$3.30**	\$50.51
VSP	Employee Only	4	\$8.75	\$35.00
VSP	Employee & Spouse Only	1	\$14.81	\$14.81
GRAND TOTAL				\$222.70

1703-SENIOR HELPERS - ROCKFORD  
129 Phelps Avenue  
ROCKFORD, IL 61108

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
HUBA, IRENE	2022-01-01	ADD		\$2.10
HUBA, IRENE	2022-01-01	GUARDLOW	EE	\$29.44
HUBA, IRENE	2022-01-01	VSP	EE	\$8.75
HUBA, IRENE	2022-01-01	LIFE		\$35.75
HUBA, SHAUN	2022-01-01	ADD		\$0.84
HUBA, SHAUN	2022-01-01	LIFE		\$2.40
KRUEGER, JILL	2022-01-01	ADD		\$0.42
KRUEGER, JILL	2022-01-01	GUARDLOW	EE	\$29.44
KRUEGER, JILL	2022-01-01	VSP	EE	\$8.75
KRUEGER, JILL	2022-01-01	LIFE		\$1.91
PASCARELLA, SUSAN	2022-01-01	ADD		\$0.84
PASCARELLA, SUSAN	2022-01-01	VSP	EE	\$8.75
PASCARELLA, SUSAN	2022-01-01	GUARDLOW	EE	\$29.44
PASCARELLA, SUSAN	2022-01-01	LIFE		\$7.15
TERRELL, JACQUELINE	2022-01-01	ADD		\$0.42
TERRELL, JACQUELINE	2022-01-01	VSP	EE	\$8.75
TERRELL, JACQUELINE	2022-01-01	GUARDLOW	EE	\$29.44
TERRELL, JACQUELINE	2022-01-01	LIFE		\$3.30
WAHL, JOY	2017-01-01	VSP	ES	\$14.81

**MEDICAL PLAN COUNTS**

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





## Account Services

### Monthly Statement

1801-SENIOR HELPERS - INDIANAPOLIS  
6845 Parkdale Place  
INDIANAPOLIS, IN 46254

Invoice Number: 4480-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$0.00**	\$8.40
GUARDLOW	Employee Only	1	\$29.44	\$29.44
LIFE	Employee Only	2	\$19.10**	\$55.40
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$101.99

1801-SENIOR HELPERS - INDIANAPOLIS

6845 Parkdale Place

INDIANAPOLIS, IN 46254

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CAMPBELL, HEATHER	2022-01-01	LIFE		\$19.10
THOMPSON, DAPHANIE	2022-03-01	LIFE		\$36.30
THOMPSON, DAPHANIE	2022-01-01	ADD		\$8.40
WOLFE, TINA	2021-01-01	GUARDLOW	EE	\$29.44
WOLFE, TINA	2021-01-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

1804-SENIOR HELPERS - CROWN POINT  
405 N MAIN ST  
CROWN POINT, IN 46307

Invoice Number: 4483-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
LIFE	Employee Only	1	\$21.45**	\$21.45
VSP	Employee Only	2	\$8.75	\$17.50
			GRAND TOTAL	\$86.56

1804-SENIOR HELPERS - CROWN POINT  
405 N MAIN ST  
CROWN POINT, IN 46307

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CULLEY, MARGARET	2019-01-01	VSP	EE	\$8.75
CULLEY, MARGARET	2019-01-01	LIFE		\$21.45
STUCKERT, MICHAEL	2022-01-01	VSP	EE	\$8.75
STUCKERT, MICHAEL	2022-01-01	GUARDHIGH	EE	\$47.61

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

2913-SENIOR HELPERS - ST. LOUIS

Invoice Number: 5499-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
			GRAND TOTAL	\$47.61

2913-SENIOR HELPERS - ST. LOUIS

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## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
SHAW, ALISHA	2022-09-01	GUARDHIGH	EE	\$47.61

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

2913C-SENIOR HELPERS - ST. LOUIS  
12300 Old Tesson Road  
SAINT LOUIS, MO 63128

Invoice Number: 4103-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$56.36

2913C-SENIOR HELPERS - ST. LOUIS

12300 Old Tesson Road

SAINT LOUIS, MO 63128

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
KOENIGS, SIGRID	2019-01-01	GUARDHIGH	EE	\$47.61
KOENIGS, SIGRID	2019-01-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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





## Account Services

### Monthly Statement

3405-SENIOR HELPERS - PARAMUS  
22 Madison Ave  
PARAMUS, NJ 07652

Invoice Number: 4283-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
3405OPENAXESSESEN	Employee & Children	1	\$784.36	\$784.36
3405OPENAXESSPRIME	Employee Only	1	\$628.74	\$628.74
3405OPENAXESSPRIME	Employee & Spouse Only	1	\$1,256.86	\$1,256.86
3405OPENAXESSPRIME	Employee & Children	1	\$1,138.41	\$1,138.41
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDLOW	Employee & Spouse Only	1	\$55.54	\$55.54
GUARDLOW	Employee & Children	2	\$74.61	\$149.22
LIFE	Employee Only	1	\$152.00**	\$152.00
VSP	Employee Only	2	\$8.75	\$17.50
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
			GRAND TOTAL	\$4,244.97

3405-SENIOR HELPERS - PARAMUS

22 Madison Ave

PARAMUS, NJ 07652

CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
EGE, LISA	2020-01-01	VSP	EE	\$8.75
EGE, LISA	2021-01-01	3405OPENAXESSPRIME	EE	\$628.74
EGE, LISA	2020-01-01	GUARDHIGH	EE	\$47.61
NICHOLAS, KENNETH	2021-01-01	3405OPENAXESSPRIME	ES	\$1256.86
NICHOLAS, KENNETH	2018-07-01	GUARDLOW	ES	\$55.54
NICHOLAS, KENNETH	2018-12-01	VSP	ES	\$14.73
PANDO, YAMILA	2022-01-01	3405OPENAXESSESSEN	EC2	\$784.36
PANDO, YAMILA	2022-01-01	GUARDLOW	EC2	\$74.61
PANDO, YAMILA	2022-01-01	VSP	EE	\$8.75
SUTCLIFFE, KIMLEY	2022-07-01	3405OPENAXESSPRIME	EC2	\$1138.41
SUTCLIFFE, KIMLEY	2022-07-01	LIFE		\$152.00
SUTCLIFFE, KIMLEY	2022-07-01	GUARDLOW	EC2	\$74.61

MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

3411-SENIOR HELPERS - MANALAPAN  
711 TENNENT RD  
Englishtown, NJ 07726

Invoice Number: 4645-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDLOW	Employee Only	1	\$29.44	\$29.44
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$38.19

3411-SENIOR HELPERS - MANALAPAN

711 TENNENT RD

Englishtown, NJ 07726

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ALVARADO, BRENDA	2019-01-01	VSP	EE	\$8.75
ALVARADO, BRENDA	2019-01-01	GUARDLOW	EE	\$29.44

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

3417-SENIOR HELPERS - MORRIS COUNTY  
214 Main Street  
MADISON, NJ 07940

Invoice Number: 4293-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDLOW	Employee & Spouse Only	1	\$55.54	\$55.54
LIFE	Employee Only	1	\$89.38**	\$89.38
			GRAND TOTAL	\$192.53

3417-SENIOR HELPERS - MORRIS COUNTY

214 Main Street

MADISON, NJ 07940

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BURKE, MEGAN	2017-12-01	GUARDHIGH	EE	\$47.61
SARROW, WAYNE	2017-12-01	GUARDLOW	ES	\$55.54
SARROW, WAYNE	2019-11-01	LIFE		\$89.38

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

3626-SENIOR HELPERS - GARDEN CITY

Invoice Number: 5541-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDLOW	Employee Only	1	\$29.44	\$29.44
			GRAND TOTAL	\$29.44

3626-SENIOR HELPERS - GARDEN CITY

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## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
HAASE, EVA	2022-06-01	GUARDLOW	EE	\$29.44

## MEDICAL PLAN COUNTS

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





## Account Services

### Monthly Statement

3710-SENIOR HELPERS - DUNN  
1104 N. Ellis Avenue  
DUNN, NC 28334

Invoice Number: 4505-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$0.00**	\$2.52
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
GUARDLOW	Employee & Children	1	\$74.61	\$74.61
GUARDLOW	Family	1	\$100.74	\$100.74
LIFE	Employee Only	2	\$5.30**	\$20.33
VSP	Employee Only	3	\$8.75	\$26.25
VSP	Employee & Children	1	\$15.02	\$15.02
			GRAND TOTAL	\$453.94

3710-SENIOR HELPERS - DUNN

1104 N. Ellis Avenue

DUNN, NC 28334

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CLEVINGER, CARLA	2022-07-01	ADD		\$2.52
CLEVINGER, CARLA	2022-07-01	LIFE		\$15.03
CLEVINGER, CARLA	2022-07-01	GUARDHIGH	EE	\$47.61
EASON, JENA	2022-01-01	GUARDLOW	EE	\$29.44
EASON, JENA	2022-01-01	VSP	EE	\$8.75
EASON, JENA	2022-01-01	LIFE		\$5.30
HUNTER, JESSICA	2022-01-01	VSP	EE	\$8.75
LUCAS, LORI	2021-11-01	GUARDHIGH	ES	\$89.81
WILLIAMS, JEWEL	2022-01-01	GUARDHIGH	EE	\$47.61
WILLIAMS, JEWEL	2022-01-01	VSP	EE	\$8.75
WILLIFORD, MARY	2022-01-01	GUARDLOW	FAM	\$100.74
YOUNG, ERIN	2022-01-01	GUARDLOW	EC	\$74.61
YOUNG, ERIN	2022-01-01	VSP	EC	\$15.02

**MEDICAL PLAN COUNTS**

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



## Account Services

### Monthly Statement

4222-SENIOR HELPERS - YARDLEY  
820 Township Line Road  
YARDLEY, PA 19067

Invoice Number: 4616-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
LIFE	Employee Only	1	\$89.38**	\$89.38
GRAND TOTAL				\$89.38

4222-SENIOR HELPERS - YARDLEY  
820 Township Line Road  
YARDLEY, PA 19067

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
GOODWIN, DAVID	2019-12-01	LIFE		\$89.38

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

4223-SENIOR HELPERS - PHILADELPHIA  
7600 Stenton Avenue  
PHILADELPHIA, PA 19118

Invoice Number: 4617-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$0.84**	\$5.46
LIFE	Employee Only	2	\$10.40**	\$17.55
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$31.76

4223-SENIOR HELPERS - PHILADELPHIA

7600 Stenton Avenue

PHILADELPHIA, PA 19118

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
DUNGEE, SAMANTHA	2020-09-01	LIFE		\$10.40
MURPHY, DARLENE	2022-01-01	ADD		\$5.46
MURPHY, DARLENE	2022-01-01	VSP	EE	\$8.75
MURPHY, DARLENE	2022-01-01	LIFE		\$7.15

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

4707-SENIOR HELPERS - CHATTANOOGA  
7151 Lee Hwy.  
CHATTANOOGA, TN 37421

Invoice Number: 4744-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$2.10**	\$2.10
LIFE	Employee Only	1	\$12.00**	\$12.00
GRAND TOTAL				\$14.10

4707-SENIOR HELPERS - CHATTANOOGA

7151 Lee Hwy.

CHATTANOOGA, TN 37421

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CASH, HEATHER	2022-01-01	LIFE		\$12.00
CASH, HEATHER	2022-01-01	ADD		\$2.10

## MEDICAL PLAN COUNTS

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





## Account Services

### Monthly Statement

5307-SENIOR HELPERS - KENT (SEATTLE)  
1101 HARVEY RD NE  
AUBURN, WA 98002

Invoice Number: 4649-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$0.42**	\$0.42
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDLOW	Employee Only	1	\$29.44	\$29.44
VSP	Employee Only	3	\$8.75	\$26.25
			GRAND TOTAL	\$103.72

5307-SENIOR HELPERS - KENT (SEATTLE)  
1101 HARVEY RD NE  
AUBURN, WA 98002

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
LADD, TARYN LEIGH	2020-01-01	GUARDLOW	EE	\$29.44
LADD, TARYN LEIGH	2020-01-01	VSP	EE	\$8.75
NYAGA, JOSEPH	2022-03-01	ADD		\$0.42
NYAGA, JOSEPH	2022-03-01	GUARDHIGH	EE	\$47.61
NYAGA, JOSEPH	2022-03-01	VSP	EE	\$8.75
PAUL, EMMANUEL	2019-01-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



**Account Services**  
**Monthly Statement**

5505-SENIOR HELPERS - APPLETON  
2501 S. ONEIDA STREET  
APPLETON, WI 54915

Invoice Number: 4439-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDLOW	Employee Only	1	\$29.44	\$29.44
			GRAND TOTAL	\$29.44

5505-SENIOR HELPERS - APPLETON  
2501 S. ONEIDA STREET  
APPLETON, WI 54915

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
PHETSAVANH, SHIANNA	2022-06-01	GUARDLOW	EE	\$29.44

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

5514-SENIOR HELPERS - MADISON  
4726 EAST TOWNE BLVD  
MADISON, WI 53704

Invoice Number: 4448-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	3	\$4.20**	\$31.50
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDLOW	Employee Only	2	\$29.44	\$58.88
GUARDLOW	Employee & Spouse Only	1	\$55.54	\$55.54
LIFE	Employee Only	3	\$2.70**	\$117.10
VSP	Employee Only	5	\$8.75	\$43.75
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
			GRAND TOTAL	\$369.11

5514-SENIOR HELPERS - MADISON  
4726 EAST TOWNE BLVD  
MADISON, WI 53704

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BARBER, CYNTHIA	2022-03-01	LIFE		\$71.50
BARBER, CYNTHIA	2022-01-01	ADD		\$21.00
BEARDER, MICHELLE	2022-01-01	VSP	EE	\$8.75
BEARDER, MICHELLE	2022-01-01	GUARDHIGH	EE	\$47.61
BRUNSELL, APRIL	2020-03-01	VSP	ES	\$14.73
BRUNSELL, APRIL	2020-03-01	GUARDLOW	ES	\$55.54
CALABRESA, BETSY	2022-01-01	GUARDLOW	EE	\$29.44
GOMEZ, EMILY	2020-04-01	GUARDLOW	EE	\$29.44
GOMEZ, EMILY	2020-04-01	VSP	EE	\$8.75
KNIPPEL, KELLY	2022-04-01	LIFE		\$2.70
MARCHANT, BRENDA	2022-01-01	LIFE		\$42.90
MARCHANT, BRENDA	2022-01-01	VSP	EE	\$8.75
MARCHANT, BRENDA	2022-01-01	ADD		\$4.20
PETERSEN, BEATA	2022-01-01	VSP	EE	\$8.75
PETERSEN, BEATA	2022-01-01	ADD		\$6.30
TURNER, NAFFIE	2020-04-01	VSP	EE	\$8.75

**MEDICAL PLAN COUNTS**

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



## Account Services

### Monthly Statement

8061-AFC URGENT CARE - CENTRAL NJ  
601 W Union Avenue  
BOUND BROOK, NJ 08805

Invoice Number: 4633-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	18	\$4.20**	\$175.56
AFCCIGNABRONZE	Employee Only	17	\$455.95	\$7,751.15
AFCCIGNABRONZE	Employee & Spouse Only	1	\$956.66	\$956.66
AFCCIGNABRONZE	Employee & Children	2	\$783.20	\$1,566.40
AFCCIGNABRONZE	Family	4	\$1,376.00	\$5,504.00
AFCCIGNAGOLD	Employee Only	33	\$560.19	\$18,486.27
AFCCIGNAGOLD	Employee & Spouse Only	3	\$1,317.59	\$3,952.77
AFCCIGNAGOLD	Employee & Children	2	\$1,070.60	\$2,141.20
AFCCIGNAGOLD	Family	4	\$1,878.42	\$7,513.68
AFCCIGNASILVER	Employee Only	9	\$509.26	\$4,583.34
AFCCIGNASILVER	Employee & Children	3	\$973.27	\$2,919.81
AFCCIGNASILVER	Family	2	\$1,707.65	\$3,415.30
GUARDHIGH	Employee Only	36	\$47.61	\$1,713.96
GUARDHIGH	Employee & Spouse Only	4	\$89.81	\$359.24
GUARDHIGH	Employee & Children	4	\$89.81	\$359.24
GUARDHIGH	Family	8	\$160.18	\$1,281.44
GUARDLOW	Employee Only	20	\$29.44	\$588.80
GUARDLOW	Employee & Spouse Only	2	\$55.54	\$111.08
GUARDLOW	Employee & Children	3	\$74.61	\$223.83
GUARDLOW	Family	5	\$100.74	\$503.70
LIFE	Employee Only	28	\$19.10**	\$317.14
VSP	Employee Only	47	\$8.75	\$411.29
VSP	Employee & Spouse Only	9	\$14.73	\$132.57
VSP	Employee & Children	6	\$15.02	\$90.12
VSP	Family	10	\$23.76	\$237.60
GRAND TOTAL				\$67,042.63

8061-AFC URGENT CARE - CENTRAL NJ  
601 W Union Avenue  
BOUND BROOK, NJ 08805

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ALBANESE, JESSICA	2022-01-01	AFCCIGNAGOLD	EE	\$560.19
ALBANESE, JESSICA	2022-01-01	GUARDHIGH	EE	\$47.61
ALBANESE, JESSICA	2022-01-01	VSP	EE	\$8.75
ALTAMURO, CARA	2022-01-01	AFCCIGNAGOLD	EE	\$560.19
ALTAMURO, CARA	2022-01-01	GUARDLOW	EE	\$29.44
ALTAMURO, CARA	2022-01-01	VSP	EE	\$8.75
AZCONA, JULI	2022-09-01	LIFE		\$10.80
BENNETT, WILLIAM RODERIC	2022-01-01	AFCCIGNABRONZE	FAM	\$1376.00
BENNETT, WILLIAM RODERIC	2022-01-01	ADD		\$21.00
BENNETT, WILLIAM RODERIC	2022-02-01	GUARDLOW	FAM	\$100.74
BENNETT, WILLIAM RODERIC	2022-02-01	VSP	ES	\$14.73
BENNETT, WILLIAM RODERIC	2022-01-01	LIFE		\$13.05
BESIDA, DENISE	2022-09-01	AFCCIGNAGOLD	EE	\$560.19
BESIDA, DENISE	2022-09-01	LIFE		\$3.82
BESIDA, DENISE	2022-09-01	GUARDHIGH	EE	\$47.61
BESIDA, DENISE	2022-09-01	VSP	EE	\$8.75
BIDO, NORMELIS	2015-11-01	VSP	EE	\$8.79
BLACK, DIETRA	2022-01-01	AFCCIGNAGOLD	EE	\$560.19
BLACK, DIETRA	2022-01-01	GUARDLOW	EE	\$29.44
BLACK, DIETRA	2022-01-01	VSP	EE	\$8.75
BLACK, DIETRA	2022-01-01	LIFE		\$4.94
BORKOWSKI, DOUGLAS	2022-01-01	AFCCIGNASILVER	EC2	\$973.27
BORKOWSKI, DOUGLAS	2022-01-01	GUARDHIGH	FAM	\$160.18
BORKOWSKI, DOUGLAS	2022-01-01	VSP	EC2	\$15.02
BUAYABAN, RYAN	2022-01-01	VSP	EE	\$8.75
BUAYABAN, RYAN	2022-01-01	AFCCIGNABRONZE	EE	\$455.95
BUAYABAN, RYAN	2022-01-01	GUARDHIGH	EE	\$47.61



8061-AFC URGENT CARE - CENTRAL NJ  
601 W Union Avenue  
BOUND BROOK, NJ 08805

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BURGOS, PRISILIA	2022-01-01	AFCCIGNABRONZE	EE	\$455.95
BURGOS, PRISILIA	2022-01-01	GUARDLOW	EE	\$29.44
BURGOS, PRISILIA	2022-01-01	VSP	EE	\$8.75
CALAYAG, KATRINA	2022-09-01	AFCCIGNABRONZE	EE	\$455.95
CALAYAG, KATRINA	2022-09-01	LIFE		\$6.00
CALAYAG, KATRINA	2022-09-01	GUARDHIGH	EE	\$47.61
CALAYAG, KATRINA	2022-09-01	VSP	EE	\$8.75
CAMPBELL, JACQUELINE	2022-01-01	AFCCIGNASILVER	EE	\$509.26
CAMPBELL, JACQUELINE	2022-01-01	GUARDLOW	ES	\$55.54
CAMPBELL, JACQUELINE	2022-01-01	VSP	ES	\$14.73
CAMPBELL, JACQUELINE	2022-01-01	LIFE		\$1.60
CAMPBELL, RICHARD	2022-02-01	AFCCIGNAGOLD	FAM	\$1878.42
CAMPBELL, RICHARD	2022-02-01	GUARDLOW	FAM	\$100.74
CAMPBELL, RICHARD	2022-02-01	VSP	FAM	\$23.76
CASTELANO, JOSEPH	2018-12-01	VSP	FAM	\$23.76
CASTELANO, JOSEPH	2021-01-01	AFCCIGNASILVER	FAM	\$1707.65
CASTELANO, JOSEPH	2018-06-01	GUARDHIGH	FAM	\$160.18
CASTELLANO, CHRISTOPHER	2022-01-01	AFCCIGNAGOLD	EE	\$560.19
CASTELLANO, CHRISTOPHER	2022-01-01	GUARDHIGH	EE	\$47.61
CHENEY, DANIEL	2022-07-01	AFCCIGNABRONZE	EE	\$455.95
CHENEY, DANIEL	2022-07-01	GUARDHIGH	EE	\$47.61
CLAYTON, ASHLEY	2022-01-01	VSP	EE	\$8.75
CLAYTON, ASHLEY	2022-01-01	AFCCIGNABRONZE	EE	\$455.95
CLAYTON, ASHLEY	2022-01-01	GUARDHIGH	EE	\$47.61
CRESCIMBENI, VALERIA	2022-03-01	GUARDHIGH	EE	\$47.61

8061-AFC URGENT CARE - CENTRAL NJ  
601 W Union Avenue  
BOUND BROOK, NJ 08805

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CRESCIMBENI, VALERIA	2022-03-01	VSP	EE	\$8.75
D'AMBRA, ANDREA	2021-11-01	AFCCIGNASILVER	EC	\$973.27
D'AMBRA, ANDREA	2021-08-01	GUARDHIGH	EC	\$89.81
D'AMBRA, ANDREA	2021-08-01	VSP	EC	\$15.02
D'AMBRA, ANDREA	2021-11-01	LIFE		\$16.10
DAMICO, PAUL	2022-01-01	AFCCIGNAGOLD	EE	\$560.19
DAMICO, PAUL	2022-01-01	ADD		\$2.10
DAMICO, PAUL	2022-01-01	GUARDHIGH	EE	\$47.61
DAMICO, PAUL	2022-01-01	VSP	EE	\$8.75
DAMICO, PAUL	2022-09-01	LIFE		\$9.90
DAVIS, BRADLEY	2021-08-01	AFCCIGNAGOLD	EE	\$560.19
DAVIS, BRADLEY	2021-08-01	ADD		\$21.00
DAVIS, BRADLEY	2021-08-01	GUARDHIGH	EE	\$47.61
DE JESUS, JEANNETTE	2022-01-01	GUARDLOW	EE	\$29.44
DE JESUS, JEANNETTE	2022-01-01	AFCCIGNABRONZE	EE	\$455.95
DELLAVECCHIA, TANIA	2021-11-01	AFCCIGNABRONZE	EE	\$455.95
DIAS, ALAN	2022-01-01	AFCCIGNAGOLD	EE	\$560.19
DIAS, ALAN	2022-01-01	GUARDHIGH	EE	\$47.61
DICKS, ERIN	2022-04-01	AFCCIGNAGOLD	EC	\$1070.60
DICKS, ERIN	2022-04-01	ADD	EE	\$21.42
DICKS, ERIN	2022-04-01	GUARDLOW	EC	\$74.61
DICKS, ERIN	2022-04-01	VSP	EE	\$8.75
DICKS, ERIN	2022-04-01	LIFE	EE	\$60.98
DOLSON, ERIN	2022-07-01	VSP	EE	\$8.75
DOLSON, ERIN	2022-07-01	AFCCIGNAGOLD	EE	\$560.19

8061-AFC URGENT CARE - CENTRAL NJ  
601 W Union Avenue  
BOUND BROOK, NJ 08805

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
DOLSON, ERIN	2022-07-01	ADD		\$0.84
DOLSON, ERIN	2022-07-01	LIFE		\$2.40
DOLSON, ERIN	2022-07-01	GUARDHIGH	EE	\$47.61
EHRlich, HAROLD	2018-01-01	GUARDLOW	EE	\$29.44
EHRlich, HAROLD	2018-12-01	VSP	EE	\$8.75
ELEAZER, TYNETTA	2022-04-01	AFCCIGNAGOLD	EE	\$560.19
ELEAZER, TYNETTA	2022-04-01	GUARDHIGH	EE	\$47.61
ELEAZER, TYNETTA	2022-04-01	VSP	EE	\$8.75
ELEAZER, TYNETTA	2022-04-01	LIFE		\$10.80
ELGRISSEY, ALEXANDRA	2022-02-01	VSP	EE	\$8.75
ELGRISSEY, ALEXANDRA	2021-01-01	AFCCIGNAGOLD	EE	\$560.19
ELGRISSEY, ALEXANDRA	2022-02-01	GUARDLOW	EE	\$29.44
FALDUTO, RACHEL	2022-01-01	AFCCIGNAGOLD	EE	\$560.19
FALDUTO, RACHEL	2022-01-01	GUARDHIGH	EE	\$47.61
FOWLER, NATALIE	2022-09-01	AFCCIGNAGOLD	EE	\$560.19
GARCIA, MARIA	2022-01-01	AFCCIGNAGOLD	EE	\$560.19
GARCIA, MARIA	2022-01-01	GUARDHIGH	EE	\$47.61
GARCIA, MARIA	2022-01-01	VSP	EE	\$8.75
GASPAR, BRIAN	2021-06-01	AFCCIGNAGOLD	EE	\$560.19
GASPAR, BRIAN	2021-06-01	GUARDHIGH	EE	\$47.61
GASPAR, BRIAN	2021-06-01	VSP	EE	\$8.75
GATTUSO, GIANNA	2022-01-01	AFCCIGNABRONZE	EE	\$455.95
GATTUSO, GIANNA	2022-01-01	GUARDLOW	EE	\$29.44
GATTUSO, GIANNA	2022-01-01	VSP	EE	\$8.75
GREEN, BRIANA	2021-11-01	AFCCIGNASILVER	EE	\$509.26

8061-AFC URGENT CARE - CENTRAL NJ  
601 W Union Avenue  
BOUND BROOK, NJ 08805

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
GREENBERG, JORDAN	2022-04-01	VSP	ES	\$14.73
GREENBERG, JORDAN	2022-04-01	LIFE		\$9.60
GUERRERO, PRISCILLA	2022-01-01	VSP	EE	\$8.75
GUERRERO, PRISCILLA	2022-01-01	AFCCIGNABRONZE	EE	\$455.95
GUERRERO, PRISCILLA	2022-01-01	GUARDLOW	EE	\$29.44
HASAN, IZHAR	2022-01-01	VSP	FAM	\$23.76
HASAN, IZHAR	2022-01-01	AFCCIGNABRONZE	FAM	\$1376.00
HASAN, IZHAR	2022-01-01	GUARDLOW	FAM	\$100.74
HAVLICEK, MARK	2022-03-01	LIFE		\$14.82
HAVLICEK, MARK	2022-03-01	AFCCIGNAGOLD	EE	\$560.19
HAVLICEK, MARK	2022-03-01	GUARDHIGH	EE	\$47.61
HAVLICEK, MARK	2022-03-01	VSP	EE	\$8.75
HERNANDEZ, ELIZABETH	2022-01-01	GUARDLOW	EE	\$29.44
HERNANDEZ, ELIZABETH	2022-01-01	VSP	EE	\$8.75
HORNAK, BRIAN	2021-10-01	AFCCIGNAGOLD	FAM	\$1878.42
HORNAK, BRIAN	2021-11-01	GUARDLOW	ES	\$55.54
HORNAK, BRIAN	2021-11-01	VSP	ES	\$14.73
HORNAK, BRIAN	2021-09-01	LIFE		\$7.20
HUNT, ERICA	2022-01-01	ADD		\$4.20
HUNT, ERICA	2022-02-01	GUARDHIGH	EC	\$89.81
HUNT, ERICA	2022-02-01	VSP	EE	\$8.75
HUNT, ERICA	2022-01-01	LIFE		\$8.00
IFONO, SIA MMAH	2022-07-01	GUARDHIGH	EE	\$47.61
IFONO, SIA MMAH	2022-07-01	VSP	EE	\$8.75
ILVENTO, CHRISTINA	2021-12-01	AFCCIGNABRONZE	EE	\$455.95

8061-AFC URGENT CARE - CENTRAL NJ  
601 W Union Avenue  
BOUND BROOK, NJ 08805

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ILVENTO, CHRISTINA	2021-12-01	GUARDLOW	EE	\$29.44
ILVENTO, CHRISTINA	2021-12-01	VSP	EE	\$8.75
KELII, CARA	2022-02-01	ADD		\$8.82
KELII, CARA	2022-02-01	GUARDHIGH	FAM	\$160.18
KELII, CARA	2022-02-01	VSP	FAM	\$23.76
KELII, CARA	2022-02-01	LIFE		\$16.70
KLEINFELDER, SUSAN	2022-01-01	ADD		\$4.20
KLEINFELDER, SUSAN	2022-01-01	AFCCIGNAGOLD	EE	\$560.19
KOCZARSKI, JACEK	2022-05-01	GUARDHIGH	EE	\$47.61
KOCZARSKI, JACEK	2022-05-01	VSP	EE	\$8.75
LAGUERRE, PHILOMISE	2021-12-01	AFCCIGNASILVER	EE	\$509.26
LAGUERRE, PHILOMISE	2021-12-01	GUARDHIGH	EE	\$47.61
LAGUERRE, PHILOMISE	2021-12-01	VSP	EE	\$8.75
LAGUERRE, PHILOMISE	2021-12-01	LIFE		\$1.60
LANNUTTI, MARIA	2022-01-01	AFCCIGNAGOLD	EE	\$560.19
LEE, DWIGHT	2021-06-01	AFCCIGNAGOLD	ES	\$1317.59
LEE, DWIGHT	2021-06-01	GUARDHIGH	ES	\$89.81
LEE, DWIGHT	2021-06-01	VSP	ES	\$14.73
LEE, JASMINE	2022-01-01	VSP	ES	\$14.73
LEE, JASMINE	2022-01-01	AFCCIGNAGOLD	ES	\$1317.59
LEE, JASMINE	2022-01-01	GUARDHIGH	ES	\$89.81
LEE, JENNY	2022-03-01	VSP	EE	\$8.75
LIMA, VICTORIA	2022-01-01	AFCCIGNABRONZE	EE	\$455.95
LIMA, VICTORIA	2022-01-01	GUARDLOW	EE	\$29.44
LITTON, COREY	2022-02-01	VSP	EE	\$8.75

8061-AFC URGENT CARE - CENTRAL NJ  
601 W Union Avenue  
BOUND BROOK, NJ 08805

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
LITTON, COREY	2022-01-01	AFCCIGNAGOLD	EE	\$560.19
LITTON, COREY	2022-01-01	ADD		\$4.20
LITTON, COREY	2022-02-01	GUARDLOW	EE	\$29.44
LITTON, COREY	2022-01-01	LIFE		\$6.00
LOPEZ, DANNILIZ	2022-01-01	AFCCIGNABRONZE	EC2	\$783.20
LOPEZ, DANNILIZ	2022-01-01	GUARDLOW	FAM	\$100.74
LOPEZ, JOHN PEDRO	2022-07-01	AFCCIGNAGOLD	FAM	\$1878.42
LOPEZ, JOHN PEDRO	2022-07-01	ADD		\$2.10
LOPEZ, JOHN PEDRO	2022-07-01	LIFE		\$16.50
LOPEZ, JOHN PEDRO	2022-07-01	GUARDHIGH	FAM	\$160.18
LOPEZ, JOHN PEDRO	2022-07-01	VSP	FAM	\$23.76
MASTANTUNO, SAMANTHA	2022-01-01	AFCCIGNAGOLD	EE	\$560.19
MASTANTUNO, SAMANTHA	2022-01-01	GUARDHIGH	EE	\$47.61
MENDOZA, JILLIAN	2022-03-01	GUARDLOW	EE	\$29.44
MENDOZA, JILLIAN	2022-03-01	VSP	EE	\$8.75
MENDOZA, JILLIAN	2022-03-01	AFCCIGNABRONZE	EE	\$455.95
MITCHELL, IAN	2022-09-01	AFCCIGNAGOLD	EE	\$560.19
MITCHELL, IAN	2022-09-01	GUARDHIGH	EE	\$47.61
MITCHELL, IAN	2022-09-01	VSP	EE	\$8.75
MONTGOMERY, KYLE	2022-01-01	AFCCIGNAGOLD	EE	\$560.19
MONTGOMERY, KYLE	2022-02-01	GUARDLOW	EE	\$29.44
MONTGOMERY, KYLE	2022-02-01	VSP	FAM	\$23.76
OCCEAN, BIANCA	2022-08-01	AFCCIGNABRONZE	EE	\$455.95
OCCEAN, BIANCA	2022-08-01	ADD		\$2.10
OCCEAN, BIANCA	2022-08-01	GUARDHIGH	EE	\$47.61
OCCEAN, BIANCA	2022-08-01	VSP	EE	\$8.75

8061-AFC URGENT CARE - CENTRAL NJ  
601 W Union Avenue  
BOUND BROOK, NJ 08805

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
OTERO, MARYLIN	2021-06-01	AFCCIGNAGOLD	EC	\$1070.60
OTERO, MARYLIN	2021-06-01	GUARDLOW	EC	\$74.61
OTERO, MARYLIN	2021-06-01	VSP	EC	\$15.02
PARANAVITHARANA, SUHEJA	2022-01-01	AFCCIGNASILVER	EE	\$509.26
PARANAVITHARANA, SUHEJA	2022-01-01	ADD		\$6.72
PARANAVITHARANA, SUHEJA	2022-01-01	GUARDHIGH	FAM	\$160.18
PARANAVITHARANA, SUHEJA	2022-01-01	VSP	FAM	\$23.76
PARANAVITHARANA, SUHEJA	2022-01-01	LIFE		\$19.10
PATEL, YATI	2022-01-01	AFCCIGNABRONZE	EE	\$455.95
PATEL, YATI	2022-01-01	GUARDLOW	EE	\$29.44
PATEL, YATI	2022-01-01	VSP	EE	\$8.75
PRICE, MICHAEL	2022-01-01	AFCCIGNAGOLD	EE	\$560.19
PRICE, MICHAEL	2022-02-01	GUARDHIGH	EE	\$47.61
PRICE, MICHAEL	2022-02-01	VSP	EE	\$8.75
PRINGLE, ROBERT	2022-08-01	AFCCIGNAGOLD	EE	\$560.19
PRINGLE, ROBERT	2022-08-01	ADD		\$21.00
PRINGLE, ROBERT	2022-08-01	LIFE		\$10.80
PRINGLE, ROBERT	2022-08-01	GUARDHIGH	EE	\$47.61
PRINGLE, ROBERT	2022-08-01	VSP	EE	\$8.75
RAMADAN, REEM	2022-03-01	AFCCIGNABRONZE	EE	\$455.95
RAMADAN, REEM	2022-03-01	GUARDHIGH	EE	\$47.61
RAMADAN, REEM	2022-03-01	VSP	EE	\$8.75
RANA, MALVIKA	2021-01-01	AFCCIGNAGOLD	EE	\$560.19
RANA, MALVIKA	2021-01-01	GUARDHIGH	ES	\$89.81
RANA, MALVIKA	2021-01-01	VSP	ES	\$14.73
RAZON, RAUL	2022-08-01	LIFE		\$15.03

8061-AFC URGENT CARE - CENTRAL NJ  
601 W Union Avenue  
BOUND BROOK, NJ 08805

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
RAZON, RAUL	2022-08-01	GUARDLOW	EE	\$29.44
RAZON, RAUL	2022-08-01	VSP	EE	\$8.75
REGENCIA, MARIA	2022-04-01	AFCCIGNASILVER	EE	\$509.26
REGENCIA, MARIA	2022-04-01	GUARDHIGH	EE	\$47.61
REGENCIA, MARIA	2022-04-01	VSP	EE	\$8.75
RIVERA, NYDIA	2022-01-01	ADD		\$2.52
RIVERA, NYDIA	2022-01-01	LIFE		\$9.70
RIVERA, ROSA	2022-04-01	ADD		\$6.30
RIVERA, ROSA	2022-04-01	GUARDHIGH	EE	\$47.61
RIVERA, ROSA	2022-04-01	VSP	EE	\$8.75
RUPPERT, MICHAEL	2022-07-01	AFCCIGNAGOLD	EE	\$560.19
RUPPERT, MICHAEL	2022-07-01	ADD		\$21.00
RUPPERT, MICHAEL	2022-07-01	LIFE		\$10.80
RUPPERT, MICHAEL	2022-07-01	GUARDHIGH	EE	\$47.61
RUPPERT, MICHAEL	2022-07-01	VSP	EE	\$8.75
RUTLEDGE, DOUGLAS	2022-01-01	AFCCIGNAGOLD	FAM	\$1878.42
RUTLEDGE, DOUGLAS	2022-02-01	GUARDHIGH	FAM	\$160.18
RUTLEDGE, DOUGLAS	2022-02-01	VSP	ES	\$14.73
RUZEHAJI, SEVIM	2021-01-01	AFCCIGNABRONZE	ES	\$956.66
RUZEHAJI, TIMUR	2022-02-01	AFCCIGNABRONZE	FAM	\$1376.00
RUZEHAJI, TIMUR	2022-02-01	GUARDLOW	FAM	\$100.74
RUZEHAJI, TIMUR	2022-02-01	VSP	FAM	\$23.76
SANCHEZ, MAURICIO	2021-01-01	AFCCIGNAGOLD	ES	\$1317.59
SANCHEZ, MAURICIO	2021-01-01	GUARDHIGH	ES	\$89.81
SANCHEZ, MAURICIO	2021-01-01	VSP	ES	\$14.73



8061-AFC URGENT CARE - CENTRAL NJ  
601 W Union Avenue  
BOUND BROOK, NJ 08805

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
SIROTOVITZ, MONICA	2022-06-01	AFCCIGNAGOLD	EE	\$560.19
SIROTOVITZ, MONICA	2022-06-01	GUARDHIGH	EE	\$47.61
SIROTOVITZ, MONICA	2022-06-01	VSP	EE	\$8.75
SMITH, ASHLEE	2022-01-01	AFCCIGNABRONZE	EE	\$455.95
SMITH, ASHLEE	2022-01-01	GUARDLOW	EE	\$29.44
SMITH, ASHLEE	2022-08-01	LIFE		\$4.50
SMITH, ROBERT	2022-01-01	AFCCIGNASILVER	EE	\$509.26
SMITH, ROBERT	2022-01-01	VSP	EE	\$8.75
SONDEJ, KRISTY	2022-03-01	AFCCIGNAGOLD	EE	\$560.19
SONDEJ, KRISTY	2022-03-01	GUARDHIGH	EE	\$47.61
SOPER, ROBERT	2021-02-01	ADD		\$21.00
SQUEO, DENISE	2022-05-31	AFCCIGNABRONZE	FAM	\$1376.00
SQUEO, DENISE	2022-05-31	GUARDHIGH	FAM	\$160.18
SQUEO, DENISE	2022-05-31	VSP	FAM	\$23.76
THONGVANH ROSS, LANSTRAN	2022-01-01	AFCCIGNASILVER	EE	\$509.26
THONGVANH ROSS, LANSTRAN	2022-01-01	GUARDHIGH	EC	\$89.81
THONGVANH ROSS, LANSTRAN	2022-01-01	VSP	EC	\$15.02
TOBIAS, FRANK	2022-01-01	AFCCIGNAGOLD	EE	\$560.19
TOBIAS, FRANK	2022-01-01	GUARDHIGH	EE	\$47.61
TOBIAS, FRANK	2022-01-01	VSP	EE	\$8.75
TOCK, JASON	2022-01-01	AFCCIGNASILVER	EE	\$509.26
TOCK, JASON	2022-01-01	GUARDLOW	EE	\$29.44
TOCK, JASON	2022-01-01	VSP	EE	\$8.75
TOCK, JASON	2022-01-01	LIFE		\$14.40
TOMINOVICH, ANDREW	2022-01-01	AFCCIGNAGOLD	EE	\$560.19

8061-AFC URGENT CARE - CENTRAL NJ  
601 W Union Avenue  
BOUND BROOK, NJ 08805

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
TOMINOVICH, ANDREW	2022-01-01	GUARDHIGH	EE	\$47.61
TOMINOVICH, ANDREW	2022-01-01	VSP	EE	\$8.75
TRIPPEL, SHERYL	2022-01-01	AFCCIGNASILVER	FAM	\$1707.65
TRIPPEL, SHERYL	2022-02-01	GUARDHIGH	FAM	\$160.18
TRIPPEL, SHERYL	2022-02-01	VSP	FAM	\$23.76
VAZQUEZ, TAISHA	2021-01-01	AFCCIGNABRONZE	EC	\$783.20
VERAS, IMALAI	2022-01-01	AFCCIGNAGOLD	EE	\$560.19
VERAS, IMALAI	2022-01-01	GUARDHIGH	EC	\$89.81
VERAS, IMALAI	2022-01-01	VSP	EC	\$15.02
VIDAL BRANCO, CLAUDIA	2022-10-01	AFCCIGNASILVER	EE	\$509.26
VIDAL BRANCO, CLAUDIA	2022-10-01	GUARDLOW	EE	\$29.44
WILLIAMS, DENISE	2022-01-01	AFCCIGNASILVER	EC	\$973.27
WILLIAMS, DENISE	2022-01-01	ADD		\$5.04
WILLIAMS, DENISE	2022-01-01	VSP	EC	\$15.02
WILLIAMS, DENISE	2022-01-01	GUARDLOW	EC	\$74.61
WILLIAMS, DENISE	2022-01-01	LIFE		\$7.20
WILLIAMS, JOCELYN	2021-06-01	GUARDHIGH	EE	\$47.61
WILLIAMS, JOCELYN	2021-06-01	VSP	EE	\$8.75
WILLIAMS, JOCELYN	2021-06-01	LIFE		\$4.80
WOLFSON, ANNA	2022-01-01	AFCCIGNAGOLD	EE	\$560.19
WOLFSON, ANNA	2022-01-01	GUARDHIGH	EE	\$47.61
WOLFSON, ANNA	2022-01-01	VSP	EE	\$8.75
WYNN, JAWAUN	2022-10-01	AFCCIGNABRONZE	EE	\$455.95
WYNN, JAWAUN	2022-10-01	GUARDLOW	EE	\$29.44
YENCARELLI, JOYCE	2022-07-01	GUARDHIGH	EE	\$47.61

8061-AFC URGENT CARE - CENTRAL NJ  
601 W Union Avenue  
BOUND BROOK, NJ 08805

## CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
YENCARELLI, JOYCE	2022-07-01	AFCCIGNAGOLD	EE	\$560.19

8061-AFC URGENT CARE - CENTRAL NJ  
 601 W Union Avenue  
 BOUND BROOK, NJ 08805

PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BESIDA, DENISE	2022-09-01	AFCCIGNAGOLD	EE	\$560.19
BESIDA, DENISE	2022-09-01	LIFE		\$3.82
BESIDA, DENISE	2022-09-01	GUARDHIGH	EE	\$47.61
BESIDA, DENISE	2022-09-01	VSP	EE	\$8.75
CALAYAG, KATRINA	2022-09-01	AFCCIGNABRONZE	EE	\$455.95
CALAYAG, KATRINA	2022-09-01	LIFE		\$6.00
CALAYAG, KATRINA	2022-09-01	GUARDHIGH	EE	\$47.61
MITCHELL, IAN	2022-09-01	AFCCIGNAGOLD	EE	\$560.19
MITCHELL, IAN	2022-09-01	GUARDHIGH	EE	\$47.61
MITCHELL, IAN	2022-09-01	VSP	EE	\$8.75

MEDICAL PLAN COUNTS

Employee Only	59
Employee & Spouse	4
Employee & Children	5
Family	10



## Account Services

### Monthly Statement

8069 - PINECROFT CAPITAL ADVISORS LLC  
3000 Summer Street  
STAMFORD, CT 06905

Invoice Number: 4635-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
AFCCIGNAGOLD	Employee Only	2	\$560.19	\$1,120.38
GUARDLOW	Employee Only	2	\$29.44	\$58.88
VSP	Employee Only	2	\$8.75	\$17.50
			GRAND TOTAL	\$1,196.76

8069 - PINECROFT CAPITAL ADVISORS LLC  
3000 Summer Street  
STAMFORD, CT 06905

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
PALMER, STEPHANIE	2022-01-01	VSP	EE	\$8.75
PALMER, STEPHANIE	2022-01-01	AFCCIGNAGOLD	EE	\$560.19
PALMER, STEPHANIE	2022-01-01	GUARDLOW	EE	\$29.44
RODRIGUEZ, JESSICA	2021-12-01	VSP	EE	\$8.75
RODRIGUEZ, JESSICA	2021-01-01	AFCCIGNAGOLD	EE	\$560.19
RODRIGUEZ, JESSICA	2021-12-01	GUARDLOW	EE	\$29.44

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

8070-AFC URGENT CARE STAMFORD  
3000 Summer Street  
STAMFORD, CT 06905

Invoice Number: 4636-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	2	\$4.20**	\$46.62
AFCCIGNAGOLD	Employee Only	1	\$560.19	\$560.19
AFCCIGNAGOLD	Family	1	\$1,878.42	\$1,878.42
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDLOW	Family	1	\$100.74	\$100.74
LIFE	Employee Only	1	\$105.38**	\$105.38
VSP	Employee Only	1	\$8.75	\$8.75
VSP	Family	1	\$23.76	\$23.76
			GRAND TOTAL	\$2,771.47

8070-AFC URGENT CARE STAMFORD  
3000 Summer Street  
STAMFORD, CT 06905

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BAILEY, ARIANNA	2022-01-01	AFCCIGNAGOLD	EE	\$560.19
BAILEY, ARIANNA	2022-01-01	ADD		\$4.20
BAILEY, ARIANNA	2022-01-01	GUARDHIGH	EE	\$47.61
BAILEY, ARIANNA	2022-01-01	VSP	EE	\$8.75
LAUREN, DAVID	2022-01-01	VSP	FAM	\$23.76
LAUREN, DAVID	2022-01-01	LIFE		\$105.38
LAUREN, DAVID	2022-01-01	AFCCIGNAGOLD	FAM	\$1878.42
LAUREN, DAVID	2022-01-01	ADD		\$42.42
LAUREN, DAVID	2022-01-01	GUARDLOW	FAM	\$100.74

## MEDICAL PLAN COUNTS

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





## Account Services

### Monthly Statement

911 RESTORATION OF PORTLAND

Invoice Number: 5519-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
VSP	Employee Only	1	\$0.00	\$8.75
GRAND TOTAL				\$103.97

911 RESTORATION OF PORTLAND

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CURTIS, JOHNATHON	2022-09-01	GUARDHIGH	EE	\$47.61
CURTIS, JOHNATHON	2022-09-01	VSP	EE	\$8.75

911 RESTORATION OF PORTLAND

,

PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CURTIS, JOHNATHON	2022-09-01	GUARDHIGH	EE	\$47.61

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

AAA AIRPORTER SERVICES INC  
87 CRESCENT RD  
NEEDHAM, MA 02494

Invoice Number: 4098-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	10	\$2.10**	\$33.60
GUARDHIGH	Employee Only	11	\$47.61	\$523.71
GUARDHIGH	Employee & Spouse Only	1	\$89.81	\$89.81
GUARDLOW	Employee Only	2	\$29.44	\$58.88
GUARDLOW	Employee & Children	2	\$74.61	\$149.22
LIFE	Employee Only	9	\$6.00**	\$212.70
VSP	Employee Only	10	\$8.75	\$87.50
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
VSP	Employee & Children	2	\$15.02	\$30.04
			GRAND TOTAL	\$1,420.99

AAA AIRPORTER SERVICES INC  
87 CRESCENT RD  
NEEDHAM, MA 02494

CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BOYD, JEREMY	2022-09-01	ADD		\$4.20
BOYD, JEREMY	2022-09-01	LIFE		\$8.00
BROOKS, ISIDORE	2022-06-01	VSP	EE	\$8.75
BROOKS, ISIDORE	2022-06-01	LIFE		\$49.40
BROOKS, ISIDORE	2022-06-01	GUARDHIGH	EE	\$47.61
BROOKS, ISIDORE	2022-06-01	ADD		\$2.10
CASTILLO, MICHAEL	2022-08-01	GUARDLOW	ECN	\$74.61
COATES, LAWRENCE	2022-04-01	VSP	ES	\$14.73
COATES, LAWRENCE	2022-04-01	ADD		\$3.36
COATES, LAWRENCE	2022-04-01	GUARDHIGH	ES	\$89.81
COATES, LAWRENCE	2022-04-01	LIFE		\$97.70
ELIJAH, ANTWON	2022-01-01	VSP	EE	\$8.75
ELIJAH, ANTWON	2022-01-01	ADD		\$5.04
ELIJAH, ANTWON	2022-01-01	GUARDHIGH	EE	\$47.61
FRAZIER, TOMMIE	2022-07-01	VSP	EC	\$15.02
FRAZIER, TOMMIE	2022-07-01	GUARDLOW	EC	\$74.61
GLOVER, DIVAL	2022-07-01	GUARDHIGH	EE	\$47.61
GONZALEZ, ESTEBAN	2022-08-01	VSP	EE	\$8.75
HAMPTON JR, MARK	2022-07-01	ADD		\$4.20
HAMPTON JR, MARK	2022-07-01	LIFE		\$12.00
HAMPTON JR, MARK	2022-07-01	GUARDHIGH	EE	\$47.61
HAMPTON JR, MARK	2022-07-01	VSP	EE	\$8.75
JENKINS, KIARA	2022-07-01	GUARDHIGH	EE	\$47.61
LEWIS, STEFAN	2022-08-01	GUARDLOW	EE	\$29.44
LEWIS, STEFAN	2022-08-01	VSP	EE	\$8.75
MCADORY, ERIC	2022-01-01	VSP	EE	\$8.75

AAA AIRPORTER SERVICES INC  
87 CRESCENT RD  
NEEDHAM, MA 02494

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
MCADORY, ERIC	2022-01-01	ADD		\$4.20
MCADORY, ERIC	2022-01-01	GUARDHIGH	EE	\$47.61
MCADORY, ERIC	2022-01-01	LIFE		\$7.20
MCKINLEY, LORINZO	2022-09-01	ADD		\$4.20
MCKINLEY, LORINZO	2022-09-01	LIFE		\$10.80
MCKINLEY, LORINZO	2022-09-01	GUARDHIGH	EE	\$47.61
MEYERS, MICHAEL	2022-03-01	ADD		\$2.10
MEYERS, MICHAEL	2022-03-01	GUARDHIGH	EE	\$47.61
MEYERS, MICHAEL	2022-03-01	VSP	EE	\$8.75
MEYERS, MICHAEL	2022-03-01	LIFE		\$14.40
PROCTOR, ROBERT	2022-06-01	ADD		\$2.10
PROCTOR, ROBERT	2022-06-01	LIFE		\$7.20
PROCTOR, ROBERT	2022-06-01	GUARDLOW	EE	\$29.44
PROCTOR, ROBERT	2022-06-01	VSP	EE	\$8.75
RODRIGUEZ, ARMANDO	2022-09-01	GUARDLOW	EC	\$74.61
RODRIGUEZ, ARMANDO	2022-09-01	VSP	EC	\$15.02
WALSH, TRENTON	2022-09-01	GUARDHIGH	EE	\$47.61
WALSH, TRENTON	2022-09-01	VSP	EE	\$8.75
WARE, TRAVIUS	2022-07-01	GUARDHIGH	EE	\$47.61
WRIGHT, ADRIAN	2022-07-01	ADD		\$2.10
WRIGHT, ADRIAN	2022-07-01	LIFE		\$6.00
WRIGHT, ADRIAN	2022-07-01	GUARDHIGH	EE	\$47.61
WRIGHT, ADRIAN	2022-07-01	VSP	EE	\$8.75

AAA AIRPORTER SERVICES INC  
87 CRESCENT RD  
NEEDHAM, MA 02494

PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BOYD, JEREMY	2022-09-01	ADD		\$4.20
BOYD, JEREMY	2022-09-01	LIFE		\$8.00
MCKINLEY, LORINZO	2022-09-01	ADD		\$4.20
MCKINLEY, LORINZO	2022-09-01	LIFE		\$10.80
MCKINLEY, LORINZO	2022-09-01	GUARDHIGH	EE	\$47.61
RODRIGUEZ, ARMANDO	2022-09-01	GUARDLOW	EC	\$74.61
RODRIGUEZ, ARMANDO	2022-09-01	VSP	EC	\$15.02
WALSH, TRENTON	2022-09-01	GUARDHIGH	EE	\$47.61
WALSH, TRENTON	2022-09-01	VSP	EE	\$8.75

MEDICAL PLAN COUNTS

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



**Account Services**  
**Monthly Statement**

ACE HANDYMAN SERVICES CASPER WY  
253 S LOWELL STREET  
CASPER, WY 82601

Invoice Number: 4712-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	2	\$47.61	\$95.22
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$103.97



ACE HANDYMAN SERVICES CASPER WY  
253 S LOWELL STREET  
CASPER, WY 82601

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CHRISTIANSON, CRAIG	2022-04-01	GUARDHIGH	EE	\$47.61
STOYSICH, JOHN	2022-01-01	GUARDHIGH	EE	\$47.61
STOYSICH, JOHN	2022-01-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

ACE HANDYMAN SERVICES OF GREATER BOSTON

Invoice Number: 5628-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
VSP	Employee Only	1	\$8.75	\$8.75
GRAND TOTAL				\$56.36

ACE HANDYMAN SERVICES OF GREATER BOSTON

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
SAWYER, JONATHAN	2022-08-01	GUARDHIGH	EE	\$47.61
SAWYER, JONATHAN	2022-08-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

ACE HANDYMAN SERVICES SOUTH CHARLOTTE  
1312 MATTHEWS MINT HILL ROAD  
MATTHEWS, NC 28105

Invoice Number: 4118-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1046OPENAXESSGOLD	Employee Only	1	\$653.81	\$653.81
GUARDLOW	Employee Only	1	\$29.44	\$29.44
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$692.00

ACE HANDYMAN SERVICES SOUTH CHARLOTTE  
1312 MATTHEWS MINT HILL ROAD  
MATTHEWS, NC 28105

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
STRANIX, DAVID	2022-01-01	VSP	EE	\$8.75
STRANIX, DAVID	2022-01-01	1046OPENAXESSGOLD	EE	\$653.81
STRANIX, DAVID	2022-01-01	GUARDLOW	EE	\$29.44

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

ACE HANDYMAN SERVICES TWIN CITIES  
6224 HALIFAX AVENUE S  
EDINA, MN 55424

Invoice Number: 4707-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$12.60**	\$12.60
GUARDLOW	Employee & Children	1	\$74.61	\$74.61
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
VSP	Employee & Children	1	\$15.02	\$15.02
			GRAND TOTAL	\$116.96

ACE HANDYMAN SERVICES TWIN CITIES  
6224 HALIFAX AVENUE S  
EDINA, MN 55424

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ALLEN, JASON	2020-09-01	GUARDLOW	EC	\$74.61
ALLEN, JASON	2020-09-01	VSP	EC	\$15.02
LANKFARD, ANTHONY	2022-01-01	ADD		\$12.60
LANKFARD, ANTHONY	2022-01-01	VSP	ES	\$14.73

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

ACME HOTEL COMPANY  
15 E OHIO STREET  
CHICAGO, IL 60611

Invoice Number: 4135-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1130OPENAXESSESEN	Employee Only	2	\$450.75	\$901.50
1130OPENAXESSPRIME	Employee Only	2	\$653.75	\$1,307.50
ADD	Employee Only	1	\$10.92**	\$10.92
GUARDHIGH	Employee Only	5	\$47.61	\$238.05
GUARDHIGH	Employee & Spouse Only	1	\$89.81	\$89.81
GUARDLOW	Employee Only	2	\$29.44	\$58.88
LIFE	Employee Only	1	\$24.62**	\$24.62
VSP	Employee Only	5	\$8.75	\$43.75
			GRAND TOTAL	\$2,675.03



ACME HOTEL COMPANY  
15 E OHIO STREET  
CHICAGO, IL 60611

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ALCIVAR, GLADYS	2022-01-01	GUARDHIGH	ES	\$89.81
COGHLAN, SEAN	2021-11-01	ADD		\$10.92
COGHLAN, SEAN	2021-11-01	LIFE		\$24.62
CUNNINGHAM, JENNIFER	2022-01-01	1130OPENAXESSPRIME	EE	\$653.75
CUNNINGHAM, JENNIFER	2022-01-01	GUARDHIGH	EE	\$47.61
CUNNINGHAM, JENNIFER	2022-01-01	VSP	EE	\$8.75
DAVIS-MCCALL, MICHELLE	2020-01-01	GUARDHIGH	EE	\$47.61
MANRIQUEZ, PEDRO	2020-01-01	GUARDHIGH	EE	\$47.61
MANRIQUEZ, PEDRO	2020-12-01	1130OPENAXESSESSEN	EE	\$450.75
MANRIQUEZ, PEDRO	2020-01-01	VSP	EE	\$8.75
MARBAN, MARIA	2022-01-01	GUARDLOW	EE	\$29.44
MARBAN, MARIA	2022-01-01	1130OPENAXESSPRIME	EE	\$653.75
MARBAN, MARIA	2022-01-01	VSP	EE	\$8.75
RESENDIZ, ALICIA	2020-01-01	GUARDHIGH	EE	\$47.61
RICHARDSON, VALAIDA	2022-01-01	GUARDHIGH	EE	\$47.61
RICHARDSON, VALAIDA	2022-01-01	VSP	EE	\$8.75
WASHINGTON, JEROME	2022-01-01	GUARDLOW	EE	\$29.44
WASHINGTON, JEROME	2022-01-01	VSP	EE	\$8.75
WASHINGTON, JEROME	2022-01-01	1130OPENAXESSESSEN	EE	\$450.75

**MEDICAL PLAN COUNTS**

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



## Account Services

### Monthly Statement

AFC URGENT CARE - EDGEWATER, MD  
3059 SOLOMONS ISLAND RD  
EDGEWATER, MD 21037

Invoice Number: 4304-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	2	\$2.52**	\$13.02
GUARDHIGH	Employee Only	2	\$0.00	\$95.22
GUARDLOW	Employee Only	1	\$29.44	\$29.44
LIFE	Employee Only	2	\$3.00**	\$19.10
VSP	Employee Only	1	\$8.75	\$8.75
VSP	Employee & Children	1	\$15.02	\$15.02
			GRAND TOTAL	\$228.16

AFC URGENT CARE - EDGEWATER, MD  
3059 SOLOMONS ISLAND RD  
EDGEWATER, MD 21037

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
GARBLA, DECONTEE	2022-08-01	GUARDHIGH	EE	\$47.61
REYES, DIANE	2022-09-01	GUARDHIGH	EE	\$47.61
RYDER, TIFFANY	2022-10-01	ADD		\$10.50
RYDER, TIFFANY	2022-10-01	LIFE		\$16.10
RYDER, TIFFANY	2022-10-01	VSP	EC	\$15.02
WARE, KAITLYN	2022-01-01	ADD		\$2.52
WARE, KAITLYN	2022-01-01	GUARDLOW	EE	\$29.44
WARE, KAITLYN	2022-01-01	VSP	EE	\$8.75
WARE, KAITLYN	2022-01-01	LIFE		\$3.00

AFC URGENT CARE - EDGEWATER, MD  
3059 SOLOMONS ISLAND RD  
EDGEWATER, MD 21037

## PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
REYES, DIANE	2022-09-01	GUARDHIGH	EE	\$47.61

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

AIDEN BY BEST WESTERN AT DENVER WEST

Invoice Number: 5812-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$8.75

AIDEN BY BEST WESTERN AT DENVER WEST

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ESTRADA, WILLIE JAMES	2022-10-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

ALEXIUS SOLUTIONS  
250 FILLMORE ST SUITE 150  
DENVER, CO 80206

Invoice Number: 4267-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1501OPENAXESSGOLD	Employee Only	1	\$588.43	\$588.43
1501OPENAXESSILVE	Family	1	\$1,480.09	\$1,480.09
ADD	Employee Only	1	\$21.00**	\$21.00
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDLOW	Family	1	\$100.74	\$100.74
LIFE	Employee Only	1	\$71.50**	\$180.36
VSP	Employee Only	1	\$8.75	\$8.75
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
			GRAND TOTAL	\$2,441.71

ALEXIUS SOLUTIONS  
250 FILLMORE ST SUITE 150  
DENVER, CO 80206

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ELSON, ANDREW	2022-01-01	VSP	ES	\$14.73
ELSON, ANDREW	2022-01-01	1501OPENAXESSILVE	FAM	\$1480.09
ELSON, ANDREW	2022-01-01	GUARDLOW	FAM	\$100.74
TYRA, KENNETH	2022-01-01	VSP	EE	\$8.75
TYRA, KENNETH	2022-09-01	LIFE		\$180.36
TYRA, KENNETH	2022-01-01	1501OPENAXESSGOLD	EE	\$588.43
TYRA, KENNETH	2022-01-01	ADD		\$21.00
TYRA, KENNETH	2022-01-01	GUARDHIGH	EE	\$47.61

**MEDICAL PLAN COUNTS**

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





## Account Services

### Monthly Statement

ALLIANCE ABA, LLC  
17932 S FRALEY BLVD #300  
DUMFRIES, VA 22026

Invoice Number: 4129-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$21.42**	\$21.42
GUARDLOW	Employee Only	1	\$29.44	\$29.44
LIFE	Employee Only	1	\$8.90**	\$8.90
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$68.51

ALLIANCE ABA, LLC  
17932 S FRALEY BLVD #300  
DUMFRIES, VA 22026

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
FERREIRA, AMANDA	2021-07-01	LIFE		\$8.90
FERREIRA, AMANDA	2021-07-01	ADD		\$21.42
FERREIRA, AMANDA	2021-07-01	GUARDLOW	EE	\$29.44
FERREIRA, AMANDA	2021-07-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

ALMITA PILING  
2000 S COLORADO BLVD TOWER ONE, SUITE 200  
DENVER, CO 80222

Invoice Number: 4203-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

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
LIFE	Employee Only	1	\$11.25**	\$11.25
VSP	Employee Only	2	\$8.75	\$17.50
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
			GRAND TOTAL	\$257.95

ALMITA PILING  
2000 S COLORADO BLVD TOWER ONE, SUITE 200  
DENVER, CO 80222

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
HARPER, JESSICA	2022-02-01	GUARDHIGH	EE	\$47.61
HARPER, JESSICA	2020-04-01	VSP	EE	\$8.75
JOHNSON, KEVIN	2022-02-01	GUARDHIGH	ES	\$89.81
JOHNSON, KEVIN	2022-01-01	VSP	ES	\$14.73
JOHNSON, KEVIN	2022-01-01	LIFE		\$11.25
LLOYD, AUSTIN	2022-02-01	GUARDLOW	EE	\$29.44
LLOYD, AUSTIN	2022-01-01	VSP	EE	\$8.75
LOWRY, SAMUEL	2022-01-01	GUARDHIGH	EE	\$47.61

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

AMADA LANIER  
3785 ROLLING CREEK DRIVE  
BUFORD, GA 30519

Invoice Number: 4670-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDLOW	Family	1	\$100.74	\$100.74
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
			GRAND TOTAL	\$115.47

AMADA LANIER  
3785 ROLLING CREEK DRIVE  
BUFORD, GA 30519

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
HARPOLE, BARBARA	2022-01-01	GUARDLOW	FAM	\$100.74
HARPOLE, BARBARA	2022-01-01	VSP	ES	\$14.73

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

AMADA MID-MARYLAND  
5100 BUCKEYSTOWN PIKE  
FREDERICK, MD 21704

Invoice Number: 4667-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$4.20**	\$6.30
GUARDLOW	Employee & Spouse Only	1	\$55.54	\$55.54
GUARDLOW	Family	1	\$100.74	\$100.74
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
VSP	Family	1	\$23.76	\$23.76
			GRAND TOTAL	\$201.07

AMADA MID-MARYLAND  
5100 BUCKEYSTOWN PIKE  
FREDERICK, MD 21704

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CONTRERAS, KIMBERLY	2022-01-01	GUARDLOW	ES	\$55.54
CONTRERAS, KIMBERLY	2022-01-01	VSP	ES	\$14.73
FRIZZELL, RICHARD	2020-04-01	GUARDLOW	FAM	\$100.74
FRIZZELL, RICHARD	2019-12-01	VSP	FAM	\$23.76
LEMON, NICOLE	2022-08-01	ADD		\$6.30

## MEDICAL PLAN COUNTS

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





## Account Services

### Monthly Statement

AMADA MONUMENT  
755 COLORADO 105  
PALMER LAKE, CO 80133

Invoice Number: 4640-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	9	\$1.26**	\$44.94
GUARDHIGH	Employee Only	7	\$47.61	\$333.27
GUARDHIGH	Employee & Children	2	\$89.81	\$207.80
GUARDLOW	Employee Only	6	\$29.44	\$176.64
LIFE	Employee Only	7	\$5.85**	\$56.18
VSP	Employee Only	16	\$8.75	\$140.00
			GRAND TOTAL	\$1,066.58

AMADA MONUMENT  
755 COLORADO 105  
PALMER LAKE, CO 80133

CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ACHIVIDA, KATRINA	2022-08-01	LIFE		\$2.70
ACHIVIDA, KATRINA	2022-08-01	VSP	EE	\$8.75
BAEZ, RACHELLE	2021-09-01	GUARDLOW	EE	\$29.44
BAEZ, RACHELLE	2021-09-01	VSP	EE	\$8.75
BEEMAN, KIMBERLY	2022-08-01	ADD		\$10.50
BEEMAN, KIMBERLY	2022-08-01	LIFE		\$14.40
BEEMAN, KIMBERLY	2022-08-01	VSP	EE	\$8.75
BUTLER, JERRY	2022-07-01	GUARDLOW	EE	\$29.44
BUTLER, JERRY	2022-07-01	VSP	EE	\$8.75
CURTIS, HEATHER	2019-10-01	VSP	EE	\$8.75
CURTIS, HEATHER	2021-01-01	GUARDHIGH	EC	\$89.81
DAVIS, TARA	2022-03-01	LIFE		\$1.80
DAVIS, TARA	2022-03-01	ADD		\$1.68
DAVIS, TARA	2022-03-01	GUARDLOW	EE	\$29.44
DAVIS, TARA	2022-03-01	VSP	EE	\$8.75
FRISBIE, BEVERLY	2022-01-01	GUARDHIGH	EE	\$47.61
FRISBIE, BEVERLY	2022-01-01	ADD		\$0.42
GUNN, JANUARY	2022-03-01	VSP	EE	\$8.75
GUNN, JANUARY	2022-03-01	GUARDHIGH	EE	\$47.61
JOHNSON, LACEY	2022-10-01	GUARDHIGH	EE	\$47.61
JOHNSON, LACEY	2022-10-01	VSP	EE	\$8.75
KIRK, SUSAN	2022-07-01	ADD		\$3.78
KRUEGER, KAILEE	2022-09-01	ADD		\$3.78
KRUEGER, KAILEE	2022-09-01	GUARDHIGH	EE	\$47.61
KRUEGER, KAILEE	2022-09-01	VSP	EE	\$8.75
LA LONDE, ARIANNA	2022-09-01	GUARDHIGH	EE	\$47.61

AMADA MONUMENT  
755 COLORADO 105  
PALMER LAKE, CO 80133

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
LA LONDE, ARIANNA	2022-09-01	VSP	EE	\$8.75
MARTIN, NICOLE	2022-01-01	VSP	EE	\$8.75
MARTIN, NICOLE	2022-01-01	GUARDLOW	EE	\$29.44
MATHEWS, SHARDE	2022-05-01	ADD		\$1.68
MATHEWS, SHARDE	2022-04-18	LIFE		\$11.60
MAULER, LAURIE	2022-01-01	VSP	EE	\$8.75
MCGLEISH, MARGARET	2022-01-01	LIFE		\$9.20
MCGLEISH, MARGARET	2022-01-01	ADD		\$4.20
MOSLEY, LASHAWN	2022-10-01	ADD		\$4.62
MOSLEY, LASHAWN	2022-10-01	GUARDHIGH	EC2	\$117.99
PASCAL, TAMMY	2022-01-01	LIFE		\$9.88
PEREZ, HOPE	2022-08-01	ADD		\$14.28
PEREZ, HOPE	2022-08-01	LIFE		\$6.60
PORTER RAMSAY, KARESA	2022-01-01	VSP	EE	\$8.75
PORTER RAMSAY, KARESA	2022-01-01	GUARDLOW	EE	\$29.44
SAWYER, ALLISON	2022-01-01	GUARDHIGH	EE	\$47.61
SAWYER, ALLISON	2022-01-01	VSP	EE	\$8.75
VARGAS, LIANA	01/01/2021	GUARDLOW	EE	\$29.44
VARGAS, LIANA	01/01/2021	VSP	EE	\$8.75
WINTER, EMILY	2022-08-01	GUARDHIGH	EE	\$47.61
WINTER, EMILY	2022-08-01	VSP	EE	\$8.75

AMADA MONUMENT  
755 COLORADO 105  
PALMER LAKE, CO 80133

## PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
KRUEGER, KAILEE	2022-09-01	ADD		\$3.78
KRUEGER, KAILEE	2022-09-01	GUARDHIGH	EE	\$47.61
KRUEGER, KAILEE	2022-09-01	VSP	EE	\$8.75
LA LONDE, ARIANNA	2022-09-01	GUARDHIGH	EE	\$47.61

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

AMADA NORTHERN NEVADA  
985 Damonte Ranch Pkwy Suite 320  
RENO, NV 89521

Invoice Number: 4671-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	3	\$47.61	\$142.83
GUARDHIGH	Employee & Children	2	\$89.81	\$179.62
GUARDHIGH	Family	1	\$160.18	\$160.18
GUARDLOW	Employee & Children	1	\$74.61	\$74.61
VSP	Employee Only	4	\$8.75	\$35.00
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
VSP	Employee & Children	3	\$15.02	\$45.06
			GRAND TOTAL	\$652.03

AMADA NORTHERN NEVADA  
985 Damonte Ranch Pkwy Suite 320  
RENO, NV 89521

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
DEGUZMAN, TAMARA	2020-01-01	GUARDHIGH	EE	\$47.61
DEGUZMAN, TAMARA	2020-02-01	VSP	EE	\$8.75
DENIGRIS, VICTOR	2019-01-01	GUARDHIGH	FAM	\$160.18
DENIGRIS, VICTOR	2020-02-01	VSP	ES	\$14.73
HART, RYAN	2021-03-01	GUARDLOW	EC2	\$74.61
HART, RYAN	2021-03-01	VSP	EC2	\$15.02
HEAVEY, JAN	2020-01-01	GUARDHIGH	EE	\$47.61
HEAVEY, JAN	2020-02-01	VSP	EE	\$8.75
LEBLANC, CARLY	2020-11-01	GUARDHIGH	EC	\$89.81
LEBLANC, CARLY	2020-02-01	VSP	EC	\$15.02
LOVELL, ROSANNA	2020-02-01	VSP	EE	\$8.75
MARSHALL, MILES	2022-03-01	VSP	EE	\$8.75
MILLER, JUSTIN	2020-11-01	GUARDHIGH	EC	\$89.81
MILLER, JUSTIN	2020-01-01	VSP	EC	\$15.02
POWERS, EILEEN	2020-01-01	GUARDHIGH	EE	\$47.61

**MEDICAL PLAN COUNTS**

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



## Account Services

### Monthly Statement

AMADA OCEANSIDE  
2124 S. EL CAMINO REAL  
OCEANSIDE, CA 92054

Invoice Number: 4650-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	4	\$8.40**	\$17.22
GUARDHIGH	Employee Only	5	\$47.61	\$238.05
GUARDHIGH	Employee & Spouse Only	2	\$89.81	\$179.62
GUARDHIGH	Employee & Children	1	\$117.99	\$117.99
GUARDHIGH	Family	1	\$160.18	\$160.18
GUARDLOW	Employee Only	6	\$29.44	\$176.64
GUARDLOW	Employee & Spouse Only	1	\$55.54	\$55.54
GUARDLOW	Employee & Children	1	\$74.61	\$74.61
LIFE	Employee Only	4	\$3.60**	\$50.80
VSP	Employee Only	15	\$8.75	\$131.25
VSP	Employee & Spouse Only	4	\$14.73	\$58.92
VSP	Employee & Children	1	\$15.02	\$15.02
VSP	Family	1	\$23.76	\$23.76
			GRAND TOTAL	\$1,435.11

AMADA OCEANSIDE  
2124 S. EL CAMINO REAL  
OCEANSIDE, CA 92054

CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BAILEY, DAWN	2022-09-01	GUARDLOW	EE	\$29.44
BAILEY, DAWN	2022-09-01	VSP	EE	\$8.75
BRIGANTE, SAMANTHA	2022-04-01	LIFE		\$19.10
BRIGANTE, SAMANTHA	2022-01-01	ADD		\$4.20
BRIGANTE, SAMANTHA	2022-01-01	GUARDHIGH	EE	\$47.61
BRIGANTE, SAMANTHA	2022-01-01	VSP	EE	\$8.75
BURROUGH, CHERIE	2022-01-01	LIFE		\$13.70
BURROUGH, CHERIE	2022-01-01	GUARDHIGH	EC2	\$117.99
BURROUGH, CHERIE	2022-01-01	VSP	EC2	\$15.02
BURROUGH, JONATHAN	2022-01-01	GUARDHIGH	EE	\$47.61
BURROUGH, JONATHAN	2022-01-01	VSP	EE	\$8.75
BURROUGH, JONATHAN	2022-01-01	LIFE		\$14.40
CAFFEE, FRANCISCA	2022-09-01	GUARDHIGH	EE	\$47.61
CANONIZADO, EDGAR	2022-01-01	VSP	ES	\$14.73
CRUZ, ANNA	2022-08-01	GUARDHIGH	ES	\$89.81
CRUZ, ANNA	2022-08-01	VSP	ES	\$14.73
DIAZ, HOPE	2022-09-01	ADD		\$2.10
DIAZ, HOPE	2022-09-01	GUARDHIGH	EE	\$47.61
DIAZ, HOPE	2022-09-01	VSP	EE	\$8.75
EHLERS, FRED	2022-01-01	VSP	ES	\$14.73
EHLERS, FRED	2022-01-01	ADD		\$8.40
EHLERS, FRED	2022-01-01	GUARDHIGH	ES	\$89.81
EHLERS, JANICE	2019-01-01	VSP	EE	\$8.75
FALCON, CHRISTINA	2020-01-01	GUARDHIGH	FAM	\$160.18
FALCON, CHRISTINA	2020-01-01	VSP	FAM	\$23.76
FIGUEROA, NATALIA	2020-01-01	VSP	EE	\$8.75



AMADA OCEANSIDE  
2124 S. EL CAMINO REAL  
OCEANSIDE, CA 92054

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
FIGUEROA, NATALIA	2020-01-01	GUARDLOW	EE	\$29.44
FLORES, DANIELLE	2020-01-01	VSP	EE	\$8.75
FLORES, DANIELLE	2020-01-01	GUARDLOW	EE	\$29.44
JARINA, JUDYBEL	2022-01-01	GUARDLOW	EC2	\$74.61
JARINA, JUDYBEL	2022-01-01	VSP	EE	\$8.75
LINSSEN, EUPHEMIA	2022-01-01	VSP	EE	\$8.75
LOPEZ, MICHAYLA	2022-01-01	LIFE		\$3.60
LOPEZ, MICHAYLA	2022-01-01	ADD		\$2.52
LOPEZ, MICHAYLA	2022-01-01	GUARDLOW	EE	\$29.44
MUNOZ, LORENA	2017-12-01	GUARDHIGH	EE	\$47.61
MUNOZ, LORENA	2018-12-01	VSP	EE	\$8.75
RHODES, MIKALIA	2021-08-01	VSP	EE	\$8.75
RITENHOUR, KATHALEEN	2021-01-01	VSP	EE	\$8.75
SAKHA, FARIDA	2020-01-01	VSP	EE	\$8.75
SAKHA, FARIDA	2020-01-01	GUARDLOW	EE	\$29.44
SCHOLL, OFELIA	2022-08-01	VSP	EE	\$8.75
SHARP, YETATWORK	2021-01-01	GUARDLOW	EE	\$29.44
SHARP, YETATWORK	2021-01-01	VSP	EE	\$8.75
ULLOA, DARLENE	2020-01-01	GUARDLOW	ES	\$55.54
ULLOA, DARLENE	2018-12-01	VSP	ES	\$14.73

AMADA OCEANSIDE  
2124 S. EL CAMINO REAL  
OCEANSIDE, CA 92054

## PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BAILEY, DAWN	2022-09-01	GUARDLOW	EE	\$29.44
CAFFEE, FRANCISCA	2022-09-01	GUARDHIGH	EE	\$47.61
DIAZ, HOPE	2022-09-01	ADD		\$2.10
DIAZ, HOPE	2022-09-01	GUARDHIGH	EE	\$47.61
DIAZ, HOPE	2022-09-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

AMADA SENIOR CARE JACKSON MS  
1867 CRANE RIDGE DRIVE  
JACKSON, MS 39216

Invoice Number: 4643-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDLOW	Employee Only	1	\$29.44	\$29.44
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$38.19

AMADA SENIOR CARE JACKSON MS  
1867 CRANE RIDGE DRIVE  
JACKSON, MS 39216

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CHAMBERS, JANIE	2020-01-01	GUARDLOW	EE	\$29.44
MCAVOY, PAMELA	2022-03-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

AMADA SENIOR CARE MESA  
1660 S ALMA SCHOOL RD  
MESA, AZ 85210

Invoice Number: 4634-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
0574OPENAXESSBRONZ	Employee Only	1	\$487.36	\$487.36
			GRAND TOTAL	\$487.36

AMADA SENIOR CARE MESA  
1660 S ALMA SCHOOL RD  
MESA, AZ 85210

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
PATMOS, KRISTINE	2022-09-01	0574OPENAXESSBRONZ EE		\$487.36

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

AMADA SENIOR CARE TOLEDO

Invoice Number: 6010-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
0897OPENAXESSPLATI	Employee Only	1	\$862.95	\$862.95
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
LIFE	Employee Only	1	\$16.50**	\$16.50
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$935.81

AMADA SENIOR CARE TOLEDO

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
GROVES, ANISSA	2022-01-01	LIFE		\$16.50
GROVES, ANISSA	2022-01-01	GUARDHIGH	EE	\$47.61
GROVES, ANISSA	2022-02-01	0897OPENAXESSPLATI	EE	\$862.95
GROVES, ANISSA	2022-01-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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





## Account Services

### Monthly Statement

AMERICAN TELESIS, INC.

Invoice Number: 5521-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDLOW	Employee Only	1	\$29.44	\$29.44
LIFE	Employee Only	1	\$9.90**	\$9.90
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$48.09

AMERICAN TELESIS, INC.

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
TURNER, KEVIN	2022-07-01	VSP	EE	\$8.75
TURNER, KEVIN	2022-07-01	LIFE		\$9.90
TURNER, KEVIN	2022-07-01	GUARDLOW	EE	\$29.44

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

ARCULUS HOLDINGS  
309 Pierce St  
SOMERSET, NJ 08873

Invoice Number: 4430-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1748OPENAXESSBRONZ	Employee Only	1	\$536.10	\$536.10
1748OPENAXESSCOPPE	Employee Only	1	\$495.83	\$495.83
1748OPENAXESSCOPPE	Family	1	\$1,419.92	\$1,419.92
1748OPENAXESSSILVE	Employee Only	4	\$603.00	\$2,412.00
1748OPENAXESSSILVE	Employee & Spouse Only	3	\$1,206.00	\$3,618.00
1748OPENAXESSSILVE	Employee & Children	1	\$1,206.00	\$1,206.00
1748OPENAXESSSILVE	Family	5	\$1,809.00	\$9,045.00
ADD	Employee Only	9	\$2.10**	\$211.26
GUARDHIGH	Employee Only	2	\$47.61	\$95.22
GUARDHIGH	Employee & Spouse Only	3	\$89.81	\$269.43
GUARDHIGH	Family	5	\$160.18	\$800.90
GUARDLOW	Employee Only	4	\$29.44	\$117.76
GUARDLOW	Employee & Children	1	\$74.61	\$74.61
GUARDLOW	Family	1	\$100.74	\$100.74
LIFE	Employee Only	9	\$19.10**	\$294.29
VSP	Employee Only	7	\$8.75	\$61.25
VSP	Employee & Spouse Only	3	\$14.73	\$44.19
VSP	Employee & Children	1	\$15.02	\$15.02
VSP	Family	4	\$23.76	\$95.04
			GRAND TOTAL	\$21,609.42

ARCULUS HOLDINGS  
309 Pierce St  
SOMERSET, NJ 08873

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BAILEY, MATTHEW	2022-04-01	ADD		\$42.00
BAILEY, MATTHEW	2022-04-01	GUARDHIGH	ES	\$89.81
BAILEY, MATTHEW	2022-04-01	1748OPENAXESSILVE	ES	\$1206.00
BAILEY, MATTHEW	2022-04-01	VSP	ES	\$14.73
BASSERI, AFSHIN	2022-01-01	LIFE		\$19.80
BASSERI, AFSHIN	2022-01-01	GUARDHIGH	FAM	\$160.18
BASSERI, AFSHIN	2022-01-01	1748OPENAXESSCOPPE	FAM	\$1419.92
BASSERI, AFSHIN	2022-01-01	VSP	FAM	\$23.76
CHEN, CHIH-EN	2022-02-01	GUARDHIGH	ES	\$89.81
CHEN, CHIH-EN	2022-02-01	1748OPENAXESSILVE	ES	\$1206.00
CHEN, CHIH-EN	2022-02-01	VSP	ES	\$14.73
D'ELETTO, THOMAS	2022-01-01	LIFE		\$47.85
D'ELETTO, THOMAS	2022-01-01	ADD		\$10.08
D'ELETTO, THOMAS	2022-01-01	1748OPENAXESSILVE	FAM	\$1809.00
EMERSON, ERICA	2022-01-01	LIFE		\$27.49
EMERSON, ERICA	2022-01-01	ADD		\$29.82
FAHY, JOSEPH	2022-01-01	GUARDHIGH	ES	\$89.81
FAHY, JOSEPH	2022-01-01	1748OPENAXESSILVE	ES	\$1206.00
FAHY, JOSEPH	2022-01-01	VSP	ES	\$14.73
FORTIN, KYLE	2022-01-01	LIFE		\$73.33
FORTIN, KYLE	2022-01-01	ADD		\$42.42
FORTIN, KYLE	2022-01-01	GUARDHIGH	FAM	\$160.18
FORTIN, KYLE	2022-01-01	1748OPENAXESSILVE	FAM	\$1809.00
FORTIN, KYLE	2022-01-01	VSP	FAM	\$23.76
GOLDSTEIN, ARDEN	2022-04-01	ADD		\$8.82
GOLDSTEIN, ARDEN	2022-04-01	GUARDHIGH	FAM	\$160.18
GOLDSTEIN, ARDEN	2022-04-01	VSP	EC	\$15.02
KATZ, EVAN	2022-07-01	ADD		\$2.10

ARCULUS HOLDINGS  
309 Pierce St  
SOMERSET, NJ 08873

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
KATZ, EVAN	2022-07-01	GUARDLOW	EE	\$29.44
KATZ, EVAN	2022-07-01	1748OPENAXESSILVE	EE	\$603.00
KATZ, EVAN	2022-07-01	VSP	EE	\$8.75
LANZILLI, LAWRENCE	2022-01-01	GUARDHIGH	FAM	\$160.18
LANZILLI, LAWRENCE	2022-01-01	1748OPENAXESSILVE	FAM	\$1809.00
LANZILLI, LAWRENCE	2022-01-01	VSP	FAM	\$23.76
LAWINSKI, JENNIFER	2022-05-01	LIFE		\$22.92
LYONS, CYNTHIA	2022-06-01	LIFE		\$27.70
LYONS, CYNTHIA	2022-01-01	GUARDHIGH	FAM	\$160.18
LYONS, CYNTHIA	2022-01-01	1748OPENAXESSILVE	FAM	\$1809.00
LYONS, CYNTHIA	2022-01-01	VSP	FAM	\$23.76
MARTINEZ, JEFFREY	2022-04-01	LIFE		\$19.10
MARTINEZ, JEFFREY	2022-04-01	ADD		\$34.02
MARTINEZ, JEFFREY	2022-04-01	GUARDLOW	FAM	\$100.74
MARTINEZ, JEFFREY	2022-04-01	1748OPENAXESSILVE	FAM	\$1809.00
MULLEN, JENNIFER	2022-01-01	LIFE		\$39.60
MULLEN, JENNIFER	2022-01-01	ADD		\$21.00
MULLEN, JENNIFER	2022-01-01	GUARDLOW	EC	\$74.61
MULLEN, JENNIFER	2022-01-01	1748OPENAXESSILVE	EC	\$1206.00
MULLEN, JENNIFER	2022-01-01	VSP	EE	\$8.75
OSTROM, JOHN	2022-08-01	ADD		\$21.00
OSTROM, JOHN	2022-08-01	LIFE		\$16.50
OSTROM, JOHN	2022-08-01	GUARDHIGH	EE	\$47.61
OSTROM, JOHN	2022-08-01	1748OPENAXESSILVE	EE	\$603.00
OSTROM, JOHN	2022-08-01	VSP	EE	\$8.75
RIEGEL, GEOFFREY	2022-01-01	GUARDLOW	EE	\$29.44

ARCULUS HOLDINGS  
309 Pierce St  
SOMERSET, NJ 08873

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
RIEGEL, GEOFFREY	2022-01-01	1748OPENAXESSILVE	EE	\$603.00
RIEGEL, GEOFFREY	2022-01-01	VSP	EE	\$8.75
RYAN, BENJAMIN	2022-04-01	1748OPENAXESSBRONZ	EE	\$536.10
SPAHR, ROSEMARY	2022-01-01	GUARDHIGH	EE	\$47.61
SPAHR, ROSEMARY	2022-01-01	VSP	EE	\$8.75
THOMPSON, MICHAEL	2022-01-01	GUARDLOW	EE	\$29.44
THOMPSON, MICHAEL	2022-01-01	1748OPENAXESSILVE	EE	\$603.00
THOMPSON, MICHAEL	2022-01-01	VSP	EE	\$8.75
VAUDRIEN, MORGAN	2022-04-01	GUARDLOW	EE	\$29.44
VAUDRIEN, MORGAN	2022-04-01	1748OPENAXESSCOPPE	EE	\$495.83
VAUDRIEN, MORGAN	2022-04-01	VSP	EE	\$8.75

ARCULUS HOLDINGS  
309 Pierce St  
SOMERSET, NJ 08873

## PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
OSTROM, JOHN	2022-08-01	ADD		\$21.00
OSTROM, JOHN	2022-08-01	LIFE		\$16.50
OSTROM, JOHN	2022-08-01	GUARDHIGH	EE	\$47.61
OSTROM, JOHN	2022-08-01	1748OPENAXESSSILVE	EE	\$603.00
OSTROM, JOHN	2022-08-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

Employee Only	6
Employee & Spouse	3
Employee & Children	1
Family	6



## Account Services

### Monthly Statement

ASSISTED LIVING LOCATORS  
16731 ROSA LANE  
SOUTHGATE, MI 48195

Invoice Number: 4698-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$2.10**	\$2.10
GRAND TOTAL				\$2.10



## ASSISTED LIVING LOCATORS

16731 ROSA LANE  
SOUTHGATE, MI 48195

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
MARENGERE, CAROLYN	2022-01-01	ADD		\$2.10

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

ATSUMI & SAKAI NEW YORK

Invoice Number: 5547-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1907OPENAXESSBRONZ	Employee Only	1	\$536.10	\$536.10
GUARDLOW	Employee Only	1	\$29.44	\$29.44
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$574.29

ATSUMI &amp; SAKAI NEW YORK

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
KATSUMI, MASANARI	2022-02-01	GUARDLOW	EE	\$29.44
KATSUMI, MASANARI	2022-03-01	1907OPENAXESSBRONZ	EE	\$536.10
KATSUMI, MASANARI	2022-02-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

AVANCER HOMES  
350 SYCAMORE ROAD  
GENOA, IL 60135

Invoice Number: 4677-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	3	\$21.42**	\$28.14
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDLOW	Employee Only	1	\$29.44	\$29.44
GUARDLOW	Employee & Children	4	\$74.61	\$298.44
LIFE	Employee Only	5	\$14.30**	\$48.88
VSP	Employee Only	3	\$8.75	\$26.25
VSP	Employee & Children	3	\$15.02	\$45.06
			GRAND TOTAL	\$525.08

AVANCER HOMES  
350 SYCAMORE ROAD  
GENOA, IL 60135

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BATES, TEKOLIA	2019-01-01	ADD		\$21.42
BATES, TEKOLIA	2019-01-01	GUARDLOW	EC2	\$74.61
BATES, TEKOLIA	2022-09-01	LIFE		\$12.50
GRAZIANO, ASHLEY	2020-04-01	GUARDHIGH	EE	\$47.61
GRAZIANO, ASHLEY	2020-04-01	VSP	EE	\$8.75
HARRIS, TANETTE	2019-01-01	GUARDLOW	EC2	\$74.61
HARRIS, TANETTE	2019-01-01	VSP	EC2	\$15.02
MOORE, TANYA	2019-01-01	ADD		\$5.46
MOORE, TANYA	2018-01-01	GUARDLOW	EC2	\$74.61
MOORE, TANYA	2018-12-01	VSP	EC2	\$15.02
MOORE, TANYA	2019-12-01	LIFE		\$14.74
NELLANS, JUDITH	2022-01-01	LIFE		\$14.30
PALMER, COURTENAY	2022-09-01	ADD		\$1.26
PALMER, COURTENAY	2022-09-01	LIFE		\$2.40
SHROYER, BRIAN	2022-01-01	VSP	EE	\$8.75
SHROYER, BRIAN	2022-01-01	LIFE		\$4.94
WILLIAMS, DAMONTAE	2020-09-01	GUARDLOW	EC	\$74.61
WILLIAMS, DAMONTAE	2020-09-01	VSP	EC	\$15.02
WRIGHT, KIERYN	2022-01-01	GUARDLOW	EE	\$29.44
WRIGHT, KIERYN	2022-01-01	VSP	EE	\$8.75

AVANCER HOMES  
350 SYCAMORE ROAD  
GENOA, IL 60135

## PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
PALMER, COURTENAY	2022-09-01	ADD		\$1.26

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

BANYAN LIVING OHIO, LLC

Invoice Number: 5988-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1986OPENAXESSBRONZ	Employee & Spouse Only	1	\$0.00	\$1,300.07
1986OPENAXESSCOPPE	Employee Only	8	\$544.16	\$4,353.28
1986OPENAXESSCOPPE	Employee & Children	1	\$544.16	\$1,061.14
1986OPENAXESSGOLD	Employee Only	12	\$738.98	\$8,867.76
1986OPENAXESSPLATI	Employee Only	4	\$0.00	\$3,251.52
1986OPENAXESSSILVE	Employee Only	3	\$0.00	\$2,015.40
ADD	Employee Only	10	\$1.68**	\$63.00
GUARDHIGH	Employee Only	10	\$47.61	\$476.10
GUARDHIGH	Employee & Children	1	\$47.61	\$89.81
GUARDHIGH	Family	1	\$0.00	\$160.18
GUARDLOW	Employee Only	9	\$29.44	\$264.96
GUARDLOW	Employee & Spouse Only	1	\$29.44	\$55.54
GUARDLOW	Employee & Children	2	\$29.44	\$149.22
LIFE	Employee Only	14	\$2.40**	\$184.00
VSP	Employee Only	18	\$8.75	\$157.50
VSP	Employee & Spouse Only	3	\$8.75	\$44.19
VSP	Employee & Children	1	\$8.75	\$15.02
VSP	Family	1	\$0.00	\$23.76
			GRAND TOTAL	\$22,570.64

BANYAN LIVING OHIO, LLC

,

CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ALHEIT, DAVID	2022-07-01	1986OPENAXESSCOPPE	EE	\$544.16
ALHEIT, DAVID	2022-07-01	GUARDLOW	EC2	\$74.61
ALHEIT, DAVID	2022-07-01	VSP	EE	\$8.75
ARNOLD, TIM	2022-07-01	GUARDLOW	ES	\$55.54
ARNOLD, TIM	2022-07-01	VSP	ES	\$14.73
ASHCRAFT, HALEIGH	2022-07-01	ADD		\$21.00
ASHCRAFT, HALEIGH	2022-07-01	LIFE		\$11.70
ASHCRAFT, HALEIGH	2022-07-01	GUARDHIGH	FAM	\$160.18
ASHCRAFT, HALEIGH	2022-07-01	VSP	ES	\$14.73
BRYNER, MARK	2022-07-01	1986OPENAXESSGOLD	EE	\$738.98
BRYNER, MARK	2022-07-01	LIFE		\$9.60
BRYNER, MARK	2022-07-01	GUARDHIGH	EE	\$47.61
CASDORPH, LINDSEY	2022-07-01	1986OPENAXESSCOPPE	EE	\$544.16
CASDORPH, LINDSEY	2022-09-01	LIFE		\$8.00
CASDORPH, LINDSEY	2022-07-01	GUARDLOW	EE	\$29.44
CASDORPH, LINDSEY	2022-07-01	VSP	EE	\$8.75
CONNER, JOHN	2022-07-01	1986OPENAXESSGOLD	EE	\$738.98
CONNER, JOHN	2022-07-01	ADD		\$12.60
CONNER, JOHN	2022-07-01	GUARDHIGH	EE	\$47.61
CONNER, JOHN	2022-07-01	VSP	EE	\$8.75
DAVIS, ALFONSO	2022-07-01	1986OPENAXESSGOLD	EE	\$738.98
DAVIS, ALFONSO	2022-07-01	ADD		\$0.42
DAVIS, ALFONSO	2022-07-01	LIFE		\$39.60
DAVIS, ALFONSO	2022-07-01	GUARDHIGH	EE	\$47.61
DAVIS, ALFONSO	2022-07-01	VSP	EE	\$8.75
DE MENEZES, JOSIMAR	2022-07-01	1986OPENAXESSCOPPE	EE	\$544.16
EICKHOLT, JOSHUA	2022-10-01	GUARDHIGH	EE	\$47.61



BANYAN LIVING OHIO, LLC

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CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
FERRELL, JAMES	2022-07-01	1986OPENAXESSPLATI	EE	\$812.88
FERRELL, JAMES	2022-07-01	GUARDHIGH	EE	\$47.61
FERRELL, JAMES	2022-07-01	VSP	EE	\$8.75
GRAEHLING, ROCKWELL	2022-07-01	1986OPENAXESSILVE	EE	\$671.80
HILL, LAURA	2022-07-01	1986OPENAXESSCOPPE	EC2	\$1061.14
HILL, LAURA	2022-07-01	LIFE		\$1.91
HILL, LAURA	2022-07-01	GUARDLOW	EC2	\$74.61
HILL, LAURA	2022-07-01	VSP	EC2	\$15.02
HINDS, KYLI	2022-07-01	GUARDLOW	EE	\$29.44
HINDS, KYLI	2022-07-01	VSP	EE	\$8.75
JOHNSTONE, TAYLER	2022-07-01	ADD		\$0.84
JOHNSTONE, TAYLER	2022-07-01	GUARDHIGH	EE	\$47.61
JOHNSTONE, TAYLER	2022-07-01	VSP	EE	\$8.75
JOHNSTONE, TAYLER	2022-07-01	1986OPENAXESSGOLD	EE	\$738.98
KIDD, RICHARD	2022-07-01	ADD		\$10.92
KIDD, RICHARD	2022-07-01	LIFE		\$42.95
KIDD, RICHARD	2022-07-01	VSP	FAM	\$23.76
LAB, MICHAEL	2022-07-01	1986OPENAXESSCOPPE	EE	\$544.16
LAUTZENHEISER, CHLOE	2022-07-01	VSP	EE	\$8.75
LAUTZENHEISER, CHLOE	2022-07-01	1986OPENAXESSGOLD	EE	\$738.98
LAUTZENHEISER, CHLOE	2022-07-01	GUARDLOW	EE	\$29.44
MOORE, KAITLIN	2022-07-01	1986OPENAXESSILVE	EE	\$671.80
MOORE, KAITLIN	2022-07-01	GUARDLOW	EE	\$29.44
MOORE, KAITLIN	2022-07-01	VSP	EE	\$8.75
MURESAN, SEBASTIAN	2022-08-01	1986OPENAXESSGOLD	EE	\$738.98

BANYAN LIVING OHIO, LLC

,

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
PAYNE, MARIAH	2022-07-01	1986OPENAXESSCOPPE	EE	\$544.16
PAYNE, MARIAH	2022-07-01	GUARDLOW	EE	\$29.44
PAYNE, MARIAH	2022-07-01	VSP	EE	\$8.75
PHILLIPPOU, PHILLIP	2022-07-01	1986OPENAXESSBRONZ	ES	\$1300.07
PREDMETSKY, AMY	2022-07-01	1986OPENAXESSILVE	EE	\$671.80
PREDMETSKY, AMY	2022-07-01	LIFE		\$1.91
PREDMETSKY, AMY	2022-07-01	GUARDLOW	EE	\$29.44
PREDMETSKY, AMY	2022-07-01	VSP	EE	\$8.75
PRITCHARD, CANDY	2022-07-01	LIFE		\$12.00
PRITCHARD, CANDY	2022-07-01	GUARDLOW	EE	\$29.44
PRITCHARD, CANDY	2022-07-01	VSP	EE	\$8.75
PRITCHARD, CANDY	2022-07-01	1986OPENAXESSCOPPE	EE	\$544.16
REID, NATHANIEL	2022-07-01	1986OPENAXESSGOLD	EE	\$738.98
REID, NATHANIEL	2022-07-01	GUARDLOW	EE	\$29.44
REID, NATHANIEL	2022-07-01	VSP	EE	\$8.75
RUBY, MAKELA	2022-07-01	1986OPENAXESSGOLD	EE	\$738.98
SNAY, TODD	2022-07-01	1986OPENAXESSPLATI	EE	\$812.88
SPASIC, ASHTON	2022-07-01	1986OPENAXESSGOLD	EE	\$738.98
STOVALL, ASIA	2022-07-01	1986OPENAXESSCOPPE	EE	\$544.16
STOVALL, ASIA	2022-07-01	LIFE		\$8.00
STOVALL, ASIA	2022-07-01	GUARDHIGH	EC	\$89.81
TRIFU, CLAUDIA	2022-07-01	1986OPENAXESSPLATI	EE	\$812.88
TRIFU, CLAUDIA	2022-07-01	ADD		\$4.20
TRIFU, CLAUDIA	2022-07-01	LIFE		\$4.50

BANYAN LIVING OHIO, LLC

,

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
TRIFU, CLAUDIA	2022-07-01	GUARDHIGH	EE	\$47.61
TRIFU, CLAUDIA	2022-07-01	VSP	EE	\$8.75
TRIFU, ETHENIEL	2022-07-01	1986OPENAXESSPLATI	EE	\$812.88
TRIFU, ETHENIEL	2022-07-01	ADD		\$4.20
TRIFU, ETHENIEL	2022-07-01	LIFE		\$4.50
TRIFU, ETHENIEL	2022-07-01	GUARDHIGH	EE	\$47.61
TRIFU, ETHENIEL	2022-07-01	VSP	EE	\$8.75
TRUEX, EMILY	2022-07-01	ADD		\$2.10
TRUEX, EMILY	2022-07-01	LIFE		\$13.05
TRUEX, EMILY	2022-07-01	VSP	ES	\$14.73
WEHR, ASHLEY	2022-07-01	1986OPENAXESSGOLD	EE	\$738.98
WEHR, ASHLEY	2022-07-01	GUARDHIGH	EE	\$47.61
WEHR, ASHLEY	2022-07-01	VSP	EE	\$8.75
WELLS, JOSEPH	2022-07-01	1986OPENAXESSCOPPE	EE	\$544.16
WHITE, ALYSSA	2022-07-01	1986OPENAXESSGOLD	EE	\$738.98
WHITE, ALYSSA	2022-07-01	ADD		\$1.68
WHITE, ALYSSA	2022-07-01	LIFE		\$2.40
WHITE, ALYSSA	2022-07-01	GUARDLOW	EE	\$29.44
WHITE, ALYSSA	2022-07-01	VSP	EE	\$8.75
WILLS-MCCRARY, JOEY	2022-07-01	1986OPENAXESSGOLD	EE	\$738.98
WILLS-MCCRARY, JOEY	2022-07-01	ADD		\$5.04
WILLS-MCCRARY, JOEY	2022-09-01	LIFE		\$23.88
WILLS-MCCRARY, JOEY	2022-07-01	GUARDHIGH	EE	\$47.61
WILLS-MCCRARY, JOEY	2022-07-01	VSP	EE	\$8.75

BANYAN LIVING OHIO, LLC

,

## PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
PAYNE, MARIAH	2022-07-01	GUARDLOW	EE	\$29.44
PAYNE, MARIAH	2022-07-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

BEACON OF HOPE HOSPICE OF IOWA, INC.  
1020 W 35TH ST  
DAVENPORT, IA 52806

Invoice Number: 4675-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	6	\$4.20**	\$62.16
GUARDHIGH	Employee Only	2	\$47.61	\$95.22
GUARDHIGH	Employee & Spouse Only	2	\$89.81	\$179.62
GUARDLOW	Employee Only	3	\$29.44	\$88.32
GUARDLOW	Employee & Spouse Only	1	\$55.54	\$55.54
GUARDLOW	Family	3	\$100.74	\$302.22
LIFE	Employee Only	10	\$41.25**	\$226.35
VSP	Employee Only	4	\$8.75	\$35.00
VSP	Employee & Spouse Only	3	\$14.73	\$44.19
VSP	Employee & Children	3	\$15.02	\$45.06
			GRAND TOTAL	\$1,133.68

BEACON OF HOPE HOSPICE OF IOWA, INC.  
1020 W 35TH ST  
DAVENPORT, IA 52806

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BEAN, CONNIE	2022-01-01	ADD	EE	\$21.42
BEAN, CONNIE	2022-01-01	GUARDLOW	FAM	\$100.74
BEAN, CONNIE	2022-01-01	VSP	EC2	\$15.02
BEAN, CONNIE	2022-01-01	LIFE	EE	\$11.30
CASSINI, CHEYENNE	2022-04-01	GUARDLOW	FAM	\$100.74
CASSINI, CHEYENNE	2022-04-01	VSP	EC2	\$15.02
CASSINI, CHEYENNE	2022-04-01	LIFE	EE	\$12.00
FESSEL, PATCHES	2022-01-01	ADD	EE	\$2.10
FESSEL, PATCHES	2022-01-01	GUARDHIGH	EE	\$47.61
FESSEL, PATCHES	2022-01-01	VSP	EE	\$8.75
FESSEL, PATCHES	2022-01-01	LIFE	EE	\$9.00
GIDDINGS, RODNEY	2022-01-01	ADD		\$31.50
GIDDINGS, RODNEY	2022-01-01	GUARDHIGH	ES	\$89.81
GIDDINGS, RODNEY	2022-01-01	VSP	ES	\$14.73
GIDDINGS, RODNEY	2022-01-01	LIFE		\$71.63
JOHNSON, PEGGY	2022-01-01	ADD		\$0.84
JOHNSON, PEGGY	2022-01-01	GUARDLOW	EE	\$29.44
JOHNSON, PEGGY	2022-01-01	LIFE		\$4.94
JOHNSON, PEGGY	2022-01-01	VSP	EE	\$8.75
JONES, MICHAEL	2022-10-01	LIFE		\$2.40
JONES, MICHAEL	2022-10-01	GUARDLOW	EE	\$29.44
JONES, MICHAEL	2022-10-01	VSP	EE	\$8.75
LEYENDECKER, MERRY	2022-06-01	VSP	ES	\$14.73
LEYENDECKER, MERRY	2022-06-01	GUARDLOW	ES	\$55.54
LEYENDECKER, MERRY	2022-06-01	LIFE		\$41.25
LOFQUIST, JENNIFER	2022-01-01	GUARDHIGH	ES	\$89.81
LOFQUIST, JENNIFER	2022-01-01	VSP	ES	\$14.73
SCOTT, NICOLE	2022-01-01	ADD		\$4.62

BEACON OF HOPE HOSPICE OF IOWA, INC.  
1020 W 35TH ST  
DAVENPORT, IA 52806

## CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
SCOTT, NICOLE	2022-01-01	GUARDLOW	FAM	\$100.74
SCOTT, NICOLE	2022-01-01	VSP	EC2	\$15.02
SCOTT, NICOLE	2022-01-01	LIFE		\$12.50
SOUTHWARD, SCOTT	2022-01-01	GUARDHIGH	EE	\$47.61
TERRONEZ, RAYMOND	2022-01-01	ADD		\$1.68
TERRONEZ, RAYMOND	2022-01-01	LIFE		\$46.93
TRUEBLOOD, AMBER	2022-04-01	GUARDLOW	EE	\$29.44
TRUEBLOOD, AMBER	2022-04-01	VSP	EE	\$8.75
TRUEBLOOD, AMBER	2022-04-01	LIFE		\$14.40

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

BEACON OF HOPE HOSPICE OF MISSOURI, INC.  
1201 C SOUTH BROADWAY  
OAK GROVE, MO 64075

Invoice Number: 4676-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	7	\$6.30**	\$47.88
GUARDHIGH	Employee Only	4	\$47.61	\$190.44
GUARDHIGH	Employee & Spouse Only	1	\$89.81	\$89.81
GUARDHIGH	Employee & Children	1	\$89.81	\$89.81
GUARDLOW	Employee & Children	2	\$74.61	\$149.22
GUARDLOW	Family	1	\$100.74	\$100.74
LIFE	Employee Only	8	\$7.20**	\$87.18
VSP	Employee Only	5	\$8.75	\$43.75
VSP	Employee & Spouse Only	4	\$14.73	\$58.92
VSP	Employee & Children	3	\$15.02	\$45.06
			GRAND TOTAL	\$902.81



BEACON OF HOPE HOSPICE OF MISSOURI, INC.  
1201 C SOUTH BROADWAY  
OAK GROVE, MO 64075

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ANDERSON, CHANDRA	2022-01-01	ADD		\$4.20
ANDERSON, CHANDRA	2022-01-01	GUARDHIGH	EC	\$89.81
ANDERSON, CHANDRA	2022-01-01	VSP	EC	\$15.02
ANDERSON, CHANDRA	2022-01-01	LIFE		\$8.00
BREDEHOEFT, ALLISON	2022-10-01	ADD		\$1.68
CHRISTENSEN, MONICA	2022-01-01	ADD		\$4.20
CHRISTENSEN, MONICA	2022-01-01	GUARDHIGH	ES	\$89.81
CHRISTENSEN, MONICA	2022-01-01	VSP	ES	\$14.73
CHRISTENSEN, MONICA	2022-01-01	LIFE		\$9.00
CLARK, MARY	2022-02-01	GUARDHIGH	EE	\$47.61
CLARK, MARY	2022-02-01	LIFE	EE	\$14.40
CLARK, MARY	2022-02-01	VSP	EE	\$8.75
DAVENPORT, JULIE	2022-01-01	VSP	ES	\$14.73
GANN, CAROLYN	2022-05-01	LIFE		\$7.64
GANN, CAROLYN	2022-05-01	GUARDLOW	EC	\$74.61
GANN, CAROLYN	2022-05-01	VSP	EC	\$15.02
KLING, LINDA	2022-06-01	ADD		\$4.20
KLING, LINDA	2022-06-01	GUARDHIGH	EE	\$47.61
KLING, LINDA	2022-06-01	VSP	EE	\$8.75
LEWIS, RHONDA	2022-01-01	ADD		\$21.00
LEWIS, RHONDA	2022-01-01	GUARDHIGH	EE	\$47.61
LEWIS, RHONDA	2022-01-01	VSP	EE	\$8.75
LEWIS, RHONDA	2022-01-01	LIFE		\$24.70
PETERSON, JOSHUA	2022-03-01	GUARDHIGH	EE	\$47.61
PETERSON, JOSHUA	2022-03-01	VSP	EE	\$8.75
PLUMBERG, JENNIFER	2022-01-01	VSP	ES	\$14.73

BEACON OF HOPE HOSPICE OF MISSOURI, INC.  
 1201 C SOUTH BROADWAY  
 OAK GROVE, MO 64075

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
PLUMBERG, JENNIFER	2022-01-01	ADD		\$6.30
PLUMBERG, JENNIFER	2022-01-01	LIFE		\$14.33
POWELL, VONDA	2022-06-01	LIFE		\$1.91
POWELL, VONDA	2022-06-01	VSP	EE	\$8.75
STIVERSON, AMANDA	2022-06-01	ADD		\$6.30
STIVERSON, AMANDA	2022-06-01	LIFE		\$7.20
STIVERSON, AMANDA	2022-06-01	GUARDLOW	EC	\$74.61
STIVERSON, AMANDA	2022-06-01	VSP	EC	\$15.02
TIEMAN, RASCHEL	2022-01-01	GUARDLOW	FAM	\$100.74
TIEMAN, RASCHEL	2022-01-01	VSP	ES	\$14.73

MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

BEST WESTERN - PHOENIX

Invoice Number: 5810-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	2	\$4.20**	\$7.14
GUARDHIGH	Employee Only	2	\$47.61	\$95.22
GUARDHIGH	Employee & Children	1	\$89.81	\$89.81
VSP	Employee Only	3	\$8.75	\$26.25
VSP	Employee & Children	2	\$15.02	\$30.04
VSP	Family	1	\$0.00	\$23.76
			GRAND TOTAL	\$272.22

BEST WESTERN - PHOENIX

,

CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ARNETT-PETERSON, CHEYENNE	2022-08-01	GUARDHIGH	EE	\$47.61
ARNETT-PETERSON, CHEYENNE	2022-08-01	VSP	EE	\$8.75
AVINA, RHANDY	2022-09-01	VSP	FAM	\$23.76
CRUZ, MARIA	2022-07-01	GUARDHIGH	EE	\$47.61
CRUZ, MARIA	2022-07-01	VSP	EC2	\$15.02
ESPINOZA, LORELEI	2022-05-01	VSP	EE	\$8.75
GAZON, CRYSTAL	2022-05-01	VSP	EE	\$8.75
GAZON, CRYSTAL	2022-05-01	ADD		\$4.20
SPAIN, MONIQUE	2022-05-01	ADD		\$2.94
SPAIN, MONIQUE	2022-05-01	GUARDHIGH	EC	\$89.81
SPAIN, MONIQUE	2022-05-01	VSP	EC	\$15.02

MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

BEST WESTERN AIRPORT INN & SUITES ORLANDO

Invoice Number: 5754-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDHIGH	Family	1	\$160.18	\$160.18
GUARDLOW	Employee & Children	1	\$74.61	\$74.61
LIFE	Employee Only	2	\$30.06**	\$36.06
VSP	Employee Only	1	\$8.75	\$8.75
VSP	Family	1	\$23.76	\$23.76
			GRAND TOTAL	\$350.97

BEST WESTERN AIRPORT INN &amp; SUITES ORLANDO

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
JOHNSON, SARAH	2022-02-01	GUARDLOW	EC	\$74.61
PEREZ, DAMARIS	2022-07-01	GUARDHIGH	EE	\$47.61
PEREZ, DAMARIS	2022-07-01	VSP	EE	\$8.75
SHINKLE, WAYNE	2022-04-01	LIFE		\$30.06
SMITH, JEFFREY	2022-02-01	GUARDHIGH	FAM	\$160.18
SMITH, JEFFREY	2022-02-01	VSP	FAM	\$23.76
SMITH, JEFFREY	2022-02-01	LIFE		\$6.00

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

BEST WESTERN INN

Invoice Number: 5848-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$0.42**	\$0.42
GUARDLOW	Employee Only	1	\$29.44	\$29.44
LIFE	Employee Only	1	\$14.82**	\$14.82
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$53.43

BEST WESTERN INN

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ALLEN, TERESA	2022-06-01	VSP	EE	\$8.75
ALLEN, TERESA	2022-06-01	ADD		\$0.42
ALLEN, TERESA	2022-06-01	LIFE		\$14.82
ALLEN, TERESA	2022-06-01	GUARDLOW	EE	\$29.44

## MEDICAL PLAN COUNTS

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





## Account Services

### Monthly Statement

BEST WESTERN PLUS FRONTIER  
8101 HUTCHINS DR  
CHEYENNE, WY 82007

Invoice Number: 4422-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1738OPENAXESSGOLD	Employee Only	1	\$719.19	\$719.19
GUARDHIGH	Employee Only	2	\$47.61	\$95.22
GUARDLOW	Employee & Children	1	\$74.61	\$74.61
VSP	Employee Only	3	\$8.75	\$26.25
VSP	Employee & Children	1	\$15.02	\$15.02
			GRAND TOTAL	\$930.29

BEST WESTERN PLUS FRONTIER  
8101 HUTCHINS DR  
CHEYENNE, WY 82007

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
DICKINSON, LILIA	2022-01-01	1738OPENAXESSGOLD	EE	\$719.19
GLOVER, EMILY	2022-08-01	VSP	EE	\$8.75
HOLLINGSWORTH, APRIL	2022-01-01	GUARDHIGH	EE	\$47.61
HOLLINGSWORTH, APRIL	2022-01-01	VSP	EE	\$8.75
LATHAM, NADINE	2022-06-01	GUARDLOW	EC	\$74.61
LATHAM, NADINE	2022-06-01	VSP	EC	\$15.02
WRIGHT, PATRICK	2022-06-01	GUARDHIGH	EE	\$47.61
WRIGHT, PATRICK	2022-06-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

BEST WESTERN PLUS HAWTHORNE TERRACE  
3434 N BROADWAY AVE  
CHICAGO, IL 60657

Invoice Number: 4134-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1130OPENAXESSESEN	Employee Only	2	\$450.75	\$901.50
1130OPENAXESSPRIME	Employee Only	6	\$653.75	\$3,922.50
ADD	Employee Only	3	\$1.68**	\$20.16
GUARDHIGH	Employee Only	4	\$47.61	\$190.44
GUARDLOW	Employee Only	1	\$29.44	\$29.44
LIFE	Employee Only	5	\$9.60**	\$88.43
VSP	Employee Only	6	\$8.75	\$52.50
			GRAND TOTAL	\$5,204.97

BEST WESTERN PLUS HAWTHORNE TERRACE  
3434 N BROADWAY AVE  
CHICAGO, IL 60657

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ARGUDO, ANNA	2022-01-01	LIFE		\$39.60
ARGUDO, ANNA	2022-01-01	1130OPENAXESSPRIME	EE	\$653.75
ARGUDO, ANNA	2022-01-01	ADD		\$8.40
ARGUDO, ANNA	2022-01-01	VSP	EE	\$8.75
ASMAL, ROSA	2022-01-01	1130OPENAXESSPRIME	EE	\$653.75
CALDERON, KATERINE	2022-01-01	LIFE		\$9.60
OCAMPO, ESMERALDA	2022-01-01	1130OPENAXESSPRIME	EE	\$653.75
PINEDA, CARLOS	2022-01-01	1130OPENAXESSPRIME	EE	\$653.75
PINEDA, CARLOS	2022-01-01	GUARDHIGH	EE	\$47.61
PINEDA, CARLOS	2022-01-01	VSP	EE	\$8.75
PINEDA, CARLOS	2022-05-01	LIFE		\$15.28
RAMIREZ, AGUEDA	2022-01-01	1130OPENAXESSESSEN	EE	\$450.75
RAMIREZ, AGUEDA	2022-01-01	GUARDLOW	EE	\$29.44
RAMIREZ, AGUEDA	2022-01-01	VSP	EE	\$8.75
ROUSE, RHONDA	2022-01-01	ADD		\$1.68
ROUSE, RHONDA	2022-01-01	GUARDHIGH	EE	\$47.61
ROUSE, RHONDA	2022-01-01	VSP	EE	\$8.75
ROUSE, RHONDA	2022-01-01	1130OPENAXESSESSEN	EE	\$450.75
ROUSE, RHONDA	2022-01-01	LIFE		\$9.55
VAZQUEZ, AZUCENA	2022-01-01	1130OPENAXESSPRIME	EE	\$653.75
VAZQUEZ, AZUCENA	2022-01-01	ADD		\$10.08
VAZQUEZ, AZUCENA	2022-01-01	GUARDHIGH	EE	\$47.61
VAZQUEZ, AZUCENA	2022-01-01	VSP	EE	\$8.75
VAZQUEZ, AZUCENA	2022-01-01	LIFE		\$14.40
VAZQUEZ, MELENY	2022-01-01	1130OPENAXESSPRIME	EE	\$653.75
VAZQUEZ, MELENY	2022-01-01	GUARDHIGH	EE	\$47.61
VAZQUEZ, MELENY	2022-01-01	VSP	EE	\$8.75

BEST WESTERN PLUS HAWTHORNE TERRACE  
3434 N BROADWAY AVE  
CHICAGO, IL 60657

## CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
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## MEDICAL PLAN COUNTS

Employee Only	8
Employee & Spouse	0
Employee & Children	0
Family	0



## Account Services

### Monthly Statement

BEST WESTERN PLUS OVERLAND INN

Invoice Number: 5542-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
LIFE	Employee Only	1	\$1.91**	\$1.91
VSP	Employee Only	1	\$8.75	\$8.75
GRAND TOTAL				\$10.66

BEST WESTERN PLUS OVERLAND INN

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
SCHREINER, TERESA	2022-08-01	VSP	EE	\$8.75
VELOTTA, KIM	2022-06-01	LIFE		\$1.91

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

BEST WESTERN RIVERSIDE INN

Invoice Number: 5883-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	3	\$47.61	\$142.83
GUARDLOW	Employee Only	1	\$29.44	\$29.44
LIFE	Employee Only	1	\$7.20**	\$7.20
VSP	Employee Only	3	\$8.75	\$26.25
			GRAND TOTAL	\$205.72



BEST WESTERN RIVERSIDE INN

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
HANEY, JAMES	2022-07-01	VSP	EE	\$8.75
LUSTER, KABRISHA	2022-06-01	GUARDLOW	EE	\$29.44
MCCLYDE, TREVON	2022-10-01	GUARDHIGH	EE	\$47.61
MCCLYDE, TREVON	2022-10-01	VSP	EE	\$8.75
SANCHEZ, DARIAN	2022-10-01	LIFE		\$7.20
SANCHEZ, DARIAN	2022-10-01	GUARDHIGH	EE	\$47.61
SANCHEZ, DARIAN	2022-10-01	VSP	EE	\$8.75
WILLIAMS, DANICA	2022-04-01	GUARDHIGH	EE	\$47.61

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

BIG HIT EVENTS  
681 Degraw St Apt. 2  
BROOKLYN, NY 11217

Invoice Number: 4282-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1531OPENAXESSGOLD	Employee & Spouse Only	1	\$1,307.62	\$1,307.62
			GRAND TOTAL	\$1,307.62

## BIG HIT EVENTS

681 Degraw St Apt. 2  
BROOKLYN, NY 11217

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
TAKSLER, SARA	2020-12-01	1531OPENAXESSGOLD	ES	\$1307.62

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

BIN THERE USA, LLC  
1209 N ORANGE STREET  
WILMINGTON, DE 19801

Invoice Number: 4169-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
LIFE	Employee Only	1	\$180.36**	\$180.36
VSP	Employee & Spouse Only	1	\$15.67	\$15.67
			GRAND TOTAL	\$196.03

BIN THERE USA, LLC  
1209 N ORANGE STREET  
WILMINGTON, DE 19801

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
YON, GREGORY	2013-08-01	VSP	ES	\$15.67
YON, GREGORY	2013-08-01	LIFE		\$180.36

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

BIONAP USA INC.  
420 COLUMBUS AVE STE 304  
VALHALLA, NY 10595

Invoice Number: 4417-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1732OPENAXESSGOLD	Employee Only	1	\$653.81	\$653.81
1732OPENAXESSGOLD	Employee & Spouse Only	1	\$1,307.62	\$1,307.62
1732OPENAXESSILVE	Employee Only	1	\$548.18	\$548.18
ADD	Employee Only	1	\$2.10**	\$2.10
GUARDHIGH	Employee & Spouse Only	1	\$89.81	\$89.81
GUARDHIGH	Family	1	\$160.18	\$160.18
GUARDLOW	Employee Only	1	\$29.44	\$29.44
VSP	Employee Only	1	\$8.75	\$8.75
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
VSP	Family	1	\$23.76	\$23.76
			GRAND TOTAL	\$2,838.38

BIONAP USA INC.  
420 COLUMBUS AVE STE 304  
VALHALLA, NY 10595

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BLACKWOOD, JODI-ANN	2021-12-01	GUARDHIGH	FAM	\$160.18
BLACKWOOD, JODI-ANN	2021-12-01	1732OPENAXESSILVE	EE	\$548.18
BLACKWOOD, JODI-ANN	2021-12-01	VSP	FAM	\$23.76
RIS, TYLER	2022-01-01	GUARDHIGH	ES	\$89.81
RIS, TYLER	2022-01-01	1732OPENAXESSGOLD	ES	\$1307.62
RIS, TYLER	2022-01-01	VSP	ES	\$14.73
STRAGAPEDE, MARINO	2021-09-01	ADD		\$2.10
STRAGAPEDE, MARINO	2021-09-01	GUARDLOW	EE	\$29.44
STRAGAPEDE, MARINO	2021-08-01	1732OPENAXESSGOLD	EE	\$653.81
STRAGAPEDE, MARINO	2021-09-01	VSP	EE	\$8.75

**MEDICAL PLAN COUNTS**

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



## Account Services

### Monthly Statement

BLUE CRAB BREWING, INC.  
8251 TELEGRAPH ROAD  
ODENTON, MD 21113

Invoice Number: 4658-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$6.30**	\$6.30
LIFE	Employee Only	1	\$10.80**	\$10.80
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$25.85



BLUE CRAB BREWING, INC.  
8251 TELEGRAPH ROAD  
ODENTON, MD 21113

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
SHAMAN, GIANMARCO	2022-07-01	ADD		\$6.30
SHAMAN, GIANMARCO	2022-07-01	LIFE		\$10.80
SHAMAN, GIANMARCO	2022-07-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

BLUEFROG PLUMBING & DRAIN - WEST HOUSTON  
22003 Chesterwick Dr  
KATY, TX 77450

Invoice Number: 4276-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
0834OPENAXESS	Family	1	\$1,161.76	\$1,161.76
GUARDHIGH	Family	1	\$160.18	\$160.18
VSP	Family	1	\$23.76	\$23.76
			GRAND TOTAL	\$1,345.70

BLUEFROG PLUMBING & DRAIN - WEST HOUSTON  
22003 Chesterwick Dr  
KATY, TX 77450

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
FRISCO, CHRISTOPHER	2021-04-01	0834OPENAXESSCOPPE	FAM	\$1161.76
FRISCO, CHRISTOPHER	2021-04-01	GUARDHIGH	FAM	\$160.18
FRISCO, CHRISTOPHER	2021-04-01	VSP	FAM	\$23.76

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

BUDGET BLINDS OF CAPE CORAL  
12431 MCGREGOR BLVD  
FORT MYERS, FL 33919

Invoice Number: 4551-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1897OPENAXESSBRONZ	Employee Only	1	\$536.10	\$536.10
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDLOW	Employee Only	1	\$0.00	\$29.44
VSP	Employee Only	3	\$8.75	\$26.25
			GRAND TOTAL	\$677.59

BUDGET BLINDS OF CAPE CORAL  
12431 MCGREGOR BLVD  
FORT MYERS, FL 33919

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
FRANKE, BRIAN	2022-09-01	GUARDLOW	EE	\$29.44
FRANKE, BRIAN	2022-09-01	VSP	EE	\$8.75
GARCIA, KENNETH	2022-01-01	VSP	EE	\$8.75
LAWRENCE, MICHELLE	2022-04-04	GUARDHIGH	EE	\$47.61
LAWRENCE, MICHELLE	2022-04-04	1897OPENAXESSBRONZ	EE	\$536.10
LAWRENCE, MICHELLE	2022-04-04	VSP	EE	\$8.75

BUDGET BLINDS OF CAPE CORAL  
12431 MCGREGOR BLVD  
FORT MYERS, FL 33919

## PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
FRANKE, BRIAN	2022-09-01	GUARDLOW	EE	\$29.44
FRANKE, BRIAN	2022-09-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

BUDGET BLINDS OF CREVE COEUR  
11628 Old Ballas Rd Ste 338  
CREVE COEUR, MO 63141

Invoice Number: 4299-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1559OPENAXESSILVE	Family	1	\$1,644.54	\$1,644.54
ADD	Employee Only	1	\$4.20**	\$4.20
GUARDLOW	Family	1	\$100.74	\$100.74
LIFE	Employee Only	1	\$8.40**	\$8.40
VSP	Family	1	\$23.76	\$23.76
GRAND TOTAL				\$1,781.64

## BUDGET BLINDS OF CREVE COEUR

11628 Old Ballas Rd Ste 338

CREVE COEUR, MO 63141

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
VANCIL, DANIELLE	2022-02-01	1559OPENAXESSILVE	FAM	\$1644.54
VANCIL, DANIELLE	2022-08-14	ADD		\$4.20
VANCIL, DANIELLE	2022-08-14	GUARDLOW	FAM	\$100.74
VANCIL, DANIELLE	2022-08-14	VSP	FAM	\$23.76
VANCIL, DANIELLE	2022-02-01	LIFE		\$8.40

## MEDICAL PLAN COUNTS

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





## Account Services

### Monthly Statement

BUDGET BLINDS OF SAN LEANDRO  
900 DOOLITTLE DRIVE #2A  
SAN LEANDRO, CA 94577

Invoice Number: 4280-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1526OPENAXESSGOLD	Employee & Spouse Only	1	\$1,307.62	\$1,307.62
ADD	Employee Only	1	\$0.71**	\$0.71
GUARDHIGH	Employee & Spouse Only	1	\$89.81	\$89.81
GUARDHIGH	Family	1	\$160.18	\$160.18
LIFE	Employee Only	2	\$3.21**	\$18.06
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
			GRAND TOTAL	\$1,591.11

BUDGET BLINDS OF SAN LEANDRO  
900 DOOLITTLE DRIVE #2A  
SAN LEANDRO, CA 94577

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
MORENO, LYNDIA	2022-01-17	ADD		\$0.71
MORENO, LYNDIA	2022-01-17	GUARDHIGH	FAM	\$160.18
MORENO, LYNDIA	2022-04-01	LIFE		\$3.21
TAYLOR, LEA	2022-01-01	1526OPENAXESSGOLD	ES	\$1307.62
TAYLOR, LEA	2022-01-01	GUARDHIGH	ES	\$89.81
TAYLOR, LEA	2022-01-01	VSP	ES	\$14.73
TAYLOR, LEA	2022-01-01	LIFE		\$14.85

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

BUDGET BLINDS OF SOUTH BEND AND MISHAWAKA

Invoice Number: 5703-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
LIFE	Employee Only	1	\$6.75**	\$6.75
GRAND TOTAL				\$6.75

BUDGET BLINDS OF SOUTH BEND AND MISHAWAKA

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
PRICE, STEPHANIE	2022-04-01	LIFE		\$6.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

BUDGET BLINDS OF STEAMBOAT  
2550 South Copper Frontage Rd.  
STEAMBOAT SPRINGS, CO 80487

Invoice Number: 4108-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$17.64**	\$17.64
GUARDHIGH	Family	1	\$160.18	\$160.18
GUARDLOW	Employee Only	1	\$29.44	\$29.44
LIFE	Employee Only	2	\$41.30**	\$64.22
VSP	Employee Only	1	\$8.75	\$8.75
VSP	Employee & Children	1	\$15.02	\$15.02
			GRAND TOTAL	\$295.25

## BUDGET BLINDS OF STEAMBOAT

2550 South Copper Frontage Rd.

STEAMBOAT SPRINGS, CO 80487

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BURDICK, SHAUN	2022-01-01	VSP	EE	\$8.75
BURDICK, SHAUN	2022-01-01	LIFE		\$22.92
COXON, KRISTI	2022-01-01	GUARDHIGH	FAM	\$160.18
FRINKS, ALISON	2022-01-01	ADD		\$17.64
FRINKS, ALISON	2022-01-01	GUARDLOW	EE	\$29.44
FRINKS, ALISON	2022-01-01	VSP	EC	\$15.02
FRINKS, ALISON	2022-01-01	LIFE		\$41.30

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

BUILDING KIDZ OF WEST HAYWARD  
4492 HEADEN WAY  
SANTA CLARA, CA 95054

Invoice Number: 4087-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$2.10**	\$2.10
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDLOW	Employee Only	1	\$29.44	\$29.44
GUARDLOW	Employee & Children	1	\$74.61	\$74.61
VSP	Employee Only	1	\$8.75	\$8.75
VSP	Employee & Children	1	\$15.02	\$15.02
			GRAND TOTAL	\$177.53

BUILDING KIDZ OF WEST HAYWARD  
4492 HEADEN WAY  
SANTA CLARA, CA 95054

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
HEARD, LATRELL	2022-01-01	ADD		\$2.10
HEARD, LATRELL	2022-01-01	GUARDLOW	EC	\$74.61
HEARD, LATRELL	2022-01-01	VSP	EC	\$15.02
VASQUEZ, BRISA	2022-01-01	GUARDLOW	EE	\$29.44
VASQUEZ, BRISA	2022-01-01	VSP	EE	\$8.75
ZUNIGA, HILDA	2022-01-01	GUARDHIGH	EE	\$47.61

## MEDICAL PLAN COUNTS

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





## Account Services

### Monthly Statement

BUILDING KIDZ SCHOOL LYNNWOOD  
15212 HWY 99  
LYNNWOOD, WA 98087

Invoice Number: 4137-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$0.00**	\$5.46
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
LIFE	Employee Only	1	\$9.43**	\$7.20
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$69.02

BUILDING KIDZ SCHOOL LYNNWOOD  
15212 HWY 99  
LYNNWOOD, WA 98087

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
SEABRON, LEAH	2022-09-01	ADD		\$5.46
SEABRON, LEAH	2022-09-01	LIFE		\$7.20
SEABRON, LEAH	2022-09-01	GUARDHIGH	EE	\$47.61
SEABRON, LEAH	2022-09-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

BUILDING KIDZ SCHOOL OF SAN CARLOS  
1633 LAUREL STREET  
SAN CARLOS, CA 94070

Invoice Number: 4213-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1401OPENAXESSPLATI	Employee Only	1	\$862.95	\$862.95
GUARDHIGH	Employee Only	2	\$47.61	\$95.22
GUARDLOW	Employee Only	1	\$29.44	\$29.44
VSP	Employee Only	2	\$8.75	\$17.50
			GRAND TOTAL	\$1,005.11

BUILDING KIDZ SCHOOL OF SAN CARLOS  
1633 LAUREL STREET  
SAN CARLOS, CA 94070

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
FRIEDLIN, LINDA	2022-01-01	GUARDHIGH	EE	\$47.61
FRIEDLIN, LINDA	2022-01-01	VSP	EE	\$8.75
FRIEDLIN, LINDA	2022-04-01	1401OPENAXESSPLATI	EE	\$862.95
SMITH, JESSICA	2022-05-01	GUARDLOW	EE	\$29.44
SMITH, JESSICA	2022-05-01	VSP	EE	\$8.75
SMITH, NICHOLAS EDGAR CLAY	2022-01-01	GUARDHIGH	EE	\$47.61

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

CADEN CONCEPTS  
13412 VENTURA BLVD.  
SHERMAN OAKS, CA 91423

Invoice Number: 4665-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$56.36

CADEN CONCEPTS  
13412 VENTURA BLVD.  
SHERMAN OAKS, CA 91423

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
SALAS, SIERRA	2021-02-01	GUARDHIGH	EE	\$47.61
SALAS, SIERRA	2021-02-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

CAIR MANAGEMENT LLC  
1633 Broadway Fl 7  
NEW YORK, NY 10019

Invoice Number: 4332-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1609OPENAXESSGOLD	Employee Only	1	\$653.81	\$653.81
1609OPENAXESSGOLD	Family	2	\$1,961.43	\$3,922.86
ADD	Employee Only	1	\$10.50**	\$10.50
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDHIGH	Family	2	\$160.18	\$320.36
LIFE	Employee Only	1	\$87.50**	\$87.50
VSP	Employee Only	1	\$8.75	\$8.75
VSP	Family	2	\$23.76	\$47.52
			GRAND TOTAL	\$5,098.91

CAIR MANAGEMENT LLC  
1633 Broadway Fl 7  
NEW YORK, NY 10019

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
PETERSEN, DONALD	2021-03-01	1609OPENAXESSGOLD	FAM	\$1961.43
PETERSEN, DONALD	2021-04-01	ADD		\$10.50
PETERSEN, DONALD	2021-11-01	GUARDHIGH	FAM	\$160.18
PETERSEN, DONALD	2021-11-01	VSP	FAM	\$23.76
PETERSEN, DONALD	2021-04-01	LIFE		\$87.50
ROHRBACH, JACOB	2022-01-01	1609OPENAXESSGOLD	FAM	\$1961.43
ROHRBACH, JACOB	2022-01-01	GUARDHIGH	FAM	\$160.18
ROHRBACH, JACOB	2022-01-01	VSP	FAM	\$23.76
VEGA, ROBERT	2021-03-01	1609OPENAXESSGOLD	EE	\$653.81
VEGA, ROBERT	2021-11-01	GUARDHIGH	EE	\$47.61
VEGA, ROBERT	2021-11-01	VSP	EE	\$8.75

**MEDICAL PLAN COUNTS**

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





## Account Services

### Monthly Statement

CANAL WORKS ADVERTISING, LLC  
FOUR NESHAMINY INTERPLEX, STE 202  
TREVOSSE, PA 19053

Invoice Number: 4155-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1182OPENAXESSGOLD	Employee & Spouse Only	1	\$1,267.06	\$1,267.06
1182OPENAXESSILVE	Employee Only	1	\$559.14	\$559.14
ADD	Employee Only	1	\$9.24**	\$9.24
CANALWORKSADD	Employee Only	9	\$0.65	\$11.96
GUARDHIGH	Employee & Spouse Only	1	\$89.81	\$89.81
GUARDLOW	Employee & Spouse Only	1	\$55.54	\$55.54
LIFE	Employee Only	3	\$48.00**	\$133.95
VSP	Employee Only	1	\$8.75	\$8.75
VSP	Employee & Spouse Only	2	\$14.73	\$29.46
VSP	Family	1	\$23.76	\$23.76
			GRAND TOTAL	\$2,188.67

CANAL WORKS ADVERTISING, LLC  
 FOUR NESHAMINY INTERPLEX, STE 202  
 TREVOSE, PA 19053

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BASGIL, JOSEPH	2022-08-01	CANALWORKSADD		\$1.70
BASGIL, JOSEPH	2020-01-01	LIFE		\$48.00
BILENKO, LILYA	2022-08-01	CANALWORKSADD		\$1.72
CROWLEY, CHRISTINE E	2022-01-01	CANALWORKSADD		\$1.66
CROWLEY, CHRISTINE E	2022-01-01	1182OPENAXESSGOLD	ES	\$1267.06
CROWLEY, CHRISTINE E	2022-01-01	VSP	ES	\$14.73
GIRTY II, JOHN J	2022-08-01	CANALWORKSADD		\$2.46
GIRTY II, JOHN J	2019-02-01	GUARDLOW	ES	\$55.54
GIRTY II, JOHN J	2019-02-01	VSP	ES	\$14.73
GIUSTI, KRISTIN D	2022-08-01	CANALWORKSADD		\$0.67
GIUSTI, KRISTIN D	2022-01-01	ADD		\$9.24
GIUSTI, KRISTIN D	2022-01-01	GUARDHIGH	ES	\$89.81
GIUSTI, KRISTIN D	2022-01-01	VSP	FAM	\$23.76
GIUSTI, KRISTIN D	2022-01-01	LIFE		\$10.80
KURLYUK, BARBARA	2022-08-01	CANALWORKSADD		\$1.41
LEIGHTON, CAROL	2022-08-01	CANALWORKSADD		\$0.63
LEIGHTON, CAROL	2022-01-01	LIFE		\$75.15
PERILLI, MARISA L	2022-01-01	1182OPENAXESSILVE	EE	\$559.14
PERILLI, MARISA L	2022-01-01	VSP	EE	\$8.75
PERILLI, MARISA L	2022-01-01	CANALWORKSADD		\$1.16
STOFFREGEN, MICHELLE	2022-08-01	CANALWORKSADD		\$0.55

**MEDICAL PLAN COUNTS**

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



## Account Services

### Monthly Statement

CAREMAX SENIOR SOLUTIONS  
2585 E PERRIN AVE  
FRESNO, CA 93720

Invoice Number: 4746-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$4.20**	\$6.30
GUARDHIGH	Family	1	\$160.18	\$160.18
GUARDLOW	Employee & Children	1	\$0.00	\$74.61
LIFE	Employee Only	1	\$4.20**	\$25.58
VSP	Employee & Children	1	\$0.00	\$15.02
VSP	Family	1	\$23.76	\$23.76
			GRAND TOTAL	\$305.45

CAREMAX SENIOR SOLUTIONS  
2585 E PERRIN AVE  
FRESNO, CA 93720

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
HUTTER, TAMMY	2022-01-01	LIFE		\$25.58
HUTTER, TAMMY	2022-01-01	ADD		\$6.30
HUTTER, TAMMY	2022-01-01	GUARDHIGH	FAM	\$160.18
HUTTER, TAMMY	2022-01-01	VSP	FAM	\$23.76
YBARRA, STACY	2022-08-01	GUARDLOW	EC	\$74.61
YBARRA, STACY	2022-08-01	VSP	EC	\$15.02

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

CARING HANDS DUNDALK MD  
49-61 SHIPPING PLACE  
DUNDALK, MD 21222

Invoice Number: 4608-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
0448OPENAXESSPLATI	Family	1	\$0.00	\$2,589.09
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDHIGH	Family	1	\$160.18	\$160.18
GUARDLOW	Employee Only	1	\$29.44	\$29.44
GUARDLOW	Family	1	\$100.74	\$100.74
VSP	Employee Only	2	\$8.75	\$17.50
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
VSP	Family	2	\$23.76	\$47.52
			GRAND TOTAL	\$3,006.81

CARING HANDS DUNDALK MD  
49-61 SHIPPING PLACE  
DUNDALK, MD 21222

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
FINNEY, LAKESHA	2019-02-01	GUARDLOW	EE	\$29.44
KARGMAN, DIMITRY	2022-04-01	GUARDHIGH	FAM	\$160.18
KARGMAN, DIMITRY	2022-04-01	VSP	FAM	\$23.76
KARGMAN, DIMITRY	04/01/2022	0448OPENAXESSPLATI	FAM	\$2589.09
KARGMAN, LARISA	2018-12-01	VSP	EE	\$8.75
KARGMAN, LARISA	2018-03-01	GUARDHIGH	EE	\$47.61
KLEIN, MILANA	2019-01-01	VSP	FAM	\$23.76
KLEIN, MILANA	2018-01-01	GUARDLOW	FAM	\$100.74
MOYD, RICKY	2019-02-01	VSP	ES	\$14.73
THOMPSON, MARY	2019-02-01	VSP	EE	\$8.75

**MEDICAL PLAN COUNTS**

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



## Account Services

### Monthly Statement

CARING HANDS OF GREATER BALTIMORE MD  
49-61 SHIPPING PLACE  
DUNDALK, MD 21222

Invoice Number: 4610-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDLOW	Employee Only	2	\$29.44	\$58.88
LIFE	Employee Only	1	\$49.40**	\$49.40
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$117.03

CARING HANDS OF GREATER BALTIMORE MD  
49-61 SHIPPING PLACE  
DUNDALK, MD 21222

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CAMPBELL, ARCHIE	2019-02-01	GUARDLOW	EE	\$29.44
CAMPBELL, ARCHIE	2019-02-01	VSP	EE	\$8.75
CAMPBELL, ARCHIE	2021-01-01	LIFE		\$49.40
YELVERTON, JAQUELINE	2019-02-01	GUARDLOW	EE	\$29.44

## MEDICAL PLAN COUNTS

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





## Account Services

### Monthly Statement

CARING TRANSITIONS OF CARLSBAD-LA JOLLA  
5651 PALMER WAY  
CARLSBAD, CA 92010

Invoice Number: 4696-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$21.00**	\$21.00
GUARDLOW	Employee Only	1	\$29.44	\$29.44
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$59.19

CARING TRANSITIONS OF CARLSBAD-LA JOLLA  
5651 PALMER WAY  
CARLSBAD, CA 92010

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
LESICKO, DAWN	2019-01-01	ADD		\$21.00
LESICKO, DAWN	2018-03-01	GUARDLOW	EE	\$29.44
LESICKO, DAWN	2018-12-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

CARING TRANSITIONS OF DENTON AND COLLIN COUNTIES  
1201 CHANDLER CIRCLE  
PROSPER, TX 75078

Invoice Number: 4690-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$31.50**	\$31.50
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDHIGH	Employee & Spouse Only	2	\$89.81	\$179.62
LIFE	Employee Only	1	\$103.68**	\$103.68
VSP	Employee & Spouse Only	2	\$14.73	\$29.46
			GRAND TOTAL	\$391.87

CARING TRANSITIONS OF DENTON AND COLLIN COUNTIES  
1201 CHANDLER CIRCLE  
PROSPER, TX 75078

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
DOW, MARYA	2021-01-01	GUARDHIGH	EE	\$47.61
NEWTON, CHARLES	2022-01-01	GUARDHIGH	ES	\$89.81
NEWTON, CHARLES	2022-01-01	VSP	ES	\$14.73
NORRIS, REX	2022-01-01	ADD		\$31.50
NORRIS, REX	2022-01-01	GUARDHIGH	ES	\$89.81
NORRIS, REX	2022-01-01	VSP	ES	\$14.73
NORRIS, REX	2022-01-01	LIFE		\$103.68

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

CHAOS INTELLIGENCE INC  
640 N Wells St Apt 1313  
CHICAGO, IL 60654

Invoice Number: 4360-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1653OPENAXESSBRONZ	Employee Only	1	\$487.36	\$487.36
			GRAND TOTAL	\$487.36

CHAOS INTELLIGENCE INC  
640 N Wells St Apt 1313  
CHICAGO, IL 60654

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
FICHO, BRIAN	2021-04-01	1653OPENAXESSBRONZ EE		\$487.36

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

CIELO24  
1221 STATE STREET  
SANTA BARBARA, CA 93101

Invoice Number: 4248-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1465OPENACESSGOLD	Family	1	\$1,161.52	\$1,161.52
1465OPENAXESSPLATI	Employee Only	5	\$484.50	\$2,422.50
1465OPENAXESSPLATI	Employee & Spouse Only	1	\$961.16	\$961.16
1465OPENAXESSPLATI	Family	2	\$1,222.65	\$2,445.30
ADD	Employee Only	1	\$1.68**	\$1.68
GUARDHIGH	Employee Only	4	\$47.61	\$190.44
GUARDHIGH	Employee & Children	1	\$89.81	\$89.81
GUARDLOW	Employee & Spouse Only	1	\$55.54	\$55.54
GUARDLOW	Employee & Children	1	\$74.61	\$74.61
GUARDLOW	Family	1	\$100.74	\$100.74
LIFE	Employee Only	1	\$4.06**	\$4.06
VSP	Employee Only	5	\$8.75	\$43.75
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
VSP	Employee & Children	1	\$15.02	\$15.02
VSP	Family	1	\$23.76	\$23.76
			GRAND TOTAL	\$7,604.62

CIELO24  
1221 STATE STREET  
SANTA BARBARA, CA 93101

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
AGUIRRE, CYNTHIA	2021-12-01	GUARDLOW	EC2	\$74.61
ESQUEDA, LIZZETTE	2022-01-01	1465OPENAXESSPLATI	FAM	\$1222.65
ESQUEDA, LIZZETTE	2022-01-01	ADD		\$1.68
ESQUEDA, LIZZETTE	2022-01-01	GUARDHIGH	EC	\$89.81
ESQUEDA, LIZZETTE	2021-12-01	VSP	EC	\$15.02
ESQUEDA, LIZZETTE	2022-01-01	LIFE		\$4.06
HAERING, DAVID	2020-10-01	1465OPENAXESSPLATI	EE	\$484.50
HAERING, DAVID	2021-12-01	GUARDHIGH	EE	\$47.61
HAERING, DAVID	2021-12-01	VSP	EE	\$8.75
MCALLISTER, KYLE	2020-10-01	1465OPENAXESSPLATI	EE	\$484.50
MCALLISTER, KYLE	2021-12-01	GUARDHIGH	EE	\$47.61
MCALLISTER, KYLE	2021-12-01	VSP	EE	\$8.75
NAFT, JASON	2022-04-01	1465OPENAXESSPLATI	FAM	\$1222.65
NAFT, JASON	2022-04-01	GUARDLOW	FAM	\$100.74
NAFT, JASON	2022-04-01	VSP	FAM	\$23.76
O'HARA, MCKENZIE	2022-04-01	1465OPENAXESSPLATI	ES	\$961.16
O'HARA, MCKENZIE	2022-04-01	VSP	ES	\$14.73
O'HARA, MCKENZIE	2022-04-01	GUARDLOW	ES	\$55.54
PARK, MITCHELL	2022-01-01	1465OPENAXESSPLATI	EE	\$484.50
SAMARASINGHE, KRISTI	2021-08-01	1465OPENACESSGOLD	FAM	\$1161.52
SAMARASINGHE, KRISTI	2021-12-01	VSP	EE	\$8.75
SOTTAK, CARA	2020-10-01	1465OPENAXESSPLATI	EE	\$484.50
SOTTAK, CARA	2021-12-01	GUARDHIGH	EE	\$47.61
SOTTAK, CARA	2021-12-01	VSP	EE	\$8.75
STEWART, NICOLE	2022-01-01	1465OPENAXESSPLATI	EE	\$484.50
STEWART, NICOLE	2022-01-01	GUARDHIGH	EE	\$47.61



CIELO24  
1221 STATE STREET  
SANTA BARBARA, CA 93101

## CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
STEWARD, NICOLE	2022-01-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

Employee Only	5
Employee & Spouse	1
Employee & Children	0
Family	3



## Account Services

### Monthly Statement

CLARITY COMMUNICATION ADVISORS, INC.  
2 CORPORATE DRIVE  
SOUTHFIELD, MI 48076

Invoice Number: 4577-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	11	\$0.42**	\$117.60
GUARDHIGH	Employee Only	8	\$47.61	\$382.35
GUARDHIGH	Employee & Spouse Only	2	\$89.81	\$179.62
GUARDHIGH	Employee & Children	1	\$117.99	\$117.99
GUARDHIGH	Family	1	\$160.18	\$160.18
GUARDLOW	Employee Only	7	\$29.44	\$206.08
GUARDLOW	Employee & Children	1	\$74.61	\$74.61
GUARDLOW	Family	2	\$100.74	\$201.48
LIFE	Employee Only	13	\$6.00**	\$242.55
VSP	Employee Only	9	\$8.75	\$78.75
VSP	Employee & Spouse Only	2	\$14.73	\$29.46
VSP	Employee & Children	1	\$15.02	\$15.02
VSP	Family	2	\$23.76	\$47.52
			GRAND TOTAL	\$1,853.21

CLARITY COMMUNICATION ADVISORS, INC.  
2 CORPORATE DRIVE  
SOUTHFIELD, MI 48076

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ARENS, TIMOTHY	2022-01-01	ADD		\$21.00
ARENS, TIMOTHY	2022-01-01	GUARDHIGH	EE	\$47.61
ARENS, TIMOTHY	2022-01-01	VSP	EE	\$8.75
BATTLES, JENNIFER	2022-01-01	ADD		\$0.42
BATTLES, JENNIFER	2022-01-01	GUARDHIGH	EE	\$47.61
BATTLES, JENNIFER	2022-01-01	LIFE		\$0.80
CLATTERBAUGH, MELISA	2022-01-01	GUARDLOW	EE	\$29.44
CLATTERBAUGH, MELISA	2022-01-01	ADD		\$4.20
CLATTERBAUGH, MELISA	2022-01-01	VSP	EE	\$8.75
CLATTERBAUGH, MELISA	2022-01-01	LIFE		\$6.60
DAVIS, BRIAN	2022-01-01	GUARDHIGH	EE	\$47.61
DAVIS, BRIAN	2022-01-01	LIFE		\$22.92
DAVIS, LAURIE	2022-01-01	ADD		\$8.40
DAVIS, LAURIE	2022-01-01	GUARDHIGH	EE	\$47.61
DAVIS, LAURIE	2022-01-01	VSP	EE	\$8.75
DAVIS, LAURIE	2022-01-01	LIFE		\$8.25
HERNDON, JENNY	2022-08-01	ADD		\$42.42
HERNDON, JENNY	2022-08-01	LIFE		\$29.40
KENYON, ADAM	2019-01-01	GUARDHIGH	EE	\$47.61
KENYON, ADAM	2020-01-01	VSP	EE	\$8.75
LAPARL, DANNY	2022-01-01	ADD		\$6.30
LAPARL, DANNY	2022-01-01	VSP	FAM	\$23.76
LAPARL, DANNY	2022-01-01	GUARDHIGH	FAM	\$160.18
LAPARL, DANNY	2022-05-01	LIFE		\$14.40
LOOMIS, VICKI	2022-01-01	ADD		\$5.04
LOOMIS, VICKI	2022-01-01	GUARDLOW	EE	\$29.44
LOOMIS, VICKI	2022-01-01	LIFE		\$39.60

CLARITY COMMUNICATION ADVISORS, INC.  
2 CORPORATE DRIVE  
SOUTHFIELD, MI 48076

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
MCBRIDE, JAMES	2022-01-01	ADD		\$11.34
MCBRIDE, JAMES	2022-01-01	GUARDLOW	EE	\$29.44
MCBRIDE, JAMES	2022-01-01	VSP	EE	\$8.75
MCBRIDE, JAMES	2022-06-01	LIFE		\$19.10
MCDERMOTT, JOHN	2022-05-01	LIFE		\$41.25
MCDERMOTT, JOHN	2022-05-01	GUARDHIGH	ES	\$89.81
MORIARTY, SEAN	2022-07-01	ADD		\$8.40
MORIARTY, SEAN	2022-07-01	LIFE		\$14.40
PERRAS, ROSEMARY	2022-01-01	GUARDHIGH	EE	\$47.61
PERRAS, ROSEMARY	2022-01-01	VSP	EE	\$8.75
POGUE, CHRISTIAN	2022-01-01	GUARDHIGH	EE	\$47.61
POGUE, CHRISTIAN	2022-01-01	VSP	EE	\$8.75
RAPHAEL, MARY	2021-01-01	GUARDLOW	EE	\$29.44
RAPHAEL, MARY	2019-06-01	VSP	ES	\$14.73
RUNYAN, JASON	2022-01-01	ADD		\$9.66
RUNYAN, JASON	2022-01-01	GUARDLOW	FAM	\$100.74
RUNYAN, JASON	2022-01-01	LIFE		\$25.58
SADIK, ERIC	2015-12-01	GUARDHIGH	EE	\$49.08
SADIK, ERIC	2017-12-01	GUARDLOW	EE	\$29.44
SPINELLI, STEVEN	2022-01-01	GUARDLOW	EE	\$29.44
SPINELLI, STEVEN	2022-01-01	VSP	EE	\$8.75
STAPLE, LOU ANNE	2022-01-01	GUARDHIGH	ES	\$89.81
STAPLE, LOU ANNE	2022-01-01	VSP	ES	\$14.73
TOBOLSKI, MARTHA	2021-08-01	GUARDLOW	FAM	\$100.74

CLARITY COMMUNICATION ADVISORS, INC.  
2 CORPORATE DRIVE  
SOUTHFIELD, MI 48076

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
TOBOLSKI, MARTHA	2021-08-01	VSP	FAM	\$23.76
VASQUEZ, MARIO	2022-01-01	GUARDLOW	EE	\$29.44
WILLIAMS, TRACY	2022-06-01	ADD		\$0.42
WILLIAMS, TRACY	2022-07-01	LIFE		\$9.55
WILLIAMS, TRACY	2022-06-01	GUARDHIGH	EC2	\$117.99
WILLIAMS, TRACY	2022-06-01	VSP	EC2	\$15.02
WILLIAMS, VICTORIA	2022-01-01	GUARDLOW	EC	\$74.61
WILLIAMS, VICTORIA	2022-01-01	VSP	EE	\$8.75
WILLIAMS, VICTORIA	2022-01-01	LIFE		\$10.70

MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

CLEAN AIR LAWN CARE  
PO BOX 2087  
FORT COLLINS, CO 80522

Invoice Number: 4731-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
0932OPENAXESSGOLD	Employee Only	3	\$443.53	\$1,330.59
ADD	Employee Only	3	\$1.68**	\$26.88
GUARDLOW	Employee Only	3	\$29.44	\$88.32
GUARDLOW	Employee & Spouse Only	1	\$55.54	\$55.54
LIFE	Employee Only	2	\$7.64**	\$172.64
VSP	Employee Only	2	\$8.75	\$17.50
			GRAND TOTAL	\$2,177.39

CLEAN AIR LAWN CARE  
PO BOX 2087  
FORT COLLINS, CO 80522

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
DRABEK, CHRISTOPHER	2022-08-01	0932OPENAXESSGOLD	EE	\$443.53
DRABEK, CHRISTOPHER	2022-08-01	ADD		\$4.20
DRABEK, CHRISTOPHER	2022-08-01	GUARDLOW	EE	\$29.44
DRABEK, CHRISTOPHER	2022-08-01	VSP	EE	\$8.75
GIARD, KELLY	2022-01-01	LIFE		\$165.00
GIARD, KELLY	2022-01-01	0932OPENAXESSGOLD	EE	\$443.53
GIARD, KELLY	2022-01-01	ADD		\$21.00
GIARD, KELLY	2022-01-01	GUARDLOW	EE	\$29.44
MARTIN, DAWN	2022-01-01	0932OPENAXESSGOLD	EE	\$443.53
MARTIN, DAWN	2022-01-01	ADD		\$1.68
MARTIN, DAWN	2022-01-01	GUARDLOW	EE	\$29.44
MARTIN, DAWN	2022-01-01	VSP	EE	\$8.75
MARTIN, DAWN	2022-01-01	LIFE		\$7.64
REYNIER, JUSTIN	2019-01-01	GUARDLOW	ES	\$55.54

CLEAN AIR LAWN CARE  
PO BOX 2087  
FORT COLLINS, CO 80522

## PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
DRABEK, CHRISTOPHER	2022-08-01	0932OPENAXESSGOLD	EE	\$443.53
DRABEK, CHRISTOPHER	2022-08-01	ADD		\$4.20
DRABEK, CHRISTOPHER	2022-08-01	GUARDLOW	EE	\$29.44
DRABEK, CHRISTOPHER	2022-08-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

Employee Only	3
Employee & Spouse	0
Employee & Children	0
Family	0





## Account Services

### Monthly Statement

CLEAN AIR LAWN CARE MARIETTA  
2705 Constant Lndg  
MARIETTA, GA 30066

Invoice Number: 4410-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1718OPENAXESSGOLD	Employee Only	1	\$653.81	\$653.81
1718OPENAXESSGOLD	Family	1	\$1,961.43	\$1,961.43
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
			GRAND TOTAL	\$2,662.85

CLEAN AIR LAWN CARE MARIETTA

2705 Constant Lndg

MARIETTA, GA 30066

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
DOUGLAS, DERRICK	2022-07-01	GUARDHIGH	EE	\$47.61
DOUGLAS, DERRICK	2022-07-01	1718OPENAXESSGOLD	EE	\$653.81
WIERSMA, SETH	2021-07-01	1718OPENAXESSGOLD	FAM	\$1961.43

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

CLOVR LIFE SPA APPLE VALLEY MN  
15730 EMPEROR AVE  
APPLE VALLEY, MN 55124

Invoice Number: 4114-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$56.36

CLOVR LIFE SPA APPLE VALLEY MN  
15730 EMPEROR AVE  
APPLE VALLEY, MN 55124

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
RADCLIFFE, DENISE	2021-06-01	VSP	EE	\$8.75
RADCLIFFE, DENISE	2021-06-01	GUARDHIGH	EE	\$47.61

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

COBALT WORKSPACE

Invoice Number: 5659-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$8.75

## COBALT WORKSPACE

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CROSS, BRANDY	2022-05-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

COMFORT INN & SUITES CAMBRIDGE  
2936 OCEAN GATEWAY  
CAMBRIDGE, MD 21613

Invoice Number: 4736-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDLOW	Employee Only	1	\$29.44	\$29.44
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$38.19

COMFORT INN & SUITES CAMBRIDGE  
2936 OCEAN GATEWAY  
CAMBRIDGE, MD 21613

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
SMITH, GRETCHEN	2019-02-01	VSP	EE	\$8.75
SMITH, GRETCHEN	2019-02-01	GUARDLOW	EE	\$29.44

## MEDICAL PLAN COUNTS

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





## Account Services

### Monthly Statement

COMFORT INN & SUITES DOWNTOWN ALBUQUERQUE

Invoice Number: 5829-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	2	\$2.10**	\$2.73
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
LIFE	Employee Only	2	\$45.09**	\$46.89
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
			GRAND TOTAL	\$111.96

COMFORT INN &amp; SUITES DOWNTOWN ALBUQUERQUE

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
RASCON, IRMA	2022-05-01	ADD		\$2.10
RASCON, IRMA	2022-05-01	LIFE		\$45.09
SMITH, ELIZABETH	2022-08-01	ADD		\$0.63
SMITH, ELIZABETH	2022-08-01	LIFE		\$1.80
SMITH, ELIZABETH	2022-08-01	GUARDHIGH	EE	\$47.61
SMITH, ELIZABETH	2022-08-01	VSP	ES	\$14.73

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

COMFORT INN CHESTERTOWN  
150 SCHEELER ROAD  
CHESTERTOWN, MD 21620

Invoice Number: 4735-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$4.20**	\$4.20
GUARDLOW	Employee Only	2	\$29.44	\$58.88
NEEMAOPENAXESSESSE	Employee Only	1	\$489.70	\$489.70
VSP	Employee Only	2	\$8.75	\$17.50
			GRAND TOTAL	\$570.28

COMFORT INN CHESTERTOWN  
150 SCHEELER ROAD  
CHESTERTOWN, MD 21620

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CURTIS, SHERRY	2022-01-01	NEEMAOPENAXESSESSIEE		\$489.70
CURTIS, SHERRY	2022-01-01	GUARDLOW	EE	\$29.44
CURTIS, SHERRY	2022-01-01	VSP	EE	\$8.75
TILLMAN, ONEIHA	2022-07-01	ADD		\$4.20
WARREN, DAVON	2022-05-01	VSP	EE	\$8.75
WARREN, DAVON	2022-05-01	GUARDLOW	EE	\$29.44

**MEDICAL PLAN COUNTS**

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



## Account Services

### Monthly Statement

COMFORT INN MECHANICSBURG  
1012 WESLEY DRIVE  
MECHANICSBURG, PA 17055

Invoice Number: 4740-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDLOW	Employee Only	1	\$29.44	\$29.44
LIFE	Employee Only	1	\$8.10**	\$1.20
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$39.39

COMFORT INN MECHANICSBURG  
1012 WESLEY DRIVE  
MECHANICSBURG, PA 17055

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
COBAUGH, JENNIFER	2022-09-01	LIFE		\$1.20
PRIAR, LEE	2022-01-01	VSP	EE	\$8.75
PRIAR, LEE	2022-01-01	GUARDLOW	EE	\$29.44

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

COMFORT INN SANTA ROSA

Invoice Number: 5830-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$2.10**	\$2.10
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
LIFE	Employee Only	1	\$4.50**	\$4.50
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$125.92

COMFORT INN SANTA ROSA

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
GRIEGO, JASON	2022-09-01	ADD		\$2.10
GRIEGO, JASON	2022-09-01	LIFE		\$4.50
GRIEGO, JASON	2022-09-01	GUARDHIGH	EE	\$47.61
GRIEGO, JASON	2022-09-01	VSP	EE	\$8.75



COMFORT INN SANTA ROSA

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## PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
GRIEGO, JASON	2022-09-01	ADD		\$2.10
GRIEGO, JASON	2022-09-01	LIFE		\$4.50
GRIEGO, JASON	2022-09-01	GUARDHIGH	EE	\$47.61
GRIEGO, JASON	2022-09-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

COMFORT KEEPERS OREGON  
555 MARTIN LUTHER KING BLVD  
PORTLAND, OR 97214

Invoice Number: 4082-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDLOW	Employee Only	1	\$29.44	\$29.44
LIFE	Employee Only	1	\$29.64**	\$30.06
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
			GRAND TOTAL	\$148.46

COMFORT KEEPERS OREGON  
555 MARTIN LUTHER KING BLVD  
PORTLAND, OR 97214

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
STINEFORD, BERNARD	2022-09-01	LIFE		\$30.06
STINEFORD, BERNARD	2022-09-01	GUARDLOW	EE	\$29.44
STINEFORD, BERNARD	2022-09-01	VSP	ES	\$14.73

COMFORT KEEPERS OREGON  
555 MARTIN LUTHER KING BLVD  
PORTLAND, OR 97214

## PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
STINEFORD, BERNARD	2022-09-01	LIFE		\$30.06
STINEFORD, BERNARD	2022-09-01	GUARDLOW	EE	\$29.44
STINEFORD, BERNARD	2022-09-01	VSP	ES	\$14.73

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

COMMUNITY SETTLEMENTS  
340 East Patrick Street  
FREDERICK, MD 21701

Invoice Number: 4312-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1583OPENAXESSGOLD	Employee Only	1	\$719.19	\$719.19
1583OPENAXESSGOLD	Family	1	\$2,157.57	\$2,157.57
GUARDLOW	Family	1	\$100.74	\$100.74
VSP	Employee Only	1	\$8.75	\$8.75
VSP	Family	1	\$23.76	\$23.76
			GRAND TOTAL	\$3,010.01

## COMMUNITY SETTLEMENTS

340 East Patrick Street  
FREDERICK, MD 21701

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BURHANS, KATHRYN	2022-04-01	GUARDLOW	FAM	\$100.74
BURHANS, KATHRYN	2022-04-01	VSP	FAM	\$23.76
BURHANS, KATHRYN	2022-04-01	1583OPENAXESSGOLD	FAM	\$2157.57
WILLETT, CATHY	2022-01-01	VSP	EE	\$8.75
WILLETT, CATHY	2022-04-01	1583OPENAXESSGOLD	EE	\$719.19

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

CONCRETE CRAFT OF CHARLOTTE  
1715 ROCK REST ROAD  
WINGATE, NC 28174

Invoice Number: 4131-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
			GRAND TOTAL	\$47.61

CONCRETE CRAFT OF CHARLOTTE  
1715 ROCK REST ROAD  
WINGATE, NC 28174

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
PHILLIPS, LINDSEY	2022-01-01	GUARDHIGH	EE	\$47.61

## MEDICAL PLAN COUNTS

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





**Account Services**  
**Monthly Statement**

CONGRESSIONAL INSURANCE  
12505 PARK POTOMAC AVE  
POTOMAC, MD 20854

Invoice Number: 4176-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$8.75

CONGRESSIONAL INSURANCE  
12505 PARK POTOMAC AVE  
POTOMAC, MD 20854

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
VASQUEZ, CONSUELO	2019-01-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

CONSOLIDATED PACKAGING GROUP

Invoice Number: 5764-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1926OPENAXESSGOLD	Employee Only	17	\$854.13	\$14,520.21
1926OPENAXESSGOLD	Employee & Spouse Only	7	\$1,760.69	\$12,324.83
1926OPENAXESSGOLD	Employee & Children	7	\$1,595.85	\$11,170.95
1926OPENAXESSGOLD	Family	1	\$2,502.41	\$2,502.41
1926OPENAXESSPLATI	Employee Only	4	\$936.54	\$3,746.16
1926OPENAXESSPLATI	Employee & Spouse Only	2	\$1,933.76	\$3,867.52
1926OPENAXESSPLATI	Family	1	\$2,749.65	\$2,749.65
1926OPENAXESSSILVE	Employee Only	17	\$779.21	\$13,246.57
1926OPENAXESSSILVE	Employee & Spouse Only	4	\$1,603.35	\$6,413.40
1926OPENAXESSSILVE	Employee & Children	2	\$1,453.50	\$2,907.00
1926OPENAXESSSILVE	Family	2	\$2,277.64	\$4,555.28
ADD	Employee Only	18	\$2.52**	\$119.49
GUARDHIGH	Employee Only	19	\$47.61	\$904.59
GUARDHIGH	Employee & Spouse Only	12	\$89.81	\$1,077.72
GUARDHIGH	Employee & Children	1	\$117.99	\$117.99
GUARDHIGH	Family	4	\$160.18	\$640.72
GUARDLOW	Employee Only	17	\$29.44	\$500.48
GUARDLOW	Employee & Spouse Only	3	\$55.54	\$166.62
GUARDLOW	Employee & Children	4	\$74.61	\$298.44
GUARDLOW	Family	4	\$100.74	\$402.96
LIFE	Employee Only	17	\$10.10**	\$332.72
VSP	Employee Only	31	\$8.75	\$271.25
VSP	Employee & Spouse Only	14	\$14.73	\$206.22
VSP	Employee & Children	7	\$15.02	\$105.14
VSP	Family	5	\$23.76	\$118.80
			GRAND TOTAL	\$84,168.86

**CONSOLIDATED PACKAGING GROUP**

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**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ACKER, SAMANTHA	2022-03-01	GUARDHIGH	EE	\$47.61
ACKER, SAMANTHA	2022-03-01	1926OPENAXESSILVE	EE	\$779.21
ACKER, SAMANTHA	2022-03-01	VSP	EE	\$8.75
ANDERSON, KYE	2022-03-01	GUARDLOW	EC	\$74.61
ANDERSON, KYE	2022-03-01	1926OPENAXESSGOLD	EC	\$1595.85
ANDERSON, KYE	2022-03-01	VSP	EC	\$15.02
ARNOLD, MARK	2022-03-01	GUARDHIGH	EE	\$47.61
ARNOLD, MARK	2022-03-01	1926OPENAXESSGOLD	EE	\$854.13
ARNOLD, MARK	2022-03-01	VSP	EE	\$8.75
ARROYO, ELESVAN	2022-03-01	GUARDLOW	EE	\$29.44
ARROYO, ELESVAN	2022-03-01	1926OPENAXESSILVE	EE	\$779.21
ARROYO, ELESVAN	2022-03-01	VSP	EE	\$8.75
ARROYO, ELESVAN	2022-03-01	ADD		\$0.42
ARROYO, ELESVAN	2022-03-01	LIFE		\$0.80
BARTLEY, KEN	2022-03-01	GUARDHIGH	FAM	\$160.18
BARTLEY, KEN	2022-03-01	1926OPENAXESSGOLD	FAM	\$2502.41
BARTLEY, KEN	2022-03-01	VSP	FAM	\$23.76
BEEBE, TINA	2022-03-01	GUARDLOW	EE	\$29.44
BEEBE, TINA	2022-03-01	1926OPENAXESSGOLD	EE	\$854.13
BEEBE, TINA	2022-03-01	VSP	EE	\$8.75
BELLMAN, GREGORY	2022-03-01	GUARDHIGH	EE	\$47.61
BELLMAN, GREGORY	2022-03-01	1926OPENAXESSPLATI	EE	\$936.54
BELLMAN, GREGORY	2022-03-01	VSP	EE	\$8.75
BOWLING, LESTER	2022-03-01	GUARDHIGH	ES	\$89.81
BOWLING, LESTER	2022-03-01	1926OPENAXESSGOLD	EE	\$854.13
BOWLING, LESTER	2022-03-01	VSP	ES	\$14.73
BOWLING, LESTER	2022-03-01	ADD		\$4.20
BOWLING, LESTER	2022-03-01	LIFE		\$47.85

**CONSOLIDATED PACKAGING GROUP**

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**CURRENT MONTH ENROLLMENT (CONTINUED)**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BROADNAX, CHASITY	2022-03-01	GUARDHIGH	EE	\$47.61
BROADNAX, CHASITY	2022-03-01	1926OPENAXESSILVE	EE	\$779.21
BROADNAX, CHASITY	2022-03-01	VSP	EE	\$8.75
BRONSTON, DEBRA	2022-03-01	GUARDLOW	EE	\$29.44
BRONSTON, DEBRA	2022-03-01	1926OPENAXESSILVE	EE	\$779.21
BRONSTON, DEBRA	2022-03-01	VSP	EE	\$8.75
CABALLERO, ANGEL	2022-03-01	GUARDLOW	EE	\$29.44
CABALLERO, ANGEL	2022-03-01	VSP	EE	\$8.75
CARMICHAEL, RYAN	2022-03-01	GUARDLOW	FAM	\$100.74
CARMICHAEL, RYAN	2022-03-01	1926OPENAXESSILVE	FAM	\$2277.64
CARMICHAEL, RYAN	2022-03-01	VSP	FAM	\$23.76
CARRARO, ANDREW	2022-10-01	GUARDHIGH	EE	\$47.61
CARRARO, ANDREW	2022-10-01	1926OPENAXESSPLATI	EE	\$936.54
CASON, PHILLIP	2022-03-01	GUARDHIGH	ES	\$89.81
CASON, PHILLIP	2022-03-01	1926OPENAXESSGOLD	ES	\$1760.69
CASON, PHILLIP	2022-03-01	VSP	ES	\$14.73
COLE, JAMES	2022-03-01	GUARDLOW	ES	\$55.54
COLE, JAMES	2022-03-01	1926OPENAXESSGOLD	ES	\$1760.69
COLE, JAMES	2022-03-01	VSP	ES	\$14.73
CROCKATT, LAURA	2022-09-01	GUARDHIGH	EE	\$47.61
CROCKATT, LAURA	2022-09-01	1926OPENAXESSGOLD	EE	\$854.13
CROCKATT, LAURA	2022-09-01	VSP	EE	\$8.75
DETRO, AMELIA	2022-06-08	GUARDHIGH	FAM	\$160.18
DETRO, AMELIA	2022-06-08	1926OPENAXESSGOLD	EC2	\$1595.85
DETRO, AMELIA	2022-06-08	VSP	FAM	\$23.76

**CONSOLIDATED PACKAGING GROUP**

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**CURRENT MONTH ENROLLMENT (CONTINUED)**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
DETRO, JAMIE	2022-05-21	1926OPENAXESSILVE	ES	\$1603.35
DETRO, JAMIE	2022-05-21	GUARDHIGH	ES	\$89.81
DETRO, JAMIE	2022-03-01	1926OPENAXESSGOLD	EE	\$854.13
DETRO, JAMIE	2022-05-21	VSP	ES	\$14.73
DETRO, TAMMY	2022-08-29	GUARDHIGH	EE	\$47.61
DETRO, TAMMY	2022-08-29	1926OPENAXESSGOLD	EC2	\$1595.85
DETRO, TAMMY	2022-08-29	VSP	EE	\$8.75
DETRO, TAMMY	2022-03-01	ADD		\$10.92
DETRO, TAMMY	2022-03-01	LIFE		\$9.88
DONA, MARTHA	2022-03-01	GUARDLOW	EE	\$29.44
DONA, MARTHA	2022-03-01	1926OPENAXESSILVE	EE	\$779.21
DONA, MARTHA	2022-03-01	VSP	EE	\$8.75
DORRIS, LAURA	2022-10-01	GUARDHIGH	EE	\$47.61
DORRIS, LAURA	2022-10-01	1926OPENAXESSILVE	EE	\$779.21
DORRIS, LAURA	2022-10-01	VSP	EE	\$8.75
DOWNEY, BRANDY	2022-03-01	ADD		\$0.42
DOWNEY, BRANDY	2022-03-01	LIFE		\$2.56
DOWNEY, BRANDY	2022-03-01	GUARDLOW	FAM	\$100.74
DOWNEY, BRANDY	2022-03-01	VSP	EC2	\$15.02
EDMISTEN, NICHOLAS	2022-03-01	GUARDLOW	EC2	\$74.61
EDMISTEN, NICHOLAS	2022-03-01	1926OPENAXESSGOLD	EC2	\$1595.85
ELAM, DONALD	2022-03-01	1926OPENAXESSILVE	EE	\$779.21
ERNST, BRADY	2022-03-01	GUARDHIGH	EE	\$47.61
ERNST, BRADY	2022-03-01	1926OPENAXESSILVE	EE	\$779.21
FISCHER, MICHAEL	2022-03-01	1926OPENAXESSILVE	EE	\$779.21

**CONSOLIDATED PACKAGING GROUP**

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**CURRENT MONTH ENROLLMENT (CONTINUED)**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
FOSTER, FRANK	2022-03-01	GUARDLOW	EE	\$29.44
FOSTER, FRANK	2022-03-01	VSP	EE	\$8.75
FRANK, JASON	2022-06-01	ADD		\$2.52
FRANK, JASON	2022-06-01	LIFE		\$10.10
FRANK, JASON	2022-06-01	GUARDHIGH	EC2	\$117.99
FRANK, JASON	2022-06-01	1926OPENAXESSGOLD	EC2	\$1595.85
FRANK, JASON	2022-06-01	VSP	EC2	\$15.02
GODBEY, TERRY	2022-03-01	GUARDLOW	EE	\$29.44
GODBEY, TERRY	2022-03-01	1926OPENAXESSGOLD	EE	\$854.13
GONZALEZ, JORGE	2022-03-01	ADD		\$4.20
GONZALEZ, JORGE	2022-03-01	LIFE		\$59.28
GONZALEZ, JORGE	2022-03-01	GUARDHIGH	EE	\$47.61
GONZALEZ, JORGE	2022-03-01	1926OPENAXESSPLATI	EE	\$936.54
GONZALEZ, JORGE	2022-03-01	VSP	EE	\$8.75
GRAHAM, CLEON	2022-03-01	ADD		\$0.42
GRAHAM, CLEON	2022-03-01	LIFE		\$1.91
GRAHAM, CLEON	2022-03-01	GUARDLOW	FAM	\$100.74
GRAHAM, CLEON	2022-03-01	1926OPENAXESSGOLD	EC2	\$1595.85
GRAHAM, CLEON	2022-03-01	VSP	EC2	\$15.02
GREELY, PATRICK	2022-03-01	GUARDLOW	FAM	\$100.74
GREELY, PATRICK	2022-03-01	1926OPENAXESSILVE	EC2	\$1453.50
GREELY, PATRICK	2022-03-01	VSP	ES	\$14.73
HAGAMAN, KELLY	2022-03-01	ADD		\$2.52
HAGAMAN, KELLY	2022-03-01	GUARDLOW	ES	\$55.54
HAGAMAN, KELLY	2022-03-01	1926OPENAXESSILVE	ES	\$1603.35
HAGAMAN, KELLY	2022-03-01	VSP	ES	\$14.73

**CONSOLIDATED PACKAGING GROUP**

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**CURRENT MONTH ENROLLMENT (CONTINUED)**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
HENRICHSON, NANCY	2022-04-01	ADD		\$10.50
HERRINGTON, STEPHEN	2022-07-21	1926OPENAXESSILVE	ES	\$1603.35
HERRINGTON, STEPHEN	2022-07-21	ADD		\$8.40
HERRINGTON, STEPHEN	2022-03-01	LIFE		\$24.70
HERRINGTON, STEPHEN	2022-07-21	GUARDLOW	ES	\$55.54
HERRINGTON, STEPHEN	2022-03-01	1926OPENAXESSGOLD	EE	\$854.13
HERRINGTON, STEPHEN	2022-07-21	VSP	ES	\$14.73
HOLLENDER, BERL	2022-03-01	GUARDHIGH	EE	\$47.61
JACK, SUZANNE	2022-03-01	ADD		\$33.60
JACK, SUZANNE	2022-09-01	LIFE		\$53.63
JACK, SUZANNE	2022-03-01	GUARDHIGH	ES	\$89.81
JACK, SUZANNE	2022-03-01	1926OPENAXESSPLATI	ES	\$1933.76
JACK, SUZANNE	2022-03-01	VSP	ES	\$14.73
JONES, TIM	2022-03-01	GUARDLOW	EE	\$29.44
JONES, TIM	2022-03-01	1926OPENAXESSGOLD	EE	\$854.13
JONES, TIM	2022-03-01	VSP	EE	\$8.75
KAUFMAN, GARY	2022-03-01	1926OPENAXESSPLATI	FAM	\$2749.65
KAUFMAN, GARY	2022-03-01	GUARDHIGH	FAM	\$160.18
KAUFMAN, GARY	2022-03-01	VSP	FAM	\$23.76
KLAUSING, ANTHONY	2022-03-01	ADD		\$4.20
KLAUSING, ANTHONY	2022-03-01	LIFE		\$39.52
KLENKE, KELLY	2022-03-01	GUARDHIGH	EE	\$47.61
KLENKE, KELLY	2022-03-01	1926OPENAXESSILVE	EE	\$779.21
KLENKE, KELLY	2022-03-01	VSP	EE	\$8.75
KNUCKLES, ARTHUR	2022-03-01	GUARDLOW	EE	\$29.44



**CONSOLIDATED PACKAGING GROUP**

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**CURRENT MONTH ENROLLMENT (CONTINUED)**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
KNUCKLES, ARTHUR	2022-03-01	1926OPENAXESSGOLD	EE	\$854.13
KNUCKLES, ARTHUR	2022-03-01	VSP	EE	\$8.75
KOLB, KAYE	2022-03-01	GUARDLOW	EE	\$29.44
KOLB, KAYE	2022-03-01	1926OPENAXESSGOLD	ES	\$1760.69
KOLB, KAYE	2022-03-01	VSP	EE	\$8.75
KUHLMANN, BUDDY	2022-03-01	GUARDLOW	EE	\$29.44
KUHLMANN, BUDDY	2022-03-01	1926OPENAXESSILVE	EE	\$779.21
KUHLMANN, BUDDY	2022-03-01	VSP	EE	\$8.75
KUMPULA, SUSAN	2022-03-01	ADD		\$10.50
KUMPULA, SUSAN	2022-03-01	GUARDHIGH	EE	\$47.61
KUMPULA, SUSAN	2022-03-01	1926OPENAXESSPLATI	EE	\$936.54
KUMPULA, SUSAN	2022-03-01	VSP	EE	\$8.75
KUSZYNSKI, ANDREW	2022-03-01	1926OPENAXESSGOLD	EE	\$854.13
KUSZYNSKI, ANDREW	2022-03-01	ADD		\$8.40
KUSZYNSKI, ANDREW	2022-03-01	GUARDHIGH	ES	\$89.81
KUSZYNSKI, ANDREW	2022-03-01	VSP	ES	\$14.73
LEETH, PAUL	2022-03-01	GUARDHIGH	EE	\$47.61
LEETH, PAUL	2022-03-01	1926OPENAXESSGOLD	EE	\$854.13
LEETH, PAUL	2022-03-01	VSP	ES	\$14.73
LINGREL, CODY	2022-03-01	GUARDHIGH	EE	\$47.61
LINGREL, CODY	2022-03-01	1926OPENAXESSGOLD	EE	\$854.13
LINGREL, CODY	2022-03-01	VSP	EE	\$8.75
MANN, ABRAHAM	2022-03-01	GUARDHIGH	ES	\$89.81
MANN, ABRAHAM	2022-03-01	1926OPENAXESSPLATI	ES	\$1933.76
MCCOY, JESSICA	2022-03-01	ADD		\$5.04

**CONSOLIDATED PACKAGING GROUP**

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**CURRENT MONTH ENROLLMENT (CONTINUED)**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
MCCOY, JESSICA	2022-03-01	LIFE		\$14.40
MCCOY, JESSICA	2022-03-01	GUARDLOW	EE	\$29.44
MCCOY, JESSICA	2022-03-01	1926OPENAXESSILVE	EE	\$779.21
MCCOY, JESSICA	2022-03-01	VSP	EE	\$8.75
MEJIA, JOSE	2022-03-01	1926OPENAXESSILVE	EE	\$779.21
MERIDETH, LONNIE	2022-03-01	ADD		\$8.40
MERIDETH, LONNIE	2022-03-01	LIFE		\$24.70
MERIDETH, LONNIE	2022-03-01	GUARDHIGH	ES	\$89.81
MERIDETH, LONNIE	2022-03-01	1926OPENAXESSILVE	ES	\$1603.35
MERIDETH, LONNIE	2022-03-01	VSP	ES	\$14.73
MESSALA, ELMOSTAFA	2022-03-01	GUARDLOW	EE	\$29.44
MESSALA, ELMOSTAFA	2022-03-01	1926OPENAXESSILVE	EE	\$779.21
MESSALA, ELMOSTAFA	2022-03-01	VSP	EE	\$8.75
NELSON, JASON	2022-03-01	GUARDLOW	EE	\$29.44
NELSON, JASON	2022-03-01	1926OPENAXESSILVE	EE	\$779.21
NELSON, JASON	2022-03-01	VSP	EE	\$8.75
NORTON I, TRENT	2022-05-01	GUARDHIGH	FAM	\$160.18
NORTON I, TRENT	2022-05-01	1926OPENAXESSILVE	FAM	\$2277.64
NORTON I, TRENT	2022-05-01	VSP	FAM	\$23.76
OMBA, CHRISTIAN	2022-07-01	GUARDLOW	EE	\$29.44
OMBA, CHRISTIAN	2022-07-01	VSP	EE	\$8.75
PACE SCOTT, SARYAH	2022-03-01	LIFE		\$6.00
PARSONS, JAMES	2022-03-01	1926OPENAXESSGOLD	EE	\$854.13
PARSONS, JAMES	2022-03-01	VSP	EE	\$8.75
PINON, BRAIEN	2022-03-01	GUARDHIGH	EE	\$47.61

**CONSOLIDATED PACKAGING GROUP**

,

**CURRENT MONTH ENROLLMENT (CONTINUED)**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
PINON, BRAIEN	2022-03-01	1926OPENAXESSILVE	EE	\$779.21
ROPER, JARRELL	2022-03-01	GUARDLOW	EE	\$29.44
ROPER, JARRELL	2022-03-01	1926OPENAXESSGOLD	EE	\$854.13
ROPER, JARRELL	2022-06-01	VSP	EC	\$15.02
SCHIPPERS, CAROLYN	2022-03-01	GUARDLOW	EC	\$74.61
SCHIPPERS, CAROLYN	2022-03-01	1926OPENAXESSGOLD	EC	\$1595.85
SCHIPPERS, CAROLYN	2022-03-01	VSP	EC	\$15.02
SHIELDS, PARIS	2022-03-01	ADD		\$0.63
SHIELDS, PARIS	2022-03-01	LIFE		\$1.80
SHIELDS, PARIS	2022-03-01	GUARDHIGH	ES	\$89.81
SHIELDS, PARIS	2022-03-01	1926OPENAXESSGOLD	ES	\$1760.69
SHIELDS, PARIS	2022-03-01	VSP	EE	\$8.75
SPERRY, AIMEE	2022-03-01	GUARDHIGH	EE	\$47.61
SPERRY, AIMEE	2022-03-01	1926OPENAXESSGOLD	EE	\$854.13
SPERRY, AIMEE	2022-03-01	VSP	EE	\$8.75
STICKROD, ROBERT	2022-03-01	ADD		\$4.20
STICKROD, ROBERT	2022-03-01	LIFE		\$11.25
STICKROD, ROBERT	2022-03-01	GUARDHIGH	ES	\$89.81
STICKROD, ROBERT	2022-03-01	1926OPENAXESSGOLD	ES	\$1760.69
STICKROD, ROBERT	2022-03-01	VSP	ES	\$14.73
SYLLA, FANTA	2022-03-01	GUARDLOW	EC	\$74.61
SYLLA, FANTA	2022-03-01	1926OPENAXESSILVE	EC	\$1453.50
SYLLA, FANTA	2022-03-01	VSP	EC	\$15.02
THRUSH, ALICE	2022-03-01	GUARDLOW	EE	\$29.44
THRUSH, ALICE	2022-03-01	1926OPENAXESSGOLD	EE	\$854.13
THRUSH, ALICE	2022-03-01	VSP	EE	\$8.75

**CONSOLIDATED PACKAGING GROUP**

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**CURRENT MONTH ENROLLMENT (CONTINUED)**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
TOMEI, MARIO	2022-03-01	GUARDHIGH	ES	\$89.81
TOMEI, MARIO	2022-03-01	1926OPENAXESSGOLD	ES	\$1760.69
TOMEI, MARIO	2022-03-01	VSP	ES	\$14.73
WALDMAN, ANDREW	2022-03-01	LIFE		\$17.19
WALDMAN, ANDREW	2022-03-01	GUARDHIGH	EE	\$47.61
WALDMAN, ANDREW	2022-03-01	1926OPENAXESSGOLD	EE	\$854.13
WALDMAN, ANDREW	2022-03-01	VSP	EE	\$8.75
WEINBERGER, MOSHE	2022-07-01	GUARDHIGH	ES	\$89.81
WILLIAMS, DARLENE	2022-03-01	GUARDHIGH	EE	\$47.61
WILLIAMS, DARLENE	2022-03-01	1926OPENAXESSILVE	EE	\$779.21
WILLIAMS, DARLENE	2022-03-01	VSP	EE	\$8.75
WILLIAMS, DARLENE	2022-03-01	LIFE		\$7.15
WITTE, WILLAM	2022-03-01	GUARDHIGH	ES	\$89.81
WITTE, WILLAM	2022-03-01	1926OPENAXESSGOLD	ES	\$1760.69
WITTE, WILLAM	2022-03-01	VSP	ES	\$14.73

## CONSOLIDATED PACKAGING GROUP

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## PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CROCKATT, LAURA	2022-09-01	GUARDHIGH	EE	\$47.61
CROCKATT, LAURA	2022-09-01	1926OPENAXESSGOLD	EE	\$854.13

## MEDICAL PLAN COUNTS

Employee Only	38
Employee & Spouse	13
Employee & Children	3
Family	4



## Account Services

### Monthly Statement

CORSTONE CAPITAL  
6707 DEMOCRACY BLVD. SUITE 905  
BETHESDA, MD 20817

Invoice Number: 4693-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDHIGH	Employee & Spouse Only	1	\$89.81	\$89.81
GUARDHIGH	Family	1	\$160.18	\$160.18
VSP	Employee Only	1	\$8.75	\$8.75
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
			GRAND TOTAL	\$321.08

CORSTONE CAPITAL  
6707 DEMOCRACY BLVD. SUITE 905  
BETHESDA, MD 20817

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
HAWK, ALBERT	2022-01-01	GUARDHIGH	ES	\$89.81
HAWK, ALBERT	2022-01-01	VSP	ES	\$14.73
MERCADER PEREZ, MYRIAM	2022-01-01	GUARDHIGH	FAM	\$160.18
SIPES, LAURIE	2022-01-01	GUARDHIGH	EE	\$47.61
SIPES, LAURIE	2022-01-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

CREWMEUP  
530 7TH AVENUE  
NEW YORK, NY 10018

Invoice Number: 4235-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1439CIGNAPREMIUM	Employee Only	2	\$500.00	\$1,000.00
1439CIGNAPREMIUM	Employee & Spouse Only	1	\$1,000.00	\$1,000.00
1439CIGNAPRIME	Employee Only	1	\$574.63	\$574.63
1439GUARDIANDENTAL	Employee Only	3	\$38.75	\$116.25
			GRAND TOTAL	\$2,690.88



CREWMEUP  
530 7TH AVENUE  
NEW YORK, NY 10018

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
FRIEDMAN, JOSHUA	2020-12-01	1439CIGNAPREMIUM	EE	\$500.00
FRIEDMAN, JOSHUA	2020-12-01	1439GUARDIANDENTAL	EE	\$38.75
KRIM, JESSE	2021-03-17	1439CIGNAPREMIUM	ES	\$1000.00
NACHAMPASSAK, VORAVONG	2020-12-01	1439CIGNAPREMIUM	EE	\$500.00
NACHAMPASSAK, VORAVONG	2020-12-01	1439GUARDIANDENTAL	EE	\$38.75
STOKES, JENNIFER	2021-04-01	1439CIGNAPRIME	EE	\$574.63
STOKES, JENNIFER	2021-04-01	1439GUARDIANDENTAL	EE	\$38.75

**MEDICAL PLAN COUNTS**

Employee Only	3
Employee & Spouse	1
Employee & Children	0
Family	0



## Account Services

### Monthly Statement

CTRUST STAFFING  
2143 HURLEY WAY  
SACRAMENTO, CA 95825

Invoice Number: 4234-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1438OPENAXESSBRONZ	Employee & Children	1	\$888.23	\$888.23
1438OPENAXESSCOPPE	Employee Only	1	\$360.60	\$360.60
1438OXCOPPEROWNERSE	Employee Only	2	\$360.60	\$721.20
GUARDLOW	Employee & Children	3	\$74.61	\$223.83
VSP	Employee & Children	3	\$15.02	\$45.06
			GRAND TOTAL	\$2,238.92

CTRUST STAFFING  
2143 HURLEY WAY  
SACRAMENTO, CA 95825

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BARAJAS, ADRIAN ARTURO	2022-07-01	GUARDLOW	EC	\$74.61
BARAJAS, ADRIAN ARTURO	2022-07-01	VSP	EC	\$15.02
DOMINGUEZ, PAULO	2021-01-01	GUARDLOW	EC	\$74.61
DOMINGUEZ, PAULO	2021-01-01	VSP	EC	\$15.02
ELMS, JACOB R.	2022-07-01	GUARDLOW	EC	\$74.61
ELMS, JACOB R.	2022-07-01	VSP	EC	\$15.02
MONTEZ, JOHN	2022-02-01	1438OPENAXESSBRONZ	EC	\$888.23
PARRAZ, CORINA	2021-02-01	1438OXCOPPEROWNER	SEE	\$360.60
QUIROZ, ERIKA	2021-02-01	1438OPENAXESSCOPPE	EE	\$360.60
QUIROZ, ERIKA	2021-02-01	1438OXCOPPEROWNER	SEE	\$360.60

**MEDICAL PLAN COUNTS**

Employee Only	3
Employee & Spouse	0
Employee & Children	1
Family	0



## Account Services

### Monthly Statement

DATA CONNECXION  
13501 Katy Fwy # 3120  
HOUSTON, TX 77079

Invoice Number: 4498-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1830OPENAXESSBRONZ	Employee Only	1	\$536.10	\$536.10
1830OPENAXESSGOLD	Employee Only	1	\$719.19	\$719.19
1830OPENAXESSPLATI	Employee & Spouse Only	1	\$1,726.05	\$1,726.05
1830OPENAXESSPLATI	Family	2	\$2,589.09	\$5,178.18
1830OPENAXESSSILVE	Employee Only	1	\$603.00	\$603.00
ADD	Employee Only	1	\$21.00**	\$2.10
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDLOW	Employee & Spouse Only	1	\$55.54	\$55.54
LIFE	Employee Only	2	\$0.60**	\$4.80
VSP	Employee Only	2	\$8.75	\$17.50
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
			GRAND TOTAL	\$8,904.80

DATA CONNECXION  
13501 Katy Fwy # 3120  
HOUSTON, TX 77079

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CLARK, COURTNEY	2021-12-01	1830OPENAXESSPLATI	FAM	\$2589.09
GHANCHI, NIDA	2022-02-01	1830OPENAXESSPLATI	FAM	\$2589.09
HILLIER, CARTER	2022-04-01	1830OPENAXESSBRONZ	EE	\$536.10
HILLIER, CARTER	2022-04-01	VSP	EE	\$8.75
HILLIER, CARTER	2022-04-01	LIFE		\$0.60
LE, MINDY	2022-03-01	1830OPENAXESSILVE	EE	\$603.00
MARTINEZ, ADRIANA	2022-02-01	ADD		\$2.10
MARTINEZ, ADRIANA	2022-02-01	GUARDHIGH	EE	\$47.61
MARTINEZ, ADRIANA	2022-02-01	1830OPENAXESSGOLD	EE	\$719.19
MARTINEZ, ADRIANA	2022-02-01	VSP	EE	\$8.75
MARTINEZ, ADRIANA	2022-02-01	LIFE		\$4.20
TAHIR, MUHAMMAD AJLAN	2022-03-01	GUARDLOW	ES	\$55.54
TAHIR, MUHAMMAD AJLAN	2022-03-01	1830OPENAXESSPLATI	ES	\$1726.05
TAHIR, MUHAMMAD AJLAN	2022-03-01	VSP	ES	\$14.73

**MEDICAL PLAN COUNTS**

Employee Only	3
Employee & Spouse	1
Employee & Children	0
Family	2



## Account Services

### Monthly Statement

DAVID S. WEISS, MD

Invoice Number: 5546-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1903OPENAXESSPLATI	Employee Only	1	\$862.95	\$862.95
ADD	Employee Only	1	\$4.20**	\$4.20
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
LIFE	Employee Only	1	\$19.76**	\$19.76
VSP	Employee Only	1	\$8.75	\$8.75
GRAND TOTAL				\$943.27

DAVID S. WEISS, MD

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
KORTRIGHT, RUTH	2022-02-01	LIFE		\$19.76
KORTRIGHT, RUTH	2022-02-01	ADD		\$4.20
KORTRIGHT, RUTH	2022-02-01	GUARDHIGH	EE	\$47.61
KORTRIGHT, RUTH	2022-02-01	1903OPENAXESSPLATI	EE	\$862.95
KORTRIGHT, RUTH	2022-02-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

DEW WEALTH MANAGEMENT LLC

Invoice Number: 5846-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	2	\$4.20**	\$12.60
GUARDLOW	Employee Only	1	\$29.44	\$29.44
LIFE	Employee Only	2	\$9.60**	\$16.80
VSP	Employee Only	1	\$14.73	\$8.75
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
GRAND TOTAL				\$135.24



DEW WEALTH MANAGEMENT LLC

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## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
DAVIS, LAURA	2022-09-01	VSP	ES	\$14.73
SCHANAFELT, ROBYN	2022-09-01	ADD		\$8.40
STOBB, BRYAN	2022-07-01	ADD		\$4.20
STOBB, BRYAN	2022-07-01	LIFE		\$9.60
TINGLE, DREW	2022-09-01	GUARDLOW	EE	\$29.44
TINGLE, DREW	2022-09-01	VSP	EE	\$8.75
WEAVER, PRESTON	2022-07-01	LIFE		\$7.20

DEW WEALTH MANAGEMENT LLC

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## PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
DAVIS, LAURA	2022-09-01	VSP	ES	\$14.73
TINGLE, DREW	2022-09-01	GUARDLOW	EE	\$29.44
TINGLE, DREW	2022-09-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

DTX DIGITAL TRANSFORMATION  
43661 Catton Pl  
ASHBURN, VA 20147

Invoice Number: 4424-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1740OPENAXESSBRONZ	Employee & Children	1	\$986.92	\$986.92
1740OPENAXESSCOPPE	Employee Only	2	\$450.75	\$901.50
1740OPENAXESSGOLD	Employee Only	2	\$653.81	\$1,307.62
ADD	Employee Only	1	\$4.20**	\$4.20
GUARDHIGH	Employee & Children	1	\$117.99	\$117.99
GUARDHIGH	Family	1	\$160.18	\$160.18
GUARDLOW	Employee Only	3	\$29.44	\$88.32
LIFE	Employee Only	3	\$0.60**	\$41.46
VSP	Employee Only	4	\$8.75	\$35.00
VSP	Employee & Children	1	\$15.02	\$15.02
			GRAND TOTAL	\$3,658.21

## DTX DIGITAL TRANSFORMATION

43661 Catton Pl

ASHBURN, VA 20147

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
AZHAR, SAKINA	2021-09-01	GUARDHIGH	EC2	\$117.99
AZHAR, SAKINA	2021-09-01	1740OPENAXESSBRONZ	EC2	\$986.92
AZHAR, SAKINA	2021-09-01	VSP	EC2	\$15.02
BYRD, TIMOTHY	2022-06-01	ADD		\$4.20
BYRD, TIMOTHY	2022-06-01	LIFE		\$19.10
BYRD, TIMOTHY	2022-06-01	GUARDLOW	EE	\$29.44
BYRD, TIMOTHY	2022-06-01	1740OPENAXESSGOLD	EE	\$653.81
BYRD, TIMOTHY	2022-06-01	VSP	EE	\$8.75
JOHNSON, LECIA	2022-05-01	LIFE		\$21.76
JOHNSON, LECIA	2022-05-01	GUARDHIGH	FAM	\$160.18
JOHNSON, LECIA	2022-05-01	1740OPENAXESSCOPPE	EE	\$450.75
JOHNSON, LECIA	2022-05-01	VSP	EE	\$8.75
MAHDI, AHMED	2022-01-01	GUARDLOW	EE	\$29.44
MAHDI, AHMED	2022-01-01	1740OPENAXESSGOLD	EE	\$653.81
MAHDI, AHMED	2022-01-01	VSP	EE	\$8.75
WILLIAMS, TREY	2022-08-01	LIFE		\$0.60
WILLIAMS, TREY	2022-08-01	GUARDLOW	EE	\$29.44
WILLIAMS, TREY	2022-08-01	1740OPENAXESSCOPPE	EE	\$450.75
WILLIAMS, TREY	2022-08-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

EASY REST ADJUSTABLE SLEEP SYSTEM  
1401 EDGEWOOD ST  
BALTIMORE, MD 21227

Invoice Number: 4161-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1182OPENAXESSGOLD	Employee Only	8	\$633.54	\$5,068.32
1182OPENAXESSGOLD	Employee & Spouse Only	1	\$1,267.06	\$1,267.06
1182OPENAXESSILVE	Employee Only	2	\$559.14	\$1,118.28
ADD	Employee Only	3	\$12.68**	\$21.84
CANALWORKSADD	Employee Only	32	\$0.95	\$33.91
GUARDHIGH	Employee Only	5	\$47.61	\$238.05
GUARDHIGH	Family	2	\$160.18	\$320.36
GUARDLOW	Employee Only	8	\$29.44	\$235.52
GUARDLOW	Employee & Spouse Only	1	\$55.54	\$55.54
LIFE	Employee Only	10	\$13.20**	\$241.05
VSP	Employee Only	8	\$8.75	\$70.00
VSP	Employee & Spouse Only	2	\$14.73	\$29.46
VSP	Employee & Children	1	\$15.02	\$15.02
VSP	Family	1	\$23.76	\$23.76
			GRAND TOTAL	\$8,738.17

**EASY REST ADJUSTABLE SLEEP SYSTEM**

1401 EDGEWOOD ST  
BALTIMORE, MD 21227

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ABBOTT, JEFFERY	2022-08-01	CANALWORKSADD		\$0.88
ABBOTT, JEFFERY	2022-01-01	1182OPENAXESSGOLD	EE	\$633.54
ANDERSON, LEIGH	2022-08-01	CANALWORKSADD		\$1.37
ANDERSON, LEIGH	2022-01-01	1182OPENAXESSGOLD	EE	\$633.54
ANDERSON, LEIGH	2022-01-01	GUARDLOW	EE	\$29.44
ANDERSON, LEIGH	2022-01-01	VSP	EC	\$15.02
ANDERSON, LEIGH	2019-02-01	ADD		\$10.92
ANDERSON, LEIGH	2022-01-01	LIFE		\$24.62
BURWELL, KEVIN	2022-08-01	CANALWORKSADD		\$0.80
COMAN, DEBORAH	2022-08-01	CANALWORKSADD		\$1.64
COMAN, DEBORAH	2019-02-01	GUARDLOW	ES	\$55.54
COMAN, DEBORAH	2019-02-01	VSP	ES	\$14.73
EHMAN, DAVID	2019-04-01	GUARDLOW	EE	\$29.44
ELLIOTT, WENDY	2022-08-01	CANALWORKSADD		\$0.71
EMRICK, CHAD	2022-08-01	CANALWORKSADD		\$1.76
EMRICK, CHAD	2022-01-01	1182OPENAXESSGOLD	ES	\$1267.06
EMRICK, CHAD	2022-01-01	ADD		\$6.72
EMRICK, CHAD	2022-01-01	GUARDHIGH	FAM	\$160.18
EMRICK, CHAD	2022-01-01	LIFE		\$49.55
FARMER, JAMES	2022-08-01	CANALWORKSADD		\$1.16
FARMER, JAMES	2019-02-01	GUARDHIGH	EE	\$47.61
FARMER, JAMES	2020-01-01	LIFE		\$14.40
FARMER, JAMES	2019-02-01	VSP	EE	\$8.75
GAMBLE, TERRY	2022-08-01	CANALWORKSADD		\$1.07
GAMBLE, TERRY	2022-01-01	1182OPENAXESSGOLD	EE	\$633.54
GAMBLE, TERRY	2022-01-01	ADD		\$4.20
GAMBLE, TERRY	2022-01-01	GUARDHIGH	EE	\$47.61

EASY REST ADJUSTABLE SLEEP SYSTEM  
1401 EDGEWOOD ST  
BALTIMORE, MD 21227

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
GAMBLE, TERRY	2022-06-01	LIFE		\$39.60
GAMMON, TREVOR D	2022-08-01	CANALWORKSADD		\$0.97
GAMMON, TREVOR D	2022-01-01	1182OPENAXESSGOLD	EE	\$633.54
GREEN, YAITZA	2022-01-01	VSP	EE	\$8.75
GREEN, YAITZA	2022-01-01	LIFE		\$14.40
GREEN, YAITZA	2022-01-01	GUARDLOW	EE	\$29.44
GREGORY, DONNA	2022-10-01	CANALWORKSADD		\$0.98
GREMPER, ELIZABETH	2022-08-01	CANALWORKSADD		\$0.80
GREMPER, ELIZABETH	2022-04-30	1182OPENAXESSILVE	EE	\$559.14
GREMPER, ELIZABETH	2022-05-01	LIFE		\$9.00
GREMPER, ELIZABETH	2022-04-30	GUARDLOW	EE	\$29.44
HALL, SHANIA	2022-08-01	CANALWORKSADD		\$0.80
HANSEN, BRADLEY	2022-08-01	CANALWORKSADD		\$0.80
HANSEN, BRADLEY	2022-01-01	1182OPENAXESSGOLD	EE	\$633.54
HANSEN, BRADLEY	2022-01-01	GUARDLOW	EE	\$29.44
HANSEN, BRADLEY	2022-01-01	VSP	EE	\$8.75
JONES, ANTWON	2022-08-01	CANALWORKSADD		\$0.78
MAGHARI, JANET	2022-08-01	CANALWORKSADD		\$2.08
MAGHARI, MOHAMED	2022-08-01	CANALWORKSADD		\$3.15
MAGHARI, MOHAMED	2019-02-01	GUARDHIGH	FAM	\$160.18
MAGHARI, MOHAMED	2019-02-01	VSP	FAM	\$23.76
MOORE, REGINA	2022-09-01	CANALWORKSADD		\$0.71
NEIDHARDT, STEPHANIE	2022-10-01	CANALWORKSADD		\$0.80

EASY REST ADJUSTABLE SLEEP SYSTEM  
1401 EDGEWOOD ST  
BALTIMORE, MD 21227

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
PARKER, DA'SHAWN	2022-08-01	CANALWORKSADD		\$0.76
POWELL, RONALD	2022-08-01	CANALWORKSADD		\$0.88
RIBIS, RUTH	2022-08-01	CANALWORKSADD		\$1.62
RIBIS, RUTH	2022-01-01	1182OPENAXESSGOLD	EE	\$633.54
RIBIS, RUTH	2022-01-01	GUARDHIGH	EE	\$47.61
RIBIS, RUTH	2022-01-01	VSP	EE	\$8.75
RIBIS, RUTH	2022-01-01	LIFE		\$59.28
RILEY, SHAMARRA	2022-07-01	CANALWORKSADD		\$0.80
ROBINSON, LEONETTE	2022-08-01	CANALWORKSADD		\$0.71
ROBINSON, LEONETTE	2022-05-01	LIFE		\$13.20
ROBINSON, LEONETTE	2022-05-01	GUARDHIGH	EE	\$47.61
ROBINSON, LEONETTE	2022-05-01	VSP	EE	\$8.75
SCOTT, GARY	2022-08-01	CANALWORKSADD		\$0.84
SCOTT, GARY	2019-02-01	GUARDHIGH	EE	\$47.61
SIMMONS, WILLIAM	2022-08-01	CANALWORKSADD		\$0.88
SIMMONS, WILLIAM	2022-01-01	1182OPENAXESSGOLD	EE	\$633.54
SIMMONS, WILLIAM	2021-09-01	VSP	ES	\$14.73
SMITH, FLORENCE	2022-08-01	CANALWORKSADD		\$0.59
SMITH, FLORENCE	2019-02-01	GUARDLOW	EE	\$29.44
SMITH, FLORENCE	2019-02-01	VSP	EE	\$8.75
STAVOLA, DANIELLE	2022-08-01	CANALWORKSADD		\$1.01
STAVOLA, DANIELLE	2022-01-01	1182OPENAXESSILVE	EE	\$559.14
STAVOLA, DANIELLE	2022-01-01	GUARDLOW	EE	\$29.44
STAVOLA, DANIELLE	2022-01-01	VSP	EE	\$8.75
STAVOLA, DANIELLE	2022-01-01	LIFE		\$6.20



EASY REST ADJUSTABLE SLEEP SYSTEM  
 1401 EDGEWOOD ST  
 BALTIMORE, MD 21227

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
STEWART, GREGORY A	2022-08-01	CANALWORKSADD		\$0.97
TESHA, LULU	2022-08-01	CANALWORKSADD		\$0.71
VENZKE, ALICIA	2022-08-01	CANALWORKSADD		\$0.71
WALKER, KIMBERLY	2022-08-01	CANALWORKSADD		\$0.80
WORTHINGTON, DWAYNE V	2022-08-01	CANALWORKSADD		\$1.37
WORTHINGTON, DWAYNE V	2022-01-01	1182OPENAXESSGOLD	EE	\$633.54
WORTHINGTON, DWAYNE V	2021-01-01	GUARDLOW	EE	\$29.44
WORTHINGTON, DWAYNE V	2021-01-01	VSP	EE	\$8.75
WORTHINGTON, DWAYNE V	2021-11-01	LIFE		\$10.80

MEDICAL PLAN COUNTS

Employee Only	10
Employee & Spouse	1
Employee & Children	0
Family	0



**Account Services**  
**Monthly Statement**

ELEV8 LODGING  
5100 Eden Ave Ste 102B  
EDINA, MN 55436

Invoice Number: 4451-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$8.75

ELEV8 LODGING  
5100 Eden Ave Ste 102B  
EDINA, MN 55436

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
PRUETT, TROY	2022-01-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

ELITE AUTO BODY - GAMBRILLS  
738 STATE ROUTE 3 S #B  
GAMBRILLS, MD 21054

Invoice Number: 4570-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee & Spouse Only	1	\$89.81	\$89.81
GUARDHIGH	Family	1	\$138.96	\$160.18
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
			GRAND TOTAL	\$264.72

ELITE AUTO BODY - GAMBRILLS  
738 STATE ROUTE 3 S #B  
GAMBRILLS, MD 21054

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
FORD, JASON	2017-12-01	GUARDHIGH	FAM	\$160.18
HORN, MICHAEL	2022-06-01	VSP	ES	\$14.73
HORN, MICHAEL	2022-06-01	GUARDHIGH	ES	\$89.81

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

ELITE AUTO BODY, INC - ANNAPOLIS  
1791 VIRGINIA STREET  
ANNAPOLIS, MD 21401

Invoice Number: 4569-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	2	\$47.61	\$95.22
GUARDHIGH	Employee & Spouse Only	1	\$89.81	\$89.81
VSP	Employee Only	2	\$8.75	\$17.50
			GRAND TOTAL	\$202.53

ELITE AUTO BODY, INC - ANNAPOLIS  
1791 VIRGINIA STREET  
ANNAPOLIS, MD 21401

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BANDY, REID	2017-12-01	GUARDHIGH	EE	\$47.61
BRASHEARS, ROBERT	2017-12-01	GUARDHIGH	ES	\$89.81
FLANAGAN, BEVERLY	2019-03-01	VSP	EE	\$8.75
HILL, THOMAS	2017-12-01	GUARDHIGH	EE	\$47.61
HILL, THOMAS	2018-12-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

ELITE HOTEL GROUP  
5928 TWIN COVES  
DALLAS, TX 75248

Invoice Number: 4373-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1667OPENAXESSILVE	Employee Only	1	\$531.73	\$531.73
GUARDLOW	Employee Only	1	\$29.44	\$29.44
			GRAND TOTAL	\$561.17



ELITE HOTEL GROUP  
5928 TWIN COVES  
DALLAS, TX 75248

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
KRAMER, ALEX	2021-12-01	GUARDLOW	EE	\$29.44
KRAMER, ALEX	2021-05-01	1667OPENAXESSILVE	EE	\$531.73

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

ELLIOT MANAGEMENT SERVICES CO  
108 W PACIFIC ST  
SEDALIA, MO 65301

Invoice Number: 4477-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1798OPENAXESSGOLD	Employee Only	4	\$0.00	\$0.00
1798OPENAXESSGOLD	Employee & Spouse Only	1	\$0.00	\$1,244.18
1798OPENAXESSPLATI	Employee Only	1	\$657.25	\$657.25
1798OPENAXESSPLATI	Employee & Children	1	\$1,316.28	\$1,316.28
ADD	Employee Only	2	\$2.10**	\$23.10
GUARDLOW	Employee Only	2	\$29.44	\$58.88
LIFE	Employee Only	2	\$35.75**	\$42.95
VSP	Employee Only	3	\$8.75	\$26.25
			GRAND TOTAL	\$3,368.89

ELLIOT MANAGEMENT SERVICES CO  
108 W PACIFIC ST  
SEDALIA, MO 65301

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BENBROOK, SCOTT	2022-01-01	1798OPENAXESSPLATI	EC2	\$1316.28
BRESHEARS, LOU	2021-12-01	LIFE		\$35.75
BRESHEARS, LOU	2021-12-01	ADD		\$2.10
BRESHEARS, LOU	2021-12-01	GUARDLOW	EE	\$29.44
BRESHEARS, LOU	2022-01-01	1798OPENAXESSPLATI	EE	\$657.25
BRESHEARS, LOU	2021-12-01	VSP	EE	\$8.75
BUNKER, WILLIAM	2022-01-01	1798OPENAXESSGOLD	EE	\$0.00
QUATTLEBAUM, MARK	2022-01-01	1798OPENAXESSGOLD	EE	\$0.00
SWEARINGEN, ELIZABETH	2022-01-01	1798OPENAXESSGOLD	EE	\$0.00
SWEARINGEN, ELIZABETH	2021-12-01	VSP	EE	\$8.75
SWEARINGEN, GLEN	2021-12-01	LIFE		\$7.20
SWEARINGEN, GLEN	2021-12-01	ADD		\$21.00
SWEARINGEN, GLEN	2021-12-01	GUARDLOW	EE	\$29.44
SWEARINGEN, GLEN	2022-01-01	1798OPENAXESSGOLD	EE	\$0.00
SWEARINGEN, GLEN	2021-12-01	VSP	EE	\$8.75
SWEARINGEN, JOHN	2022-08-01	1798OPENAXESSGOLD	ES	\$1244.18

**MEDICAL PLAN COUNTS**

Employee Only	5
Employee & Spouse	1
Employee & Children	0
Family	0



## Account Services

### Monthly Statement

EMEDICAL FUSION, LLC  
4502 HIGHLAND GREN CT  
ALEXANDRIA, VA 22312

Invoice Number: 4574-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
LIFE	Employee Only	1	\$85.80**	\$85.80
GRAND TOTAL				\$85.80

EMEDICAL FUSION, LLC  
4502 HIGHLAND GREN CT  
ALEXANDRIA, VA 22312

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ETHERLY, ANDRE	2019-01-01	LIFE		\$85.80

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

EMPOWERS AFRICA

Invoice Number: 5767-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1931OPENAXESSPLATI	Employee Only	1	\$1,225.50	\$1,225.50
VSP	Employee Only	1	\$8.75	\$8.75
GRAND TOTAL				\$1,234.25

EMPOWERS AFRICA

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
DERELIEVA, NADIA	2022-03-01	1931OPENAXESSPLATI	EE	\$1225.50
DERELIEVA, NADIA	2022-03-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

FAIRFIELD INN & SUITES BY MARRIOTT  
181 3RD AVE  
BROOKLYN, NY 11217

Invoice Number: 4715-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
0880OPENAXESSGOLD	Employee Only	1	\$443.13	\$443.13
ADD	Employee Only	1	\$4.20**	\$4.20
GUARDLOW	Employee Only	1	\$29.44	\$29.44
LIFE	Employee Only	1	\$9.00**	\$9.00
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$494.52



FAIRFIELD INN & SUITES BY MARRIOTT  
181 3RD AVE  
BROOKLYN, NY 11217

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ZAPATA-BATISTA, YOMAIRA	2022-07-01	0880OPENAXESSGOLD	EE	\$443.13
ZAPATA-BATISTA, YOMAIRA	2022-07-01	ADD		\$4.20
ZAPATA-BATISTA, YOMAIRA	2022-07-01	LIFE		\$9.00
ZAPATA-BATISTA, YOMAIRA	2022-07-01	GUARDLOW	EE	\$29.44
ZAPATA-BATISTA, YOMAIRA	2022-07-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

FAIRFIELD INN & SUITES SLIPPERY ROCK  
1000 UNIVERSITY PARKWAY  
SLIPPERY ROCK, PA 16057

Invoice Number: 4741-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$1.26**	\$1.26
GUARDHIGH	Employee & Children	1	\$117.99	\$117.99
GUARDLOW	Employee Only	2	\$29.44	\$58.88
LIFE	Employee Only	1	\$4.00**	\$4.50
NEEMAOPENAXESSESSE	Employee Only	1	\$489.70	\$489.70
NEEMAOPENAXESSPRIME	Employee & Children	1	\$1,255.22	\$1,255.22
VSP	Employee Only	1	\$8.75	\$8.75
VSP	Employee & Children	1	\$15.02	\$15.02
			GRAND TOTAL	\$1,951.32

FAIRFIELD INN & SUITES SLIPPERY ROCK  
1000 UNIVERSITY PARKWAY  
SLIPPERY ROCK, PA 16057

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
FOSTER, THOMAS	2022-01-01	GUARDLOW	EE	\$29.44
MCQUEENEY, JARAD	2021-01-01	VSP	EE	\$8.75
MCQUEENEY, JARAD	2022-07-01	LIFE		\$4.50
MCQUEENEY, JARAD	2020-10-01	NEEMAOPENAXESSESS	EE	\$489.70
MCQUEENEY, JARAD	2021-01-01	ADD		\$1.26
MCQUEENEY, JARAD	2021-01-01	GUARDLOW	EE	\$29.44
TORVIK, CAROL	2022-01-01	NEEMAOPENAXESSPRIME	EC2	\$1255.22
TORVIK, CAROL	2022-01-01	GUARDHIGH	EC2	\$117.99
TORVIK, CAROL	2022-01-01	VSP	EC2	\$15.02

**MEDICAL PLAN COUNTS**

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



## Account Services

### Monthly Statement

FAIRMONT INSURANCE BROKERS, LTD  
1600 60th St  
BROOKLYN, NY 11204

Invoice Number: 4521-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1861OPENAXESSGOLD	Employee Only	4	\$719.19	\$2,876.76
1861OPENAXESSPLATI	Employee Only	16	\$863.03	\$13,808.48
1861OPENAXESSPLATI	Employee & Spouse Only	2	\$1,726.05	\$3,452.10
1861OPENAXESSPLATI	Family	4	\$2,589.08	\$10,356.32
1861OPENAXESSSILVE	Employee Only	22	\$640.26	\$14,085.72
1861OPENAXESSSILVE	Employee & Spouse Only	5	\$1,289.33	\$6,446.65
1861OPENAXESSSILVE	Family	4	\$1,835.92	\$7,343.68
ADD	Employee Only	11	\$6.30**	\$83.37
GUARDHIGH	Employee Only	14	\$47.61	\$666.54
GUARDHIGH	Employee & Spouse Only	1	\$89.81	\$89.81
GUARDHIGH	Family	6	\$160.18	\$961.08
GUARDLOW	Employee Only	6	\$29.44	\$176.64
GUARDLOW	Employee & Spouse Only	3	\$55.54	\$166.62
GUARDLOW	Family	1	\$100.74	\$100.74
LIFE	Employee Only	17	\$11.70**	\$304.14
VSP	Employee Only	14	\$8.75	\$122.50
VSP	Employee & Spouse Only	4	\$14.73	\$58.92
VSP	Family	3	\$23.76	\$71.28
GRAND TOTAL				\$62,034.38

FAIRMONT INSURANCE BROKERS, LTD  
1600 60th St  
BROOKLYN, NY 11204

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ASHKENAZI, SHERYL	2022-01-01	1861OPENAXESSILVE	EE	\$640.26
BILLE, JO ANN	2022-01-01	LIFE		\$6.00
BILLE, JO ANN	2022-01-01	GUARDHIGH	EE	\$47.61
BILLE, JO ANN	2022-01-01	1861OPENAXESSPLATI	EE	\$863.03
BROWN, DEBRA	2022-03-01	GUARDLOW	EE	\$29.44
BROWN, DEBRA	2022-03-01	1861OPENAXESSPLATI	EE	\$863.03
BROWN, DEBRA	2022-03-01	VSP	EE	\$8.75
CIOFALO, NICOLE	2022-01-01	GUARDLOW	EE	\$29.44
COHEN, CHEDVAH	2022-01-01	GUARDLOW	EE	\$29.44
COHEN, CHEDVAH	2022-01-01	1861OPENAXESSILVE	EE	\$640.26
COHEN, FAIGEL	2022-07-01	1861OPENAXESSILVE	EE	\$640.26
COHEN, FAIGEL	2022-07-01	VSP	FAM	\$23.76
DENBURG, SHAI	2022-01-01	1861OPENAXESSPLATI	FAM	\$2589.08
DEUTSCH, MOSHE	2022-01-01	GUARDHIGH	FAM	\$160.18
DEUTSCH, MOSHE	2022-01-01	1861OPENAXESSILVE	ES	\$1289.33
DRATLER, YOSEF	2022-04-01	1861OPENAXESSPLATI	EE	\$863.03
FREILICH, NAOMI	2022-01-01	1861OPENAXESSPLATI	EE	\$863.03
FRIED, HANNAH	2022-01-01	GUARDHIGH	EE	\$47.61
FRIED, HANNAH	2022-01-01	1861OPENAXESSILVE	EE	\$640.26
GAGAIEV, RIVKA	2022-01-01	1861OPENAXESSPLATI	EE	\$863.03
GOLDSTEIN, RIVKA	2022-06-01	ADD		\$6.30
GOLDSTEIN, RIVKA	2022-06-01	LIFE		\$11.70
GOLDSTEIN, RIVKA	2022-06-01	GUARDLOW	ES	\$55.54
GOLDSTEIN, RIVKA	2022-06-01	1861OPENAXESSPLATI	ES	\$1726.05

FAIRMONT INSURANCE BROKERS, LTD  
1600 60th St  
BROOKLYN, NY 11204

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
GOLDSTEIN, RIVKA	2022-06-01	VSP	ES	\$14.73
GOTTESMAN, SHEVY	2022-01-01	1861OPENAXESSILVE	EE	\$640.26
GROSS, AVROHOM	2022-04-01	1861OPENAXESSILVE	ES	\$1289.33
HALPERIN, ROCHELLE	2022-01-01	1861OPENAXESSILVE	EE	\$640.26
HUBNER, CHRISTINA	2022-01-01	LIFE		\$3.30
HUBNER, CHRISTINA	2022-01-01	1861OPENAXESSGOLD	EE	\$719.19
HUBNER, CHRISTINA	2022-01-01	VSP	EE	\$8.75
HYLTON, JOAN	2022-01-01	1861OPENAXESSPLATI	EE	\$863.03
JACOBVICS, TZIPORA	2022-01-01	1861OPENAXESSILVE	EE	\$640.26
JACOBS, BRACHA	2022-01-01	1861OPENAXESSILVE	EE	\$640.26
KAHANA, PESACH	2022-01-01	ADD		\$4.20
KAHANA, PESACH	2022-01-01	GUARDHIGH	FAM	\$160.18
KAHANA, PESACH	2022-01-01	1861OPENAXESSILVE	FAM	\$1835.92
KAHANA, PESACH	2022-01-01	VSP	FAM	\$23.76
KAPLAN, CHANAN	2022-01-01	ADD		\$5.04
KAPLAN, CHANAN	2022-01-01	GUARDHIGH	ES	\$89.81
KAPLAN, CHANAN	2022-01-01	1861OPENAXESSILVE	ES	\$1289.33
KAPLAN, CHANAN	2022-01-01	VSP	ES	\$14.73
KAPLAN, CHANAN	2022-01-01	LIFE		\$85.80
KATZ, BARRY	2022-01-01	1861OPENAXESSPLATI	FAM	\$2589.08
KATZ, MALKA	2022-01-01	1861OPENAXESSILVE	EE	\$640.26
KATZ, SHELDON	2022-01-01	LIFE		\$2.14

FAIRMONT INSURANCE BROKERS, LTD  
1600 60th St  
BROOKLYN, NY 11204

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
KATZ, SHELDON	2022-01-01	ADD		\$0.63
KATZ, SHELDON	2022-01-01	GUARDHIGH	FAM	\$160.18
KATZ, SHELDON	2022-01-01	1861OPENAXESSPLATI	FAM	\$2589.08
KATZ, SHELDON	2022-01-01	VSP	FAM	\$23.76
KAZIYEV, BORIS	2022-01-01	1861OPENAXESSILVE	EE	\$640.26
KELTY, NORA	2022-01-01	GUARDHIGH	EE	\$47.61
KELTY, NORA	2022-01-01	1861OPENAXESSGOLD	EE	\$719.19
KELTY, NORA	2022-01-01	VSP	EE	\$8.75
KLIGER, MORDECHAI	2022-07-01	GUARDHIGH	FAM	\$160.18
KLINGER, CHAIM	2022-01-01	1861OPENAXESSGOLD	EE	\$719.19
KOHN, BASSIE	2022-01-01	1861OPENAXESSILVE	EE	\$640.26
KRAKAUER, DEVORAH	2022-02-01	VSP	ES	\$14.73
KRAKAUER, DEVORAH	2022-02-01	1861OPENAXESSILVE	EE	\$640.26
LESSER, ABRAHAM E	2022-01-01	1861OPENAXESSILVE	FAM	\$1835.92
LI, CHENXI	2022-04-01	ADD		\$4.20
LI, CHENXI	2022-04-01	GUARDHIGH	EE	\$47.61
LI, CHENXI	2022-04-01	LIFE		\$1.60
LI, CHENXI	2022-04-01	1861OPENAXESSGOLD	EE	\$719.19
LIANG, LILY	2022-01-01	LIFE		\$14.40
LIANG, LILY	2022-01-01	ADD		\$21.00
LIANG, LILY	2022-01-01	GUARDHIGH	EE	\$47.61
LIANG, LILY	2022-01-01	1861OPENAXESSPLATI	EE	\$863.03
LIANG, LILY	2022-01-01	VSP	EE	\$8.75
LICHT, HARRY	2022-01-01	GUARDHIGH	EE	\$47.61

FAIRMONT INSURANCE BROKERS, LTD  
1600 60th St  
BROOKLYN, NY 11204

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
LICHT, MOLLIE	2022-08-01	1861OPENAXESSPLATI	EE	\$863.03
LIOTINE, ANTOINETTE	2022-01-01	LIFE		\$19.10
LIOTINE, ANTOINETTE	2022-01-01	GUARDLOW	EE	\$29.44
LIOTINE, ANTOINETTE	2022-01-01	1861OPENAXESSSILVE	EE	\$640.26
LIOTINE, ANTOINETTE	2022-01-01	VSP	EE	\$8.75
MARCUS, FAIGE	2022-01-01	1861OPENAXESSSILVE	EE	\$640.26
MARK, KRISSY	2022-04-01	GUARDHIGH	EE	\$47.61
MARK, KRISSY	2022-04-01	VSP	EE	\$8.75
MARK, KRISSY	2022-04-01	1861OPENAXESSPLATI	EE	\$863.03
MCINTOSH, FREDDIE	2022-04-01	ADD		\$4.20
MCINTOSH, FREDDIE	2022-04-01	LIFE		\$16.50
MCINTOSH, FREDDIE	2022-04-01	GUARDHIGH	EE	\$47.61
MCINTOSH, FREDDIE	2022-04-01	VSP	EE	\$8.75
MCINTOSH, FREDDIE	2022-04-01	1861OPENAXESSPLATI	EE	\$863.03
MISHKOWITZ, MOISHE	2022-01-01	1861OPENAXESSSILVE	ES	\$1289.33
NATHAN, CHANA	2022-04-01	GUARDHIGH	EE	\$47.61
NATHAN, CHANA	2022-04-01	1861OPENAXESSSILVE	EE	\$640.26
NATHAN, SHRAGI	2022-01-01	ADD		\$4.20
NATHAN, SHRAGI	2022-01-01	GUARDLOW	EE	\$29.44
NATHAN, SHRAGI	2022-01-01	1861OPENAXESSSILVE	EE	\$640.26
NATHAN, TZVI	2022-01-01	LIFE		\$9.60
NATHAN, TZVI	2022-01-01	1861OPENAXESSSILVE	EE	\$640.26
NELSON, ESTELLE	2022-01-01	1861OPENAXESSSILVE	EE	\$640.26
ROBERTSON, NANCY	2022-05-01	LIFE		\$49.40



FAIRMONT INSURANCE BROKERS, LTD  
1600 60th St  
BROOKLYN, NY 11204

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ROBERTSON, NANCY	2022-05-01	GUARDLOW	EE	\$29.44
ROBERTSON, NANCY	2022-05-01	1861OPENAXESSPLATI	EE	\$863.03
ROBERTSON, NANCY	2022-05-01	VSP	EE	\$8.75
ROSENBERG, DEVORA	2022-01-01	1861OPENAXESSILVE	EE	\$640.26
RUAN, KEVIN	2022-01-01	LIFE		\$9.60
RUAN, KEVIN	2022-01-01	ADD		\$21.00
RUAN, KEVIN	2022-01-01	GUARDHIGH	EE	\$47.61
RUAN, KEVIN	2022-01-01	1861OPENAXESSPLATI	EE	\$863.03
RUAN, KEVIN	2022-01-01	VSP	EE	\$8.75
SCHACHNER, JOSHUA	2022-01-01	GUARDHIGH	EE	\$47.61
SCHACHNER, JOSHUA	2022-01-01	1861OPENAXESSILVE	EE	\$640.26
SCHINDLER, STEVEN	2022-01-01	GUARDHIGH	FAM	\$160.18
SCHINDLER, STEVEN	2022-01-01	1861OPENAXESSPLATI	FAM	\$2589.08
SEBBAN, ANNABELLA	2022-01-01	1861OPENAXESSILVE	EE	\$640.26
SHARON, BRADLEY	2022-01-01	LIFE		\$15.00
SHARON, BRADLEY	2022-01-01	GUARDHIGH	FAM	\$160.18
SHARON, BRADLEY	2022-01-01	1861OPENAXESSILVE	FAM	\$1835.92
SHARON, BRADLEY	2022-01-01	VSP	ES	\$14.73
SHARON, EVA	2022-01-01	VSP	EE	\$8.75
SIMSOVITS, CHAYA	2022-02-01	GUARDLOW	ES	\$55.54
SIMSOVITS, CHAYA	2022-02-01	1861OPENAXESSPLATI	ES	\$1726.05
SMITH, NIKELA	2022-01-01	LIFE		\$6.00
SMITH, NIKELA	2022-01-01	ADD		\$4.20
SMITH, NIKELA	2022-01-01	GUARDHIGH	EE	\$47.61
SMITH, NIKELA	2022-01-01	1861OPENAXESSPLATI	EE	\$863.03

FAIRMONT INSURANCE BROKERS, LTD  
1600 60th St  
BROOKLYN, NY 11204

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
SMITH, NIKELA	2022-01-01	VSP	EE	\$8.75
STANISLAS, YOLANDA M	2022-01-01	LIFE		\$39.60
STANISLAS, YOLANDA M	2022-01-01	ADD		\$8.40
STANISLAS, YOLANDA M	2022-01-01	GUARDHIGH	EE	\$47.61
STANISLAS, YOLANDA M	2022-01-01	1861OPENAXESSPLATI	EE	\$863.03
STANISLAS, YOLANDA M	2022-01-01	VSP	EE	\$8.75
VAYSMAN, MAYA	2022-01-01	1861OPENAXESSPLATI	EE	\$863.03
WACHSLER, CHARLES	2022-01-01	GUARDLOW	FAM	\$100.74
WACHSLER, CHARLES	2022-01-01	1861OPENAXESSILVE	FAM	\$1835.92
WOHLGELERNTER, ABRAHAM	2022-01-01	LIFE		\$10.80
WOHLGELERNTER, ABRAHAM	2022-01-01	GUARDLOW	ES	\$55.54
WOHLGELERNTER, ABRAHAM	2022-01-01	1861OPENAXESSILVE	ES	\$1289.33
WOHLGELERNTER, ABRAHAM	2022-01-01	VSP	EE	\$8.75
YARDAN, VENESSA	2022-02-01	LIFE		\$3.60
YARDAN, VENESSA	2022-02-01	GUARDHIGH	EE	\$47.61
YARDAN, VENESSA	2022-01-01	1861OPENAXESSPLATI	EE	\$863.03
YARDAN, VENESSA	2022-02-01	VSP	EE	\$8.75
ZHAO, YU	2022-01-01	1861OPENAXESSILVE	EE	\$640.26

FAIRMONT INSURANCE BROKERS, LTD  
1600 60th St  
BROOKLYN, NY 11204

## PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
LICHT, MOLLIE	2022-08-01	1861OPENAXESSPLATI	EE	\$863.03

## MEDICAL PLAN COUNTS

Employee Only	42
Employee & Spouse	7
Employee & Children	0
Family	8



## Account Services

### Monthly Statement

FERROFAB, INC  
1416 HYLAN AVE  
HAMLET, NC 28345

Invoice Number: 4686-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$21.00**	\$21.00
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDHIGH	Employee & Spouse Only	1	\$89.81	\$89.81
GUARDLOW	Employee Only	4	\$29.44	\$117.76
LIFE	Employee Only	1	\$19.76**	\$19.76
VSP	Employee Only	4	\$8.75	\$35.00
VSP	Employee & Spouse Only	2	\$14.73	\$29.46
			GRAND TOTAL	\$360.40

FERROFAB, INC  
1416 HYLAN AVE  
HAMLET, NC 28345

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CAPPS, EARL	2021-01-01	GUARDLOW	EE	\$29.44
CAPPS, EARL	2019-01-01	VSP	EE	\$8.75
GREENE, JERRY	2022-01-01	VSP	EE	\$8.75
HOLIDAY, LEONARD	2022-01-01	GUARDLOW	EE	\$29.44
HOLIDAY, LEONARD	2022-01-01	VSP	ES	\$14.73
HOLIDAY, LEONARD	2022-01-01	LIFE		\$19.76
JEFFERY, MARCUS	2022-01-01	GUARDLOW	EE	\$29.44
LAMM, NORBERT	2022-01-01	ADD		\$21.00
LAMM, NORBERT	2022-01-01	GUARDHIGH	ES	\$89.81
LAMM, NORBERT	2022-01-01	VSP	ES	\$14.73
MCRAE, ANDREW	2019-04-01	GUARDHIGH	EE	\$47.61
TODD, JARRELL	2019-04-01	VSP	EE	\$8.75
YORK, THOMAS	2020-01-01	GUARDLOW	EE	\$29.44
YORK, THOMAS	2020-01-01	VSP	EE	\$8.75

**MEDICAL PLAN COUNTS**

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



## Account Services

### Monthly Statement

FETCH PET CARE OF PLANTATION

Invoice Number: 5752-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$0.84**	\$0.84
LIFE	Employee Only	1	\$6.60**	\$6.60
GRAND TOTAL				\$7.44

FETCH PET CARE OF PLANTATION

,

CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
SKOSKIE, JULIE	2022-02-01	LIFE		\$6.60
SKOSKIE, JULIE	2022-02-01	ADD		\$0.84

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

FETCH PET CARE, INC.  
19500 Victor Parkway  
Livonia, MI 48152

Invoice Number: 4604-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$4.20**	\$4.20
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDHIGH	Family	1	\$160.18	\$160.18
GUARDLOW	Employee Only	2	\$29.44	\$58.88
GUARDLOW	Employee & Children	1	\$0.00	\$74.61
LIFE	Employee Only	1	\$14.30**	\$14.30
VSP	Employee Only	3	\$8.75	\$26.25
VSP	Employee & Children	1	\$0.00	\$15.02
			GRAND TOTAL	\$401.05



FETCH PET CARE, INC.  
19500 Victor Parkway  
Livonia, MI 48152

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
GRONDIN, ADAM	2022-07-01	GUARDHIGH	FAM	\$160.18
JOHNSON, LINDSEY	2022-10-01	GUARDLOW	EE	\$29.44
JOHNSON, LINDSEY	2022-10-01	VSP	EE	\$8.75
JOHNSON, THOMAS	2022-05-01	ADD		\$4.20
JOHNSON, THOMAS	2022-05-01	LIFE		\$14.30
MARTIN, RAY	2022-05-01	GUARDLOW	EE	\$29.44
MARTIN, RAY	2022-05-01	VSP	EE	\$8.75
TARDIFF, MICHELLE	2022-08-01	GUARDLOW	EC	\$74.61
TARDIFF, MICHELLE	2022-08-01	VSP	EC	\$15.02
VARGO, JOANNA	2022-08-01	GUARDHIGH	EE	\$47.61
VARGO, JOANNA	2022-08-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

FETCH! PET CARE OF PHILADELPHIA

Invoice Number: 5839-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$0.42**	\$0.42
GUARDLOW	Employee Only	1	\$29.44	\$29.44
LIFE	Employee Only	1	\$0.80**	\$0.80
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$39.41

FETCH! PET CARE OF PHILADELPHIA

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
MARX, KATELYN	2022-05-01	ADD		\$0.42
MARX, KATELYN	2022-05-01	LIFE		\$0.80
MARX, KATELYN	2022-05-01	GUARDLOW	EE	\$29.44
MARX, KATELYN	2022-05-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

FORTYONETEN  
4110 Faudree Rd  
ODESSA, TX 79765

Invoice Number: 4285-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1533OPENAXESSGOLD	Employee Only	1	\$653.81	\$653.81
1533OPENAXESSGOLD	Employee & Children	1	\$1,307.62	\$1,307.62
ADD	Employee Only	1	\$2.52**	\$2.52
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDHIGH	Employee & Children	1	\$117.99	\$117.99
GUARDLOW	Employee Only	4	\$29.44	\$117.76
VSP	Employee Only	5	\$8.75	\$43.75
VSP	Employee & Children	1	\$15.02	\$15.02
			GRAND TOTAL	\$2,306.08

FORTYONETEN  
4110 Faudree Rd  
ODESSA, TX 79765

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CRUZ, AIMEE	2022-01-01	VSP	EE	\$8.75
CRUZ, AIMEE	2022-01-01	GUARDHIGH	EE	\$47.61
HEALER, BOBBI	2022-01-01	ADD		\$2.52
HEALER, BOBBI	2022-01-01	GUARDLOW	EE	\$29.44
HEALER, BOBBI	2022-01-01	VSP	EE	\$8.75
PATEL, NITA	2022-01-01	1533OPENAXESSGOLD	EC2	\$1307.62
PATEL, NITA	2022-01-01	GUARDHIGH	EC2	\$117.99
PATEL, NITA	2022-01-01	VSP	EC2	\$15.02
PATEL, RUPEN	2022-01-01	1533OPENAXESSGOLD	EE	\$653.81
PATEL, RUPEN	2022-01-01	GUARDLOW	EE	\$29.44
PATEL, RUPEN	2022-01-01	VSP	EE	\$8.75
REED, DARNELL	2022-10-01	GUARDLOW	EE	\$29.44
REED, DARNELL	2022-10-01	VSP	EE	\$8.75
RICHARDSON, CHRISTOPHER	2022-01-01	GUARDLOW	EE	\$29.44
RICHARDSON, CHRISTOPHER	2022-01-01	VSP	EE	\$8.75

**MEDICAL PLAN COUNTS**

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



## Account Services

### Monthly Statement

FRIENDSWOOD FAMILY MEDICINE

Invoice Number: 6017-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	2	\$10.29**	\$11.13
GUARDHIGH	Employee Only	2	\$47.61	\$95.22
GUARDLOW	Employee Only	1	\$29.44	\$29.44
GUARDLOW	Employee & Spouse Only	1	\$29.44	\$55.54
GUARDLOW	Employee & Children	1	\$29.44	\$74.61
GUARDLOW	Family	1	\$0.00	\$100.74
LIFE	Employee Only	5	\$42.95**	\$130.32
VSP	Employee Only	3	\$8.75	\$26.25
VSP	Employee & Spouse Only	1	\$8.75	\$14.73
VSP	Employee & Children	1	\$8.75	\$15.02
VSP	Family	2	\$0.00	\$47.52
			GRAND TOTAL	\$687.73

**FRIENDSWOOD FAMILY MEDICINE**

,

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BATSON, LISA	2022-07-01	VSP	ES	\$14.73
BATSON, LISA	2022-07-01	ADD		\$10.29
BATSON, LISA	2022-07-01	LIFE		\$27.17
BATSON, LISA	2022-07-01	GUARDLOW	ES	\$55.54
CANADY, CAROLYN	2022-07-01	LIFE		\$18.20
CANADY, CAROLYN	2022-07-01	GUARDLOW	EC	\$74.61
CANADY, CAROLYN	2022-07-01	VSP	EC	\$15.02
COLLINS, SHE'A	2022-10-01	ADD		\$0.84
COLLINS, SHE'A	2022-10-01	LIFE		\$2.40
COLLINS, SHE'A	2022-10-01	GUARDHIGH	EE	\$47.61
COLLINS, SHE'A	2022-10-01	VSP	EE	\$8.75
DIXON, JAMIE	2022-07-01	GUARDLOW	EE	\$29.44
DIXON, JAMIE	2022-07-01	VSP	EE	\$8.75
NESLINE, GINA	2022-07-01	LIFE		\$42.95
NESLINE, GINA	2022-07-01	GUARDLOW	FAM	\$100.74
NESLINE, GINA	2022-07-01	VSP	FAM	\$23.76
ORSAK, GLENN	2022-07-01	VSP	FAM	\$23.76
WINN, SHANNON	2022-09-01	LIFE		\$39.60
WINN, SHANNON	2022-07-01	GUARDHIGH	EE	\$47.61
WINN, SHANNON	2022-07-01	VSP	EE	\$8.75

FRIENDSWOOD FAMILY MEDICINE

,

## PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
WINN, SHANNON	2022-09-01	LIFE		\$39.60
WINN, SHANNON	2022-07-01	GUARDHIGH	EE	\$47.61

## MEDICAL PLAN COUNTS

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





## Account Services

### Monthly Statement

GENESIS DTC  
350 SYCAMORE ROAD  
GENOA, IL 60135

Invoice Number: 4678-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$8.75

GENESIS DTC  
350 SYCAMORE ROAD  
GENOA, IL 60135

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
HOWERTON, ELAINE	2019-05-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

GEOSLAM INC  
45662 TERMINAL DRIVE  
STERLING, VA 20166

Invoice Number: 4194-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	3	\$6.30**	\$14.70
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDLOW	Employee Only	1	\$29.44	\$29.44
LIFE	Employee Only	2	\$7.20**	\$18.80
VSP	Employee Only	2	\$8.75	\$17.50
			GRAND TOTAL	\$128.05

GEOSLAM INC  
45662 TERMINAL DRIVE  
STERLING, VA 20166

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BONNEY, DAVID	2021-01-01	VSP	EE	\$8.75
BONNEY, DAVID	2021-01-01	LIFE		\$10.80
MUNN, BRYCE	2022-01-01	ADD		\$4.20
ROSENSTEEL, BRIAN	2022-01-01	ADD		\$4.20
ROSENSTEEL, BRIAN	2022-01-01	GUARDLOW	EE	\$29.44
ROSENSTEEL, BRIAN	2022-01-01	LIFE		\$8.00
WEST, NATHAN	2022-04-01	ADD		\$6.30
WEST, NATHAN	2022-04-01	GUARDHIGH	EE	\$47.61
WEST, NATHAN	2022-04-01	VSP	EE	\$8.75

**MEDICAL PLAN COUNTS**

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



## Account Services

### Monthly Statement

GLASS STREAM INC.  
3675 KENNESAW N IND PKWY NW  
KENNESAW, GA 30144

Invoice Number: 4484-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1805OPENAXESSBRONZ	Employee & Spouse Only	1	\$1,287.54	\$1,287.54
1805OPENAXESSCOPPE	Employee Only	6	\$551.82	\$3,310.92
1805OPENAXESSCOPPE	Employee & Spouse Only	1	\$1,158.79	\$1,158.79
1805OPENAXESSCOPPE	Family	1	\$1,655.42	\$1,655.42
1805OPENAXESSGOLD	Employee Only	2	\$972.47	\$1,944.94
1805OPENAXESSPLATI	Employee Only	1	\$1,080.52	\$1,080.52
1805OPENAXESSSILVE	Employee Only	2	\$681.25	\$1,362.50
1805OPENAXESSSILVE	Family	1	\$2,043.73	\$2,043.73
ADD	Employee Only	5	\$4.20**	\$23.10
GUARDHIGH	Employee Only	5	\$47.61	\$238.05
GUARDLOW	Employee Only	6	\$29.44	\$176.64
GUARDLOW	Employee & Spouse Only	3	\$55.54	\$166.62
GUARDLOW	Family	1	\$100.74	\$100.74
LIFE	Employee Only	5	\$25.03**	\$180.06
VSP	Employee Only	6	\$8.75	\$52.50
VSP	Employee & Spouse Only	3	\$14.73	\$44.19
VSP	Family	1	\$23.76	\$23.76
			GRAND TOTAL	\$14,850.02

GLASS STREAM INC.  
3675 KENNESAW N IND PKWY NW  
KENNESAW, GA 30144

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BECKWITH, FIRMAN	2022-01-01	GUARDLOW	ES	\$55.54
BECKWITH, FIRMAN	2022-01-01	1805OPENAXESSCOPPE	ES	\$1158.79
BECKWITH, FIRMAN	2022-01-01	VSP	ES	\$14.73
BENITEZ, JUAN CARLOS	2022-01-01	GUARDLOW	EE	\$29.44
BENITEZ, JUAN CARLOS	2022-01-01	1805OPENAXESSCOPPE	EE	\$551.82
DANGAR III, PAUL	2022-01-01	GUARDLOW	FAM	\$100.74
DANGAR III, PAUL	2022-01-01	1805OPENAXESSCOPPE	FAM	\$1655.42
DANGAR III, PAUL	2022-01-01	VSP	FAM	\$23.76
HENDERSON, DANNY	2022-01-01	ADD		\$4.20
HENDERSON, DANNY	2022-01-01	VSP	EE	\$8.75
HENDERSON, DANNY	2022-09-01	LIFE		\$50.05
HENDERSON, MATTHEW	2022-01-01	ADD		\$4.20
HENDERSON, MATTHEW	2022-01-01	GUARDHIGH	EE	\$47.61
HENDERSON, MATTHEW	2022-01-01	VSP	EE	\$8.75
HOLDER, PHILLIP	2022-01-01	GUARDLOW	ES	\$55.54
HOLDER, PHILLIP	2022-01-01	1805OPENAXESSBRONZ	ES	\$1287.54
LONG, DARIN	2022-01-01	GUARDHIGH	EE	\$47.61
LONG, DARIN	2022-01-01	1805OPENAXESSCOPPE	EE	\$551.82
LOPEZ, CRISTOBAL	2022-01-01	GUARDHIGH	EE	\$47.61
LOPEZ, CRISTOBAL	2022-01-01	1805OPENAXESSCOPPE	EE	\$551.82
LOPEZ, CRISTOBAL	2022-01-01	VSP	EE	\$8.75
MCELROY, ANDREW	2022-01-01	GUARDHIGH	EE	\$47.61
MCELROY, ANDREW	2022-01-01	1805OPENAXESSCOPPE	EE	\$551.82
MCELROY, ANDREW	2022-01-01	VSP	EE	\$8.75
MOORE, KATHERINE	2022-01-01	GUARDLOW	ES	\$55.54
MOORE, KATHERINE	2022-01-01	1805OPENAXESSPLATI	EE	\$1080.52

GLASS STREAM INC.  
3675 KENNESAW N IND PKWY NW  
KENNESAW, GA 30144

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
MOORE, KATHERINE	2022-01-01	VSP	ES	\$14.73
OSBORNE, RANDY	2022-01-01	1805OPENAXESSILVE	FAM	\$2043.73
PEPPER, TOMMY	2022-01-01	1805OPENAXESSILVE	EE	\$681.25
PEPPER, TOMMY	2022-01-01	VSP	EE	\$8.75
PEPPER, TOMMY	2022-01-01	GUARDLOW	EE	\$29.44
RIVAS, WILFREDO	2022-01-01	GUARDLOW	EE	\$29.44
RIVAS, WILFREDO	2022-01-01	1805OPENAXESSCOPPE	EE	\$551.82
ROGERS, ANDY	2022-01-01	ADD		\$4.20
ROGERS, ANDY	2022-01-01	GUARDHIGH	EE	\$47.61
ROGERS, ANDY	2022-01-01	1805OPENAXESSILVE	EE	\$681.25
ROGERS, ANDY	2022-01-01	LIFE		\$9.60
VENTURA, DAVID	2022-01-01	GUARDLOW	EE	\$29.44
VENTURA, DAVID	2022-01-01	1805OPENAXESSCOPPE	EE	\$551.82
VIRAMONTES, MICHELE	2022-01-01	LIFE		\$23.88
VIRAMONTES, MICHELE	2022-01-01	ADD		\$6.30
WATSON, KENNETH	2022-01-01	GUARDLOW	EE	\$29.44
WATSON, KENNETH	2022-01-01	1805OPENAXESSGOLD	EE	\$972.47
WATSON, KENNETH	2022-01-01	VSP	ES	\$14.73
WATSON, KENNETH	2022-05-01	LIFE		\$25.03
WILSON, ANTHONY	2022-08-01	LIFE		\$71.50
WILSON, ANTHONY	2022-01-01	ADD		\$4.20
WILSON, ANTHONY	2022-01-01	GUARDLOW	EE	\$29.44
WILSON, ANTHONY	2022-01-01	1805OPENAXESSGOLD	EE	\$972.47
WILSON, ANTHONY	2022-01-01	VSP	EE	\$8.75

MEDICAL PLAN COUNTS

Employee Only	11
Employee & Spouse	2
Employee & Children	0
Family	2



## Account Services

### Monthly Statement

GLOBIWEST MANAGEMENT SERVICES, LLC

Invoice Number: 5517-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$0.00**	\$12.60
GRAND TOTAL				\$12.60



GLOBIWEST MANAGEMENT SERVICES, LLC

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
STEEN, ACACIA	03/01/2022	ADD		\$12.60

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

GOGLOBAL USA  
3 E 3rd Ave Ste 200  
SAN MATEO, CA 94401

Invoice Number: 4391-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1689OPENAXESSBRONZ	Employee Only	1	\$487.36	\$487.36
1689OPENAXESSBRONZ	Employee & Spouse Only	1	\$986.92	\$986.92
1689OPENAXESSCOPPE	Employee Only	1	\$450.75	\$450.75
1689OPENAXESSCOPPE	Employee & Children	1	\$825.52	\$825.52
1689OPENAXESSGOLD	Employee Only	3	\$653.81	\$1,961.43
1689OPENAXESSGOLD	Employee & Spouse Only	2	\$1,307.62	\$2,615.24
1689OPENAXESSGOLD	Employee & Children	1	\$1,307.62	\$1,307.62
1689OPENAXESSGOLD	Family	3	\$1,961.43	\$5,884.29
1689OPENAXESSPLATI	Employee Only	7	\$784.50	\$5,491.50
1689OPENAXESSPLATI	Employee & Spouse Only	1	\$1,569.14	\$1,569.14
1689OPENAXESSPLATI	Family	3	\$2,353.72	\$7,061.16
1689OPENAXESSSILVE	Employee Only	1	\$548.18	\$548.18
1689OPENAXESSSILVE	Employee & Spouse Only	1	\$1,096.36	\$1,096.36
1689OPENAXESSSILVE	Family	1	\$1,644.54	\$1,644.54
ADD	Employee Only	13	\$21.00**	\$175.56
GUARDHIGH	Employee Only	6	\$47.61	\$285.66
GUARDHIGH	Employee & Spouse Only	3	\$89.81	\$269.43
GUARDHIGH	Employee & Children	1	\$89.81	\$89.81
GUARDHIGH	Family	4	\$160.18	\$640.72
GUARDLOW	Employee Only	5	\$29.44	\$147.20
GUARDLOW	Employee & Spouse Only	3	\$55.54	\$166.62
GUARDLOW	Employee & Children	1	\$74.61	\$74.61
GUARDLOW	Family	1	\$100.74	\$100.74
LIFE	Employee Only	14	\$39.60**	\$227.71
VSP	Employee Only	8	\$8.75	\$70.00
VSP	Employee & Spouse Only	6	\$14.73	\$88.38
VSP	Employee & Children	1	\$15.02	\$15.02
VSP	Family	6	\$23.76	\$142.56
GRAND TOTAL				\$34,466.03

GOGLOBAL USA  
3 E 3rd Ave Ste 200  
SAN MATEO, CA 94401

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BULLEN, RYAN	2021-06-01	1689OPENAXESSGOLD	EE	\$653.81
CAREY, TAYLOR	2021-12-01	GUARDHIGH	EE	\$47.61
CAREY, TAYLOR	2021-12-01	1689OPENAXESSPLATI	EE	\$784.50
CAREY, TAYLOR	2021-12-01	VSP	EE	\$8.75
CHUNG, DAVID	2022-07-01	ADD		\$21.00
CHUNG, DAVID	2022-07-01	LIFE		\$39.60
CURLEE, STEPHEN	2022-01-01	GUARDLOW	ES	\$55.54
CURLEE, STEPHEN	2022-01-01	1689OPENAXESSILVE	ES	\$1096.36
CURLEE, STEPHEN	2022-01-01	VSP	ES	\$14.73
DENEGRE, JAMES	2022-04-01	ADD		\$4.20
FENG, ALICE	2022-04-01	GUARDHIGH	EC	\$89.81
FENG, ALICE	2022-04-01	1689OPENAXESSCOPPE	EC	\$825.52
FOREMAN, KEVIN	2022-05-01	ADD		\$0.42
FOREMAN, KEVIN	2022-05-01	LIFE		\$4.94
FOWLER, JESSICA	2022-10-01	LIFE		\$4.50
FOWLER, JESSICA	2022-10-01	GUARDLOW	EE	\$29.44
FOWLER, JESSICA	2022-10-01	1689OPENAXESSGOLD	EE	\$653.81
FRANCOIS, JEAN	2022-03-01	1689OPENAXESSPLATI	EE	\$784.50
FRANCOIS, JEAN	2022-03-01	LIFE		\$19.10
FRANCOIS, JEAN	2022-03-01	ADD		\$1.26
FRANCOIS, JEAN	2022-03-01	GUARDHIGH	EE	\$47.61
FRANCOIS, JEAN	2022-03-01	VSP	EE	\$8.75
GALLAGHER, MARTHA	2022-03-01	GUARDLOW	FAM	\$100.74
GALLAGHER, MARTHA	2022-03-01	1689OPENAXESSPLATI	FAM	\$2353.72
GALLAGHER, MARTHA	2022-03-01	VSP	FAM	\$23.76
GILBERTSON, NICHOLAS	2022-09-01	ADD		\$21.00

GOGLOBAL USA  
3 E 3rd Ave Ste 200  
SAN MATEO, CA 94401

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
GILBERTSON, NICHOLAS	2022-09-01	LIFE		\$9.60
HARIA, BHARAT	2022-01-01	GUARDHIGH	FAM	\$160.18
HARIA, BHARAT	2022-01-01	1689OPENAXESSPLATI	FAM	\$2353.72
HARIA, BHARAT	2022-01-01	VSP	FAM	\$23.76
LINDQUIST, ANDREW	2021-07-01	GUARDHIGH	FAM	\$160.18
LINDQUIST, ANDREW	2021-06-01	1689OPENAXESSGOLD	FAM	\$1961.43
LINDQUIST, ANDREW	2021-07-01	VSP	FAM	\$23.76
LUNA, ELIZABETH	2022-05-31	GUARDLOW	ES	\$55.54
LUNA, ELIZABETH	2022-05-31	1689OPENAXESSGOLD	ES	\$1307.62
LUNA, ELIZABETH	2022-05-31	VSP	ES	\$14.73
LUNA, ELIZABETH	2022-05-31	LIFE		\$13.05
MCGILL, JOHN	2022-05-01	LIFE		\$6.00
MCGILL, JOHN	2022-05-01	GUARDLOW	EE	\$29.44
MCGILL, JOHN	2022-05-01	1689OPENAXESSCOPPE	EE	\$450.75
MCGILL, JOHN	2022-05-01	VSP	EE	\$8.75
MILLER, ADAM	2022-01-01	ADD		\$18.90
MILLER, ADAM	2022-01-01	LIFE		\$24.70
MUFTI, NAMI	2022-05-01	GUARDLOW	EE	\$29.44
MUFTI, NAMI	2022-05-01	1689OPENAXESSSILVE	EE	\$548.18
OKIMURO, KOHEI	2021-08-01	GUARDHIGH	FAM	\$160.18
OKIMURO, KOHEI	2021-06-01	1689OPENAXESSGOLD	FAM	\$1961.43
OKIMURO, KOHEI	2021-08-01	VSP	FAM	\$23.76
OLIVA, MELISSA	2022-06-01	ADD		\$25.62
OLIVA, MELISSA	2022-06-01	LIFE		\$24.62
OLIVA, MELISSA	2022-06-01	GUARDHIGH	FAM	\$160.18

GOGLOBAL USA  
3 E 3rd Ave Ste 200  
SAN MATEO, CA 94401

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
OLIVA, MELISSA	2022-06-01	1689OPENAXESSPLATI	FAM	\$2353.72
OLIVA, MELISSA	2022-06-01	VSP	FAM	\$23.76
PURCELL, PATRICK	2022-05-01	GUARDHIGH	EE	\$47.61
PURCELL, PATRICK	2022-05-01	1689OPENAXESSPLATI	EE	\$784.50
PURCELL, PATRICK	2022-05-01	VSP	EE	\$8.75
PURCELL, PATRICK	2022-05-01	LIFE		\$10.80
RADOSAVLJEVIC, BRANKO	2022-01-01	ADD		\$23.52
RADOSAVLJEVIC, BRANKO	2022-01-01	1689OPENAXESSILVE	FAM	\$1644.54
RADOSAVLJEVIC, BRANKO	2022-01-01	VSP	FAM	\$23.76
RADOSAVLJEVIC, BRANKO	2022-01-01	LIFE		\$42.95
ROLDAN, GRETHEL	2022-03-01	ADD		\$8.40
ROLDAN, GRETHEL	2022-03-01	GUARDHIGH	EE	\$47.61
ROLDAN, GRETHEL	2022-03-01	1689OPENAXESSBRONZ	EE	\$487.36
ROLDAN, GRETHEL	2022-03-01	VSP	EE	\$8.75
ROULSTON, MARCILLA	2021-07-01	GUARDHIGH	ES	\$89.81
ROULSTON, MARCILLA	2021-06-01	1689OPENAXESSGOLD	ES	\$1307.62
ROULSTON, MARCILLA	2021-07-01	VSP	ES	\$14.73
ROULSTON, MARCILLA	2021-07-01	LIFE		\$13.05
ROWETT, MATTHEW	2021-09-01	GUARDLOW	EE	\$29.44
ROWETT, MATTHEW	2021-09-01	1689OPENAXESSGOLD	EE	\$653.81
SAID, LEILA	2022-01-01	GUARDHIGH	EE	\$47.61
SAID, LEILA	2022-01-01	1689OPENAXESSPLATI	EE	\$784.50
SCHAAB, KEVIN	2022-09-01	ADD		\$4.20
SHARMA, AMITABH	2022-04-01	GUARDHIGH	ES	\$89.81
SHARMA, AMITABH	2022-04-01	1689OPENAXESSBRONZ	ES	\$986.92

GOGLOBAL USA  
3 E 3rd Ave Ste 200  
SAN MATEO, CA 94401

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
SHARMA, AMITABH	2022-04-01	VSP	ES	\$14.73
SUTTON SMITH, PAIGE	2022-03-01	GUARDLOW	ES	\$55.54
SUTTON SMITH, PAIGE	2022-03-01	1689OPENAXESSPLATI	ES	\$1569.14
SUTTON SMITH, PAIGE	2022-03-01	VSP	ES	\$14.73
SUTTON SMITH, PAIGE	2022-03-01	LIFE		\$4.00
VALENZUELA, JESSICA	2022-04-01	ADD		\$5.04
VALENZUELA, JESSICA	2022-04-01	GUARDLOW	EC	\$74.61
VALENZUELA, JESSICA	2022-04-01	1689OPENAXESSGOLD	EC	\$1307.62
VALENZUELA, JESSICA	2022-04-01	VSP	EC	\$15.02
VALENZUELA, JESSICA	2022-04-01	LIFE		\$10.80
VASANT, AMIT	2022-01-01	1689OPENAXESSGOLD	FAM	\$1961.43
VICK, LINDSAY	2022-05-01	GUARDHIGH	EE	\$47.61
VICK, LINDSAY	2022-05-01	1689OPENAXESSPLATI	EE	\$784.50
VICK, LINDSAY	2022-05-01	VSP	EE	\$8.75
WAN, JIE	2022-01-01	ADD		\$21.00
WAN, JIE	2022-01-01	GUARDLOW	EE	\$29.44
WAN, JIE	2022-01-01	1689OPENAXESSPLATI	EE	\$784.50
WAN, JIE	2022-01-01	VSP	EE	\$8.75
YANG, WEIJIE	2022-10-01	VSP	EE	\$8.75
YANG, YANFEI	2022-07-01	GUARDHIGH	ES	\$89.81
YANG, YANFEI	2022-07-01	1689OPENAXESSPLATI	EE	\$784.50
YANG, YANFEI	2022-07-01	VSP	ES	\$14.73
ZHOU, RUI	2022-09-01	ADD		\$21.00

GOGLOBAL USA  
3 E 3rd Ave Ste 200  
SAN MATEO, CA 94401

## PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
GILBERTSON, NICHOLAS	2022-09-01	ADD		\$21.00
ZHOU, RUI	2022-09-01	ADD		\$21.00

## MEDICAL PLAN COUNTS

Employee Only	13
Employee & Spouse	5
Employee & Children	2
Family	7



## Account Services

### Monthly Statement

GRAY MATTERS

Invoice Number: 6044-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$7.14**	\$7.14
GUARDHIGH	Family	1	\$0.00	\$160.18
LIFE	Employee Only	1	\$71.50**	\$71.50
			GRAND TOTAL	\$477.64



GRAY MATTERS

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
RYAN, DAVID	2022-08-01	ADD		\$7.14
RYAN, DAVID	2022-08-01	LIFE		\$71.50
RYAN, DAVID	2022-08-01	GUARDHIGH	FAM	\$160.18

GRAY MATTERS

,

## PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
RYAN, DAVID	2022-08-01	ADD		\$7.14
RYAN, DAVID	2022-08-01	LIFE		\$71.50
RYAN, DAVID	2022-08-01	GUARDHIGH	FAM	\$160.18

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

GREYHAWK INSURANCE  
25129 The Old Rd Ste 214  
STEVENSON RANCH, CA 91381

Invoice Number: 4441-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1760OPENAXESSGOLD	Employee Only	1	\$0.00	\$719.19
1760OPENAXESSGOLD	Employee & Spouse Only	1	\$1,438.38	\$1,438.38
1760OPENAXESSGOLD	Family	2	\$2,157.57	\$4,315.14
GUARDHIGH	Family	2	\$160.18	\$320.36
GUARDLOW	Employee Only	1	\$0.00	\$29.44
GUARDLOW	Employee & Spouse Only	1	\$55.54	\$55.54
VSP	Employee Only	2	\$8.75	\$17.50
VSP	Family	2	\$23.76	\$47.52
			GRAND TOTAL	\$6,943.07

GREYHAWK INSURANCE  
25129 The Old Rd Ste 214  
STEVENSON RANCH, CA 91381

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CLARKE, DANIEL	2022-01-01	GUARDHIGH	FAM	\$160.18
CLARKE, DANIEL	2022-01-01	1760OPENAXESSGOLD	FAM	\$2157.57
CLARKE, DANIEL	2022-01-01	VSP	FAM	\$23.76
DEAVER, CHARLIE	2022-01-01	GUARDHIGH	FAM	\$160.18
DEAVER, CHARLIE	2022-01-01	1760OPENAXESSGOLD	FAM	\$2157.57
DEAVER, CHARLIE	2022-01-01	VSP	FAM	\$23.76
HANCKEL, JESSE	2022-02-01	GUARDLOW	ES	\$55.54
HANCKEL, JESSE	2022-02-01	1760OPENAXESSGOLD	ES	\$1438.38
HANCKEL, JESSE	2022-02-01	VSP	EE	\$8.75
SEIDMAN, VICTORIA	2022-08-01	GUARDLOW	EE	\$29.44
SEIDMAN, VICTORIA	2022-08-01	1760OPENAXESSGOLD	EE	\$719.19
SEIDMAN, VICTORIA	2022-08-01	VSP	EE	\$8.75

**MEDICAL PLAN COUNTS**

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



## Account Services

### Monthly Statement

GROW TODAY

Invoice Number: 5972-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$0.42**	\$0.42
GUARDLOW	Employee Only	1	\$29.44	\$29.44
LIFE	Employee Only	1	\$2.40**	\$2.40
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$41.01

## GROW TODAY

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
LOUISDHON, LUDOVIC	2022-06-01	ADD		\$0.42
LOUISDHON, LUDOVIC	2022-06-01	LIFE		\$2.40
LOUISDHON, LUDOVIC	2022-06-01	GUARDLOW	EE	\$29.44
LOUISDHON, LUDOVIC	2022-06-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

GUARDIAN FIDUCIARY SERVICES  
11919 PLAZA DRIVE  
PAWLEYS ISLAND, SC 29576

Invoice Number: 4685-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$56.36

GUARDIAN FIDUCIARY SERVICES  
11919 PLAZA DRIVE  
PAWLEYS ISLAND, SC 29576

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
MANTELL, STEPHEN	2017-12-01	GUARDHIGH	EE	\$47.61
MANTELL, STEPHEN	2018-12-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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





## Account Services

### Monthly Statement

GUESTS HOSPITALITY STAFFING  
135 S. HOLIDAY STREET  
STRASBURG, VA 22657

Invoice Number: 4528-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	5	\$5.88**	\$17.22
GUARDHIGH	Employee Only	5	\$47.61	\$238.05
GUARDHIGH	Employee & Spouse Only	1	\$89.81	\$89.81
GUARDLOW	Employee Only	1	\$29.44	\$29.44
LIFE	Employee Only	6	\$12.00**	\$53.95
VSP	Employee Only	4	\$8.75	\$35.00
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
			GRAND TOTAL	\$478.20

GUESTS HOSPITALITY STAFFING  
135 S. HOLIDAY STREET  
STRASBURG, VA 22657

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ADDISON, AARON	2022-02-01	ADD		\$6.30
ADDISON, AARON	2022-02-01	LIFE		\$6.00
CLONTZ, DAVID	2022-07-01	GUARDHIGH	EE	\$47.61
CLONTZ, DAVID	2022-07-01	VSP	EE	\$8.75
EAST-PARRISH, MEGAN	2022-05-01	LIFE		\$0.80
EAST-PARRISH, MEGAN	2022-05-01	ADD		\$0.42
EAST-PARRISH, MEGAN	2022-05-01	GUARDHIGH	EE	\$47.61
EAST-PARRISH, MEGAN	2022-05-01	VSP	EE	\$8.75
HAMMONDS, ELIJAH	2022-06-01	ADD		\$5.88
HAMMONDS, ELIJAH	2022-06-01	LIFE		\$12.00
HAMMONDS, ELIJAH	2022-06-01	GUARDLOW	EE	\$29.44
HUPP, SHELLY	2022-01-01	ADD		\$2.52
HUPP, SHELLY	2022-01-01	GUARDHIGH	EE	\$47.61
HUPP, SHELLY	2022-01-01	VSP	EE	\$8.75
HUPP, SHELLY	2022-01-01	LIFE		\$20.80
KVETON, FRANKLIN	2022-01-01	GUARDHIGH	ES	\$89.81
KVETON, FRANKLIN	2022-01-01	VSP	ES	\$14.73
LUND, MICHAEL	2022-01-01	GUARDHIGH	EE	\$47.61
PEARCE, CATHERINE	2022-01-01	ADD		\$2.10
PEARCE, CATHERINE	2022-01-01	LIFE		\$7.15
WILLIAMS, JASMINE	2022-05-01	LIFE		\$7.20
WILLIAMS, JASMINE	2022-05-01	GUARDHIGH	EE	\$47.61
WILLIAMS, JASMINE	2022-05-01	VSP	EE	\$8.75

**MEDICAL PLAN COUNTS**

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



## Account Services

### Monthly Statement

GUESTS INC STRASBURG  
135 S HOLIDAY STREET  
STRASBURG, VA 22657

Invoice Number: 4128-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1096OPENAXESSBRONZ	Employee Only	1	\$487.36	\$487.36
1096OPENAXESSGOLD	Employee Only	4	\$653.81	\$2,615.24
1096OPENAXESSGOLD	Family	1	\$1,961.43	\$1,961.43
GUARDHIGH	Employee & Children	1	\$117.99	\$117.99
GUARDLOW	Employee Only	1	\$29.44	\$29.44
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$5,220.21

GUESTS INC STRASBURG  
135 S HOLIDAY STREET  
STRASBURG, VA 22657

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CAVALLARO, DAVID	2021-10-01	GUARDHIGH	EC2	\$117.99
FABUS, AMANDA	2022-02-01	1096OPENAXESSBRONZ	EE	\$487.36
FARMER, GRACE	2020-12-01	1096OPENAXESSGOLD	EE	\$653.81
MILLER, SHANNON	2020-12-01	1096OPENAXESSGOLD	EE	\$653.81
STEPHENS, KEITH	2020-12-01	1096OPENAXESSGOLD	FAM	\$1961.43
VOLPINI-HOLLAND, KATHRYN	2022-01-26	1096OPENAXESSGOLD	EE	\$653.81
VOLPINI-HOLLAND, KATHRYN	2022-01-26	GUARDLOW	EE	\$29.44
VOLPINI-HOLLAND, KATHRYN	2022-01-26	VSP	EE	\$8.75
WALLACE, ROY	2020-12-01	1096OPENAXESSGOLD	EE	\$653.81

**MEDICAL PLAN COUNTS**

Employee Only	5
Employee & Spouse	0
Employee & Children	0
Family	1



## Account Services

### Monthly Statement

HAMPTON INN LAUREL  
7900 BRAYGREEN ROAD  
LAUREL, MD 20707

Invoice Number: 4737-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDLOW	Employee & Spouse Only	1	\$0.00	\$55.54
NEEMAOPENAXESSESSE	Employee Only	1	\$489.70	\$489.70
NEEMAOPENAXESSPREM	Employee & Spouse Only	1	\$0.00	\$1,155.73
VSP	Employee & Spouse Only	1	\$0.00	\$14.73
			GRAND TOTAL	\$1,715.70

HAMPTON INN LAUREL  
7900 BRAYGREEN ROAD  
LAUREL, MD 20707

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
LUEJE ORTEGA, BELEN	2021-02-01	NEEMAOPENAXESSESSIEE		\$489.70
THAKRAR, SANDEEP	2022-08-01	NEEMAOPENAXESSPREMS		\$1155.73
THAKRAR, SANDEEP	2022-08-01	GUARDLOW	ES	\$55.54
THAKRAR, SANDEEP	2022-08-01	VSP	ES	\$14.73

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

HARD HEAD HOLDINGS, LLC  
1401 S EDGEWOOD STREET  
BALTIMORE, MD 21227

Invoice Number: 4160-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
CANALWORKSADD	Employee Only	2	\$0.78	\$1.34
GUARDLOW	Employee Only	1	\$29.44	\$29.44
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$39.53

HARD HEAD HOLDINGS, LLC  
1401 S EDGEWOOD STREET  
BALTIMORE, MD 21227

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
HOWELL, ROLANDO	2022-08-01	CANALWORKSADD		\$0.67
RAVENELL, MIGEAL A	2022-08-01	CANALWORKSADD		\$0.67
RAVENELL, MIGEAL A	2021-01-01	GUARDLOW	EE	\$29.44
RAVENELL, MIGEAL A	2021-01-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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





## Account Services

### Monthly Statement

HOLIDAY INN - SANTA ANA  
2726 S GRAND AVE  
SANTA ANA, CA 92705

Invoice Number: 4270-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1509OPENAXESSCOPPE	Employee Only	2	\$365.33	\$730.66
1509OPENAXESSILVE	Employee Only	1	\$403.36	\$403.36
1509OPENAXESSILVE	Employee & Children	1	\$806.72	\$806.72
ADD	Employee Only	1	\$2.10**	\$2.10
GUARDHIGH	Employee Only	3	\$47.61	\$142.83
GUARDHIGH	Employee & Spouse Only	1	\$89.81	\$89.81
GUARDLOW	Employee Only	2	\$29.44	\$58.88
LIFE	Employee Only	3	\$3.00**	\$136.65
VSP	Employee Only	3	\$8.75	\$26.25
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
			GRAND TOTAL	\$2,411.99

HOLIDAY INN - SANTA ANA  
2726 S GRAND AVE  
SANTA ANA, CA 92705

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ANDERSON, ANNETTE	2022-01-01	1509OPENAXESSILVE	EE	\$403.36
ANDERSON, ANNETTE	2022-01-01	GUARDLOW	EE	\$29.44
ANDERSON, ANNETTE	2022-01-01	VSP	EE	\$8.75
ATAYDE, FRANCISCO	2022-01-01	1509OPENAXESSILVE	EC	\$806.72
ATAYDE, FRANCISCO	2022-01-01	GUARDHIGH	EE	\$47.61
ATAYDE, FRANCISCO	2022-01-01	VSP	EE	\$8.75
BAUTISTA, DOMINGA	2020-08-01	GUARDHIGH	ES	\$89.81
BERMEJO, VICTOR	2022-01-01	ADD		\$2.10
BERMEJO, VICTOR	2022-01-01	LIFE		\$3.00
COLBERT, DOCIA	2022-01-01	1509OPENAXESSCOPPE	EE	\$365.33
COLBERT, DOCIA	2022-01-01	GUARDHIGH	EE	\$47.61
COLBERT, DOCIA	2022-01-01	LIFE		\$85.80
GARCIA, IRMA	2020-08-01	GUARDLOW	EE	\$29.44
JAEN, HEBER	2022-01-12	VSP	EE	\$8.75
JAEN, HEBER	2022-01-12	1509OPENAXESSCOPPE	EE	\$365.33
JAEN, HEBER	2022-01-12	GUARDHIGH	EE	\$47.61
TRUJILLO GARCIA, GABRIEL	2020-08-01	VSP	ES	\$14.73
TRUJILLO GARCIA, GABRIEL	2021-11-01	LIFE		\$47.85

**MEDICAL PLAN COUNTS**

Employee Only	3
Employee & Spouse	0
Employee & Children	1
Family	0



## Account Services

### Monthly Statement

HOLIDAY INN EXPRESS & SUITES SELINGSGROVE  
651 N SUSQUEHANNA TRAIL  
SELINGSGROVE, PA 17870

Invoice Number: 4743-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$0.42**	\$0.42
GUARDHIGH	Employee Only	3	\$47.61	\$142.83
GUARDLOW	Employee Only	1	\$29.44	\$29.44
LIFE	Employee Only	1	\$3.30**	\$3.30
NEEMAOPENAXESSPREM	Employee Only	1	\$589.20	\$589.20
VSP	Employee Only	4	\$8.75	\$35.00
			GRAND TOTAL	\$800.19

HOLIDAY INN EXPRESS & SUITES SELINGSGROVE  
 651 N SUSQUEHANNA TRAIL  
 SELINGSGROVE, PA 17870

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
AIKEY, ARLENE	2019-02-01	VSP	EE	\$8.75
DRUM, ROBERT	2022-03-01	GUARDHIGH	EE	\$47.61
DRUM, ROBERT	2022-03-01	VSP	EE	\$8.75
POOLE, HANEEFAH	2022-01-01	GUARDHIGH	EE	\$47.61
STROWBRIDGE, JODY	2022-01-01	LIFE		\$3.30
STROWBRIDGE, JODY	2022-01-01	ADD		\$0.42
STROWBRIDGE, JODY	2022-01-01	GUARDLOW	EE	\$29.44
STROWBRIDGE, JODY	2022-01-01	VSP	EE	\$8.75
WALTER, CAROLYN	2020-02-01	NEEMAOPENAXESSPREME	EE	\$589.20
WALTER, CAROLYN	2020-01-01	GUARDHIGH	EE	\$47.61
WALTER, CAROLYN	2019-02-01	VSP	EE	\$8.75

**MEDICAL PLAN COUNTS**

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



## Account Services

### Monthly Statement

HOLIDAY INN EXPRESS CANONSBURG  
4000 HORIZON VUE DRIVE  
CANONSBURG, PA 15317

Invoice Number: 4742-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
LIFE	Employee Only	1	\$9.60**	\$4.10
VSP	Employee Only	1	\$8.75	\$8.75
VSP	Employee & Children	1	\$0.00	\$15.02
			GRAND TOTAL	\$75.48

HOLIDAY INN EXPRESS CANONSBURG  
4000 HORIZON VUE DRIVE  
CANONSBURG, PA 15317

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ROWLEY JR, TOMMY	2021-01-01	VSP	EE	\$8.75
ROWLEY JR, TOMMY	2021-01-01	GUARDHIGH	EE	\$47.61
STAMPS, CHEYENNE	2022-08-01	LIFE		\$4.10
STAMPS, CHEYENNE	2022-08-01	VSP	EC	\$15.02

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

HOLIDAY INN EXPRESS HOTEL & SUITE LIMON

Invoice Number: 5845-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	2	\$47.61	\$95.22
VSP	Employee Only	3	\$8.75	\$26.25
			GRAND TOTAL	\$121.47

HOLIDAY INN EXPRESS HOTEL &amp; SUITE LIMON

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
HARE, TRAVIS	2022-04-01	GUARDHIGH	EE	\$47.61
HARE, TRAVIS	2022-04-01	VSP	EE	\$8.75
KANTHACK, TAMI	2022-04-01	VSP	EE	\$8.75
ROJO-HARE, BRENDA	2022-04-01	GUARDHIGH	EE	\$47.61
ROJO-HARE, BRENDA	2022-04-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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





## Account Services

### Monthly Statement

HOLIDAY INN EXPRESS MECHANICSBURG  
6325 CARLISLE PIKE  
MECHANICSBURG, PA 17050

Invoice Number: 4738-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDLOW	Employee Only	1	\$29.44	\$29.44
NEEMAOPENAXESSPREM	Employee Only	1	\$589.20	\$589.20
VSP	Employee Only	2	\$8.75	\$17.50
			GRAND TOTAL	\$636.14

HOLIDAY INN EXPRESS MECHANICSBURG  
6325 CARLISLE PIKE  
MECHANICSBURG, PA 17050

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BLAUCH, CHRISTINE	2022-01-01	VSP	EE	\$8.75
YOUNG, RODNEY	2020-02-01	NEEMAOPENAXESSPREMIER	EE	\$589.20
YOUNG, RODNEY	2020-01-01	GUARDLOW	EE	\$29.44
YOUNG, RODNEY	2020-01-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

HONEY CREEK STAFFING  
9111 Cross Park Dr Ste D200  
KNOXVILLE, TN 37923

Invoice Number: 4308-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	6	\$4.20**	\$39.06
GUARDHIGH	Employee Only	3	\$47.61	\$142.83
GUARDHIGH	Employee & Spouse Only	1	\$89.81	\$89.81
GUARDHIGH	Employee & Children	1	\$0.00	\$89.81
GUARDLOW	Employee & Children	2	\$74.61	\$149.22
GUARDLOW	Family	1	\$0.00	\$100.74
LIFE	Employee Only	4	\$8.00**	\$27.41
VSP	Employee Only	3	\$8.75	\$26.25
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
VSP	Employee & Children	3	\$15.02	\$45.06
VSP	Family	1	\$0.00	\$23.76
			GRAND TOTAL	\$748.68

HONEY CREEK STAFFING  
9111 Cross Park Dr Ste D200  
KNOXVILLE, TN 37923

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BALLARD, MARK	2022-08-01	ADD		\$4.62
BALLARD, MARK	2022-08-01	LIFE		\$6.20
BALLARD, MARK	2022-08-01	GUARDLOW	FAM	\$100.74
BALLARD, MARK	2022-08-01	VSP	FAM	\$23.76
BEMER, STEVEN	2022-10-01	ADD		\$21.42
BEMER, STEVEN	2022-10-01	LIFE		\$11.30
BEMER, STEVEN	2022-10-01	GUARDHIGH	EC	\$89.81
BEMER, STEVEN	2022-10-01	VSP	EC	\$15.02
FLEECE, RONALD	2022-08-01	ADD		\$4.20
FLEECE, RONALD	2022-08-01	GUARDHIGH	EE	\$47.61
FLEECE, RONALD	2022-08-01	VSP	EE	\$8.75
FOLINO, BROCK	2022-10-01	GUARDHIGH	EE	\$47.61
HIRT, WAYNE	2022-08-01	VSP	EE	\$8.75
MCCLEARY, JONATHAN	2022-07-01	GUARDLOW	EC2	\$74.61
MCCLEARY, JONATHAN	2022-07-01	VSP	EC2	\$15.02
MCKEE, JARROD	2022-06-01	VSP	EE	\$8.75
MCKEE, JARROD	2022-06-01	ADD		\$4.20
MCKEE, JARROD	2022-06-01	LIFE		\$8.00
MCKEE, JARROD	2022-06-01	GUARDHIGH	EE	\$47.61
UPTON, SHANNON	2022-10-01	ADD		\$0.42
UPTON, SHANNON	2022-10-01	LIFE		\$1.91
UPTON, SHANNON	2022-10-01	GUARDLOW	EC2	\$74.61
UPTON, SHANNON	2022-10-01	VSP	EC2	\$15.02
WHITEHALL, TROY	2022-08-01	ADD		\$4.20
WHITEHALL, TROY	2022-08-01	GUARDHIGH	ES	\$89.81
WHITEHALL, TROY	2022-08-01	VSP	ES	\$14.73

**MEDICAL PLAN COUNTS**

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



## Account Services

### Monthly Statement

HORIZONS HRS  
118 WEST 5TH STREET SUITE 202  
COVINGTON, KY 41011

Invoice Number: 4219-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1399OPENAXESSBRONZ	Employee Only	1	\$487.36	\$487.36
1399OPENAXESSGOLD	Employee Only	1	\$653.81	\$653.81
ADD	Employee Only	5	\$0.84**	\$17.22
GUARDHIGH	Employee Only	3	\$47.61	\$142.83
GUARDLOW	Employee Only	3	\$29.44	\$88.32
GUARDLOW	Employee & Spouse Only	1	\$55.54	\$55.54
LIFE	Employee Only	3	\$2.40**	\$7.50
VSP	Employee Only	9	\$8.75	\$78.75
VSP	Employee & Spouse Only	2	\$14.73	\$29.46
			GRAND TOTAL	\$1,708.95

HORIZONS HRS  
118 WEST 5TH STREET SUITE 202  
COVINGTON, KY 41011

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CALIFF, ADAM	2022-06-01	VSP	ES	\$14.73
COLEMAN, SHAUNTELLE	2022-06-01	ADD		\$0.84
COLEMAN, SHAUNTELLE	2022-06-01	LIFE		\$2.40
COLEMAN, SHAUNTELLE	2022-06-01	VSP	EE	\$8.75
DODD, JONATHAN	2022-06-01	VSP	EE	\$8.75
GLAESER, CRYSTAL	2022-10-01	ADD		\$4.20
GLAESER, CRYSTAL	2022-10-01	LIFE		\$4.50
GLAESER, CRYSTAL	2022-10-01	VSP	EE	\$8.75
HANEY, RANDY	2022-08-01	ADD		\$10.50
HANEY, RANDY	2022-08-01	GUARDLOW	ES	\$55.54
HANEY, RANDY	2022-08-01	VSP	ES	\$14.73
HAYMAN, DEAN	2022-09-01	GUARDHIGH	EE	\$47.61
HAYMAN, DEAN	2022-09-01	VSP	EE	\$8.75
LEWIS, SHERI	2022-01-01	1399OPENAXESSGOLD	EE	\$653.81
LEWIS, SHERI	2022-01-01	GUARDLOW	EE	\$29.44
LEWIS, SHERI	2022-01-01	VSP	EE	\$8.75
MCCOY, MAKENZIE	2022-07-01	GUARDLOW	EE	\$29.44
MCCOY, MAKENZIE	2022-07-01	VSP	EE	\$8.75
NOWICKI, ELAINA	2022-09-01	ADD		\$0.42
NOWICKI, ELAINA	2022-09-01	LIFE		\$0.60
NOWICKI, ELAINA	2022-09-01	GUARDHIGH	EE	\$47.61
NOWICKI, ELAINA	2022-09-01	VSP	EE	\$8.75
RUCKER, CHRISTINE	2022-09-01	ADD		\$1.26
RUCKER, CHRISTINE	2022-09-01	GUARDHIGH	EE	\$47.61
RUCKER, CHRISTINE	2022-09-01	VSP	EE	\$8.75
WEAVER, KATHY	2022-01-01	GUARDLOW	EE	\$29.44

HORIZONS HRS  
118 WEST 5TH STREET SUITE 202  
COVINGTON, KY 41011

## CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
WEAVER, KATHY	2022-01-01	1399OPENAXESSBRONZ EE		\$487.36
WEAVER, KATHY	2022-01-01	VSP	EE	\$8.75

HORIZONS HRS  
118 WEST 5TH STREET SUITE 202  
COVINGTON, KY 41011

## PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
HANEY, RANDY	2022-08-01	ADD		\$10.50
HANEY, RANDY	2022-08-01	GUARDLOW	ES	\$55.54
HANEY, RANDY	2022-08-01	VSP	ES	\$14.73
HAYMAN, DEAN	2022-09-01	GUARDHIGH	EE	\$47.61
HAYMAN, DEAN	2022-09-01	VSP	EE	\$8.75
NOWICKI, ELAINA	2022-09-01	ADD		\$0.42
NOWICKI, ELAINA	2022-09-01	LIFE		\$0.60
RUCKER, CHRISTINE	2022-09-01	ADD		\$1.26
RUCKER, CHRISTINE	2022-09-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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





## Account Services

### Monthly Statement

HORIZONS HRS MANUFACTURING STAFFING II  
118 WEST 5TH STREET SUITE 202  
COVINGTON, KY 41011

Invoice Number: 4216-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	18	\$3.78**	\$97.86
GUARDHIGH	Employee Only	17	\$47.61	\$809.37
GUARDHIGH	Employee & Spouse Only	3	\$89.81	\$269.43
GUARDHIGH	Employee & Children	3	\$89.81	\$269.43
GUARDLOW	Employee Only	8	\$29.44	\$235.52
GUARDLOW	Employee & Spouse Only	1	\$55.54	\$55.54
GUARDLOW	Employee & Children	2	\$74.61	\$149.22
LIFE	Employee Only	14	\$85.80**	\$255.85
VSP	Employee Only	21	\$8.75	\$183.75
VSP	Employee & Spouse Only	3	\$14.73	\$44.19
VSP	Employee & Children	5	\$15.02	\$75.10
GRAND TOTAL				\$2,652.47

HORIZONS HRS MANUFACTURING STAFFING II  
118 WEST 5TH STREET SUITE 202  
COVINGTON, KY 41011

CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BAYLESS, ELIZABETH	2022-08-01	GUARDLOW	EE	\$29.44
BAYLESS, ELIZABETH	2022-08-01	VSP	EE	\$8.75
BELL, SUSAN	2022-07-01	VSP	EE	\$8.75
BOYER, RAEKEDA	2022-10-01	ADD		\$0.84
BOYER, RAEKEDA	2022-10-01	LIFE		\$2.60
BURNETT, DAVID	2022-08-01	VSP	EE	\$8.75
BURROUGHS, JEFFERY	2022-01-01	ADD		\$16.80
BURROUGHS, JEFFERY	2022-01-01	GUARDHIGH	ES	\$89.81
BURROUGHS, JEFFERY	2022-01-01	VSP	ES	\$14.73
BURROUGHS, JEFFERY	2022-01-01	LIFE		\$53.63
CABADA, MARLEEN	2022-09-01	GUARDHIGH	EE	\$47.61
CALLOWAY, MARCUS	2022-09-01	GUARDHIGH	EE	\$47.61
CALLOWAY, MARCUS	2022-09-01	VSP	EE	\$8.75
CLARK, SAMIRAH	2022-07-01	ADD		\$4.62
CLARK, SAMIRAH	2022-08-01	LIFE		\$11.30
COWGILL, TERRY	2022-07-01	LIFE		\$85.80
CRAIGMILES, EMILY	2022-06-01	VSP	EC	\$15.02
CRAIGMILES, EMILY	2022-06-01	GUARDHIGH	EC	\$89.81
CROCITTO, MAGALI	2022-08-01	GUARDHIGH	EE	\$47.61
DAVIS, COURTNEY	2022-08-01	GUARDHIGH	EE	\$47.61
DAVIS, MIKAELAH	2022-06-01	ADD		\$0.84
DAVIS, MIKAELAH	2022-06-01	GUARDHIGH	EE	\$47.61
DAVIS, MIKAELAH	2022-06-01	VSP	EE	\$8.75
DENSON, KEITH	2022-08-01	ADD		\$4.20

HORIZONS HRS MANUFACTURING STAFFING II  
 118 WEST 5TH STREET SUITE 202  
 COVINGTON, KY 41011

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
DENSON, KEITH	2022-08-01	GUARDHIGH	EE	\$47.61
DUNN, MARCUS	2022-10-01	ADD		\$21.00
DUNN, MARCUS	2022-10-01	LIFE		\$14.40
DUNN, MARCUS	2022-10-01	GUARDHIGH	EE	\$47.61
DUNN, MARCUS	2022-10-01	VSP	EE	\$8.75
FLORES, LIZ	2022-03-01	VSP	EE	\$8.75
FLORES, LIZ	2022-03-01	GUARDHIGH	EE	\$47.61
GONZALEZ, CHRISTINA	2022-08-01	GUARDHIGH	EE	\$47.61
GONZALEZ, CHRISTINA	2022-08-01	VSP	EE	\$8.75
GULLEY, ANGELA	2022-09-01	ADD		\$3.36
GULLEY, ANGELA	2022-09-01	LIFE		\$1.80
GULLEY, ANGELA	2022-09-01	GUARDHIGH	EE	\$47.61
GULLEY, ANGELA	2022-09-01	VSP	EE	\$8.75
GUZMAN, TAYLOR	2022-03-01	GUARDHIGH	EE	\$47.61
HAYES, LARRY	2022-07-01	ADD		\$21.00
HAYES, LARRY	2022-07-01	LIFE		\$9.60
HAYES, LARRY	2022-07-01	GUARDHIGH	EE	\$47.61
HAYES, LARRY	2022-07-01	VSP	EE	\$8.75
HILL, RODERICK	2022-04-01	GUARDHIGH	EE	\$47.61
HILL, RODERICK	2022-04-01	VSP	EE	\$8.75
HOWARD, DEADRIEN	2022-04-01	GUARDLOW	EC	\$74.61
HOWARD, DEADRIEN	2022-04-01	VSP	EC	\$15.02
JACKSON, ANTONIO	2022-07-01	ADD		\$3.78
JACKSON, ANTONIO	2022-07-01	GUARDHIGH	EE	\$47.61
JACKSON, KERRIN	2022-08-01	ADD		\$2.10

HORIZONS HRS MANUFACTURING STAFFING II  
 118 WEST 5TH STREET SUITE 202  
 COVINGTON, KY 41011

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
JACKSON, KERRIN	2022-08-01	LIFE		\$12.95
JACKSON, KERRIN	2022-08-01	GUARDHIGH	ES	\$89.81
JACKSON, KERRIN	2022-08-01	VSP	EE	\$8.75
JOHN, ADDY	2022-09-01	ADD		\$4.20
JOHN, ADDY	2022-09-01	GUARDLOW	EE	\$29.44
JOHN, ADDY	2022-09-01	VSP	EE	\$8.75
JONES, MICHAEL	2022-08-01	LIFE		\$12.50
JONES, MICHAEL	2022-08-01	GUARDHIGH	EC	\$89.81
JONES, MICHAEL	2022-08-01	VSP	EC	\$15.02
JOSE-ANTONIO, FEBE	2022-02-01	GUARDLOW	EE	\$29.44
JOSE-ANTONIO, FEBE	2022-02-01	VSP	EE	\$8.75
MANNING, TODD	2022-04-01	GUARDHIGH	EE	\$47.61
MASSEY-PANKEY, CAYLA	2022-07-01	ADD		\$0.84
MCINTYRE, BRIAN	2022-06-01	GUARDLOW	EC	\$74.61
MCINTYRE, BRIAN	2022-06-01	VSP	EC	\$15.02
MOENCK, RYDGE	2022-05-01	ADD		\$0.84
MOENCK, RYDGE	2022-05-01	LIFE		\$2.90
MOENCK, RYDGE	2022-05-01	GUARDHIGH	EE	\$47.61
MOENCK, RYDGE	2022-05-01	VSP	EE	\$8.75
MURRIETTE, BRITTANY	2022-09-01	GUARDLOW	EE	\$29.44
MURRIETTE, BRITTANY	2022-09-01	VSP	EE	\$8.75
MUTIN, RANDY	2022-05-01	ADD		\$2.10
NEWSOME, TIMOTHY	2022-09-01	GUARDLOW	EE	\$29.44
NEWSOME, TIMOTHY	2022-09-01	VSP	EE	\$8.75

HORIZONS HRS MANUFACTURING STAFFING II  
 118 WEST 5TH STREET SUITE 202  
 COVINGTON, KY 41011

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
PEELER, ERICH	2022-07-01	ADD		\$0.42
PEELER, ERICH	2022-07-01	GUARDLOW	EE	\$29.44
PEELER, ERICH	2022-07-01	VSP	EE	\$8.75
RICHARD, EDNA	2022-08-01	LIFE		\$30.06
RODRIGUEZ, MARIO	2022-08-01	ADD		\$2.10
RODRIGUEZ, MARIO	2022-08-01	LIFE		\$10.51
RODRIGUEZ, MARIO	2022-08-01	VSP	ES	\$14.73
RODRIGUEZ, MARIO	2022-08-01	GUARDLOW	ES	\$55.54
RODRIGUEZ, WANDA	2022-08-01	GUARDLOW	EE	\$29.44
RODRIGUEZ, WANDA	2022-08-01	VSP	EE	\$8.75
SIMS, DUMA	2020-04-01	GUARDHIGH	ES	\$89.81
SIMS, DUMA	2020-04-01	VSP	ES	\$14.73
SISEMORE, HANNAH	2022-07-01	ADD		\$0.42
SISEMORE, HANNAH	2022-07-01	LIFE		\$0.60
STANCIL, ALACIA	2022-08-01	GUARDLOW	EE	\$29.44
STANCIL, ALACIA	2022-08-01	VSP	EE	\$8.75
SUTTON, JADE	2022-07-01	VSP	EC	\$15.02
SUTTON, JADE	2022-07-01	GUARDHIGH	EC	\$89.81
TUCKER, JOSEPH	2022-08-01	ADD		\$8.40
TUCKER, JOSEPH	2022-08-01	LIFE		\$7.20
TUCKER, JOSEPH	2022-08-01	VSP	EE	\$8.75
TUCKER, JOSEPH	2022-08-01	GUARDHIGH	EE	\$47.61

HORIZONS HRS MANUFACTURING STAFFING II  
 118 WEST 5TH STREET SUITE 202  
 COVINGTON, KY 41011

PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CALLOWAY, MARCUS	2022-09-01	GUARDHIGH	EE	\$47.61
CALLOWAY, MARCUS	2022-09-01	VSP	EE	\$8.75
GULLEY, ANGELA	2022-09-01	ADD		\$3.36
GULLEY, ANGELA	2022-09-01	LIFE		\$1.80
GULLEY, ANGELA	2022-09-01	GUARDHIGH	EE	\$47.61
GULLEY, ANGELA	2022-09-01	VSP	EE	\$8.75
JOHN, ADDY	2022-09-01	ADD		\$4.20
JOHN, ADDY	2022-09-01	GUARDLOW	EE	\$29.44
JOHN, ADDY	2022-09-01	VSP	EE	\$8.75
MURRIETTE, BRITTANY	2022-09-01	VSP	EE	\$8.75
NEWSOME, TIMOTHY	2022-09-01	GUARDLOW	EE	\$29.44
NEWSOME, TIMOTHY	2022-09-01	VSP	EE	\$8.75

MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

HORIZONS HRS SERVICE STAFFING II  
118 WEST 5TH STREET SUITE 202  
COVINGTON, KY 41011

Invoice Number: 4217-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1399OPENAXESSGOLD	Employee Only	1	\$653.81	\$653.81
1399OPENAXESSGOLD	Employee & Children	1	\$1,307.62	\$1,307.62
ADD	Employee Only	17	\$6.30**	\$48.72
GUARDHIGH	Employee Only	10	\$47.61	\$476.10
GUARDHIGH	Family	2	\$160.18	\$320.36
GUARDLOW	Employee Only	14	\$29.44	\$412.16
GUARDLOW	Employee & Children	4	\$74.61	\$298.44
LIFE	Employee Only	14	\$10.80**	\$89.74
VSP	Employee Only	22	\$8.75	\$192.50
VSP	Employee & Children	4	\$15.02	\$60.08
VSP	Family	2	\$23.76	\$47.52
			GRAND TOTAL	\$4,202.08

HORIZONS HRS SERVICE STAFFING II  
118 WEST 5TH STREET SUITE 202  
COVINGTON, KY 41011

CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ABED, ABDEL-RAHEEM	2022-05-01	ADD		\$0.42
BENSON, NICOLE	2022-08-01	GUARDHIGH	EE	\$47.61
BENSON, NICOLE	2022-08-01	VSP	EE	\$8.75
BRYANT, DEVON	2022-08-01	ADD		\$8.40
BRYANT, DEVON	2022-08-01	LIFE		\$8.00
BRYANT, DEVON	2022-08-01	GUARDLOW	EE	\$29.44
BRYANT, DEVON	2022-08-01	VSP	EE	\$8.75
BURKS, TYUNNA	2022-09-01	GUARDLOW	EE	\$29.44
CARLTON, DEMONICA	2022-07-01	ADD	EE	\$0.42
CARLTON, DEMONICA	2022-07-01	LIFE	EE	\$0.60
CARLTON, DEMONICA	2022-07-01	GUARDLOW	EC	\$74.61
CARLTON, DEMONICA	2022-07-01	VSP	EC	\$15.02
CHANEY, NICETA	2022-08-01	GUARDLOW	EC	\$74.61
CHANEY, NICETA	2022-08-01	VSP	EC	\$15.02
DEBASE, ROBERT	2022-09-01	ADD		\$0.42
DEBASE, ROBERT	2022-09-01	GUARDLOW	EE	\$29.44
DEBASE, ROBERT	2022-09-01	VSP	EE	\$8.75
DICKERSON, JOY	2022-10-01	LIFE		\$9.00
DICKERSON, JOY	2022-10-01	GUARDHIGH	EE	\$47.61
DICKERSON, JOY	2022-10-01	VSP	EE	\$8.75
FOSTER, JOHANA	2022-09-01	ADD		\$0.42
FOSTER, JOHANA	2022-09-01	LIFE		\$3.00
FOSTER, JOHANA	2022-09-01	VSP	EE	\$8.75
GREEN, KIMBERLY	2022-10-01	GUARDHIGH	EE	\$47.61
GREEN, KIMBERLY	2022-10-01	VSP	EE	\$8.75
HOLLIS, ANDREW	2022-07-01	ADD		\$0.42



HORIZONS HRS SERVICE STAFFING II  
118 WEST 5TH STREET SUITE 202  
COVINGTON, KY 41011

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
HYDE, AMANDA	2022-05-01	LIFE		\$29.40
HYDE, AMANDA	2022-05-01	GUARDHIGH	FAM	\$160.18
HYDE, AMANDA	2022-05-01	VSP	FAM	\$23.76
JONES, ALEXIS	2022-06-01	GUARDLOW	EC	\$74.61
JONES, ALEXIS	2022-06-01	VSP	EC	\$15.02
JORDAN, ERICA	2022-07-01	ADD		\$6.30
JORDAN, ERICA	2022-07-01	LIFE		\$10.80
JORDAN, ERICA	2022-07-01	GUARDLOW	EE	\$29.44
JORDAN, ERICA	2022-07-01	VSP	EE	\$8.75
KING, TREVEON	2022-08-01	GUARDLOW	EE	\$29.44
KRIEDMAN, FAITH	2022-08-01	ADD		\$0.42
KRIEDMAN, FAITH	2022-08-01	LIFE		\$1.20
LANG, TINA	2022-06-01	GUARDHIGH	EE	\$47.61
LASTER, KELLI	2022-05-01	ADD		\$0.42
LASTER, KELLI	2022-05-01	LIFE		\$0.60
LASTER, KELLI	2022-05-01	VSP	EE	\$8.75
LASTER, KELLI	2022-05-01	GUARDHIGH	EE	\$47.61
LEE, MALACHI	2022-06-01	VSP	EE	\$8.75
MCDONALD, MAURICE	2022-05-01	ADD		\$1.68
MCDONALD, MAURICE	2022-05-01	LIFE		\$12.00
MCDONALD, MAURICE	2022-05-01	GUARDLOW	EE	\$29.44
MCDONALD, MAURICE	2022-05-01	VSP	EE	\$8.75
MERRITT, BRINASE	2020-01-01	GUARDLOW	EE	\$29.44
MERRITT, BRINASE	2020-01-01	VSP	EE	\$8.75

HORIZONS HRS SERVICE STAFFING II  
118 WEST 5TH STREET SUITE 202  
COVINGTON, KY 41011

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
MIDDLEBROOKS, JAMELLA	2022-06-01	GUARDLOW	EC	\$74.61
MIDDLEBROOKS, JAMELLA	2022-06-01	VSP	EC	\$15.02
MITCHELL, BROOKE	2022-10-01	ADD		\$0.42
MITCHELL, BROOKE	2022-10-01	LIFE		\$0.60
MITCHELL, BROOKE	2022-10-01	GUARDHIGH	EE	\$47.61
MITCHELL, BROOKE	2022-10-01	VSP	EE	\$8.75
PENNYMAN, ANITRA	2022-08-01	ADD		\$0.84
PENNYMAN, ANITRA	2022-08-01	LIFE		\$7.64
PENNYMAN, ANITRA	2022-08-01	GUARDHIGH	EE	\$47.61
PENNYMAN, ANITRA	2022-08-01	VSP	EE	\$8.75
RABB, RASHAAN	2022-07-01	ADD		\$8.82
RABB, RASHAAN	2022-07-01	LIFE		\$3.00
RABB, RASHAAN	2022-07-01	GUARDHIGH	EE	\$47.61
RABB, RASHAAN	2022-07-01	VSP	EE	\$8.75
ROBERTS, YOLANDA	2022-09-01	ADD		\$0.42
ROBERTS, YOLANDA	2022-09-01	LIFE		\$3.30
ROBERTS, YOLANDA	2022-09-01	GUARDLOW	EE	\$29.44
ROBERTS, YOLANDA	2022-09-01	VSP	EE	\$8.75
SHEAD, NICK	2022-03-01	ADD		\$4.20
SHEAD, NICK	2022-03-01	VSP	EE	\$8.75
SHEAD, NICK	2022-03-01	GUARDLOW	EE	\$29.44
SHEPHERD, MATTHEW	2022-07-01	ADD		\$6.30
SHEPHERD, MATTHEW	2022-07-01	LIFE		\$0.60
SHEPHERD, MATTHEW	2022-07-01	GUARDLOW	EE	\$29.44
SHEPHERD, MATTHEW	2022-07-01	VSP	EE	\$8.75
SIMMONS, KIANA	2022-09-01	GUARDHIGH	EE	\$47.61

HORIZONS HRS SERVICE STAFFING II  
 118 WEST 5TH STREET SUITE 202  
 COVINGTON, KY 41011

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
SIMS, CHEYENNE	2022-08-01	VSP	EE	\$8.75
SPRINGER, REBEKAH	2022-04-27	1399OPENAXESSGOLD	EC2	\$1307.62
SPRINGER, REBEKAH	2022-04-27	VSP	FAM	\$23.76
SPRINGER, REBEKAH	2022-04-27	GUARDHIGH	FAM	\$160.18
WEEDEN, DESTINE	2022-07-01	ADD		\$8.40
WEEDEN, DESTINE	2022-07-01	VSP	EE	\$8.75
WEEDEN, DESTINE	2022-07-01	GUARDLOW	EE	\$29.44
WILLIAMS, FRANK	2020-01-01	1399OPENAXESSGOLD	EE	\$653.81
WILLIAMS, FRANK	2020-01-01	GUARDHIGH	EE	\$47.61
WILLIAMS, FRANK	2020-01-01	VSP	EE	\$8.75
WOJCINSKI, JOSHUA	2022-06-01	GUARDLOW	EE	\$29.44
WOJCINSKI, JOSHUA	2022-06-01	VSP	EE	\$8.75
WOODS, DIVINE	2022-09-01	GUARDLOW	EE	\$29.44
WRIGHT, LA'BRITTNEY	2022-09-01	GUARDLOW	EE	\$29.44
WRIGHT, LA'BRITTNEY	2022-09-01	VSP	EE	\$8.75

HORIZONS HRS SERVICE STAFFING II  
 118 WEST 5TH STREET SUITE 202  
 COVINGTON, KY 41011

PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CHANEY, NICETA	2022-08-01	GUARDLOW	EC	\$74.61
DEBASE, ROBERT	2022-09-01	ADD		\$0.42
DEBASE, ROBERT	2022-09-01	GUARDLOW	EE	\$29.44
DEBASE, ROBERT	2022-09-01	VSP	EE	\$8.75
FOSTER, JOHANA	2022-09-01	ADD		\$0.42
FOSTER, JOHANA	2022-09-01	LIFE		\$3.00
RABB, RASHAAN	2022-07-01	ADD		\$8.82
RABB, RASHAAN	2022-07-01	LIFE		\$3.00
RABB, RASHAAN	2022-07-01	GUARDHIGH	EE	\$47.61
ROBERTS, YOLANDA	2022-09-01	ADD		\$0.42
ROBERTS, YOLANDA	2022-09-01	LIFE		\$3.30
ROBERTS, YOLANDA	2022-09-01	VSP	EE	\$8.75
SIMMONS, KIANA	2022-09-01	GUARDHIGH	EE	\$47.61
WOODS, DIVINE	2022-09-01	GUARDLOW	EE	\$29.44
WRIGHT, LA'BRITTNEY	2022-09-01	GUARDLOW	EE	\$29.44

MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

HORIZONS HRS TRANSPORTATION STAFFING II  
118 WEST 5TH STREET SUITE 202  
COVINGTON, KY 41011

Invoice Number: 4218-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1399OPENAXESSBRONZ	Employee & Spouse Only	1	\$986.92	\$986.92
1399OPENAXESSILVE	Employee & Spouse Only	1	\$1,096.36	\$1,096.36
GUARDLOW	Employee Only	1	\$29.44	\$29.44
GUARDLOW	Employee & Spouse Only	1	\$55.54	\$55.54
VSP	Employee Only	1	\$8.75	\$8.75
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
			GRAND TOTAL	\$2,191.74

HORIZONS HRS TRANSPORTATION STAFFING II  
118 WEST 5TH STREET SUITE 202  
COVINGTON, KY 41011

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
DULSKY, DARREN	2021-07-01	1399OPENAXESSBRONZ ES		\$986.92
DULSKY, DARREN	2020-01-01	GUARDLOW	EE	\$29.44
DULSKY, DARREN	2020-01-01	VSP	EE	\$8.75
SPENCER, THOMAS	2021-01-01	1399OPENAXESSSILVE ES		\$1096.36
SPENCER, THOMAS	2020-01-01	GUARDLOW	ES	\$55.54
SPENCER, THOMAS	2020-01-01	VSP	ES	\$14.73

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

HOSPITALITY MANAGEMENT SERVICES  
3204 Candelaria Rd NE  
ALBUQUERQUE, NM 87107

Invoice Number: 4467-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1788OPENAXESSGOLD	Employee Only	1	\$719.19	\$719.19
ADD	Employee Only	1	\$0.00**	\$1.26
LIFE	Employee Only	1	\$0.00**	\$21.45
VSP	Employee Only	1	\$0.00	\$8.75
			GRAND TOTAL	\$750.65

## HOSPITALITY MANAGEMENT SERVICES

3204 Candelaria Rd NE  
ALBUQUERQUE, NM 87107

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ROBBINS, ANNE	2022-08-01	ADD		\$1.26
ROBBINS, ANNE	2022-08-01	LIFE		\$21.45
ROBBINS, ANNE	2022-08-01	VSP	EE	\$8.75
TAYLOR, EVELYN	2022-01-01	1788OPENAXESSGOLD	EE	\$719.19

## MEDICAL PLAN COUNTS

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





## Account Services

### Monthly Statement

INCREDICARE  
4893 PRINCE WILLIAM PARKWAY  
WOODBIDGE, VA 22192

Invoice Number: 4201-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDLOW	Employee Only	2	\$29.44	\$58.88
			GRAND TOTAL	\$106.49

INCREDICARE  
4893 PRINCE WILLIAM PARKWAY  
WOODBIDGE, VA 22192

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
JACKSON, SHA-KINA	2021-01-01	GUARDLOW	EE	\$29.44
PELULLO, JOSEPH	2022-01-01	GUARDHIGH	EE	\$47.61
WOSORNU, LINDA	2022-01-01	GUARDLOW	EE	\$29.44

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

INFINITI HR CORP  
3905 NATIONAL DR., SUITE 400  
BURTONSVILLE, MD 20866

Invoice Number: 1-2022-10  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
DENTALGUARD	Employee Only	17	\$47.61	\$809.37
DENTALGUARD	Employee & Spouse Only	4	\$89.81	\$359.24
DENTALGUARD	Employee & Children	1	\$117.99	\$117.99
DENTALGUARD	Family	5	\$160.18	\$800.90
GUARDLOW	Employee Only	23	\$29.44	\$677.12
GUARDLOW	Employee & Spouse Only	2	\$55.54	\$111.08
GUARDLOW	Employee & Children	4	\$74.61	\$298.44
GUARDLOW	Family	4	\$100.74	\$402.96
PLATINUM	Employee Only	37	\$386.46	\$14,299.02
PLATINUM	Employee & Spouse Only	5	\$854.88	\$4,274.40
PLATINUM	Employee & Children	8	\$796.91	\$6,375.28
PLATINUM	Family	10	\$1,252.13	\$12,521.30
VSP FULL	Employee Only	39	\$8.75	\$341.25
VSP FULL	Employee & Spouse Only	3	\$14.73	\$44.19
VSP FULL	Employee & Children	6	\$15.02	\$90.12
VSP FULL	Family	7	\$23.76	\$166.32
ADJUSTMENT	GUARDIAN ADD SEPT			\$125.16
ADJUSTMENT	GUARDIAN LIFE SEPT			\$389.22
GRAND TOTAL				\$42,203.36

INFINITI HR CORP  
3905 NATIONAL DR., SUITE 400  
BURTONSVILLE, MD 20866

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ATKINSON, CHANTE	12/01/2020	PLATINUM	EE	\$386.46
ATKINSON, CHANTE	12/01/2020	GUARDLOW	EE	\$29.44
ATKINSON, CHANTE	12/01/2020	VSP FULL	EE	\$8.75
BANKS, DEASJA	01/01/2021	PLATINUM	EC	\$796.91
BANKS, DEASJA	01/01/2021	GUARDLOW	EC	\$74.61
BANKS, DEASJA	01/01/2021	VSP FULL	EC	\$15.02
BARBAGALLO, APRIL	12/01/2020	PLATINUM	EE	\$386.46
BARBAGALLO, APRIL	12/01/2020	DENTALGUARD	EE	\$47.61
BARBAGALLO, APRIL	12/01/2020	VSP FULL	EE	\$8.75
BARBAGALLO, TAYLOR	12/01/2020	PLATINUM	EE	\$386.46
BARBAGALLO, TAYLOR	12/01/2020	GUARDLOW	EE	\$29.44
BARBAGALLO, TAYLOR	12/01/2020	VSP FULL	EE	\$8.75
BLAND, NATALEY	05/01/2022	PLATINUM	EE	\$386.46
BLAND, NATALEY	05/01/2022	DENTALGUARD	EE	\$47.61
BLAND, NATALEY	05/01/2022	VSP FULL	EE	\$8.75
BLUNT, ROBERT	12/01/2020	PLATINUM	ES	\$854.88
BLUNT, ROBERT	12/01/2020	GUARDLOW	EE	\$29.44
BLUNT, ROBERT	12/01/2020	VSP FULL	ES	\$14.73
BOJAN, MARC	12/01/2020	PLATINUM	ES	\$854.88
BOJAN, MARC	12/01/2020	DENTALGUARD	ES	\$89.81
BOWIE, MICHELLE	12/01/2020	PLATINUM	EE	\$386.46
BOWIE, MICHELLE	12/01/2020	GUARDLOW	EE	\$29.44
BOWIE, MICHELLE	12/01/2020	VSP FULL	EC	\$15.02
BREEDEN, CHRISTOPHER	12/01/2020	PLATINUM	EE	\$386.46
BREEDEN, CHRISTOPHER	12/01/2020	DENTALGUARD	EE	\$47.61
BREEDEN, CHRISTOPHER	12/01/2020	VSP FULL	EE	\$8.75
BURGESS, PATRICIA	04/01/2022	PLATINUM	EE	\$386.46

INFINITI HR CORP  
3905 NATIONAL DR., SUITE 400  
BURTONSVILLE, MD 20866

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BURGESS, PATRICIA	04/01/2022	DENTALGUARD	EE	\$47.61
BURGESS, PATRICIA	04/01/2022	VSP FULL	EE	\$8.75
CARROLL, JOSELIN	06/01/2022	PLATINUM	EC	\$796.91
CARROLL, JOSELIN	06/01/2022	DENTALGUARD	EE	\$47.61
CARROLL, JOSELIN	06/01/2022	VSP FULL	EE	\$8.75
CHAMBERS, COURTNEY	05/01/2022	PLATINUM	EE	\$386.46
CHAMBERS, COURTNEY	05/01/2022	DENTALGUARD	EE	\$47.61
CHAMBERS, COURTNEY	05/01/2022	VSP FULL	EE	\$8.75
CLOIN, DAWN	2022-01-01	PLATINUM	ES	\$854.88
CLOIN, DAWN	2022-01-01	DENTALGUARD	ES	\$89.81
CLOIN, DAWN	2022-01-01	VSP FULL	ES	\$14.73
ELLIOTT, LOUIS	10/01/2022	PLATINUM	EE	\$386.46
ELLIOTT, LOUIS	10/01/2022	GUARDLOW	EE	\$29.44
ELLIOTT, LOUIS	10/01/2022	VSP FULL	EE	\$8.75
EPSTEIN, MIRIAM	08/01/2021	VSP FULL	EE	\$8.75
EPSTEIN, MIRIAM	08/01/2021	PLATINUM	EE	\$386.46
EPSTEIN, MIRIAM	08/01/2021	DENTALGUARD	EE	\$47.61
FARRELL, JEAN	12/01/2020	VSP FULL	EE	\$8.75
FARRELL, JEAN	12/01/2020	DENTALGUARD	EE	\$47.61
FARRELL, JEAN	12/01/2020	PLATINUM	EE	\$386.46
FELDMAN, DANIEL	12/01/2020	DENTALGUARD	ES	\$89.81
FELDMAN, DANIEL	12/01/2020	PLATINUM	EE	\$386.46
FITZWATER, STEPHANIE	12/01/2020	PLATINUM	FAM	\$1252.13
FITZWATER, STEPHANIE	12/01/2020	GUARDLOW	FAM	\$100.74
FITZWATER, STEPHANIE	12/01/2020	VSP FULL	FAM	\$23.76

INFINITI HR CORP  
3905 NATIONAL DR., SUITE 400  
BURTONSVILLE, MD 20866

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
FLYNN, JODI	09/01/2021	PLATINUM	EE	\$386.46
FLYNN, JODI	09/01/2021	GUARDLOW	EE	\$29.44
FLYNN, JODI	09/01/2021	VSP FULL	EE	\$8.75
HARDESTY, JENNIFER	12/01/2020	PLATINUM	EC	\$796.91
HARDESTY, JENNIFER	12/01/2020	GUARDLOW	EE	\$29.44
HARGROVE, MATTHEW	02/01/2022	PLATINUM	EE	\$386.46
HARGROVE, MATTHEW	02/01/2022	DENTALGUARD	EE	\$47.61
HARGROVE, MATTHEW	02/01/2022	VSP FULL	EE	\$8.75
HECKENDORN, KARL	11/01/2021	PLATINUM	EE	\$386.46
HECKENDORN, KARL	11/01/2021	DENTALGUARD	EE	\$47.61
HECKENDORN, KARL	11/01/2021	VSP FULL	EC	\$15.02
HENREY, NICOLE	03/01/2022	PLATINUM	FAM	\$1252.13
HENREY, NICOLE	03/01/2022	DENTALGUARD	FAM	\$160.18
HENREY, NICOLE	03/01/2022	VSP FULL	FAM	\$23.76
HENSON, KIA	12/01/2020	PLATINUM	EE	\$386.46
HENSON, KIA	12/01/2020	GUARDLOW	EE	\$29.44
HENSON, KIA	12/01/2020	VSP FULL	EE	\$8.75
HIBAN, PATRICK	12/01/2020	PLATINUM	ES	\$854.88
HIBAN, PATRICK	12/01/2020	GUARDLOW	ES	\$55.54
JACOBS, ALLYSHA	06/01/2022	PLATINUM	EE	\$386.46
JACOBS, ALLYSHA	06/01/2022	GUARDLOW	EE	\$29.44
JACOBS, ALLYSHA	06/01/2022	VSP FULL	EE	\$8.75
JACOBS, REBECCA	12/01/2020	PLATINUM	FAM	\$1252.13
JACOBS, REBECCA	12/01/2020	VSP FULL	EE	\$8.75
JIVIDEN, JENNIFER	03/01/2021	PLATINUM	EC	\$796.91

INFINITI HR CORP  
3905 NATIONAL DR., SUITE 400  
BURTONSVILLE, MD 20866

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
JIVIDEN, JENNIFER	03/01/2021	GUARDLOW	EE	\$29.44
JIVIDEN, JENNIFER	03/01/2021	VSP FULL	EE	\$8.75
JOHNSON, ELENA	10/01/2022	PLATINUM	FAM	\$1252.13
JOHNSON, ELENA	10/01/2022	GUARDLOW	FAM	\$100.74
JOHNSON, ELENA	10/01/2022	VSP FULL	FAM	\$23.76
JOHNSON, FREDERICK	12/01/2020	PLATINUM	EE	\$386.46
JOHNSON, FREDERICK	12/01/2020	VSP FULL	EE	\$8.75
KALU, RAPHAEL	04/01/2022	PLATINUM	EE	\$386.46
KALU, RAPHAEL	04/01/2022	DENTALGUARD	EE	\$47.61
KALU, RAPHAEL	04/01/2022	VSP FULL	EE	\$8.75
KNISLEY, CHRISTINE	12/01/2020	PLATINUM	EE	\$386.46
KNISLEY, CHRISTINE	12/01/2020	DENTALGUARD	EE	\$47.61
KNISLEY, CHRISTINE	12/01/2020	VSP FULL	EE	\$8.75
KNISLEY, WILLIAM	04/01/2022	PLATINUM	EC	\$796.91
KNISLEY, WILLIAM	04/01/2022	DENTALGUARD	EC	\$117.99
KNISLEY, WILLIAM	04/01/2022	VSP FULL	EC	\$15.02
KRAMER, JULIE	05/01/2022	PLATINUM	ES	\$854.88
KRAMER, JULIE	05/01/2022	GUARDLOW	ES	\$55.54
KRAMER, JULIE	05/01/2022	VSP FULL	EE	\$8.75
LOVE, KAREN	12/01/2020	PLATINUM	EE	\$386.46
LOVE, KAREN	12/01/2020	GUARDLOW	EE	\$29.44
LOVE, KAREN	12/01/2020	VSP FULL	EE	\$8.75
MAHAN, MICHELLE	04/01/2022	PLATINUM	EE	\$386.46
MAHAN, MICHELLE	04/01/2022	GUARDLOW	EE	\$29.44
MAHAN, MICHELLE	04/01/2022	VSP FULL	EE	\$8.75

INFINITI HR CORP  
3905 NATIONAL DR., SUITE 400  
BURTONSVILLE, MD 20866

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
MCCORMACK, JUSTINE	07/01/2021	PLATINUM	EE	\$386.46
MCCORMACK, JUSTINE	07/01/2021	GUARDLOW	EE	\$29.44
MCCORMACK, JUSTINE	07/01/2021	VSP FULL	EE	\$8.75
MCLEAN, ALEXANDREA	12/01/2020	PLATINUM	EC	\$796.91
MCLEAN, ALEXANDREA	12/01/2020	GUARDLOW	EC	\$74.61
MCLEAN, ALEXANDREA	12/01/2020	VSP FULL	EC	\$15.02
MCNAMARA, JEREMY	12/01/2020	PLATINUM	FAM	\$1252.13
MCNAMARA, JEREMY	12/01/2020	DENTALGUARD	FAM	\$160.18
MCNAMARA, JEREMY	12/01/2020	VSP FULL	FAM	\$23.76
MORMINO, DANIEL	12/01/2020	PLATINUM	EE	\$386.46
MORMINO, DANIEL	12/01/2020	DENTALGUARD	EE	\$47.61
MORMINO, DANIEL	12/01/2020	VSP FULL	EE	\$8.75
OGUNDIJO, SIMISOLA	12/01/2020	PLATINUM	EE	\$386.46
OGUNDIJO, SIMISOLA	12/01/2020	GUARDLOW	EE	\$29.44
OGUNDIJO, SIMISOLA	12/01/2020	VSP FULL	EE	\$8.75
RAYMOND, ABIGAIL	11/01/2021	PLATINUM	EE	\$386.46
RAYMOND, ABIGAIL	11/01/2021	GUARDLOW	EC	\$74.61
RODRIGUEZ QUACH, JERRICA	08/01/2021	PLATINUM	EE	\$386.46
RODRIGUEZ QUACH, JERRICA	08/01/2021	GUARDLOW	EE	\$29.44
RODRIGUEZ QUACH, JERRICA	08/01/2021	VSP FULL	EE	\$8.75
SAHAGUN, JANNETTE	08/01/2021	PLATINUM	EC	\$796.91
SAHAGUN, JANNETTE	08/01/2021	GUARDLOW	EE	\$29.44
SAHAGUN, JANNETTE	08/01/2021	VSP FULL	EE	\$8.75
SANCHEZ, ADRIANA	03/01/2022	PLATINUM	EE	\$386.46
SANCHEZ, ADRIANA	03/01/2022	DENTALGUARD	EE	\$47.61



INFINITI HR CORP  
3905 NATIONAL DR., SUITE 400  
BURTONSVILLE, MD 20866

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
SCHWAIGER, MARK	12/01/2020	PLATINUM	FAM	\$1252.13
SCHWAIGER, MARK	12/01/2020	DENTALGUARD	FAM	\$160.18
SCHWAIGER, MARK	12/01/2020	VSP FULL	FAM	\$23.76
SERRANO, FERNANDO	07/01/2022	PLATINUM	EE	\$386.46
SERRANO, FERNANDO	07/01/2022	DENTALGUARD	EE	\$47.61
SERRANO, FERNANDO	07/01/2022	VSP FULL	EE	\$8.75
SEWARD, DARREN	03/01/2022	PLATINUM	FAM	\$1252.13
SEWARD, DARREN	03/01/2022	DENTALGUARD	FAM	\$160.18
SKLAMM, COLLEEN	12/01/2020	VSP FULL	EE	\$8.75
SKLAMM, COLLEEN	12/01/2020	GUARDLOW	EE	\$29.44
SKLAMM, COLLEEN	12/01/2020	PLATINUM	EE	\$386.46
SMITH, KYMBERLY	12/01/2020	PLATINUM	EE	\$386.46
SMITH, KYMBERLY	12/01/2020	GUARDLOW	EE	\$29.44
SMITH, KYMBERLY	12/01/2020	VSP FULL	EE	\$8.75
SMITH, LYNNE	12/01/2020	VSP FULL	EE	\$8.75
SMITH, LYNNE	12/01/2020	GUARDLOW	EE	\$29.44
SMRKOVSKI, SCOTT	12/01/2020	PLATINUM	FAM	\$1252.13
SMRKOVSKI, SCOTT	12/01/2020	DENTALGUARD	FAM	\$160.18
SMRKOVSKI, SCOTT	12/01/2020	VSP FULL	FAM	\$23.76
STEWART, JOAN	12/01/2020	PLATINUM	EE	\$386.46
STEWART, JOAN	12/01/2020	DENTALGUARD	EE	\$47.61
STEWART, JOAN	12/01/2020	VSP FULL	EE	\$8.75
STRAUGHAN, JACK	12/01/2020	PLATINUM	FAM	\$1252.13
STRAUGHAN, JACK	12/01/2020	GUARDLOW	FAM	\$100.74
STRAUGHAN, JACK	12/01/2020	VSP FULL	FAM	\$23.76

INFINITI HR CORP  
3905 NATIONAL DR., SUITE 400  
BURTONSVILLE, MD 20866

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
SULLIVAN, SYDNEY	07/01/2022	PLATINUM	EE	\$386.46
SULLIVAN, SYDNEY	07/01/2022	DENTALGUARD	EE	\$47.61
SULLIVAN, SYDNEY	07/01/2022	VSP FULL	EE	\$8.75
TERMINIELLO, ANTHONY	12/01/2020	PLATINUM	FAM	\$1252.13
TERMINIELLO, ANTHONY	12/01/2020	GUARDLOW	FAM	\$100.74
TERMINIELLO, ANTHONY	12/01/2020	VSP FULL	EE	\$8.75
VAN-MEERS, DEBRA	12/01/2020	PLATINUM	EE	\$386.46
VAN-MEERS, DEBRA	12/01/2020	GUARDLOW	EE	\$29.44
VAN-MEERS, DEBRA	12/01/2020	VSP FULL	EE	\$8.75
VILLAN, MARIA	04/01/2022	PLATINUM	EC	\$796.91
VILLAN, MARIA	04/01/2022	GUARDLOW	EC	\$74.61
VILLAN, MARIA	04/01/2022	VSP FULL	EC	\$15.02
VILLAN, NATANAEL	09/01/2022	PLATINUM	EE	\$386.46
VILLAN, NATANAEL	09/01/2022	GUARDLOW	EE	\$29.44
VILLAN, NATANAEL	09/01/2022	VSP FULL	EE	\$8.75
WELSH, BRADLEY	06/01/2021	PLATINUM	EE	\$386.46
WELSH, BRADLEY	06/01/2021	DENTALGUARD	ES	\$89.81
WELSH, BRADLEY	06/01/2021	VSP FULL	ES	\$14.73
WHITNEY, ISSAC	12/01/2020	GUARDLOW	EE	\$29.44
WHITNEY, ISSAC	12/01/2020	VSP FULL	EE	\$8.75
ZAMORA, JESSICA	12/01/2020	PLATINUM	EE	\$386.46
ZAMORA, JESSICA	12/01/2020	GUARDLOW	EE	\$29.44
ZAMORA, JESSICA	12/01/2020	VSP FULL	EE	\$8.75

MEDICAL PLAN COUNTS

Employee Only	37
Employee & Spouse	5
Employee & Children	8
Family	10



## Account Services

### Monthly Statement

INSPIRING HR, LLC  
12750 JEFFERSON DAVIS HWY  
CHESTER, VA 23831

Invoice Number: 4575-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	2	\$4.62**	\$9.24
GUARDHIGH	Employee & Children	1	\$89.81	\$89.81
LIFE	Employee Only	2	\$24.62**	\$57.62
VSP	Employee & Children	1	\$15.02	\$15.02
			GRAND TOTAL	\$171.69

INSPIRING HR, LLC  
12750 JEFFERSON DAVIS HWY  
CHESTER, VA 23831

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CHAPIN, SONIA	2021-09-01	ADD		\$4.62
CHAPIN, SONIA	2022-03-01	LIFE		\$24.62
JUAREZ, VALERIE	2018-12-01	ADD		\$4.62
JUAREZ, VALERIE	2022-01-01	GUARDHIGH	EC	\$89.81
JUAREZ, VALERIE	2022-01-01	VSP	EC	\$15.02
JUAREZ, VALERIE	2022-03-01	LIFE		\$33.00

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

IRBM INC  
420 COLUMBUS AVE, STE 304  
VALHALLA, NY 10595

Invoice Number: 4437-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1757OPENAXESSCOPPE	Employee Only	1	\$495.83	\$495.83
1757OPENAXESSGOLD	Employee & Spouse Only	1	\$1,438.38	\$1,438.38
1757OPENAXESSPLATI	Employee Only	1	\$862.95	\$862.95
ADD	Employee Only	2	\$4.20**	\$25.20
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDHIGH	Employee & Spouse Only	1	\$89.81	\$89.81
GUARDLOW	Employee Only	1	\$29.44	\$29.44
LIFE	Employee Only	1	\$33.00**	\$33.00
VSP	Employee Only	2	\$8.75	\$17.50
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
			GRAND TOTAL	\$3,054.45

IRBM INC  
420 COLUMBUS AVE, STE 304  
VALHALLA, NY 10595

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
DEPALMA, PATRICK	2022-06-01	ADD		\$4.20
DEPALMA, PATRICK	2022-06-01	LIFE		\$33.00
DEPALMA, PATRICK	2022-06-01	GUARDHIGH	EE	\$47.61
DEPALMA, PATRICK	2022-06-01	1757OPENAXESSPLATI	EE	\$862.95
DEPALMA, PATRICK	2022-06-01	VSP	EE	\$8.75
HICKOK, JASON	2022-01-01	GUARDLOW	EE	\$29.44
HICKOK, JASON	2022-01-01	1757OPENAXESSCOPPE	EE	\$495.83
HICKOK, JASON	2022-01-01	VSP	EE	\$8.75
LUCHE, MICHELE	2022-01-01	ADD		\$21.00
LUCHE, MICHELE	2022-01-01	GUARDHIGH	ES	\$89.81
LUCHE, MICHELE	2022-01-01	1757OPENAXESSGOLD	ES	\$1438.38
LUCHE, MICHELE	2022-01-01	VSP	ES	\$14.73

**MEDICAL PLAN COUNTS**

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



## Account Services

### Monthly Statement

IRON KINGDOM  
4904 LAWRENCE STREET  
HYATTSVILLE, MD 20781

Invoice Number: 4178-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	2	\$47.61	\$95.22
LIFE	Employee Only	1	\$50.05**	\$50.05
GRAND TOTAL				\$145.27

IRON KINGDOM  
4904 LAWRENCE STREET  
HYATTSVILLE, MD 20781

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BONILLA, DORA	2021-01-01	GUARDHIGH	EE	\$47.61
CHAVEZ, JOSE	2021-01-01	GUARDHIGH	EE	\$47.61
TALLEY, ROBERT	2021-01-01	LIFE		\$50.05

## MEDICAL PLAN COUNTS

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





## Account Services

### Monthly Statement

IRON TRIBE FITNESS - CHARLESTON  
1145 JONNIE DODDS BLVD  
MT. PLEASANT, SC 29464

Invoice Number: 4557-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Family	1	\$160.18	\$160.18
			GRAND TOTAL	\$160.18

IRON TRIBE FITNESS - CHARLESTON  
1145 JONNIE DODDS BLVD  
MT. PLEASANT, SC 29464

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ALEXANDER, DEBORAH	2017-12-01	GUARDHIGH	FAM	\$160.18

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

J. A. LAMY MANUFACTURING CO.  
108 W PACIFIC ST  
SEDALIA, MO 65301

Invoice Number: 4478-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$21.00**	\$4.62
GUARDHIGH	Employee Only	2	\$47.61	\$95.22
GUARDLOW	Employee Only	1	\$29.44	\$29.44
LIFE	Employee Only	1	\$9.60**	\$9.60
VSP	Employee Only	3	\$8.75	\$26.25
			GRAND TOTAL	\$165.13

J. A. LAMY MANUFACTURING CO.  
 108 W PACIFIC ST  
 SEDALIA, MO 65301

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BRANCH, TIMOTHY	2021-12-01	GUARDLOW	EE	\$29.44
BRANCH, TIMOTHY	2021-12-01	VSP	EE	\$8.75
VINCENT, TYLER	2021-12-01	LIFE		\$9.60
VINCENT, TYLER	2021-12-01	ADD		\$4.62
VINCENT, TYLER	2021-12-01	GUARDHIGH	EE	\$47.61
VINCENT, TYLER	2021-12-01	VSP	EE	\$8.75
WINNING, HALEY	2021-12-01	GUARDHIGH	EE	\$47.61
WINNING, HALEY	2021-12-01	VSP	EE	\$8.75

**MEDICAL PLAN COUNTS**

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



## Account Services

### Monthly Statement

JACARANDA CAPITAL SUPERCUTS NC & SC  
7804 Fairview Rd # 225  
CHARLOTTE, NC 28226

Invoice Number: 4525-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1866OPENAXESSGOLD	Family	1	\$2,157.57	\$2,157.57
ADD	Employee Only	2	\$0.84**	\$5.04
GUARDHIGH	Employee Only	2	\$47.61	\$95.22
GUARDHIGH	Family	1	\$160.18	\$160.18
GUARDLOW	Employee Only	1	\$29.44	\$29.44
LIFE	Employee Only	1	\$8.00**	\$8.00
VSP	Family	1	\$23.76	\$23.76
			GRAND TOTAL	\$2,539.02

JACARANDA CAPITAL SUPERCUTS NC & SC  
7804 Fairview Rd # 225  
CHARLOTTE, NC 28226

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
FERGUSON, ASHLEY	2022-08-01	GUARDLOW	EE	\$29.44
RIVERS, KENNETH	2022-06-01	GUARDHIGH	EE	\$47.61
RIVERS, KENNETH	2022-06-01	ADD		\$0.84
ROGERS, TODD	2022-01-01	GUARDHIGH	FAM	\$160.18
ROGERS, TODD	2022-01-01	1866OPENAXESSGOLD	FAM	\$2157.57
ROGERS, TODD	2022-01-01	VSP	FAM	\$23.76
SHULER, SHASTENIA	2022-09-01	ADD		\$4.20
SHULER, SHASTENIA	2022-09-01	LIFE		\$8.00
SHULER, SHASTENIA	2022-09-01	GUARDHIGH	EE	\$47.61

JACARANDA CAPITAL SUPERCUTS NC & SC  
7804 Fairview Rd # 225  
CHARLOTTE, NC 28226

## PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
SHULER, SHASTENIA	2022-09-01	ADD		\$4.20
SHULER, SHASTENIA	2022-09-01	LIFE		\$8.00
SHULER, SHASTENIA	2022-09-01	GUARDHIGH	EE	\$47.61

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

KINGS PEAK TAX CONSULTING, LLC  
1881 W Traverse Pkwy Ste E #512  
LEHI, UT 84043

Invoice Number: 4450-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1770OPENAXESSBRONZ	Family	1	\$1,628.10	\$1,628.10
1770OPENAXESSGOLD	Employee Only	1	\$719.19	\$719.19
1770OPENAXESSGOLD	Family	1	\$2,157.57	\$2,157.57
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDHIGH	Family	1	\$160.18	\$160.18
GUARDLOW	Family	2	\$100.74	\$201.48
VSP	Employee Only	1	\$8.75	\$8.75
VSP	Family	2	\$23.76	\$47.52
			GRAND TOTAL	\$4,970.40



KINGS PEAK TAX CONSULTING, LLC  
 1881 W Traverse Pkwy Ste E #512  
 LEHI, UT 84043

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
COLE, JOSHUA	2022-03-01	GUARDLOW	FAM	\$100.74
COLE, JOSHUA	2022-03-01	1770OPENAXESSBRONZ	FAM	\$1628.10
COLE, JOSHUA	2022-03-01	VSP	FAM	\$23.76
HOLBROOK, JOSEPH	2022-03-01	GUARDLOW	FAM	\$100.74
SCHENCK, SKIP	2022-02-01	GUARDHIGH	FAM	\$160.18
SCHENCK, SKIP	2022-02-01	1770OPENAXESSGOLD	FAM	\$2157.57
SCHENCK, SKIP	2022-02-01	VSP	FAM	\$23.76
STOLLE, ANDREW	2022-02-01	GUARDHIGH	EE	\$47.61
STOLLE, ANDREW	2022-02-01	1770OPENAXESSGOLD	EE	\$719.19
STOLLE, ANDREW	2022-02-01	VSP	EE	\$8.75

**MEDICAL PLAN COUNTS**

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



## Account Services

### Monthly Statement

KITCHEN SOLVERS - LA CROSSE, WI  
301 4TH ST S  
LA CROSSE, WI 54601

Invoice Number: 4110-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDLOW	Family	1	\$100.74	\$100.74
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
VSP	Family	1	\$23.76	\$23.76
			GRAND TOTAL	\$139.23

KITCHEN SOLVERS - LA CROSSE, WI  
301 4TH ST S  
LA CROSSE, WI 54601

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
DUCHARME, JOANNE	2022-01-01	VSP	FAM	\$23.76
KISH, DAVID	2022-01-01	GUARDLOW	FAM	\$100.74
KISH, DAVID	2022-01-01	VSP	ES	\$14.73

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

KITCHEN SOLVERS - NORTH DALLAS  
3460 PATRIOT DR  
FRISCO, TX 75034

Invoice Number: 4418-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$56.36

KITCHEN SOLVERS - NORTH DALLAS  
3460 PATRIOT DR  
FRISCO, TX 75034

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
PARRIS, MICHAEL	2022-01-01	GUARDHIGH	EE	\$47.61
PARRIS, MICHAEL	2022-01-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

KITCHEN SOLVERS OF CORPUS CHRISTI  
2209 Riata Dr  
CORPUS CHRISTI, TX 78418

Invoice Number: 4376-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$2.10**	\$2.10
GUARDLOW	Employee Only	1	\$29.44	\$29.44
LIFE	Employee Only	1	\$19.10**	\$19.10
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$59.39

KITCHEN SOLVERS OF CORPUS CHRISTI

2209 Riata Dr

CORPUS CHRISTI, TX 78418

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BUERGERS, MICHAEL	2022-01-01	GUARDLOW	EE	\$29.44
BUERGERS, MICHAEL	2022-01-01	VSP	EE	\$8.75
PARRA, GERALD	2022-07-01	ADD		\$2.10
PARRA, GERALD	2022-07-01	LIFE		\$19.10

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

KITCHEN SOLVERS OF EMERALD COAST

Invoice Number: 5720-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
			GRAND TOTAL	\$29.46



KITCHEN SOLVERS OF EMERALD COAST

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
MCADAMS, JAY	2022-08-01	VSP	ES	\$14.73

KITCHEN SOLVERS OF EMERALD COAST

,

PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
MCADAMS, JAY	2022-08-01	VSP	ES	\$14.73

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

KITCHEN SOLVERS OF GRAYSLAKE

Invoice Number: 5299-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1565OPENAXESSGOLD	Family	1	\$1,429.42	\$1,429.42
GUARDLOW	Family	1	\$100.74	\$100.74
LIFE	Employee Only	1	\$29.40**	\$29.40
VSP	Family	1	\$23.76	\$23.76
			GRAND TOTAL	\$1,583.32

KITCHEN SOLVERS OF GRAYSLAKE

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
KONGKAEOW, CHARLERMSINGH	2021-01-01	VSP	FAM	\$23.76
KONGKAEOW, CHARLERMSINGH	2021-01-01	1565OPENAXESSGOLD	FAM	\$1429.42
KONGKAEOW, CHARLERMSINGH	2021-01-01	GUARDLOW	FAM	\$100.74
KONGKAEOW, CHARLERMSINGH	2021-01-01	LIFE		\$29.40

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

KOCH LAW  
521 5th Avenue 17th Floor  
NEW YORK, NY 10175

Invoice Number: 4399-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1702OPENAXESSBRONZ	Employee Only	2	\$487.36	\$974.72
1702OPENAXESSBRONZ	Employee & Children	1	\$0.00	\$986.92
ADD	Employee Only	2	\$0.84**	\$21.84
GUARDHIGH	Employee Only	2	\$47.61	\$95.22
GUARDHIGH	Employee & Children	1	\$0.00	\$117.99
LIFE	Employee Only	2	\$1.80**	\$12.60
VSP	Employee Only	2	\$8.75	\$17.50
VSP	Employee & Children	1	\$0.00	\$15.02
			GRAND TOTAL	\$2,241.81

KOCH LAW  
521 5th Avenue 17th Floor  
NEW YORK, NY 10175

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ESSMIDI, MEHDI	2022-07-01	ADD		\$21.00
ESSMIDI, MEHDI	2022-07-01	LIFE		\$10.80
ESSMIDI, MEHDI	2022-07-01	GUARDHIGH	EC2	\$117.99
ESSMIDI, MEHDI	2022-07-01	1702OPENAXESSBRONZ	EC2	\$986.92
ESSMIDI, MEHDI	2022-07-01	VSP	EC2	\$15.02
MARSHALL, PATRICK	2021-07-01	GUARDHIGH	EE	\$47.61
MARSHALL, PATRICK	2021-07-01	1702OPENAXESSBRONZ	EE	\$487.36
MARSHALL, PATRICK	2021-07-01	VSP	EE	\$8.75
RAMOS, EDITH	2022-07-01	1702OPENAXESSBRONZ	EE	\$487.36
RAMOS, EDITH	2022-07-01	VSP	EE	\$8.75
RAMOS, EDITH	2022-07-01	ADD		\$0.84
RAMOS, EDITH	2022-07-01	LIFE		\$1.80
RAMOS, EDITH	2022-07-01	GUARDHIGH	EE	\$47.61

**MEDICAL PLAN COUNTS**

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



## Account Services

### Monthly Statement

LALO PROPERTIES

Invoice Number: 5763-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1921OPENAXESSBRONZ	Employee Only	1	\$561.10	\$561.10
1921OPENAXESSBRONZ	Employee & Spouse Only	1	\$1,110.61	\$1,110.61
			GRAND TOTAL	\$1,671.71

LALO PROPERTIES

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
LOCHIRCO, ASHLEY	2022-03-01	1921OPENAXESSBRONZ EE		\$561.10
LOCHIRCO, MIKE	2022-03-01	1921OPENAXESSBRONZ ES		\$1110.61

## MEDICAL PLAN COUNTS

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





## Account Services

### Monthly Statement

LED PHANTOM DISTRIBUTION INC.  
930 KAY AVE  
ADDISON, IL 60101

Invoice Number: 4120-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	5	\$4.20**	\$52.50
GUARDHIGH	Employee Only	2	\$47.61	\$95.22
GUARDHIGH	Employee & Children	1	\$0.00	\$117.99
GUARDLOW	Employee Only	2	\$29.44	\$58.88
GUARDLOW	Employee & Spouse Only	1	\$55.54	\$55.54
GUARDLOW	Employee & Children	2	\$74.61	\$149.22
GUARDLOW	Family	2	\$100.74	\$201.48
LIFE	Employee Only	6	\$33.00**	\$82.36
VSP	Employee Only	3	\$8.75	\$26.25
VSP	Employee & Spouse Only	2	\$14.73	\$29.46
VSP	Employee & Children	2	\$15.02	\$30.04
GRAND TOTAL				\$898.94

LED PHANTOM DISTRIBUTION INC.  
930 KAY AVE  
ADDISON, IL 60101

CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
AGRAWAL, PRIYANKA	2022-01-01	GUARDLOW	FAM	\$100.74
DUGBO, ONORIODE	2022-06-01	VSP	EE	\$8.75
DUGBO, ONORIODE	2022-06-01	ADD		\$4.20
DUGBO, ONORIODE	2022-06-01	LIFE		\$6.00
DUGBO, ONORIODE	2022-06-01	GUARDLOW	EE	\$29.44
HIGGINS, JEFFREY	2022-03-01	VSP	ES	\$14.73
HIGGINS, JEFFREY	2022-03-01	LIFE		\$5.73
HIGGINS, JEFFREY	2022-03-01	ADD		\$2.10
HIGGINS, JEFFREY	2022-03-01	GUARDLOW	FAM	\$100.74
HOLLOWAY, JAWANN	2021-08-01	GUARDLOW	EC	\$74.61
HOLLOWAY, JAWANN	2021-08-01	VSP	EC	\$15.02
JACKSON, KENNETH	2022-01-01	ADD		\$21.00
JACKSON, KENNETH	2022-01-01	LIFE		\$9.55
KELLY, ASHLEY	2022-10-01	GUARDLOW	ES	\$55.54
KELLY, ASHLEY	2022-10-01	VSP	ES	\$14.73
LOPEZ NATAL, EDGARDO	2022-01-01	GUARDLOW	EE	\$29.44
LOPEZ NATAL, EDGARDO	2022-01-01	VSP	EE	\$8.75
MILLER, LAURA	2022-01-01	GUARDLOW	EC	\$74.61
NOLL, JEFFREY	2022-01-01	GUARDHIGH	EE	\$47.61
NOLL, JEFFREY	2022-01-01	VSP	EE	\$8.75
PEARSON, JAMES	2022-07-01	VSP	EC2	\$15.02
PEARSON, JAMES	2022-04-01	ADD		\$21.00
PEARSON, JAMES	2022-07-01	GUARDHIGH	EC2	\$117.99
PEARSON, JAMES	2022-04-01	LIFE		\$13.05
PIETRZAK, JEDRZEJ	2022-01-01	GUARDHIGH	EE	\$47.61
STEPHENSON, SCOTT	2022-08-01	ADD		\$4.20

LED PHANTOM DISTRIBUTION INC.  
930 KAY AVE  
ADDISON, IL 60101

## CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
STEPHENSON, SCOTT	2022-08-01	LIFE		\$33.00
TUTTLE, TIMOTHY	2022-01-01	LIFE		\$15.03

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

LG ACADEMY  
513 Birch St.  
BOONTON, NJ 07005

Invoice Number: 4279-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Family	1	\$160.18	\$160.18
VSP	Employee Only	1	\$0.00	\$8.75
VSP	Family	1	\$23.76	\$23.76
			GRAND TOTAL	\$201.44

LG ACADEMY  
513 Birch St.  
BOONTON, NJ 07005

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
FINNEGAN, DANIEL	2022-08-01	VSP	EE	\$8.75
MAINARDI, ELIZABETH	2021-01-01	GUARDHIGH	FAM	\$160.18
MAINARDI, ELIZABETH	2021-01-01	VSP	FAM	\$23.76

LG ACADEMY  
513 Birch St.  
BOONTON, NJ 07005

## PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
FINNEGAN, DANIEL	2022-08-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

MADICORP INC  
87 CRESCENT RD  
NEEDHAM HEIGHTS, MA 02494

Invoice Number: 4215-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	2	\$47.61	\$95.22
LIFE	Employee Only	1	\$24.70**	\$24.70
VSP	Employee Only	2	\$8.75	\$17.50
			GRAND TOTAL	\$137.42

MADICORP INC  
87 CRESCENT RD  
NEEDHAM HEIGHTS, MA 02494

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
GALT, ROBERT	2022-01-01	GUARDHIGH	EE	\$47.61
GALT, ROBERT	2022-01-01	VSP	EE	\$8.75
MCELENEY, LISA	2022-01-01	GUARDHIGH	EE	\$47.61
MCELENEY, LISA	2022-01-01	VSP	EE	\$8.75
MCELENEY, LISA	2022-01-01	LIFE		\$24.70

## MEDICAL PLAN COUNTS

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





## Account Services

### Monthly Statement

MAGIC TOUCH MECHANICAL  
942 West 1st Ave  
MESA, AZ 85210

Invoice Number: 4555-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$8.40**	\$8.40
GUARDHIGH	Employee & Spouse Only	1	\$89.81	\$89.81
LIFE	Employee Only	2	\$9.88**	\$25.98
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
			GRAND TOTAL	\$138.92

MAGIC TOUCH MECHANICAL

942 West 1st Ave

MESA, AZ 85210

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
GREBE, JASON	2022-01-01	LIFE		\$16.10
HENINGER, JEFFREY	2022-03-01	ADD		\$8.40
HENINGER, JEFFREY	2022-03-01	GUARDHIGH	ES	\$89.81
HENINGER, JEFFREY	2022-03-01	VSP	ES	\$14.73
HENINGER, JEFFREY	2022-03-01	LIFE		\$9.88

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

MANHATTAN SPACES  
133 W 72nd St Rm 201  
NEW YORK, NY 10023

Invoice Number: 4288-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1536OPENAXESSGOLD	Employee Only	1	\$653.81	\$653.81
1536OPENAXESSGOLD	Family	1	\$1,961.43	\$1,961.43
GUARDLOW	Family	1	\$100.74	\$100.74
VSP	Family	1	\$23.76	\$23.76
			GRAND TOTAL	\$2,739.74

## MANHATTAN SPACES

133 W 72nd St Rm 201

NEW YORK, NY 10023

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BERNARDES, JOSE	2020-08-01	1536OPENAXESSGOLD	FAM	\$1961.43
BERNARDES, JOSE	2020-10-01	GUARDLOW	FAM	\$100.74
BERNARDES, JOSE	2021-12-01	VSP	FAM	\$23.76
SAMAD, WAQAR	2020-08-01	1536OPENAXESSGOLD	EE	\$653.81

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

MARCO'S PIZZA - WAUKEE

Invoice Number: 5909-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
LIFE	Employee Only	1	\$3.30**	\$3.30
GRAND TOTAL				\$3.30

MARCO'S PIZZA - WAUKEE

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
PHILLIPS, MELODY	2022-05-01	LIFE		\$3.30

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

MASSAGE GREEN SPA OF BATTLE CREEK  
5568 BECKLEY RD  
BATTLE CREEK, MI 49015

Invoice Number: 4626-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
			GRAND TOTAL	\$47.61

MASSAGE GREEN SPA OF BATTLE CREEK  
5568 BECKLEY RD  
BATTLE CREEK, MI 49015

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
WADE, TYLA	2018-01-01	GUARDHIGH	EE	\$47.61

## MEDICAL PLAN COUNTS

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





## Account Services

### Monthly Statement

MAXIMUM AUTO OUTLET  
8503 EUCLID AVE  
MANASSAS PARK, VA 20111

Invoice Number: 4584-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
VSP	Employee Only	2	\$8.75	\$17.50
			GRAND TOTAL	\$17.50

MAXIMUM AUTO OUTLET  
8503 EUCLID AVE  
MANASSAS PARK, VA 20111

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CARPENTER, LYNNLEE	2021-01-01	VSP	EE	\$8.75
GARRETT, MARIO	2020-01-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

MCELROY TEAM REALTY  
4012 Gateway Drive  
Colleyville, TX 76034

Invoice Number: 4579-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
0226CIGNAGOLD	Employee Only	1	\$653.81	\$653.81
0226CIGNAGOLD	Family	1	\$1,961.43	\$1,961.43
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDHIGH	Family	1	\$160.18	\$160.18
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$2,831.78

MCELROY TEAM REALTY

4012 Gateway Drive

Colleyville, TX 76034

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
MCELROY, DANIEL	2020-02-01	0226CIGNAGOLD	FAM	\$1961.43
MCELROY, DANIEL	2020-02-01	GUARDHIGH	FAM	\$160.18
VENABLE, FRANCES	2020-10-01	0226CIGNAGOLD	EE	\$653.81
VENABLE, FRANCES	2020-10-01	GUARDHIGH	EE	\$47.61
VENABLE, FRANCES	2020-10-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

MED-FIT, PLLC  
10171 PLYMOUTH COURT  
PARKER, CO 80134

Invoice Number: 4576-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
LIFE	Employee Only	1	\$3.00**	\$8.00
GRAND TOTAL				\$55.61

MED-FIT, PLLC  
10171 PLYMOUTH COURT  
PARKER, CO 80134

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
MONTOYA, ASHLEY	2022-01-01	GUARDHIGH	EE	\$47.61
ROSA, SARAH	2022-08-01	LIFE		\$8.00

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

METRO COMMERCIAL LAUNDRY

Invoice Number: 5511-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$21.00**	\$21.00
GUARDHIGH	Employee & Spouse Only	1	\$89.81	\$89.81
LIFE	Employee Only	1	\$71.50**	\$71.50
VSP	Family	1	\$23.76	\$23.76
			GRAND TOTAL	\$206.07

METRO COMMERCIAL LAUNDRY

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
TODD, NORMAN	2022-04-01	LIFE		\$71.50
TODD, NORMAN	2022-04-01	ADD		\$21.00
TODD, NORMAN	2022-04-01	GUARDHIGH	ES	\$89.81
TODD, NORMAN	2022-04-01	VSP	FAM	\$23.76

## MEDICAL PLAN COUNTS

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





## Account Services

### Monthly Statement

MFUSION  
5410 GRIST MILL WOODS WAY  
ALEXANDRIA, VA 22309

Invoice Number: 4154-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee & Spouse Only	1	\$88.18	\$89.81
GUARDHIGH	Employee & Children	1	\$89.81	\$89.81
VSP	Employee & Spouse Only	1	\$14.81	\$14.73
VSP	Employee & Children	1	\$15.02	\$15.02
			GRAND TOTAL	\$209.37

## MFUSION

5410 GRIST MILL WOODS WAY

ALEXANDRIA, VA 22309

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
HAYES, TERRI	2020-10-01	GUARDHIGH	EC	\$89.81
HAYES, TERRI	2018-12-01	VSP	EC2	\$15.02
HAYS, JAMES	2022-01-01	GUARDHIGH	ES	\$89.81
HAYS, JAMES	2022-01-01	VSP	ES	\$14.73

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

MGS KALAMAZOO  
4412 STADIUM DRIVE  
KALAMAZOO, MI 49008

Invoice Number: 4623-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDLOW	Employee Only	1	\$29.44	\$29.44
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$38.19

MGS KALAMAZOO  
4412 STADIUM DRIVE  
KALAMAZOO, MI 49008

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
KERNS, MANDY	2018-01-01	GUARDLOW	EE	\$29.44
KERNS, MANDY	2018-12-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

MICROTEL WINCHESTER

Invoice Number: 5993-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
VSP	Employee Only	1	\$8.75	\$8.75
GRAND TOTAL				\$56.36

MICROTEL WINCHESTER

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CAMPBELL, JESSICA	2022-08-01	GUARDHIGH	EE	\$47.61
CAMPBELL, JESSICA	2022-08-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

MICROTEL WYNDHAM FAIRMONT  
20 Southland Dr  
FAIRMONT, WV 26554

Invoice Number: 4263-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$4.20**	\$4.20
GUARDLOW	Employee Only	2	\$29.44	\$58.88
LIFE	Employee Only	1	\$35.75**	\$35.75
VSP	Employee Only	2	\$8.75	\$17.50
			GRAND TOTAL	\$116.33

MICROTEL WYNDHAM FAIRMONT

20 Southland Dr

FAIRMONT, WV 26554

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CARPENTER, STEVEN	2022-06-01	ADD		\$4.20
CARPENTER, STEVEN	2022-06-01	LIFE		\$35.75
CARPENTER, STEVEN	2022-06-01	GUARDLOW	EE	\$29.44
CARPENTER, STEVEN	2022-06-01	VSP	EE	\$8.75
HALL, JACQUELINE	2022-01-01	GUARDLOW	EE	\$29.44
HALL, JACQUELINE	2022-01-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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





## Account Services

### Monthly Statement

MICROTEL WYNDHAM LYNCHBURG  
5704 Seminole Ave  
LYNCHBURG, VA 24502

Invoice Number: 4265-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$4.20**	\$4.20
VSP	Employee Only	1	\$8.75	\$8.75
GRAND TOTAL				\$12.95

MICROTEL WYNDHAM LYNCHBURG  
5704 Seminole Ave  
LYNCHBURG, VA 24502

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
IRVING, DELORES	2022-01-01	ADD		\$4.20
IRVING, DELORES	2022-01-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



**Account Services**  
**Monthly Statement**

MICROTEL WYNDHAM WAYNESBURG

Invoice Number: 5688-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$0.84**	\$0.84
GRAND TOTAL				\$0.84

MICROTEL WYNDHAM WAYNESBURG

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
AHRENDTS, VERINA	2022-10-01	ADD		\$0.84

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

MILLENNIUM HOSPITALITY MANAGEMENT  
35 Ellview Rd  
SOMERSET TOWNSHIP, PA 15360

Invoice Number: 4259-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	1	\$0.00	\$47.61
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$56.36

MILLENNIUM HOSPITALITY MANAGEMENT  
35 Ellview Rd  
SOMERSET TOWNSHIP, PA 15360

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
REED, SHAWNA	2022-09-01	GUARDHIGH	EE	\$47.61
REED, SHAWNA	2022-09-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

MOMMY TUMMY  
220 Easy 65 N St  
NEW YORK, NY 10065

Invoice Number: 4268-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1505OPENAXESSBRONZ	Employee & Children	1	\$986.72	\$986.72
ADD	Employee Only	1	\$21.42**	\$21.42
LIFE	Employee Only	1	\$24.62**	\$24.62
			GRAND TOTAL	\$1,032.76

MOMMY TUMMY  
220 Easy 65 N St  
NEW YORK, NY 10065

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
REITER, ROBIN	2021-11-01	1505OPENAXESSBRONZ EC		\$986.72
REITER, ROBIN	2021-11-01	LIFE		\$24.62
REITER, ROBIN	2021-01-01	ADD		\$21.42

## MEDICAL PLAN COUNTS

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





## Account Services

### Monthly Statement

MOTEL STUDIO 6 THOUSAND PALMS  
72215 VARNER ROAD  
THOUSAND PALMS, CA 92276

Invoice Number: 4127-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDLOW	Employee Only	1	\$29.44	\$29.44
LIFE	Employee Only	1	\$0.00**	\$30.06
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$136.50

MOTEL STUDIO 6 THOUSAND PALMS  
72215 VARNER ROAD  
THOUSAND PALMS, CA 92276

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CASTANEDA, GAIL	2022-09-01	LIFE		\$30.06
CASTANEDA, GAIL	2022-09-01	GUARDLOW	EE	\$29.44
CASTANEDA, GAIL	2022-09-01	VSP	EE	\$8.75

MOTEL STUDIO 6 THOUSAND PALMS  
72215 VARNER ROAD  
THOUSAND PALMS, CA 92276

## PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CASTANEDA, GAIL	2022-09-01	LIFE		\$30.06
CASTANEDA, GAIL	2022-09-01	GUARDLOW	EE	\$29.44
CASTANEDA, GAIL	2022-09-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

MPIRE HOSPITALITY  
13681 N Highway 183  
AUSTIN, TX 78750

Invoice Number: 4321-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDLOW	Employee Only	3	\$29.44	\$88.32
VSP	Employee Only	4	\$8.75	\$35.00
			GRAND TOTAL	\$123.32

MPIRE HOSPITALITY  
13681 N Highway 183  
AUSTIN, TX 78750

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CHAMORRO, MAYERLIN	2021-02-01	GUARDLOW	EE	\$29.44
CHAMORRO, MAYERLIN	2021-02-01	VSP	EE	\$8.75
HEWITT, LEILA	2021-02-01	GUARDLOW	EE	\$29.44
HEWITT, LEILA	2021-02-01	VSP	EE	\$8.75
JIMENEZ, LISA	2022-04-01	GUARDLOW	EE	\$29.44
JIMENEZ, LISA	2022-04-01	VSP	EE	\$8.75
TURPIN, RAYNARD	2022-01-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

MUJIN CORP  
6300 Kenjoy Dr  
LOUISVILLE, KY 40214

Invoice Number: 4405-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1711OPENAXESSBRONZ	Employee Only	1	\$511.73	\$511.73
1711OPENAXESSBRONZ	Family	1	\$1,554.09	\$1,554.09
1711OPENAXESSCOPPE	Employee Only	1	\$473.29	\$473.29
1711OPENAXESSGOLD	Employee Only	4	\$686.50	\$2,746.00
1711OPENAXESSGOLD	Family	4	\$2,059.50	\$8,238.00
1711OPENAXESSSILVE	Employee Only	2	\$575.59	\$1,151.18
1711OPENAXESSSILVE	Family	1	\$1,726.77	\$1,726.77
ADD	Employee Only	7	\$21.00**	\$129.36
GUARDHIGH	Employee Only	6	\$47.61	\$285.66
GUARDHIGH	Family	6	\$160.18	\$961.08
GUARDLOW	Employee Only	2	\$29.44	\$58.88
LIFE	Employee Only	8	\$14.40**	\$131.30
VSP	Employee Only	6	\$8.75	\$52.50
VSP	Employee & Spouse Only	1	\$0.00	\$14.73
VSP	Family	6	\$23.76	\$142.56
			GRAND TOTAL	\$18,830.86

MUJIN CORP  
6300 Kenjoy Dr  
LOUISVILLE, KY 40214

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CLOER, JOSHUA	2022-03-13	LIFE		\$9.60
CLOER, JOSHUA	2022-03-13	ADD		\$21.00
CLOER, JOSHUA	2022-03-13	GUARDHIGH	FAM	\$160.18
CLOER, JOSHUA	2022-03-13	1711OPENAXESSGOLD	FAM	\$2059.50
CLOER, JOSHUA	2022-03-13	VSP	FAM	\$23.76
COATS, BRANDON	2021-07-01	LIFE		\$14.75
COATS, BRANDON	2021-07-01	ADD		\$10.92
COATS, BRANDON	2021-07-01	GUARDHIGH	FAM	\$160.18
COATS, BRANDON	2021-07-01	1711OPENAXESSGOLD	FAM	\$2059.50
COATS, BRANDON	2021-07-01	VSP	FAM	\$23.76
CRAY, KEITH	2022-09-01	ADD		\$4.20
CRAY, KEITH	2022-09-01	LIFE		\$11.60
CRAY, KEITH	2022-09-01	GUARDHIGH	EE	\$47.61
CRAY, KEITH	2022-09-01	VSP	ES	\$14.73
CRAY, KEITH	2022-09-01	1711OPENAXESSILVE	EE	\$575.59
FULTZ, JEREMY	2022-05-01	LIFE		\$9.60
FULTZ, JEREMY	2022-05-01	GUARDHIGH	EE	\$47.61
FULTZ, JEREMY	2022-05-01	1711OPENAXESSCOPPE	EE	\$473.29
FULTZ, JEREMY	2022-05-01	VSP	EE	\$8.75
GATES, DOMINIC	2022-05-01	GUARDHIGH	EE	\$47.61
GATES, DOMINIC	2022-05-01	1711OPENAXESSGOLD	EE	\$686.50
GATES, DOMINIC	2022-05-01	VSP	EE	\$8.75
GEORGE, MICHAEL	2022-04-01	GUARDHIGH	EE	\$47.61
GEORGE, MICHAEL	2022-04-01	1711OPENAXESSBRONZ	EE	\$511.73
GEORGE, MICHAEL	2022-04-01	VSP	EE	\$8.75
GUO, CHUWEI	2022-03-01	GUARDLOW	EE	\$29.44
GUO, CHUWEI	2022-03-01	1711OPENAXESSGOLD	EE	\$686.50
GUO, CHUWEI	2022-03-01	VSP	EE	\$8.75
HARTMANN, TRENTON	2021-11-01	GUARDHIGH	EE	\$47.61

MUJIN CORP  
6300 Kenjoy Dr  
LOUISVILLE, KY 40214

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
HARTMANN, TRENTON	2021-11-01	1711OPENAXESSGOLD	EE	\$686.50
LINDELL, BRENT	2022-08-01	ADD		\$4.20
LINDELL, BRENT	2022-08-01	GUARDHIGH	FAM	\$160.18
LINDELL, BRENT	2022-08-01	1711OPENAXESSGOLD	FAM	\$2059.50
LINDELL, BRENT	2022-08-01	VSP	FAM	\$23.76
NAGASAWA, YOSHIKAZU	2022-06-01	ADD		\$42.42
NAGASAWA, YOSHIKAZU	2022-06-01	LIFE		\$49.55
NAGASAWA, YOSHIKAZU	2022-06-01	GUARDHIGH	FAM	\$160.18
NAGASAWA, YOSHIKAZU	2022-06-01	1711OPENAXESSSILVE	FAM	\$1726.77
NAGASAWA, YOSHIKAZU	2022-06-01	VSP	FAM	\$23.76
OLIVARES TAY, MEY	2022-03-01	GUARDHIGH	EE	\$47.61
OLIVARES TAY, MEY	2022-03-01	1711OPENAXESSGOLD	EE	\$686.50
OLIVARES TAY, MEY	2022-03-01	VSP	EE	\$8.75
OTOBE, DAIGO	2021-09-01	LIFE		\$19.10
OTOBE, DAIGO	2021-09-01	ADD		\$25.62
OTOBE, DAIGO	2021-11-01	GUARDHIGH	FAM	\$160.18
OTOBE, DAIGO	2021-09-01	1711OPENAXESSGOLD	FAM	\$2059.50
OTOBE, DAIGO	2021-11-01	VSP	FAM	\$23.76
RAMOS, ARIEL RAY	2022-06-01	ADD		\$21.00
STANLEY, JOHN PRASANNA	2022-07-01	LIFE		\$14.40
STANLEY, JOHN PRASANNA	2022-07-01	GUARDHIGH	FAM	\$160.18
STANLEY, JOHN PRASANNA	2022-07-01	1711OPENAXESSBRONZ	FAM	\$1554.09
STANLEY, JOHN PRASANNA	2022-07-01	VSP	FAM	\$23.76
THOMPSON, JEREMIAH	2022-04-01	LIFE		\$2.70
THOMPSON, JEREMIAH	2022-04-01	GUARDLOW	EE	\$29.44
THOMPSON, JEREMIAH	2022-04-01	1711OPENAXESSSILVE	EE	\$575.59



MUJIN CORP  
6300 Kenjoy Dr  
LOUISVILLE, KY 40214

## CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
THOMPSON, JEREMIAH	2022-04-01	VSP	EE	\$8.75

MUJIN CORP  
6300 Kenjoy Dr  
LOUISVILLE, KY 40214

## PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CRAY, KEITH	2022-09-01	ADD		\$4.20
CRAY, KEITH	2022-09-01	LIFE		\$11.60
CRAY, KEITH	2022-09-01	GUARDHIGH	EE	\$47.61
CRAY, KEITH	2022-09-01	VSP	ES	\$14.73
CRAY, KEITH	2022-09-01	1711OPENAXESSILVE	EE	\$575.59

## MEDICAL PLAN COUNTS

Employee Only	8
Employee & Spouse	0
Employee & Children	0
Family	6



## Account Services

### Monthly Statement

MULBERRI, INC

Invoice Number: 5797-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	4	\$13.02**	\$25.62
GUARDHIGH	Employee Only	1	\$89.81	\$47.61
GUARDHIGH	Employee & Spouse Only	3	\$89.81	\$269.43
GUARDHIGH	Family	4	\$0.00	\$640.72
GUARDLOW	Employee & Children	1	\$74.61	\$74.61
LIFE	Employee Only	3	\$11.30**	\$42.22
VSP	Employee Only	1	\$14.73	\$8.75
VSP	Employee & Spouse Only	3	\$14.73	\$44.19
VSP	Employee & Children	1	\$14.73	\$15.02
VSP	Family	4	\$0.00	\$95.04
			GRAND TOTAL	\$2,526.42

MULBERRI, INC

,

CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BANSAL, PRAVIN KUMAR	2022-09-01	GUARDHIGH	FAM	\$160.18
BANSAL, PRAVIN KUMAR	2022-09-01	VSP	FAM	\$23.76
BUCKNER, KAELYN	2022-08-01	GUARDHIGH	EE	\$47.61
BUCKNER, KAELYN	2022-08-01	VSP	EE	\$8.75
CHAWLA, HAMESH	2022-08-01	GUARDHIGH	FAM	\$160.18
CHAWLA, HAMESH	2022-08-01	VSP	FAM	\$23.76
HE, CHUAN	2022-08-01	GUARDHIGH	ES	\$89.81
HE, CHUAN	2022-08-01	VSP	ES	\$14.73
HENDRY, RACHAEL	2022-08-01	ADD		\$13.02
HENDRY, RACHAEL	2022-08-01	LIFE		\$11.30
HENDRY, RACHAEL	2022-08-01	GUARDLOW	EC	\$74.61
HENDRY, RACHAEL	2022-08-01	VSP	EC	\$15.02
HINMAN, DANIEL	2022-09-01	ADD		\$2.10
HINMAN, DANIEL	2022-09-01	LIFE		\$8.00
HINMAN, DANIEL	2022-09-01	GUARDHIGH	FAM	\$160.18
HINMAN, DANIEL	2022-09-01	VSP	FAM	\$23.76
LEE, BUM HO	2022-09-01	ADD		\$4.20
LEE, BUM HO	2022-09-01	GUARDHIGH	ES	\$89.81
LEE, BUM HO	2022-09-01	VSP	ES	\$14.73
RAMIL, MAURA	2022-08-01	ADD		\$6.30
RAMIL, MAURA	2022-08-01	LIFE		\$22.92
RAMIL, MAURA	2022-08-01	GUARDHIGH	ES	\$89.81
RAMIL, MAURA	2022-08-01	VSP	ES	\$14.73
ZHENG, YONG	2022-08-01	GUARDHIGH	FAM	\$160.18
ZHENG, YONG	2022-08-01	VSP	FAM	\$23.76

MULBERRI, INC

,

**PRIOR MONTH UNBILLED ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BANSAL, PRAVIN KUMAR	2022-09-01	GUARDHIGH	FAM	\$160.18
BANSAL, PRAVIN KUMAR	2022-09-01	VSP	FAM	\$23.76
BUCKNER, KAELYN	2022-08-01	GUARDHIGH	EE	\$47.61
BUCKNER, KAELYN	2022-08-01	VSP	EE	\$8.75
CHAWLA, HAMESH	2022-08-01	GUARDHIGH	FAM	\$160.18
CHAWLA, HAMESH	2022-08-01	VSP	FAM	\$23.76
HE, CHUAN	2022-08-01	GUARDHIGH	ES	\$89.81
HE, CHUAN	2022-08-01	VSP	ES	\$14.73
HENDRY, RACHAEL	2022-08-01	ADD		\$13.02
HENDRY, RACHAEL	2022-08-01	LIFE		\$11.30
HENDRY, RACHAEL	2022-08-01	GUARDLOW	EC	\$74.61
HENDRY, RACHAEL	2022-08-01	VSP	EC	\$15.02
HINMAN, DANIEL	2022-09-01	ADD		\$2.10
HINMAN, DANIEL	2022-09-01	LIFE		\$8.00
HINMAN, DANIEL	2022-09-01	GUARDHIGH	FAM	\$160.18
HINMAN, DANIEL	2022-09-01	VSP	FAM	\$23.76
LEE, BUM HO	2022-09-01	ADD		\$4.20
LEE, BUM HO	2022-09-01	GUARDHIGH	ES	\$89.81
LEE, BUM HO	2022-09-01	VSP	ES	\$14.73
RAMIL, MAURA	2022-08-01	ADD		\$6.30
RAMIL, MAURA	2022-08-01	LIFE		\$22.92
RAMIL, MAURA	2022-08-01	GUARDHIGH	ES	\$89.81
RAMIL, MAURA	2022-08-01	VSP	ES	\$14.73
ZHENG, YONG	2022-08-01	GUARDHIGH	FAM	\$160.18
ZHENG, YONG	2022-08-01	VSP	FAM	\$23.76

**MEDICAL PLAN COUNTS**

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



## Account Services

### Monthly Statement

NATIONAL HOSPICE MANAGEMENT  
2191 Lemay Ferry Road  
SAINT LOUIS, MO 63125

Invoice Number: 4607-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
0435OPENACCESSESSE	Employee Only	2	\$450.74	\$901.48
ADD	Employee Only	32	\$4.20**	\$158.06
GUARDHIGH	Employee Only	17	\$47.61	\$809.37
GUARDHIGH	Employee & Spouse Only	4	\$89.81	\$359.24
GUARDHIGH	Employee & Children	3	\$117.99	\$297.61
GUARDHIGH	Family	7	\$160.18	\$1,121.26
GUARDLOW	Employee Only	12	\$29.44	\$353.28
GUARDLOW	Employee & Spouse Only	5	\$55.54	\$277.70
GUARDLOW	Employee & Children	4	\$74.61	\$298.44
GUARDLOW	Family	5	\$100.74	\$503.70
LIFE	Employee Only	41	\$7.15**	\$812.89
VSP	Employee Only	32	\$8.75	\$280.00
VSP	Employee & Spouse Only	8	\$14.73	\$117.84
VSP	Employee & Children	8	\$15.02	\$120.16
VSP	Family	7	\$23.76	\$166.32
			GRAND TOTAL	\$6,766.18

**NATIONAL HOSPICE MANAGEMENT**

2191 Lemay Ferry Road  
SAINT LOUIS, MO 63125

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ADAMS, LISA	2022-01-01	LIFE		\$4.50
BEEM, JESSICA	2021-12-01	GUARDHIGH	EC	\$89.81
BEEM, JESSICA	2021-11-01	VSP	EE	\$8.75
BIDWELL, SHERRY	2022-01-01	GUARDLOW	EE	\$29.44
BIDWELL, SHERRY	2022-01-01	VSP	EE	\$8.75
BOUSQUET, LISA	2022-04-01	LIFE		\$19.10
BOUSQUET, LISA	2022-04-01	GUARDHIGH	FAM	\$160.18
BOUSQUET, LISA	2022-04-01	VSP	FAM	\$23.76
BOWMAN, BROOKE	2022-01-01	VSP	FAM	\$23.76
BOWMAN, BROOKE	2022-01-01	LIFE		\$7.20
BOWMAN, BROOKE	2022-01-01	GUARDHIGH	FAM	\$160.18
BREWER-LARSON, MELISSA	2022-05-01	ADD		\$8.82
BREWER-LARSON, MELISSA	2022-05-01	LIFE		\$14.75
BREWER-LARSON, MELISSA	2022-05-01	GUARDLOW	FAM	\$100.74
BREWER-LARSON, MELISSA	2022-05-01	VSP	FAM	\$23.76
BRUSH, JENNY	2022-01-01	VSP	EE	\$8.75
BRUSH, JENNY	2022-01-01	LIFE		\$9.55
BRUSH, JENNY	2022-01-01	ADD		\$4.20
BRUSH, JENNY	2022-01-01	GUARDHIGH	EE	\$47.61
BURKS, CRYSTAL	2022-06-01	ADD		\$4.20
BURKS, CRYSTAL	2022-06-01	LIFE		\$12.00
BURKS, CRYSTAL	2022-06-01	GUARDHIGH	EE	\$47.61
BURKS, CRYSTAL	2022-06-01	VSP	EE	\$8.75
CALKINS, KATHERINE	2022-01-01	GUARDHIGH	EE	\$47.61
CALKINS, KATHERINE	2022-01-01	VSP	EE	\$8.75
CLAEYS, LACEY	2022-05-01	VSP	EC	\$15.02

**NATIONAL HOSPICE MANAGEMENT**

2191 Lemay Ferry Road  
SAINT LOUIS, MO 63125

**CURRENT MONTH ENROLLMENT (CONTINUED)**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CLAEYS, LACEY	2022-05-01	LIFE		\$10.70
CLAEYS, LACEY	2022-05-01	ADD		\$4.62
CLAEYS, LACEY	2022-05-01	GUARDLOW	EC	\$74.61
COULTER, JENNIFER	2020-01-01	0435OPENACCESSESSE	EE	\$450.74
CRAIG, ANGELA	2022-01-01	ADD	EE	\$2.10
CRAIG, ANGELA	2022-01-01	GUARDLOW	EE	\$29.44
CRAIG, ANGELA	2022-01-01	VSP	EE	\$8.75
CRAIG, ANGELA	2022-01-01	LIFE	EE	\$9.55
CREVISTON, KIMBERLY	2022-09-01	GUARDLOW	EE	\$29.44
CREVISTON, KIMBERLY	2022-09-01	VSP	EE	\$8.75
DAVIS, ANGELA	2022-01-01	LIFE		\$9.55
DAVIS, ANGELA	2022-01-01	ADD		\$4.20
DAVIS, ANGELA	2022-01-01	GUARDHIGH	EE	\$47.61
DAVIS, ANGELA	2022-01-01	VSP	ES	\$14.73
DOWLING, MELANIE	2022-01-01	LIFE		\$2.40
DOWLING, MELANIE	2022-01-01	ADD		\$0.42
DOWLING, MELANIE	2022-01-01	GUARDLOW	EE	\$29.44
ELLSWORTH, STEPHANIE	2022-01-01	GUARDHIGH	EE	\$47.61
EPPARD, JESSICA	2020-01-01	0435OPENACCESSESSE	EE	\$450.74
EPPARD, JESSICA	2022-01-01	GUARDHIGH	FAM	\$160.18
EPPARD, JESSICA	2022-01-01	VSP	EC2	\$15.02
FINCH, SKYLEE	2022-02-01	VSP	EE	\$8.75
FINCH, SKYLEE	2022-02-01	LIFE		\$0.60
FINCH, SKYLEE	2022-02-01	ADD		\$1.05
FINCH, SKYLEE	2022-02-01	GUARDHIGH	FAM	\$160.18



**NATIONAL HOSPICE MANAGEMENT**

2191 Lemay Ferry Road  
SAINT LOUIS, MO 63125

**CURRENT MONTH ENROLLMENT (CONTINUED)**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
FINEMAN, CHERYL	2022-01-01	LIFE		\$17.29
FINEMAN, CHERYL	2022-01-01	ADD		\$2.10
FINEMAN, CHERYL	2022-01-01	GUARDHIGH	ES	\$89.81
FINEMAN, CHERYL	2022-01-01	VSP	ES	\$14.73
FINNE, KAYLA	2022-01-01	GUARDLOW	EC	\$74.61
FINNE, KAYLA	2022-01-01	VSP	EC	\$15.02
FLACY, LAURIE	2022-01-01	LIFE		\$14.75
FLACY, LAURIE	2022-01-01	ADD		\$23.52
FLACY, LAURIE	2022-01-01	GUARDLOW	FAM	\$100.74
FLACY, LAURIE	2022-01-01	VSP	FAM	\$23.76
FLEMMER, MELISSA	2022-01-01	VSP	ES	\$14.73
FLEMMER, MELISSA	2022-01-01	LIFE		\$8.70
FLEMMER, MELISSA	2022-01-01	ADD		\$8.40
FLEMMER, MELISSA	2022-01-01	GUARDLOW	ES	\$55.54
FREEMAN, TAMARA	2022-01-01	GUARDHIGH	EE	\$47.61
FREEMAN, TAMARA	2022-01-01	LIFE		\$85.80
FREEMAN, TAMARA	2022-01-01	ADD		\$4.20
FREEMAN, TAMARA	2022-01-01	VSP	EE	\$8.75
GALLARDE, NENITA	2022-09-01	ADD		\$2.10
GALLARDE, NENITA	2022-09-01	VSP	EE	\$8.75
GILLESPIE, GINA	2022-05-01	VSP	EE	\$8.75
GIRTON, CAROL	2022-04-01	LIFE		\$59.28
GIRTON, CAROL	2018-01-01	ADD		\$2.95
GIRTON, CAROL	2022-04-01	GUARDHIGH	EE	\$47.61
GIRTON, CAROL	2022-04-01	VSP	EE	\$8.75

NATIONAL HOSPICE MANAGEMENT  
2191 Lemay Ferry Road  
SAINT LOUIS, MO 63125

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
HAMRICK, JEFFREY	2022-01-01	LIFE		\$59.28
HEUER, TAMMY	2022-01-01	ADD		\$0.84
HEUER, TAMMY	2022-01-01	GUARDHIGH	ES	\$89.81
HEUER, TAMMY	2022-01-01	VSP	ES	\$14.73
HOWELL, JOEY	2022-01-01	LIFE		\$11.30
HOWELL, JOEY	2022-01-01	GUARDLOW	EC	\$74.61
HOWELL, JOEY	2022-01-01	VSP	EC	\$15.02
HUARD, OLIVIA	2022-01-01	GUARDLOW	FAM	\$100.74
KASIK, ANN	2022-05-01	LIFE		\$180.36
KASIK, ANN	2022-01-01	ADD		\$4.20
KASIK, ANN	2022-01-01	GUARDHIGH	ES	\$89.81
KASIK, ANN	2022-01-01	VSP	ES	\$14.73
KELLEY, SHERRI	2022-01-01	VSP	EE	\$8.75
KELLEY, SHERRI	2022-01-01	LIFE		\$35.75
KELLEY, SHERRI	2022-01-01	GUARDHIGH	EE	\$47.61
KOEPPEN, JESSICA	2022-04-01	LIFE		\$10.80
KOEPPEN, JESSICA	2022-04-01	ADD		\$7.56
KOEPPEN, JESSICA	2022-04-01	GUARDHIGH	EE	\$47.61
KOEPPEN, JESSICA	2022-04-01	VSP	EE	\$8.75
KUCICH, MARIAH	2022-06-01	VSP	EE	\$8.75
KUCICH, MARIAH	2022-06-01	LIFE		\$0.60
KUCICH, MARIAH	2022-06-01	GUARDHIGH	EC2	\$117.99
KUMER, RAE-LYNN	2022-04-01	LIFE		\$2.70
KUMER, RAE-LYNN	2022-04-01	ADD		\$0.84
KUMER, RAE-LYNN	2022-04-01	GUARDHIGH	EE	\$47.61

**NATIONAL HOSPICE MANAGEMENT**

2191 Lemay Ferry Road  
SAINT LOUIS, MO 63125

**CURRENT MONTH ENROLLMENT (CONTINUED)**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
KUMER, RAE-LYNN	2022-04-01	VSP	EE	\$8.75
LABRIOLA, CHLOE	2022-01-01	LIFE		\$7.20
LABRIOLA, CHLOE	2022-01-01	GUARDLOW	ES	\$55.54
LABRIOLA, CHLOE	2022-01-01	VSP	ES	\$14.73
LADINES, DAVID	2022-06-01	LIFE		\$7.15
LADINES, DAVID	2022-06-01	GUARDLOW	ES	\$55.54
LADINES, DAVID	2022-06-01	VSP	ES	\$14.73
LECHIEN, LORRIE	2022-05-01	ADD		\$4.20
LECHIEN, LORRIE	2022-05-01	LIFE		\$24.70
LECHIEN, LORRIE	2022-05-01	GUARDLOW	EE	\$29.44
LECHIEN, LORRIE	2022-01-01	GUARDHIGH	EE	\$47.61
LECHIEN, LORRIE	2022-05-01	VSP	EE	\$8.75
LOPEZ, MALENA	2020-01-01	ADD		\$8.82
LUNDEEN, LORANA	2022-06-01	ADD		\$2.10
LUNDEEN, LORANA	2022-06-01	LIFE		\$8.00
LUNDEEN, LORANA	2022-06-01	VSP	EE	\$8.75
LYONS, JENICA	2022-01-01	GUARDHIGH	FAM	\$160.18
LYONS, JENICA	2022-01-01	VSP	EC2	\$15.02
MAROLLA, VINCENT	2022-01-01	ADD		\$1.26
MAROLLA, VINCENT	2022-01-01	GUARDLOW	EE	\$29.44
MCMILLAN, STEPHANIE	2022-05-01	ADD		\$2.86
MCMILLAN, STEPHANIE	2022-05-01	LIFE		\$10.02
MCMILLAN, STEPHANIE	2022-05-01	GUARDLOW	EE	\$29.44
MCMILLAN, STEPHANIE	2022-05-01	VSP	EE	\$8.75
MECUM, KANDY	2022-01-02	LIFE		\$27.70

**NATIONAL HOSPICE MANAGEMENT**

2191 Lemay Ferry Road  
SAINT LOUIS, MO 63125

**CURRENT MONTH ENROLLMENT (CONTINUED)**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
MECUM, KANDY	2022-01-02	ADD		\$18.48
MECUM, KANDY	2022-01-02	GUARDLOW	FAM	\$100.74
MECUM, KANDY	2022-01-02	VSP	FAM	\$23.76
MURPHY, JULIE	2022-01-01	VSP	EE	\$8.75
MURPHY, JULIE	2022-01-01	LIFE		\$7.15
MURPHY, JULIE	2022-01-01	ADD		\$2.10
MURPHY, JULIE	2022-01-01	GUARDHIGH	EE	\$47.61
NEAL, SAMANTHA	2022-06-01	VSP	EE	\$8.75
NEAL, SAMANTHA	2022-06-01	GUARDLOW	EE	\$29.44
OMNAS, COURTNEY	2022-01-01	LIFE		\$9.60
OMNAS, COURTNEY	2022-01-01	GUARDLOW	ES	\$55.54
OMNAS, COURTNEY	2022-01-01	VSP	EE	\$8.75
PARHAM, NANCY	2022-01-01	LIFE		\$3.82
PARHAM, NANCY	2022-01-01	GUARDHIGH	ES	\$89.81
PARHAM, NANCY	2022-01-01	VSP	ES	\$14.73
PEACOCK, SHAWNA	2022-01-01	ADD		\$4.62
PEACOCK, SHAWNA	2022-01-01	GUARDHIGH	EC	\$89.81
PEACOCK, SHAWNA	2022-01-01	VSP	EC	\$15.02
PLOUGH, MYRNA	2022-01-01	VSP	EE	\$8.75
PLOUGH, MYRNA	2022-01-01	GUARDLOW	EE	\$29.44
POHL, BETH	2022-01-01	ADD		\$2.10
POHL, BETH	2022-01-01	GUARDHIGH	EE	\$47.61
POHL, BETH	2022-01-01	VSP	EE	\$8.75
POSTIN, TARA	2022-01-01	LIFE		\$9.00
POSTIN, TARA	2022-01-01	GUARDHIGH	FAM	\$160.18

**NATIONAL HOSPICE MANAGEMENT**

2191 Lemay Ferry Road  
SAINT LOUIS, MO 63125

**CURRENT MONTH ENROLLMENT (CONTINUED)**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
PRENGER, VICKI	2022-01-01	GUARDHIGH	EE	\$47.61
PRENGER, VICKI	2022-01-01	VSP	EE	\$8.75
RANDOLPH, TRAVIS	2022-04-01	LIFE		\$3.00
RANDOLPH, TRAVIS	2022-04-01	ADD		\$3.36
RANDOLPH, TRAVIS	2022-04-01	GUARDLOW	EE	\$29.44
RANDOLPH, TRAVIS	2022-04-01	VSP	EE	\$8.75
ROMANO, JENNIFER	2022-01-01	GUARDHIGH	FAM	\$160.18
ROMANO, JENNIFER	2022-01-01	VSP	FAM	\$23.76
RUST, SARA	2022-01-01	GUARDHIGH	EE	\$47.61
RUST, SARA	2022-01-01	VSP	EE	\$8.75
SAAD, MICHAEL	2022-01-01	LIFE		\$4.94
SAAD, MICHAEL	2022-01-01	VSP	EC	\$15.02
SELLS, KELSIE	2022-08-09	VSP	EE	\$8.75
SELLS, KELSIE	2022-08-09	GUARDHIGH	EE	\$47.61
SELLS, KELSIE	2022-01-01	GUARDLOW	ES	\$55.54
SHORT, CARRIE	2022-01-01	VSP	EE	\$8.75
SHORT, CARRIE	2022-01-01	LIFE		\$9.55
SHORT, CARRIE	2022-01-01	GUARDHIGH	EE	\$47.61
SMITH, JAMIE	2022-01-01	LIFE		\$26.45
SMITH, JAMIE	2022-01-01	ADD		\$4.20
SMITH, JAMIE	2022-01-01	GUARDLOW	FAM	\$100.74
SMITH, JAMIE	2022-01-01	VSP	FAM	\$23.76
SMITH, NADINE	2022-01-01	LIFE		\$15.00
SMITH, NADINE	2022-01-01	VSP	EE	\$8.75
SULZBERGER, TRACEY	2022-01-01	LIFE		\$39.60

## NATIONAL HOSPICE MANAGEMENT

2191 Lemay Ferry Road  
SAINT LOUIS, MO 63125

## CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
SULZBERGER, TRACEY	2022-01-01	ADD		\$8.40
SULZBERGER, TRACEY	2022-01-01	GUARDLOW	EE	\$29.44
SULZBERGER, TRACEY	2022-01-01	VSP	EE	\$8.75
TESCHLER, MIRANDA	2022-01-01	ADD		\$8.40
TESCHLER, MIRANDA	2022-01-01	LIFE		\$7.50
VILLAFANA, NICOLE	2022-01-01	VSP	EE	\$8.75
VILLAFANA, NICOLE	2022-01-01	LIFE		\$6.00
VILLAFANA, NICOLE	2022-01-01	ADD		\$0.84
VILLAFANA, NICOLE	2022-01-01	GUARDLOW	EE	\$29.44
YARMAN, DAWN	2022-05-01	GUARDLOW	EC	\$74.61
YARMAN, DAWN	2022-05-01	VSP	EC	\$15.02

## NATIONAL HOSPICE MANAGEMENT

2191 Lemay Ferry Road  
SAINT LOUIS, MO 63125

## PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CREVISTON, KIMBERLY	2022-09-01	VSP	EE	\$8.75
CREVISTON, KIMBERLY	2022-09-01	GUARDLOW	EE	\$29.44
GALLARDE, NENITA	2022-09-01	ADD		\$2.10
HOWELL, JOEY	2022-01-01	GUARDLOW	EC	\$74.61
HOWELL, JOEY	2022-01-01	VSP	EC	\$15.02
HOWELL, JOEY	2022-01-01	LIFE		\$11.30
SELLS, KELSIE	2022-08-09	GUARDHIGH	EE	\$47.61

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

NEEMA HOSPITALITY MGT. MECHANICSBURG  
1012 WESLEY DRIVE  
MECHANICSBURG, PA 17055

Invoice Number: 4733-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	2	\$2.10**	\$15.12
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDLOW	Employee Only	2	\$29.44	\$58.88
GUARDLOW	Employee & Spouse Only	1	\$55.54	\$55.54
LIFE	Employee Only	3	\$4.50**	\$72.00
NEEMAOPENAXESSESSE	Employee Only	1	\$489.70	\$489.70
NEEMAOPENAXESSPRIME	Employee & Spouse Only	1	\$1,394.12	\$1,394.12
VSP	Employee Only	3	\$8.75	\$26.25
			GRAND TOTAL	\$2,159.22



NEEMA HOSPITALITY MGT. MECHANICSBURG  
1012 WESLEY DRIVE  
MECHANICSBURG, PA 17055

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BACON, JUSTIN	2022-07-01	ADD		\$2.10
BACON, JUSTIN	2022-09-01	LIFE		\$6.00
BACON, JUSTIN	2022-07-01	GUARDLOW	EE	\$29.44
BACON, JUSTIN	2022-07-01	VSP	EE	\$8.75
GORDON, JAMES	2022-01-01	LIFE		\$41.30
GORDON, JAMES	2022-01-01	ADD		\$13.02
GORDON, JAMES	2022-01-01	GUARDHIGH	EE	\$47.61
GORDON, JAMES	2022-01-01	VSP	EE	\$8.75
HALL, DON	2021-12-31	NEEMAOPENAXESSPRIME		\$1394.12
HALL, DON	2021-12-31	GUARDLOW	ES	\$55.54
MARKS, RICHARD	2022-01-01	LIFE		\$24.70
MARKS, RICHARD	2022-01-01	NEEMAOPENAXESSESSE	EE	\$489.70
MARKS, RICHARD	2022-01-01	GUARDLOW	EE	\$29.44
MARKS, RICHARD	2022-01-01	VSP	EE	\$8.75

**MEDICAL PLAN COUNTS**

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



## Account Services

### Monthly Statement

NETWORK RUNNERS, INC  
21351 GENTRY DRIVE  
STERLING, VA 20166

Invoice Number: 4593-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
0340GUARDDENT	Employee Only	31	\$44.25	\$1,371.75
0340GUARDDENT	Employee & Spouse Only	3	\$92.26	\$276.78
0340GUARDDENT	Employee & Children	2	\$110.46	\$220.92
0340GUARDDENT	Family	4	\$158.46	\$633.84
0340VIS	Employee Only	30	\$9.93	\$296.90
0340VIS	Employee & Spouse Only	5	\$16.74	\$83.70
0340VIS	Employee & Children	1	\$17.06	\$17.06
0340VIS	Family	3	\$27.00	\$81.00
			GRAND TOTAL	\$3,188.74

NETWORK RUNNERS, INC  
21351 GENTRY DRIVE  
STERLING, VA 20166

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ANDERSON, LARAY	2022-02-01	0340GUARDDENT	EE	\$44.25
ANDERSON, LARAY	2022-02-01	0340VIS	EE	\$9.93
BARNETT, WILLIAM	2019-10-01	0340GUARDDENT	EE	\$44.25
BARNETT, WILLIAM	2019-10-01	0340VIS	EE	\$9.93
BHATIA, MANOJ	2018-05-01	0340VIS	EE	\$9.93
BHATIA, MANOJ	2018-04-01	0340GUARDDENT	EE	\$44.25
BHATIA, PREETI	2018-05-01	0340VIS	EE	\$9.93
BHATIA, PREETI	2018-04-01	0340GUARDDENT	EE	\$44.25
CALO II, JACOB	2020-04-01	0340GUARDDENT	EE	\$44.25
CALO II, JACOB	2020-04-01	0340VIS	EE	\$9.93
CANNON, KORI	2021-12-01	0340GUARDDENT	EC2	\$110.46
CANNON, KORI	2021-12-01	0340VIS	EC2	\$17.06
CAULEY, MARIO	2020-11-01	0340GUARDDENT	EE	\$44.25
CAULEY, MARIO	2020-11-01	0340VIS	ES	\$16.74
CHANTHAVONE, JIMMY	2022-07-01	0340GUARDDENT	EE	\$44.25
CHANTHAVONE, JIMMY	2022-07-01	0340VIS	EE	\$9.93
CHU, SZU-YU	2022-09-01	0340GUARDDENT	EE	\$44.25
CHU, SZU-YU	2022-09-01	0340VIS	EE	\$9.93
COFFMAN, KATHERIN	2020-10-01	0340GUARDDENT	EE	\$44.25
COFFMAN, KATHERIN	2020-10-01	0340VIS	EE	\$9.93
DEJARNETT, ANTONIO	2021-07-01	0340GUARDDENT	FAM	\$158.46
DEJARNETT, ANTONIO	2021-07-01	0340VIS	FAM	\$27.00
DITORE, MICHAEL-JOHN	2021-05-01	0340VIS	EE	\$9.93
DITORE, MICHAEL-JOHN	2021-05-01	0340GUARDDENT	EE	\$44.25
DUBRAY, BRITTANY	2022-08-01	0340GUARDDENT	EE	\$44.25

NETWORK RUNNERS, INC  
21351 GENTRY DRIVE  
STERLING, VA 20166

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
DUBRAY, BRITTANY	2022-08-01	0340VIS	EE	\$9.93
ESPINO, ISMAEL	2019-11-01	0340GUARDDENT	EC2	\$110.46
ESPINO, ISMAEL	2019-11-01	0340VIS	EE	\$9.93
EVANS, RODERICK	2021-10-01	0340GUARDDENT	EE	\$44.25
EVANS, RODERICK	2021-10-01	0340VIS	EE	\$9.93
GALLAGHER, PATRICK	2022-10-01	0340GUARDDENT	EE	\$44.25
GALLAGHER, PATRICK	2022-10-01	0340VIS	EE	\$9.93
GERMAN, JASMINE	2022-01-01	0340GUARDDENT	EE	\$44.25
GERMAN, JASMINE	2022-01-01	0340VIS	EE	\$9.93
GONZALEZ, DANIEL	2022-09-01	0340GUARDDENT	EE	\$44.25
GONZALEZ, DANIEL	2022-09-01	0340VIS	EE	\$9.93
GROSS, JOHN	2020-05-01	0340GUARDDENT	ES	\$92.26
GROSS, JOHN	2020-05-01	0340VIS	ES	\$16.74
GUPTA, VIVEK	2019-01-15	0340GUARDDENT	EE	\$44.25
GUPTA, VIVEK	2018-06-01	0340VIS	EE	\$9.93
JACKSON, DERRICK	2019-08-01	0340GUARDDENT	EE	\$44.25
JACKSON, DERRICK	2019-08-01	0340VIS	ES	\$16.74
KONATE, TONY	2016-11-01	0340VIS	EE	\$8.93
LEBEL, DENISE	2021-02-01	0340GUARDDENT	FAM	\$158.46
LEDUC, TODD	2022-04-01	0340GUARDDENT	EE	\$44.25
LEDUC, TODD	2022-04-01	0340VIS	EE	\$9.93
MARINO, CHERYL	2021-10-01	0340VIS	EE	\$9.93

NETWORK RUNNERS, INC  
21351 GENTRY DRIVE  
STERLING, VA 20166

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
MARINO, CHERYL	2021-10-01	0340GUARDDENT	EE	\$44.25
MCCALL, WILLIAM	2022-09-01	0340GUARDDENT	EE	\$44.25
MCCALL, WILLIAM	2022-09-01	0340VIS	EE	\$9.93
NWADIBIA, BENJAMIN	2021-04-01	0340GUARDDENT	FAM	\$158.46
NWADIBIA, BENJAMIN	2021-04-01	0340VIS	FAM	\$27.00
ONSUSKO, DAVID	2022-08-01	0340GUARDDENT	ES	\$92.26
ONSUSKO, DAVID	2022-08-01	0340VIS	ES	\$16.74
POTDAR, SUYASH	2021-12-01	0340GUARDDENT	EE	\$44.25
POTDAR, SUYASH	2021-12-01	0340VIS	EE	\$9.93
QASSIM, TAMMIM	2021-08-01	0340GUARDDENT	EE	\$44.25
QASSIM, TAMMIM	2021-08-01	0340VIS	EE	\$9.93
QUINN, SASHA	2020-08-01	0340GUARDDENT	EE	\$44.25
QUINN, SASHA	2020-08-01	0340VIS	EE	\$9.93
RAWLINS, STEVEN	2022-07-01	0340GUARDDENT	EE	\$44.25
RAWLINS, STEVEN	2022-07-01	0340VIS	EE	\$9.93
ROBINSON, MATTHEW	2022-01-01	0340GUARDDENT	EE	\$44.25
ROBINSON, MATTHEW	2022-01-01	0340VIS	EE	\$9.93
SHEPHERD, DEYSHUAN	2021-08-01	0340GUARDDENT	EE	\$44.25
SHEPHERD, DEYSHUAN	2021-08-01	0340VIS	EE	\$9.93
SMITH, DORIAN	2022-09-01	0340GUARDDENT	EE	\$44.25
SMITH, DORIAN	2022-09-01	0340VIS	EE	\$9.93
TATARKA, EVAN	2021-07-01	0340VIS	EE	\$9.93
TATARKA, EVAN	2021-07-01	0340GUARDDENT	EE	\$44.25

NETWORK RUNNERS, INC  
21351 GENTRY DRIVE  
STERLING, VA 20166

## CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
TAYLOR, JEFFREY	2021-07-01	0340GUARDDENT	EE	\$44.25
TREMMELE, LAWRENCE	2022-03-01	0340VIS	ES	\$16.74
TREMMELE, LAWRENCE	2022-03-01	0340GUARDDENT	ES	\$92.26
URGENT, KIERA	2022-09-01	0340GUARDDENT	EE	\$44.25
URGENT, KIERA	2022-09-01	0340VIS	EE	\$9.93
WALKER, ARIEL	2022-07-01	0340GUARDDENT	EE	\$44.25
WALKER, ARIEL	2022-07-01	0340VIS	EE	\$9.93
WASHINGTON, ANGELA	2020-11-01	0340VIS	FAM	\$27.00
WASHINGTON, ANGELA	2020-11-01	0340GUARDDENT	FAM	\$158.46

NETWORK RUNNERS, INC  
21351 GENTRY DRIVE  
STERLING, VA 20166

## PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
GONZALEZ, DANIEL	2022-09-01	0340GUARDDENT	EE	\$44.25
GONZALEZ, DANIEL	2022-09-01	0340VIS	EE	\$9.93
MCCALL, WILLIAM	2022-09-01	0340GUARDDENT	EE	\$44.25
MCCALL, WILLIAM	2022-09-01	0340VIS	EE	\$9.93
SMITH, DORIAN	2022-09-01	0340GUARDDENT	EE	\$44.25
URGENT, KIERA	2022-09-01	0340GUARDDENT	EE	\$44.25
URGENT, KIERA	2022-09-01	0340VIS	EE	\$9.93

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

NEW AGE ELECTRIC, INC  
8850 BROOKVILLE ROAD  
SILVER SPRING, MD 20910

Invoice Number: 4177-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$42.42**	\$42.42
GUARDHIGH	Employee Only	2	\$47.61	\$95.22
GUARDHIGH	Family	1	\$160.18	\$160.18
GUARDLOW	Employee Only	1	\$29.44	\$29.44
GUARDLOW	Employee & Spouse Only	3	\$55.54	\$165.61
GUARDLOW	Family	1	\$100.74	\$100.74
LIFE	Employee Only	3	\$247.00**	\$375.75
VSP	Employee Only	3	\$8.75	\$26.25
VSP	Employee & Spouse Only	2	\$14.73	\$29.46
VSP	Family	2	\$23.76	\$47.52
			GRAND TOTAL	\$1,072.59



NEW AGE ELECTRIC, INC  
8850 BROOKVILLE ROAD  
SILVER SPRING, MD 20910

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
AGUILERA, RUDY	2017-12-01	GUARDLOW	ES	\$55.54
FRIEDMAN-MISTERKA, MATHEW	2022-01-01	ADD		\$42.42
FRIEDMAN-MISTERKA, MATHEW	2022-01-01	VSP	FAM	\$23.76
FRIEDMAN-MISTERKA, MATHEW	2021-12-01	LIFE		\$80.90
GARCIA ZUNIGA, MIKE	2020-09-01	GUARDLOW	EE	\$29.44
GARCIA ZUNIGA, MIKE	2020-09-01	VSP	EE	\$8.75
HARVEY, JR, BRENT	2017-12-01	GUARDHIGH	EE	\$47.61
KULLA, FATMIR	2015-01-01	GUARDLOW	ES	\$54.53
KULLA, FATMIR	2020-01-01	VSP	ES	\$14.73
MORALES, JOSE	2021-01-01	GUARDHIGH	FAM	\$160.18
MORALES, JOSE	2021-01-01	VSP	ES	\$14.73
OCHAITA, WILLIAM	2017-12-01	GUARDLOW	FAM	\$100.74
OCHAITA, WILLIAM	2018-12-01	VSP	FAM	\$23.76
PUMPHREY, AUSTIN	2019-01-01	GUARDHIGH	EE	\$47.61
PUMPHREY, AUSTIN	2019-01-01	VSP	EE	\$8.75
PUMPHREY, JOHN	2020-12-01	LIFE		\$247.00
QUINTANILLA, JOSE	2018-01-01	GUARDLOW	ES	\$55.54
QUINTANILLA, JOSE	2018-12-01	VSP	EE	\$8.75
WILLIAMS, BRIAN	2021-11-01	LIFE		\$47.85

**MEDICAL PLAN COUNTS**

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



## Account Services

### Monthly Statement

NEW AGE SYSTEMS & DESIGN LLC  
8850 BROOKVILLE ROAD  
SILVER SPRING, MD 20910

Invoice Number: 4568-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDLOW	Employee Only	1	\$29.44	\$29.44
			GRAND TOTAL	\$29.44

NEW AGE SYSTEMS & DESIGN LLC  
8850 BROOKVILLE ROAD  
SILVER SPRING, MD 20910

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
SMITH, THOMAS	2017-12-01	GUARDLOW	EE	\$29.44

## MEDICAL PLAN COUNTS

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



**Account Services**  
**Monthly Statement**

NICOLE HOOPER PH.D.  
1 Stonebriar Ct  
DALLAS, TX 75206

Invoice Number: 4287-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1535OPENAXESS	SCOPPE Employee Only	1	\$450.75	\$450.75
			GRAND TOTAL	\$450.75

NICOLE HOOPER PH.D.

1 Stonebriar Ct

DALLAS, TX 75206

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
HOOPER, NICOLE	2022-01-01	1535OPENAXESSCOPPE EE		\$450.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

ONE FOR ISRAEL  
1300 Glade RD  
COLLEYVILLE, TX 76034

Invoice Number: 4565-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDHIGH	Family	1	\$0.00	\$160.18
GUARDLOW	Employee Only	4	\$29.44	\$117.76
GUARDLOW	Employee & Spouse Only	1	\$55.54	\$55.54
GUARDLOW	Family	4	\$100.74	\$402.96
LIFE	Employee Only	2	\$7.20**	\$54.00
VSP	Employee Only	5	\$8.75	\$43.75
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
VSP	Family	4	\$23.76	\$95.04
			GRAND TOTAL	\$1,175.51

ONE FOR ISRAEL  
1300 Glade RD  
COLLEYVILLE, TX 76034

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BAREFIELD, SHALIMAR	2022-01-01	GUARDLOW	EE	\$29.44
BAREFIELD, SHALIMAR	2022-01-01	VSP	EE	\$8.75
BLAIN, WHITNEY	2022-09-01	GUARDHIGH	FAM	\$160.18
BLAIN, WHITNEY	2022-09-01	VSP	FAM	\$23.76
EDDY DEBROEKERT, REBECCA	2022-01-01	GUARDLOW	EE	\$29.44
EDDY DEBROEKERT, REBECCA	2022-01-01	VSP	EE	\$8.75
EDDY DEBROEKERT, REBECCA	2022-01-01	LIFE		\$39.60
HART, BENJAMIN	2021-11-01	GUARDLOW	EE	\$29.44
HART, BENJAMIN	2021-11-01	VSP	EE	\$8.75
KLEMCKE, MARCI	2021-11-01	VSP	EE	\$8.75
KLEMCKE, MARCI	2022-01-01	GUARDHIGH	EE	\$47.61
MASSEY, JOSHUA	2022-01-01	GUARDLOW	FAM	\$100.74
MASSEY, JOSHUA	2022-01-01	VSP	FAM	\$23.76
MCINTYRE, KIM	2020-01-01	GUARDLOW	EE	\$29.44
MCINTYRE, KIM	2020-01-01	VSP	EE	\$8.75
ROOT, GINA	2022-01-01	GUARDLOW	FAM	\$100.74
ROOT, GINA	2022-01-01	LIFE		\$14.40
ROWDEN, DEREK	2022-01-01	GUARDLOW	FAM	\$100.74
ROWDEN, DEREK	2022-01-01	VSP	FAM	\$23.76
SCHULZE, LEAH	2021-02-01	GUARDLOW	ES	\$55.54
SCHULZE, LEAH	2022-01-01	VSP	ES	\$14.73
SCOTT, DEREK	2022-01-01	GUARDLOW	FAM	\$100.74
SCOTT, DEREK	2022-01-01	VSP	FAM	\$23.76

ONE FOR ISRAEL  
1300 Glade RD  
COLLEYVILLE, TX 76034

## PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BLAIN, WHITNEY	2022-09-01	GUARDHIGH	FAM	\$160.18
BLAIN, WHITNEY	2022-09-01	VSP	FAM	\$23.76

## MEDICAL PLAN COUNTS

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





## Account Services

### Monthly Statement

ONE NIGHT PROPERTIES

Invoice Number: 5908-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1973OPENAXESSPLATI	Employee Only	3	\$887.95	\$2,663.85
1973OPENAXESSPLATI	Employee & Children	1	\$1,751.05	\$1,751.05
1973OPENAXESSPLATI	Family	2	\$2,614.09	\$5,228.18
GUARDHIGH	Employee Only	2	\$47.61	\$95.22
GUARDHIGH	Employee & Children	1	\$117.99	\$117.99
GUARDHIGH	Family	2	\$160.18	\$320.36
GUARDLOW	Employee Only	1	\$29.44	\$29.44
VSP	Employee Only	3	\$8.75	\$26.25
VSP	Employee & Children	1	\$15.02	\$15.02
VSP	Family	2	\$23.76	\$47.52
			GRAND TOTAL	\$10,294.88

**ONE NIGHT PROPERTIES**

,

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
FISHOF, POLINA	2022-06-01	GUARDHIGH	EE	\$47.61
FISHOF, POLINA	2022-06-01	1973OPENAXESSPLATI	EE	\$887.95
FISHOF, POLINA	2022-06-01	VSP	EE	\$8.75
HUTTON, WILLIAM	2022-04-01	GUARDLOW	EE	\$29.44
HUTTON, WILLIAM	2022-04-01	VSP	EE	\$8.75
HUTTON, WILLIAM	2022-04-01	1973OPENAXESSPLATI	EE	\$887.95
KOLLENSCHER, AVI	2022-08-01	GUARDHIGH	FAM	\$160.18
KOLLENSCHER, AVI	2022-08-01	1973OPENAXESSPLATI	FAM	\$2614.09
KOLLENSCHER, AVI	2022-08-01	VSP	FAM	\$23.76
KRAWITZ, STEFAN	2022-04-01	GUARDHIGH	EE	\$47.61
KRAWITZ, STEFAN	2022-04-01	1973OPENAXESSPLATI	EE	\$887.95
KRAWITZ, STEFAN	2022-04-01	VSP	EE	\$8.75
SCHWARTZ, ELCHONON	2022-04-01	VSP	EC2	\$15.02
SCHWARTZ, ELCHONON	2022-04-01	GUARDHIGH	EC2	\$117.99
SCHWARTZ, ELCHONON	2022-04-01	1973OPENAXESSPLATI	EC2	\$1751.05
SINGER, SIMON	2022-04-01	GUARDHIGH	FAM	\$160.18
SINGER, SIMON	2022-04-01	VSP	FAM	\$23.76
SINGER, SIMON	2022-04-01	1973OPENAXESSPLATI	FAM	\$2614.09

**MEDICAL PLAN COUNTS**

Employee Only	3
Employee & Spouse	0
Employee & Children	0
Family	2



## Account Services

### Monthly Statement

ONE PAPER LANE INC

Invoice Number: 5891-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$4.20**	\$4.20
GUARDLOW	Family	1	\$100.74	\$100.74
VSP	Family	1	\$23.76	\$23.76
			GRAND TOTAL	\$128.70

ONE PAPER LANE INC

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
KANNAN, KIRAN	2022-04-01	ADD		\$4.20
KANNAN, KIRAN	2022-04-01	GUARDLOW	FAM	\$100.74
KANNAN, KIRAN	2022-04-01	VSP	FAM	\$23.76

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

ONE POINT HR SOLUTIONS  
118 WEST 5TH STREET SUITE 202  
COVINGTON, KY 41011

Invoice Number: 4212-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1399OPENAXESSBRONZ	Employee Only	2	\$487.36	\$974.72
1399OPENAXESSCOPPE	Employee Only	2	\$438.63	\$877.26
1399OPENAXESSGOLD	Employee Only	5	\$653.81	\$3,269.05
1399OPENAXESSPLATI	Employee Only	5	\$719.19	\$3,595.95
1399OPENAXESSPLATI	Employee & Children	2	\$1,438.38	\$2,876.76
1399OPENAXESSSILVE	Employee Only	2	\$548.18	\$1,096.36
1399OPENAXESSSILVE	Employee & Children	1	\$1,096.36	\$1,096.36
1399OPENAXESSSILVE	Family	1	\$1,644.54	\$1,644.54
ADD	Employee Only	6	\$4.20**	\$31.92
GUARDHIGH	Employee Only	8	\$47.61	\$380.88
GUARDHIGH	Employee & Spouse Only	1	\$89.81	\$89.81
GUARDHIGH	Employee & Children	3	\$89.81	\$297.61
GUARDHIGH	Family	1	\$160.18	\$160.18
GUARDLOW	Employee Only	6	\$29.44	\$176.64
GUARDLOW	Employee & Children	1	\$74.61	\$74.61
GUARDLOW	Family	2	\$100.74	\$201.48
LIFE	Employee Only	9	\$39.60**	\$204.50
VSP	Employee Only	13	\$8.75	\$113.75
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
VSP	Employee & Children	2	\$15.02	\$30.04
			GRAND TOTAL	\$17,784.77

ONE POINT HR SOLUTIONS  
118 WEST 5TH STREET SUITE 202  
COVINGTON, KY 41011

CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ADCOCK, LISA	2022-01-01	GUARDHIGH	ES	\$89.81
ADCOCK, LISA	2022-01-01	1399OPENAXESSPLATI	EE	\$719.19
ADCOCK, LISA	2022-01-01	VSP	EE	\$8.75
ADCOCK, LISA	2022-01-01	LIFE		\$33.00
ALFONSO, FERMIN	2022-04-01	GUARDHIGH	EC	\$89.81
ALFONSO, FERMIN	2022-04-01	1399OPENAXESSPLATI	EE	\$719.19
ALFONSO, FERMIN	2022-04-01	VSP	ES	\$14.73
ALFONSO, FERMIN	2022-05-01	LIFE		\$25.58
ALUMBAUGH, DEBRA	2022-10-01	1399OPENAXESSBRONZ	EE	\$487.36
ALUMBAUGH, DEBRA	2022-10-01	ADD		\$1.26
ALUMBAUGH, DEBRA	2022-10-01	GUARDLOW	EE	\$29.44
ALUMBAUGH, DEBRA	2022-10-01	VSP	EE	\$8.75
BIONDI, SHERI	2022-03-01	1399OPENAXESSSILVE	FAM	\$1644.54
BIONDI, SHERI	2022-03-01	GUARDLOW	FAM	\$100.74
BLEVINS, TRACY	2020-03-01	GUARDLOW	EE	\$29.44
BLEVINS, TRACY	2020-03-01	VSP	EE	\$8.75
BROOKS, HERMAN	2022-07-01	GUARDHIGH	EE	\$47.61
BROOKS, HERMAN	2022-07-01	1399OPENAXESSCOPPE	EE	\$438.63
BROOKS, HERMAN	2022-07-01	VSP	EE	\$8.75
CAWTHON, REBECCA	2022-01-01	ADD		\$9.66
CAWTHON, REBECCA	2022-01-01	GUARDLOW	FAM	\$100.74
CAWTHON, REBECCA	2022-01-01	LIFE		\$10.70
COOPER, SARAH	2022-01-01	GUARDLOW	EC2	\$74.61
COOPER, SARAH	2022-01-01	1399OPENAXESSPLATI	EC2	\$1438.38
COOPER, SARAH	2022-01-01	VSP	EC2	\$15.02
COOPER, SARAH	2022-01-01	LIFE		\$10.70
DALBEY, TARAH	2022-03-01	GUARDLOW	EE	\$29.44

ONE POINT HR SOLUTIONS  
118 WEST 5TH STREET SUITE 202  
COVINGTON, KY 41011

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
DALBEY, TARAH	2022-03-01	1399OPENAXESSCOPPE	EE	\$438.63
DEABREU, GHERALDINE	2022-07-01	GUARDHIGH	EE	\$47.61
DEABREU, GHERALDINE	2022-07-01	1399OPENAXESSPLATI	EE	\$719.19
DEABREU, GHERALDINE	2022-07-01	VSP	EE	\$8.75
GILL, ALEXANDER	2022-09-01	1399OPENAXESSILVE	EE	\$548.18
GILL, ALEXANDER	2022-09-01	GUARDLOW	EE	\$29.44
GILL, ALEXANDER	2022-09-01	VSP	EE	\$8.75
GNADT, KIMBERLY	2021-09-01	1399OPENAXESSGOLD	EE	\$653.81
GNADT, KIMBERLY	2021-09-01	GUARDLOW	EE	\$29.44
GNADT, KIMBERLY	2021-09-01	VSP	EE	\$8.75
GUERRERO CANTORAN, MARCELA	2022-06-10	GUARDHIGH	EC	\$89.81
GUERRERO CANTORAN, MARCELA	2022-06-10	1399OPENAXESSPLATI	EC2	\$1438.38
HENDRIXSON, KIMBERLY	2021-12-01	GUARDHIGH	FAM	\$160.18
HILL, ELIZABETH	2022-07-01	1399OPENAXESSILVE	EE	\$548.18
HILL, ELIZABETH	2022-07-01	GUARDHIGH	EE	\$47.61
HILL, ELIZABETH	2022-07-01	VSP	EE	\$8.75
LONG, DAWN	2022-01-01	ADD		\$4.20
LONG, DAWN	2022-01-01	LIFE		\$49.40
LOUGH, KELLY	2022-01-01	ADD		\$8.40
LOUGH, KELLY	2022-01-01	GUARDHIGH	EE	\$47.61
LOUGH, KELLY	2022-01-01	1399OPENAXESSPLATI	EE	\$719.19
LOUGH, KELLY	2022-01-01	VSP	EE	\$8.75
LOUGH, KELLY	2022-01-01	LIFE		\$22.92
LUNSFORD, SUSAN	2022-06-01	ADD		\$4.20
LUNSFORD, SUSAN	2022-06-01	LIFE		\$39.60

ONE POINT HR SOLUTIONS  
118 WEST 5TH STREET SUITE 202  
COVINGTON, KY 41011

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
LUNSFORD, SUSAN	2022-06-01	GUARDHIGH	EE	\$47.61
LUNSFORD, SUSAN	2022-06-01	VSP	EE	\$8.75
MCCLURE, ROBERT	2021-07-01	1399OPENAXESSGOLD	EE	\$653.81
MCCLURE, ROBERT	2021-07-01	GUARDHIGH	EE	\$47.61
MCCLURE, ROBERT	2021-07-01	VSP	EE	\$8.75
PRINCE, APRIL	2022-01-01	1399OPENAXESSGOLD	EE	\$653.81
PRINCE, APRIL	2022-01-01	GUARDHIGH	EE	\$47.61
PRINCE, APRIL	2022-01-01	VSP	EE	\$8.75
REGAN, TIMOTHY	2022-01-01	1399OPENAXESSILVE	EC2	\$1096.36
REGAN, TIMOTHY	2022-01-01	VSP	EC2	\$15.02
RICKETTS, WILLIAM	2022-06-01	ADD		\$4.20
RICKETTS, WILLIAM	2022-06-01	LIFE		\$5.40
RICKETTS, WILLIAM	2022-06-01	1399OPENAXESSPLATI	EE	\$719.19
SHEFFIELD, JENNIFER	2021-06-01	1399OPENAXESSGOLD	EE	\$653.81
SHEFFIELD, JENNIFER	2021-06-01	GUARDHIGH	EE	\$47.61
SOKOL, EMILY	2020-01-01	1399OPENAXESSBRONZ	EE	\$487.36
SOKOL, EMILY	2020-01-01	GUARDLOW	EE	\$29.44
SOKOL, EMILY	2020-01-01	VSP	EE	\$8.75
SOKOL, EMILY	2021-11-01	LIFE		\$7.20
SVOB, LISA	2022-01-01	1399OPENAXESSGOLD	EE	\$653.81
SVOB, LISA	2022-01-01	GUARDHIGH	EC2	\$117.99
SVOB, LISA	2022-01-01	VSP	ECN	\$15.02



ONE POINT HR SOLUTIONS  
118 WEST 5TH STREET SUITE 202  
COVINGTON, KY 41011

## PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
GILL, ALEXANDER	2022-09-01	1399OPENAXESSILVE	EE	\$548.18
GILL, ALEXANDER	2022-09-01	GUARDLOW	EE	\$29.44

## MEDICAL PLAN COUNTS

Employee Only	16
Employee & Spouse	0
Employee & Children	0
Family	1



## Account Services

### Monthly Statement

PATIENTLY INC

Invoice Number: 5285-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1512GUARDIANDENTAL	Employee Only	2	\$26.50	\$53.00
1512OPENAXESSGOLD	Employee Only	1	\$555.74	\$555.74
1512OPENAXESSILVE	Employee Only	1	\$465.95	\$465.95
			GRAND TOTAL	\$1,074.69

PATIENTLY INC

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ARGON, JESSE	2020-06-01	1512OPENAXESSGOLD	EE	\$555.74
ARGON, JESSE	2020-06-01	1512GUARDIANDENTAL	EE	\$26.50
GRABNER, PHILIP	2020-06-01	1512OPENAXESSILVE	EE	\$465.95
GRABNER, PHILIP	2020-06-01	1512GUARDIANDENTAL	EE	\$26.50

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

PATIENTS' RIGHTS ACTION FUND INC  
1562 First Avenue, #296  
New York, NY 10028

Invoice Number: 4588-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	2	\$42.42**	\$52.50
GUARDHIGH	Employee Only	1	\$0.00	\$47.61
GUARDHIGH	Family	1	\$160.18	\$160.18
GUARDLOW	Employee Only	1	\$29.44	\$29.44
LIFE	Employee Only	2	\$8.40**	\$23.90
VSP	Employee Only	1	\$8.75	\$8.75
VSP	Family	1	\$23.76	\$23.76
			GRAND TOTAL	\$346.14

## PATIENTS' RIGHTS ACTION FUND INC

1562 First Avenue, #296

New York, NY 10028

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
HOWELL, ALLYSON	2022-10-01	ADD		\$10.08
HOWELL, ALLYSON	2022-10-01	LIFE		\$7.20
HOWELL, ALLYSON	2022-10-01	GUARDHIGH	EE	\$47.61
HOWELL, ALLYSON	2022-10-01	VSP	EE	\$8.75
LYONS, BARBARA	2021-03-01	GUARDLOW	EE	\$29.44
VALLIERE, MATTHEW	2022-01-01	ADD		\$42.42
VALLIERE, MATTHEW	2022-01-01	GUARDHIGH	FAM	\$160.18
VALLIERE, MATTHEW	2022-01-01	VSP	FAM	\$23.76
VALLIERE, MATTHEW	2022-05-01	LIFE		\$16.70

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

PAV BHAJI HUT  
37100 Fremont Blvd, Suit A  
Fremont, CA 94536

Invoice Number: 4092-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDLOW	Employee Only	1	\$29.44	\$29.44
			GRAND TOTAL	\$29.44

PAV BHAI HUT  
37100 Fremont Blvd, Suit A  
Fremont, CA 94536

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
RATHOD, SANJAY	2022-01-01	GUARDLOW	EE	\$29.44

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

PEAK LOAD MANAGEMENT ALLIANCE, INC  
5289 Oakbrook Dr  
PLAINFIELD, IN 46168

Invoice Number: 4523-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1863OPENAXESSILVE	Employee & Spouse Only	1	\$1,206.00	\$1,206.00
GUARDHIGH	Employee & Spouse Only	1	\$89.81	\$89.81
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
			GRAND TOTAL	\$1,310.54



PEAK LOAD MANAGEMENT ALLIANCE, INC  
5289 Oakbrook Dr  
PLAINFIELD, IN 46168

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
PHILIP, RICHARD	2022-02-01	GUARDHIGH	ES	\$89.81
PHILIP, RICHARD	2022-02-01	1863OPENAXESSILVE	ES	\$1206.00
PHILIP, RICHARD	2022-02-01	VSP	ES	\$14.73

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

PEDEGO ELECTRIC BIKES HARLEM  
306 W 142nd St Apt 7C  
NEW YORK, NY 10030

Invoice Number: 4412-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee & Children	1	\$117.99	\$117.99
VSP	Employee & Children	1	\$15.02	\$15.02
			GRAND TOTAL	\$133.01

PEDEGO ELECTRIC BIKES HARLEM

306 W 142nd St Apt 7C

NEW YORK, NY 10030

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
MINNICK, CHRISTOPHER	2021-09-01	GUARDHIGH	EC2	\$117.99
MINNICK, CHRISTOPHER	2021-09-01	VSP	EC2	\$15.02

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

PET SUPPLIES PLUS - FARR BETTER PETS

Invoice Number: 5760-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1901OPENAXESSCOPPE	Employee & Children	1	\$908.07	\$908.07
1901OPENAXESSGOLD	Family	1	\$2,157.57	\$2,157.57
1901OPENAXESSILVE	Employee Only	1	\$603.00	\$603.00
ADD	Employee Only	2	\$4.20**	\$6.72
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDLOW	Employee Only	1	\$29.44	\$29.44
GUARDLOW	Employee & Children	1	\$0.00	\$74.61
GUARDLOW	Family	1	\$100.74	\$100.74
LIFE	Employee Only	2	\$21.46**	\$26.16
VSP	Employee Only	2	\$8.75	\$17.50
VSP	Employee & Children	1	\$0.00	\$15.02
VSP	Family	1	\$23.76	\$23.76
			GRAND TOTAL	\$4,010.20

**PET SUPPLIES PLUS - FARR BETTER PETS**

,

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
FARR, JEFFREY	2022-03-01	ADD		\$4.20
FARR, JEFFREY	2022-03-01	LIFE		\$21.46
FARR, JEFFREY	2022-03-01	GUARDLOW	FAM	\$100.74
FARR, JEFFREY	2022-04-01	1901OPENAXESSGOLD	FAM	\$2157.57
FARR, JEFFREY	2022-03-01	VSP	FAM	\$23.76
LOFGREN, ERIN	2022-07-01	ADD		\$2.52
LOFGREN, ERIN	2022-07-01	LIFE		\$4.70
LOFGREN, ERIN	2022-07-01	GUARDLOW	EC2	\$74.61
LOFGREN, ERIN	2022-07-01	1901OPENAXESSCOPPE	EC2	\$908.07
LOFGREN, ERIN	2022-07-01	VSP	EC2	\$15.02
MASSA, KAREN	2022-07-01	GUARDHIGH	EE	\$47.61
MASSA, KAREN	2022-07-01	1901OPENAXESSILVE	EE	\$603.00
MASSA, KAREN	2022-07-01	VSP	EE	\$8.75
TAYLOR, HARRISON	2022-07-01	GUARDLOW	EE	\$29.44
TAYLOR, HARRISON	2022-07-01	VSP	EE	\$8.75

**MEDICAL PLAN COUNTS**

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



## Account Services

### Monthly Statement

PET SUPPLIES PLUS HOUSTON

Invoice Number: 5976-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	2	\$10.50**	\$12.60
GUARDLOW	Employee & Children	1	\$74.61	\$74.61
LIFE	Employee Only	2	\$22.92**	\$25.32
VSP	Employee Only	1	\$8.75	\$8.75
VSP	Employee & Children	1	\$8.75	\$15.02
			GRAND TOTAL	\$210.91

## PET SUPPLIES PLUS HOUSTON

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
GIBSON, KATHRYN	2022-09-01	GUARDLOW	EC	\$74.61
GIBSON, KATHRYN	2022-09-01	VSP	EC	\$15.02
HUX, KAITLYNN	2022-10-01	ADD		\$2.10
HUX, KAITLYNN	2022-10-01	LIFE		\$2.40
PITTMAN, MICHAEL	2022-07-01	ADD		\$10.50
PITTMAN, MICHAEL	2022-07-01	LIFE		\$22.92
PITTMAN, MICHAEL	2022-07-01	VSP	EE	\$8.75

PET SUPPLIES PLUS HOUSTON

,

PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
GIBSON, KATHRYN	2022-09-01	GUARDLOW	EC	\$74.61

## MEDICAL PLAN COUNTS

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





## Account Services

### Monthly Statement

PET SUPPLIES PLUS STOCKTON

Invoice Number: 5545-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	1	\$0.00	\$47.61
VSP	Employee Only	1	\$0.00	\$8.75
			GRAND TOTAL	\$56.36

PET SUPPLIES PLUS STOCKTON

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
RICO, KAYLA	03/01/2022	GUARDHIGH	EE	\$47.61
RICO, KAYLA	03/01/2022	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

PET SUPPLIES PLUS TURLOCK

Invoice Number: 5748-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$0.00**	\$0.84
GUARDHIGH	Employee Only	1	\$0.00	\$47.61
VSP	Employee Only	1	\$0.00	\$8.75
			GRAND TOTAL	\$57.20

PET SUPPLIES PLUS TURLOCK

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BANUELOS, CHRISTINA	04/01/2022	ADD		\$0.84
BANUELOS, CHRISTINA	04/01/2022	GUARDHIGH	EE	\$47.61
BANUELOS, CHRISTINA	04/01/2022	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

PIGTAILS AND CREWCUTS

Invoice Number: 5962-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$1.26**	\$1.26
GUARDLOW	Employee & Children	1	\$74.61	\$74.61
LIFE	Employee Only	1	\$4.94**	\$4.94
VSP	Employee & Children	1	\$15.02	\$15.02
			GRAND TOTAL	\$95.83

## PIGTAILS AND CREWCUTS

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
PARKER, SHANI	2022-07-01	ADD		\$1.26
PARKER, SHANI	2022-07-01	LIFE		\$4.94
PARKER, SHANI	2022-07-01	GUARDLOW	EC	\$74.61
PARKER, SHANI	2022-07-01	VSP	EC	\$15.02

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

PLAY PARK HOSPITALITY

Invoice Number: 5837-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$36.12**	\$36.12
GUARDHIGH	Employee Only	1	\$0.00	\$47.61
GUARDHIGH	Family	1	\$160.18	\$160.18
GUARDLOW	Employee & Children	1	\$74.61	\$74.61
LIFE	Employee Only	1	\$2.40**	\$2.40
VSP	Employee Only	1	\$0.00	\$8.75
VSP	Employee & Children	1	\$15.02	\$15.02
VSP	Family	1	\$23.76	\$23.76
			GRAND TOTAL	\$427.21

## PLAY PARK HOSPITALITY

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BALTAZAR, ULYSSES	2022-03-01	ADD		\$36.12
BALTAZAR, ULYSSES	2022-03-01	GUARDHIGH	FAM	\$160.18
BALTAZAR, ULYSSES	2022-03-01	VSP	FAM	\$23.76
QUINTERO, GUSTAVO	2022-07-01	GUARDLOW	EC	\$74.61
QUINTERO, GUSTAVO	2022-07-01	VSP	EC	\$15.02
SHANAHAN-PALAZZO, JOSEPH	2022-09-01	LIFE		\$2.40
SHANAHAN-PALAZZO, JOSEPH	2022-09-01	GUARDHIGH	EE	\$47.61
SHANAHAN-PALAZZO, JOSEPH	2022-09-01	VSP	EE	\$8.75



## PLAY PARK HOSPITALITY

,

## PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
SHANAHAN-PALAZZO, JOSEPH	2022-09-01	LIFE		\$2.40
SHANAHAN-PALAZZO, JOSEPH	2022-09-01	GUARDHIGH	EE	\$47.61
SHANAHAN-PALAZZO, JOSEPH	2022-09-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

PMI ADVISORY GROUP

Invoice Number: 5975-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
VSP	Employee Only	1	\$8.75	\$8.75
GRAND TOTAL				\$56.36

PMI ADVISORY GROUP

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
FINLEY, BRIAN	2022-08-01	GUARDHIGH	EE	\$47.61
FINLEY, BRIAN	2022-08-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

PMI BUCKEYE SERVICES

Invoice Number: 5762-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Family	1	\$160.18	\$160.18
VSP	Family	1	\$23.76	\$23.76
GRAND TOTAL				\$183.94

PMI BUCKEYE SERVICES

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
INGRAM, DONALD	2022-03-01	GUARDHIGH	FAM	\$160.18
INGRAM, DONALD	2022-03-01	VSP	FAM	\$23.76

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

PMI GEORGIA  
170 Greencastle Rd  
TYRONE, GA 30290

Invoice Number: 4513-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1845OPENAXESSGOLD	Employee Only	7	\$744.19	\$5,209.33
1845OPENAXESSGOLD	Family	1	\$2,182.57	\$2,182.57
1845OPENAXESSPLATI	Employee Only	1	\$887.95	\$887.95
1845OPENAXESSSILVE	Employee & Children	1	\$1,231.00	\$1,231.00
ADD	Employee Only	4	\$2.52**	\$22.89
GUARDHIGH	Employee Only	3	\$47.61	\$142.83
GUARDHIGH	Family	1	\$160.18	\$160.18
GUARDLOW	Employee Only	2	\$29.44	\$58.88
GUARDLOW	Employee & Children	1	\$74.61	\$74.61
LIFE	Employee Only	7	\$13.20**	\$91.82
VSP	Employee Only	6	\$8.75	\$52.50
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
			GRAND TOTAL	\$10,129.29

PMI GEORGIA  
170 Greencastle Rd  
TYRONE, GA 30290

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BOUTELLE, KRISTIN	2022-05-01	GUARDHIGH	EE	\$47.61
BOUTELLE, KRISTIN	2022-05-01	1845OPENAXESSGOLD	EE	\$744.19
BOUTELLE, KRISTIN	2022-05-01	VSP	EE	\$8.75
BROWN, BETH	2022-02-01	LIFE		\$16.50
DUHON, VICTORIA	2022-02-01	GUARDHIGH	EE	\$47.61
DUHON, VICTORIA	2022-02-01	1845OPENAXESSGOLD	EE	\$744.19
DUHON, VICTORIA	2022-02-01	VSP	EE	\$8.75
FLETCHER, DARIUS	2022-06-01	ADD		\$2.52
FLETCHER, DARIUS	2022-06-01	LIFE		\$13.20
FLETCHER, DARIUS	2022-06-01	GUARDLOW	EE	\$29.44
FLETCHER, DARIUS	2022-06-01	1845OPENAXESSGOLD	EE	\$744.19
FLETCHER, DARIUS	2022-06-01	VSP	EE	\$8.75
FLETCHER, JA'NAT	2022-02-01	LIFE		\$8.60
FLETCHER, JA'NAT	2022-02-01	1845OPENAXESSGOLD	EE	\$744.19
FLETCHER, JA'NAT	2022-02-01	ADD		\$3.57
FLETCHER, JA'NAT	2022-02-01	GUARDLOW	EE	\$29.44
FLETCHER, JA'NAT	2022-02-01	VSP	EE	\$8.75
LITTLETON, CHRISTOPHER	2022-02-01	ADD		\$12.60
LITTLETON, CHRISTOPHER	2022-02-01	GUARDHIGH	FAM	\$160.18
LITTLETON, CHRISTOPHER	2022-02-01	1845OPENAXESSGOLD	FAM	\$2182.57
LITTLETON, CHRISTOPHER	2022-02-01	VSP	ES	\$14.73
LITTLETON, CHRISTOPHER	2022-02-01	LIFE		\$16.52
MULDOWNEY, ALBERT	2022-02-01	ADD		\$4.20
MULDOWNEY, ALBERT	2022-02-01	GUARDLOW	EC	\$74.61
MULDOWNEY, ALBERT	2022-02-01	1845OPENAXESSILVE	EC2	\$1231.00
MULDOWNEY, ALBERT	2022-02-01	VSP	EE	\$8.75
MULDOWNEY, ALBERT	2021-12-01	LIFE		\$6.00
PRESTON, APRIL	2022-02-01	1845OPENAXESSGOLD	EE	\$744.19

PMI GEORGIA  
170 Greencastle Rd  
TYRONE, GA 30290

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
PRESTON, APRIL	2022-02-01	LIFE		\$9.55
SCHMIDT, NICHOLAS	2022-02-01	1845OPENAXESSGOLD	EE	\$744.19
STRICKLAND, CATHY	2022-02-01	GUARDHIGH	EE	\$47.61
STRICKLAND, CATHY	2022-02-01	1845OPENAXESSPLATI	EE	\$887.95
STRICKLAND, CATHY	2022-02-01	VSP	EE	\$8.75
STRICKLAND, CATHY	2022-04-01	LIFE		\$21.45
SUPENA, MARK	2022-02-01	1845OPENAXESSGOLD	EE	\$744.19

MEDICAL PLAN COUNTS

Employee Only	8
Employee & Spouse	0
Employee & Children	0
Family	1





## Account Services

### Monthly Statement

PMI METROPLEX

Invoice Number: 5761-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
LIFE	Employee Only	1	\$6.00**	\$6.00
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$62.36

PMI METROPLEX

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
SCHOOLCRAFT, KEVIN	2022-03-01	LIFE		\$6.00
SCHOOLCRAFT, KEVIN	2022-03-01	GUARDHIGH	EE	\$47.61
SCHOOLCRAFT, KEVIN	2022-03-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

PMI MM

Invoice Number: 4559-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1869OPENAXESSPLATI	Family	1	\$2,589.09	\$2,589.09
GUARDHIGH	Family	1	\$160.18	\$160.18
VSP	Family	1	\$23.76	\$23.76
			GRAND TOTAL	\$2,773.03

PMI MM

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
HART, STEVEN	2022-01-01	GUARDHIGH	FAM	\$160.18
HART, STEVEN	2022-01-01	1869OPENAXESSPLATI	FAM	\$2589.09
HART, STEVEN	2022-01-01	VSP	FAM	\$23.76

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

PMI OF UTAH  
2940 W MAPLE LOOP DR  
LEHI, UT 84043

Invoice Number: 4558-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1869OPENAXESSBRONZ	Employee & Spouse Only	1	\$1,085.61	\$1,085.61
1869OPENAXESSPLATI	Family	1	\$2,589.09	\$2,589.09
1869OPENAXESSSILVE	Employee Only	1	\$603.00	\$603.00
1869OPENAXESSSILVE	Employee & Children	1	\$1,206.00	\$1,206.00
1869OPENAXESSSILVE	Family	1	\$1,809.00	\$1,809.00
ADD	Employee Only	1	\$5.04**	\$5.04
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDHIGH	Family	2	\$160.18	\$320.36
GUARDLOW	Employee & Spouse Only	1	\$55.54	\$55.54
LIFE	Employee Only	2	\$39.60**	\$52.10
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
VSP	Employee & Children	1	\$15.02	\$15.02
VSP	Family	2	\$23.76	\$47.52
			GRAND TOTAL	\$7,850.62

PMI OF UTAH  
2940 W MAPLE LOOP DR  
LEHI, UT 84043

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CUNDIFF, JEREMIAH	2022-01-01	GUARDHIGH	FAM	\$160.18
CUNDIFF, JEREMIAH	2022-01-01	1869OPENAXESSILVE	FAM	\$1809.00
CUNDIFF, JEREMIAH	2022-01-01	VSP	FAM	\$23.76
GALLAGHER, GLENN	2022-01-01	ADD		\$5.04
GALLAGHER, GLENN	2022-01-01	GUARDHIGH	EE	\$47.61
GALLAGHER, GLENN	2022-02-01	1869OPENAXESSILVE	EC2	\$1206.00
GALLAGHER, GLENN	2022-01-01	VSP	EC	\$15.02
GALLAGHER, GLENN	2022-01-01	LIFE		\$12.50
HENDRICKS-MEADERS, ADRIANNE	2022-01-01	1869OPENAXESSILVE	EE	\$603.00
LAYTON, CHRISTOPHER	2022-01-01	GUARDHIGH	FAM	\$160.18
LAYTON, CHRISTOPHER	2022-02-01	1869OPENAXESSPLATI	FAM	\$2589.09
LAYTON, CHRISTOPHER	2022-01-01	VSP	FAM	\$23.76
LAYTON, CHRISTOPHER	2022-01-01	LIFE		\$39.60
ORTHEL, JOSHUA	2022-01-01	GUARDLOW	ES	\$55.54
ORTHEL, JOSHUA	2022-02-01	1869OPENAXESSBRONZES		\$1085.61
ORTHEL, JOSHUA	2022-01-01	VSP	ES	\$14.73

**MEDICAL PLAN COUNTS**

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



## Account Services

### Monthly Statement

PMI RENO  
63 Keystone Ave Ste 104  
RENO, NV 89503

Invoice Number: 4474-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1795OPENAXESSGOLD	Employee Only	1	\$719.19	\$719.19
1795OPENAXESSGOLD	Family	1	\$2,157.57	\$2,157.57
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDHIGH	Family	1	\$160.18	\$160.18
VSP	Employee Only	1	\$0.00	\$8.75
VSP	Family	1	\$23.76	\$23.76
			GRAND TOTAL	\$3,125.81

PMI RENO  
63 Keystone Ave Ste 104  
RENO, NV 89503

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
HUGHES, ERNEST	2022-02-01	VSP	FAM	\$23.76
HUGHES, ERNEST	2022-01-01	GUARDHIGH	FAM	\$160.18
HUGHES, ERNEST	2022-01-01	1795OPENAXESSGOLD	FAM	\$2157.57
STARKS, RHONDA	2022-09-01	VSP	EE	\$8.75
STARKS, RHONDA	2022-09-01	GUARDHIGH	EE	\$47.61
STARKS, RHONDA	2022-09-01	1795OPENAXESSGOLD	EE	\$719.19



PMI RENO  
63 Keystone Ave Ste 104  
RENO, NV 89503

## PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
STARKS, RHONDA	2022-09-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

POOLWERX FOREST LANE  
3544 Forest Ln  
DALLAS, TX 75234

Invoice Number: 4290-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1539OPENAXESSBRONZ	Employee Only	3	\$437.96	\$1,313.88
1539OPENAXESSGOLD	Employee Only	9	\$525.35	\$4,728.15
1539OPENAXESSGOLD	Employee & Spouse Only	1	\$1,050.69	\$1,050.69
ADD	Employee Only	4	\$8.40**	\$26.46
GUARDHIGH	Employee Only	8	\$47.61	\$380.88
GUARDHIGH	Employee & Spouse Only	1	\$89.81	\$89.81
GUARDLOW	Employee Only	4	\$29.44	\$117.76
GUARDLOW	Employee & Spouse Only	1	\$55.54	\$55.54
LIFE	Employee Only	5	\$19.10**	\$168.13
VSP	Employee Only	12	\$8.75	\$105.00
VSP	Employee & Spouse Only	2	\$14.73	\$29.46
VSP	Family	2	\$23.76	\$47.52
			GRAND TOTAL	\$8,689.30

POOLWERX FOREST LANE  
3544 Forest Ln  
DALLAS, TX 75234

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ALLEN, LETHA	2021-01-01	VSP	EE	\$8.75
ARDERY II, WILLIAM	2022-03-01	LIFE		\$7.20
ARDERY II, WILLIAM	2022-03-01	1539OPENAXESSBRONZ	EE	\$437.96
ARDERY II, WILLIAM	2022-03-01	GUARDHIGH	EE	\$47.61
BRECHBIEL, JOSHUA	2022-01-01	1539OPENAXESSBRONZ	EE	\$437.96
CRUZ, MARY	2021-01-01	1539OPENAXESSGOLD	EE	\$525.35
CRUZ, MARY	2021-01-01	VSP	FAM	\$23.76
EHNEY, MATTHEW	2021-01-01	GUARDLOW	EE	\$29.44
EHNEY, MATTHEW	2021-01-01	VSP	EE	\$8.75
FLEMING, KEVIN	2021-01-01	VSP	FAM	\$23.76
HAMILTON, JOSEPH	2021-01-01	1539OPENAXESSGOLD	EE	\$525.35
HAMILTON, JOSEPH	2021-01-01	GUARDLOW	EE	\$29.44
HAMILTON, JOSEPH	2021-01-01	VSP	EE	\$8.75
HAMILTON, JOSEPH	2021-01-01	LIFE		\$54.34
HOLIFIELD, VICTOR	2021-01-01	1539OPENAXESSGOLD	ES	\$1050.69
HOLIFIELD, VICTOR	2021-01-01	GUARDHIGH	ES	\$89.81
HOLIFIELD, VICTOR	2021-01-01	VSP	ES	\$14.73
HOLIFIELD, VICTOR	2022-02-01	LIFE		\$85.80
HOOKEER, KEVIN	2021-01-01	1539OPENAXESSGOLD	EE	\$525.35
HOOKEER, KEVIN	2021-01-01	ADD		\$14.70
HOOKEER, KEVIN	2021-01-01	GUARDHIGH	EE	\$47.61
HOOKEER, KEVIN	2021-01-01	VSP	EE	\$8.75
JONES, CHRISTOPHER	2022-08-01	VSP	EE	\$8.75
LOVER, THANNDRA	2022-09-01	1539OPENAXESSGOLD	EE	\$525.35
LOVER, THANNDRA	2022-09-01	ADD		\$1.26
LOVER, THANNDRA	2022-09-01	LIFE		\$1.80

POOLWERX FOREST LANE  
3544 Forest Ln  
DALLAS, TX 75234

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
LOVER, THANNDRA	2022-09-01	GUARDHIGH	EE	\$47.61
LOVER, THANNDRA	2022-09-01	VSP	EE	\$8.75
MALIK, MATTHEW	2021-01-01	1539OPENAXESSBRONZ	EE	\$437.96
MALIK, MATTHEW	2021-01-01	VSP	EE	\$8.75
SCOTT, ADAM	2021-01-01	GUARDHIGH	EE	\$47.61
SCOTT, ADAM	2021-01-01	VSP	EE	\$8.75
SCOTT, TASHINA	2021-01-01	1539OPENAXESSGOLD	EE	\$525.35
SCOTT, TASHINA	2021-01-01	GUARDHIGH	EE	\$47.61
SHANKS JR, ANDREW	2022-04-01	GUARDHIGH	EE	\$47.61
SMITH, JANELL	2022-08-01	1539OPENAXESSGOLD	EE	\$525.35
SMITH, JANELL	2022-08-01	ADD		\$1.68
SMITH, JANELL	2022-08-01	GUARDLOW	EE	\$29.44
STEALEY, JEFFREY	2022-01-01	1539OPENAXESSGOLD	EE	\$525.35
STEALEY, JEFFREY	2022-01-01	GUARDHIGH	EE	\$47.61
STEALEY, JEFFREY	2022-01-01	VSP	EE	\$8.75
SULLIVAN III, LEO	2022-08-01	VSP	EE	\$8.75
SWANSON, NICHOLAS	2021-01-01	VSP	EE	\$8.75
SWANSON, NICHOLAS	2021-01-01	GUARDLOW	EE	\$29.44
TRAYLOR, DEBORAH	2022-01-01	1539OPENAXESSGOLD	EE	\$525.35
TRAYLOR, DEBORAH	2022-01-01	ADD		\$8.82
TRAYLOR, DEBORAH	2022-02-01	GUARDLOW	ES	\$55.54
TRAYLOR, DEBORAH	2022-02-01	VSP	ES	\$14.73
TRAYLOR, DEBORAH	2022-01-01	LIFE		\$18.99
WALLINGFORD GEBBIE, KAREN	2021-01-01	1539OPENAXESSGOLD	EE	\$525.35

POOLWERX FOREST LANE  
3544 Forest Ln  
DALLAS, TX 75234

## CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
WALLINGFORD GEBBIE, KAREN	2021-01-01	GUARDHIGH	EE	\$47.61
WALLINGFORD GEBBIE, KAREN	2021-01-01	VSP	EE	\$8.75

POOLWERX FOREST LANE  
3544 Forest Ln  
DALLAS, TX 75234

## PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
LOVER, THANNDRA	2022-09-01	1539OPENAXESSGOLD	EE	\$525.35
LOVER, THANNDRA	2022-09-01	ADD		\$1.26
LOVER, THANNDRA	2022-09-01	LIFE		\$1.80
LOVER, THANNDRA	2022-09-01	GUARDHIGH	EE	\$47.61

## MEDICAL PLAN COUNTS

Employee Only	12
Employee & Spouse	1
Employee & Children	0
Family	0



## Account Services

### Monthly Statement

POOLWERX NORTH RICHLAND HILLS  
8528 Davis Blvd #190  
NORTH RICHLAND HILLS, TX 76182

Invoice Number: 4343-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$21.00**	\$21.00
GUARDHIGH	Employee Only	2	\$47.61	\$95.22
LIFE	Employee Only	1	\$0.00**	\$0.00
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$124.97

POOLWERX NORTH RICHLAND HILLS  
8528 Davis Blvd #190  
NORTH RICHLAND HILLS, TX 76182

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ARGUELLES, HANNAH	2022-01-01	GUARDHIGH	EE	\$47.61
ARGUELLES, HANNAH	2022-01-01	VSP	EE	\$8.75
LIRA-HINAJOSA, RENE	2022-05-01	ADD		\$21.00
LIRA-HINAJOSA, RENE	2022-05-01	LIFE		\$0.00
LIRA-HINAJOSA, RENE	2022-05-01	GUARDHIGH	EE	\$47.61

## MEDICAL PLAN COUNTS

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





## Account Services

### Monthly Statement

POOLWERX USA  
13901 Midway Rd  
FARMERS BRANCH, TX 75244

Invoice Number: 4289-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1539OPENAXESSBRONZ	Employee Only	2	\$437.96	\$875.92
1539OPENAXESSGOLD	Employee Only	4	\$525.35	\$2,101.40
1539OPENAXESSGOLD	Employee & Spouse Only	1	\$1,050.69	\$1,050.69
1539OPENAXESSGOLD	Family	2	\$1,970.06	\$3,940.12
1539OPENAXESSILVE	Employee Only	1	\$461.01	\$461.01
1539OPENAXESSILVE	Family	1	\$1,521.31	\$1,521.31
ADD	Employee Only	6	\$0.42**	\$68.88
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDHIGH	Employee & Spouse Only	2	\$89.81	\$179.62
GUARDHIGH	Family	2	\$160.18	\$320.36
GUARDLOW	Employee Only	4	\$29.44	\$117.76
GUARDLOW	Family	2	\$100.74	\$201.48
LIFE	Employee Only	4	\$0.90**	\$109.79
VSP	Employee Only	2	\$8.75	\$17.50
VSP	Employee & Spouse Only	4	\$14.73	\$58.92
VSP	Family	2	\$23.76	\$47.52
			GRAND TOTAL	\$11,119.89

POOLWERX USA  
13901 Midway Rd  
FARMERS BRANCH, TX 75244

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
COOK, GAIL	2022-01-01	1539OPENAXESSGOLD	EE	\$525.35
COOK, GAIL	2022-01-01	GUARDHIGH	ES	\$89.81
COOK, GAIL	2022-01-01	VSP	ES	\$14.73
FERNANDES, BRIAN	2022-01-01	1539OPENAXESSGOLD	EE	\$525.35
FERNANDES, BRIAN	2022-01-01	GUARDLOW	EE	\$29.44
FUENTES, NALLEY	2022-08-01	1539OPENAXESSBRONZ	EE	\$437.96
FUENTES, NALLEY	2022-08-01	ADD		\$0.42
FUENTES, NALLEY	2022-08-01	LIFE		\$0.90
JENKINS, NANCY	2022-10-01	1539OPENAXESSGOLD	EE	\$525.35
JENKINS, NANCY	2022-10-01	ADD		\$2.10
JENKINS, NANCY	2022-10-01	GUARDLOW	EE	\$29.44
JENKINS, NANCY	2022-10-01	VSP	EE	\$8.75
KAMPER, WAYNE	2021-01-01	1539OPENAXESSGOLD	FAM	\$1970.06
KAMPER, WAYNE	2021-01-01	ADD		\$8.82
KAMPER, WAYNE	2021-01-01	GUARDHIGH	FAM	\$160.18
KAMPER, WAYNE	2021-01-01	VSP	FAM	\$23.76
KIDD, ANDREW	2022-01-01	1539OPENAXESSGOLD	ES	\$1050.69
KIDD, ANDREW	2022-01-01	GUARDHIGH	ES	\$89.81
KIDD, ANDREW	2022-01-01	VSP	ES	\$14.73
MOORE, STEPHEN	2022-01-01	1539OPENAXESSSILVE	EE	\$461.01
MOORE, STEPHEN	2022-01-01	GUARDHIGH	EE	\$47.61
MOORE, STEPHEN	2022-01-01	VSP	EE	\$8.75
O'BRIEN, SHANNON	2021-03-01	1539OPENAXESSGOLD	EE	\$525.35
O'BRIEN, SHANNON	2021-03-01	GUARDLOW	EE	\$29.44
OVERDUIN, BLAKE	2021-01-01	VSP	FAM	\$23.76
OVERDUIN, BLAKE	2021-01-01	1539OPENAXESSGOLD	FAM	\$1970.06
OVERDUIN, BLAKE	2021-01-01	GUARDLOW	FAM	\$100.74

POOLWERX USA  
13901 Midway Rd  
FARMERS BRANCH, TX 75244

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
PRESSNELL, MIRANDA	2022-05-01	GUARDLOW	EE	\$29.44
PRESSNELL, MIRANDA	2022-05-01	1539OPENAXESSBRONZ	EE	\$437.96
PRESSNELL, MIRANDA	2022-05-01	ADD		\$0.42
PRESSNELL, MIRANDA	2022-05-01	LIFE		\$1.60
ROY, RICH	2022-03-02	1539OPENAXESSILVE	FAM	\$1521.31
ROY, RICH	2022-03-02	GUARDHIGH	FAM	\$160.18
ROY, RICH	2022-03-02	VSP	ES	\$14.73
ROY, RICH	2022-08-31	ADD		\$14.70
ROY, RICH	2022-08-31	LIFE		\$1.91
STOUT, KYLE	2021-12-01	LIFE		\$105.38
STOUT, KYLE	2021-01-01	ADD		\$42.42
STOUT, KYLE	2021-01-01	GUARDLOW	FAM	\$100.74
STOUT, KYLE	2021-01-01	VSP	ES	\$14.73

MEDICAL PLAN COUNTS

Employee Only	7
Employee & Spouse	1
Employee & Children	0
Family	3



## Account Services

### Monthly Statement

PPD REMODELING & CONSTRUCTION, INC.

Invoice Number: 5834-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$8.82**	\$8.82
GUARDHIGH	Family	1	\$160.18	\$160.18
GUARDLOW	Employee & Spouse Only	1	\$55.54	\$55.54
LIFE	Employee Only	2	\$25.58**	\$38.95
VSP	Employee & Spouse Only	1	\$0.00	\$14.73
VSP	Family	1	\$23.76	\$23.76
			GRAND TOTAL	\$301.98

PPD REMODELING &amp; CONSTRUCTION, INC.

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## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
MISTINA, BRAD	2022-06-01	ADD		\$8.82
MISTINA, BRAD	2022-06-01	LIFE		\$25.58
MISTINA, BRAD	2022-06-01	GUARDHIGH	FAM	\$160.18
MISTINA, BRAD	2022-06-01	VSP	FAM	\$23.76
TURKOWSKI, ERIC	2022-10-01	LIFE		\$13.37
TURKOWSKI, ERIC	2022-10-01	GUARDLOW	ES	\$55.54
TURKOWSKI, ERIC	2022-10-01	VSP	ES	\$14.73

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

PRESENT MEDIA GROUP DBA FOREST MEDIA GROUP  
110 W 96th St  
NEW YORK, NY 10025

Invoice Number: 4469-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1790OPENAXESSILVE	Family	1	\$1,809.00	\$1,809.00
			GRAND TOTAL	\$1,809.00

PRESENT MEDIA GROUP DBA FOREST MEDIA GROUP

110 W 96th St

NEW YORK, NY 10025

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
MEYEROVICH, ARTHUR	2021-11-01	1790OPENAXESSILVE	FAM	\$1809.00

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

PRIVATE CAPITAL INTELLIGENCE LLC  
240 EAST 82nd STREET 20G  
NEW YORK, NY 10028

Invoice Number: 4257-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1487OPENAXESSGOLD	Employee Only	1	\$588.38	\$588.38
1487OPENAXESSGOLD	Employee & Spouse Only	1	\$1,176.86	\$1,176.86
ADD	Employee Only	1	\$8.40**	\$8.40
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDHIGH	Employee & Spouse Only	1	\$89.81	\$89.81
VSP	Employee Only	1	\$8.75	\$8.75
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
			GRAND TOTAL	\$1,934.54



PRIVATE CAPITAL INTELLIGENCE LLC  
240 EAST 82nd STREET 20G  
NEW YORK, NY 10028

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
FICCA, WILLIAM	2020-05-01	1487OPENAXESSGOLD	ES	\$1176.86
FICCA, WILLIAM	2020-06-01	GUARDHIGH	ES	\$89.81
FICCA, WILLIAM	2020-06-01	VSP	ES	\$14.73
LEONE, DANIELLE	2020-05-01	1487OPENAXESSGOLD	EE	\$588.38
LEONE, DANIELLE	2020-06-01	ADD		\$8.40
LEONE, DANIELLE	2020-06-01	GUARDHIGH	EE	\$47.61
LEONE, DANIELLE	2020-06-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



**Account Services**  
**Monthly Statement**

PROOF COMPANY LLC  
13412 VENTURA BLVD  
SHERMAN OAKS, CA 91423

Invoice Number: 4199-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GRAND TOTAL				\$0.00

PROOF COMPANY LLC  
13412 VENTURA BLVD  
SHERMAN OAKS, CA 91423

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
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## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

PROPERTY MANAGEMENT INC.  
2940 W Maple Loop Dr Ste 104  
LEHI, UT 84043

Invoice Number: 4527-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1869OPENAXESSBRONZ	Employee Only	8	\$536.10	\$4,288.80
1869OPENAXESSBRONZ	Employee & Spouse Only	1	\$0.00	\$1,085.61
1869OPENAXESSBRONZ	Family	2	\$1,628.10	\$3,256.20
1869OPENAXESSCOPPE	Employee & Children	2	\$908.07	\$1,816.14
1869OPENAXESSCOPPE	Family	3	\$1,419.92	\$4,259.76
1869OPENAXESSGOLD	Employee Only	1	\$719.19	\$719.19
1869OPENAXESSGOLD	Family	1	\$2,157.57	\$2,157.57
1869OPENAXESSSILVE	Employee Only	1	\$603.00	\$603.00
1869OPENAXESSSILVE	Employee & Children	1	\$1,206.00	\$1,206.00
1869OPENAXESSSILVE	Family	3	\$1,809.00	\$5,427.00
ADD	Employee Only	8	\$0.42**	\$87.78
GUARDHIGH	Employee Only	3	\$47.61	\$142.83
GUARDHIGH	Family	1	\$160.18	\$160.18
GUARDLOW	Employee Only	9	\$29.44	\$264.96
GUARDLOW	Employee & Children	2	\$74.61	\$149.22
GUARDLOW	Family	6	\$100.74	\$604.44
LIFE	Employee Only	11	\$7.60**	\$289.44
VSP	Employee Only	6	\$8.75	\$52.50
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
VSP	Employee & Children	2	\$15.02	\$30.04
VSP	Family	5	\$23.76	\$118.80
			GRAND TOTAL	\$28,507.20

PROPERTY MANAGEMENT INC.  
2940 W Maple Loop Dr Ste 104  
LEHI, UT 84043

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BAUER, BRIANNA	2022-08-01	ADD		\$21.00
BAUER, BRIANNA	2022-08-01	LIFE		\$7.20
BAUER, BRIANNA	2022-08-01	VSP	EE	\$8.75
BERRY, DAN	2022-01-01	1869OPENAXESSBRONZ	EE	\$536.10
BRANAN, JESICA	2022-09-01	LIFE		\$2.40
BRANAN, JESICA	2022-09-01	GUARDLOW	EE	\$29.44
BRANAN, JESICA	2022-09-01	1869OPENAXESSBRONZ	EE	\$536.10
BROMLEY, TERAH	2022-01-01	1869OPENAXESSSILVE	FAM	\$1809.00
BUTLER, JAMES	2022-01-01	1869OPENAXESSBRONZ	FAM	\$1628.10
CARR, KATHRYN	2022-01-01	ADD		\$4.20
CARR, KATHRYN	2022-01-01	GUARDLOW	EE	\$29.44
CARR, KATHRYN	2022-01-01	1869OPENAXESSGOLD	EE	\$719.19
CARR, KATHRYN	2022-01-01	VSP	EE	\$8.75
CARR, KATHRYN	2022-01-01	LIFE		\$59.28
DROGOWSKI, NATHAN	2022-06-01	ADD		\$0.42
DROGOWSKI, NATHAN	2022-06-01	GUARDLOW	EE	\$29.44
DROGOWSKI, NATHAN	2022-06-01	1869OPENAXESSBRONZ	EE	\$536.10
GLOVER, CARISSA	2022-01-01	VSP	FAM	\$23.76
GLOVER, CARISSA	2022-01-01	GUARDLOW	FAM	\$100.74
GOODALL, HUNTER	2022-07-01	LIFE		\$7.60
GOODALL, HUNTER	2022-07-01	GUARDLOW	FAM	\$100.74
GOODALL, HUNTER	2022-07-01	1869OPENAXESSCOPPE	FAM	\$1419.92
GOODALL, HUNTER	2022-07-01	VSP	FAM	\$23.76
HEDER, MARIANNE	2022-01-01	ADD		\$42.42
HEDER, MARIANNE	2022-01-01	GUARDHIGH	FAM	\$160.18
HEDER, MARIANNE	2022-01-01	1869OPENAXESSSILVE	FAM	\$1809.00

PROPERTY MANAGEMENT INC.  
2940 W Maple Loop Dr Ste 104  
LEHI, UT 84043

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
HEDER, MARIANNE	2022-01-01	VSP	FAM	\$23.76
HEDER, MARIANNE	2022-05-01	LIFE		\$73.33
HENDERSON, RANDALL	2022-04-01	GUARDLOW	EC2	\$74.61
HENDERSON, RANDALL	2022-04-01	1869OPENAXESSCOPPE	EC2	\$908.07
HENDERSON, RANDALL	2022-04-01	VSP	ECN	\$15.02
HOMER, ALAN	2022-01-01	GUARDHIGH	EE	\$47.61
HOMER, ALAN	2022-01-01	1869OPENAXESSBRONZ	EE	\$536.10
HOMER, ALAN	2022-01-01	VSP	EE	\$8.75
LABRUM, JASON	2022-01-01	1869OPENAXESSSILVE	FAM	\$1809.00
LUCHANSKY, MICHELLE	2022-01-01	GUARDLOW	EE	\$29.44
LUCHANSKY, MICHELLE	2022-01-01	1869OPENAXESSSILVE	EE	\$603.00
MANWILL, MEGAN	2022-01-01	GUARDLOW	EE	\$29.44
MANWILL, MEGAN	2022-01-01	1869OPENAXESSBRONZ	EE	\$536.10
MCELHINEY, AARON	2022-01-01	GUARDLOW	FAM	\$100.74
MCELHINEY, AARON	2022-01-01	1869OPENAXESSGOLD	FAM	\$2157.57
MCELHINEY, AARON	2022-01-01	VSP	FAM	\$23.76
MORLEY, JEFFREY	2022-04-01	ADD		\$5.04
MORLEY, JEFFREY	2022-04-01	GUARDLOW	FAM	\$100.74
MORLEY, JEFFREY	2022-04-01	1869OPENAXESSBRONZ	FAM	\$1628.10
MORLEY, JEFFREY	2022-04-01	VSP	FAM	\$23.76
MORLEY, JEFFREY	2022-04-01	LIFE		\$13.30
PEDRERO, ORLANDO	2022-09-01	LIFE		\$59.28
PEDRERO, ORLANDO	2022-09-01	1869OPENAXESSBRONZ	ES	\$1085.61
PEDRERO, ORLANDO	2022-09-01	VSP	ES	\$14.73
PERCELL, ASPEN	2022-01-01	GUARDLOW	EE	\$29.44

PROPERTY MANAGEMENT INC.  
2940 W Maple Loop Dr Ste 104  
LEHI, UT 84043

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
PERCELL, BAYLEE	2022-03-01	GUARDLOW	EE	\$29.44
PHILIPPS, JAMES	2022-01-01	GUARDHIGH	EE	\$47.61
PHILIPPS, JAMES	2022-01-01	1869OPENAXESSBRONZ	EE	\$536.10
PIGGOTT, BRYAN	2022-01-01	1869OPENAXESSCOPPE	FAM	\$1419.92
ROTHE, JOANNA	2022-09-01	ADD		\$4.20
ROTHE, JOANNA	2022-09-01	LIFE		\$41.25
SCHRADER, JAMES	2022-01-01	LIFE		\$20.80
SCHRADER, JAMES	2022-01-01	GUARDLOW	FAM	\$100.74
SCHRADER, JAMES	2022-01-01	1869OPENAXESSILVE	EC2	\$1206.00
SCHRADER, JAMES	2022-01-01	VSP	EC2	\$15.02
SEGRETTO, KELLI	2022-01-01	GUARDHIGH	EE	\$47.61
SEGRETTO, KELLI	2022-01-01	1869OPENAXESSBRONZ	EE	\$536.10
SEGRETTO, KELLI	2022-01-01	VSP	EE	\$8.75
SESSIONS, MORGAN	2022-07-25	ADD		\$2.10
SESSIONS, MORGAN	2022-05-01	GUARDLOW	EE	\$29.44
SESSIONS, MORGAN	2022-07-25	LIFE		\$0.00
STEEN, GERALD	2022-03-01	GUARDLOW	EC	\$74.61
STEEN, GERALD	2022-03-01	1869OPENAXESSCOPPE	EC	\$908.07
STEEN, GERALD	2022-03-01	VSP	EC	\$15.02
STEEN, GERALD	2022-03-01	LIFE		\$5.00
STROUD, ROSANNA	2022-07-01	GUARDLOW	FAM	\$100.74
STROUD, ROSANNA	2022-07-01	1869OPENAXESSCOPPE	FAM	\$1419.92
STROUD, ROSANNA	2022-07-01	VSP	EE	\$8.75
WOOD, JESSALYN	2022-01-01	ADD		\$8.40

PROPERTY MANAGEMENT INC.  
2940 W Maple Loop Dr Ste 104  
LEHI, UT 84043

## CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
WOOD, JESSALYN	2022-01-01	GUARDLOW	EE	\$29.44
WOOD, JESSALYN	2022-02-01	1869OPENAXESSBRONZ	EE	\$536.10
WOOD, JESSALYN	2022-01-01	VSP	EE	\$8.75



PROPERTY MANAGEMENT INC.  
 2940 W Maple Loop Dr Ste 104  
 LEHI, UT 84043

PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BRANAN, JESICA	2022-09-01	LIFE		\$2.40
BRANAN, JESICA	2022-09-01	GUARDLOW	EE	\$29.44
BRANAN, JESICA	2022-09-01	1869OPENAXESSBRONZ	EE	\$536.10
PEDRERO, ORLANDO	2022-09-01	LIFE		\$59.28
PEDRERO, ORLANDO	2022-09-01	1869OPENAXESSBRONZ	ES	\$1085.61
PEDRERO, ORLANDO	2022-09-01	VSP	ES	\$14.73
ROTHER, JOANNA	2022-09-01	ADD		\$4.20
ROTHER, JOANNA	2022-09-01	LIFE		\$41.25
SESSIONS, MORGAN	2022-07-25	LIFE		\$0.00

MEDICAL PLAN COUNTS

Employee Only	10
Employee & Spouse	1
Employee & Children	1
Family	9



## Account Services

### Monthly Statement

PRP LEARNING CENTER BALTIMORE MD  
10 RED MAPLE COURT  
OWINGS MILLS, MD 21117

Invoice Number: 4609-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
0449OPENAXESSPLATI	Family	2	\$2,589.09	\$5,178.18
ADD	Employee Only	1	\$21.00**	\$21.00
GUARDHIGH	Employee Only	2	\$47.61	\$95.22
LIFE	Employee Only	1	\$22.92**	\$22.92
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$5,326.07

PRP LEARNING CENTER BALTIMORE MD  
10 RED MAPLE COURT  
OWINGS MILLS, MD 21117

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ALBRITTON, ANANA	2022-01-01	GUARDHIGH	EE	\$47.61
ALBRITTON, ANANA	2022-01-01	LIFE		\$22.92
ALBRITTON, ANANA	2022-01-01	ADD		\$21.00
KARGMAN, DIMITRY	2022-04-01	0449OPENAXESSPLATI	FAM	\$2589.09
KLEIN, MILANA	2022-04-01	0449OPENAXESSPLATI	FAM	\$2589.09
MABRY, VALERIE	2017-12-01	GUARDHIGH	EE	\$47.61
MABRY, VALERIE	2018-12-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



**Account Services**  
**Monthly Statement**

QUALITY INN SELINGROVE  
613 N. SUSQUEHANNA TRAIL  
SELINGROVE, PA 17870

Invoice Number: 4732-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
			GRAND TOTAL	\$14.73

QUALITY INN SELINGROVE  
613 N. SUSQUEHANNA TRAIL  
SELINGROVE, PA 17870

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
FILBERT, MICHAEL	2020-01-01	VSP	ES	\$14.73

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

REBEL HOSPITALITY LLC  
215 W Ontario Street  
CHICAGO, IL 60654

Invoice Number: 4133-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1130OPENAXESSPRIME	Employee Only	5	\$653.75	\$3,268.75
1130OPENAXESSPRIME	Family	2	\$1,873.80	\$3,747.60
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDHIGH	Employee & Spouse Only	1	\$89.81	\$89.81
GUARDHIGH	Family	3	\$160.18	\$480.54
GUARDLOW	Employee Only	2	\$29.44	\$58.88
LIFE	Employee Only	1	\$1.60**	\$1.60
VSP	Employee Only	1	\$8.75	\$8.75
VSP	Family	1	\$23.76	\$23.76
			GRAND TOTAL	\$7,727.30

REBEL HOSPITALITY LLC  
215 W Ontario Street  
CHICAGO, IL 60654

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
DAVIS, CYNTHIA	2020-09-01	1130OPENAXESSPRIME	EE	\$653.75
DAVIS, CYNTHIA	2020-09-01	GUARDHIGH	EE	\$47.61
HINES, ANGELIA	2022-01-01	GUARDHIGH	ES	\$89.81
HINES, ANGELIA	2022-01-01	VSP	EE	\$8.75
HINES, ANGELIA	2022-01-01	1130OPENAXESSPRIME	EE	\$653.75
JACOBS, KALI	2022-03-01	LIFE		\$1.60
JACOBS, KALI	2022-03-01	1130OPENAXESSPRIME	EE	\$653.75
JACOBS, KALI	2022-03-01	GUARDLOW	EE	\$29.44
KLOK, ANTHONY	2021-01-01	GUARDHIGH	FAM	\$160.18
KLOK, ANTHONY	2020-09-01	1130OPENAXESSPRIME	FAM	\$1873.80
KORNOTA, EUGENE	2022-08-01	GUARDHIGH	FAM	\$160.18
KORNOTA, EUGENE	2022-08-01	1130OPENAXESSPRIME	FAM	\$1873.80
KORNOTA, EUGENE	2022-08-01	VSP	FAM	\$23.76
LOPROTO, GERALD	2022-01-01	1130OPENAXESSPRIME	EE	\$653.75
LOPROTO, GERALD	2022-01-01	GUARDLOW	EE	\$29.44
WAECHTER, LIANA	2020-09-01	1130OPENAXESSPRIME	EE	\$653.75
WAECHTER, LIANA	2020-09-01	GUARDHIGH	FAM	\$160.18

**MEDICAL PLAN COUNTS**

Employee Only	5
Employee & Spouse	0
Employee & Children	0
Family	2



## Account Services

### Monthly Statement

RED HOUSE STAGING, INC.  
9950 BUSINESS PKWY SUITE 100B  
LANHAM, MD 20706

Invoice Number: 4573-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$2.52**	\$2.52
GUARDHIGH	Employee Only	2	\$47.61	\$95.22
GUARDLOW	Employee Only	5	\$29.44	\$147.20
LIFE	Employee Only	2	\$9.60**	\$22.10
VSP	Employee Only	6	\$8.75	\$52.50
			GRAND TOTAL	\$348.98



RED HOUSE STAGING, INC.  
9950 BUSINESS PKWY SUITE 100B  
LANHAM, MD 20706

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
FICOR, CHRISTINE	2022-09-01	GUARDLOW	EE	\$29.44
FICOR, CHRISTINE	2022-09-01	VSP	EE	\$8.75
GASKINS, SYDNEY	2022-01-01	ADD		\$2.52
GASKINS, SYDNEY	2022-01-01	VSP	EE	\$8.75
GASKINS, SYDNEY	2022-01-01	LIFE		\$9.60
HIGGS, MICHAEL	2022-01-01	GUARDLOW	EE	\$29.44
HIGGS, MICHAEL	2022-01-01	VSP	EE	\$8.75
LANGMAID, JOHN	2022-01-01	GUARDLOW	EE	\$29.44
LANGMAID, JOHN	2022-01-01	VSP	EE	\$8.75
RAMOS, BELINDA	2021-02-01	GUARDHIGH	EE	\$47.61
RAMOS, BELINDA	2021-02-01	VSP	EE	\$8.75
RINER, TUCKER	2022-02-01	GUARDHIGH	EE	\$47.61
RUFFIN, BIANCA	2022-01-01	GUARDLOW	EE	\$29.44
RUFFIN, BIANCA	2022-01-01	VSP	EE	\$8.75
SUTTON, SHARIFFA	2022-01-01	GUARDLOW	EE	\$29.44
SUTTON, SHARIFFA	2022-01-01	LIFE		\$12.50

RED HOUSE STAGING, INC.  
9950 BUSINESS PKWY SUITE 100B  
LANHAM, MD 20706

## PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
FICOR, CHRISTINE	2022-09-01	GUARDLOW	EE	\$29.44

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

REFRIGERATION TECHNOLOGIES  
1055 S Hanover St  
POTTSTOWN, PA 19465

Invoice Number: 4431-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1749OPENAXESSILVE	Employee Only	2	\$603.00	\$1,206.00
GRAND TOTAL				\$1,206.00

## REFRIGERATION TECHNOLOGIES

1055 S Hanover St  
POTTSTOWN, PA 19465

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ANDERSON, JEFFERY	2022-01-01	1749OPENAXESSILVE	EE	\$603.00
WEZEL, GARY	2022-01-01	1749OPENAXESSILVE	EE	\$603.00

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

RELIABLE STAFFING CORPORATION  
360 N Pacific Coast Highway  
LOS ANGELES, CA 90245

Invoice Number: 4611-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDLOW	Employee & Children	1	\$74.61	\$74.61
VSP	Employee Only	1	\$8.75	\$8.75
VSP	Employee & Children	1	\$15.02	\$15.02
			GRAND TOTAL	\$220.60

## RELIABLE STAFFING CORPORATION

360 N Pacific Coast Highway

LOS ANGELES, CA 90245

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
RUIZ, VICTOR	2022-01-01	GUARDHIGH	EE	\$47.61
RUIZ, VICTOR	2022-01-01	VSP	EE	\$8.75
WELLS, JAISEN	2022-08-01	GUARDLOW	EC	\$74.61
WELLS, JAISEN	2022-08-01	VSP	EC	\$15.02

## RELIABLE STAFFING CORPORATION

360 N Pacific Coast Highway

LOS ANGELES, CA 90245

## PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
WELLS, JAISEN	2022-08-01	GUARDLOW	EC	\$74.61

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

REMAX GOLD  
1312 MATTHEWS MINT HILL RD  
MATTHEWS, NC 28105

Invoice Number: 4106-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1046OPENAXESSBRONZ	Employee & Spouse Only	1	\$986.72	\$986.72
1046OPENAXESSGOLD	Employee Only	1	\$0.00	\$653.81
1046OPENAXESSSILVE	Employee & Spouse Only	1	\$1,096.36	\$1,096.36
			GRAND TOTAL	\$3,390.70



REMAX GOLD  
1312 MATTHEWS MINT HILL RD  
MATTHEWS, NC 28105

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CASON, NATALIE	2022-09-01	1046OPENAXESSGOLD	EE	\$653.81
CASON, WESLEY	2020-05-01	1046OPENAXESSILVE	ES	\$1096.36
SUITOR, JASON	2020-05-01	1046OPENAXESSBRONZES		\$986.72

REMAX GOLD  
1312 MATTHEWS MINT HILL RD  
MATTHEWS, NC 28105

## PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CASON, NATALIE	2022-09-01	1046OPENAXESSGOLD	EE	\$653.81

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

RFC DRILLING. LLC  
6001 W Murphy St  
ODESSA, TX 79763

Invoice Number: 4497-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1828OPENAXESSBRONZ	Employee Only	3	\$414.07	\$1,242.21
1828OPENAXESSBRONZ	Employee & Spouse Only	2	\$828.14	\$1,656.28
1828OPENAXESSBRONZ	Employee & Children	1	\$0.00	\$828.14
1828OPENAXESSCOPPE	Employee Only	4	\$372.66	\$1,490.64
1828OPENAXESSCOPPE	Employee & Spouse Only	2	\$745.33	\$1,490.66
1828OPENAXESSCOPPE	Employee & Children	3	\$745.33	\$2,235.99
1828OPENAXESSGOLD	Employee Only	6	\$712.45	\$4,274.70
1828OPENAXESSPLATI	Employee Only	2	\$783.70	\$1,567.40
1828OPENAXESSPLATI	Employee & Spouse Only	2	\$1,567.40	\$3,134.80
1828OPENAXESSPLATI	Employee & Children	1	\$1,567.40	\$1,567.40
1828OPENAXESSPREMI	Employee Only	17	\$574.63	\$9,768.71
1828OPENAXESSPREMI	Employee & Spouse Only	7	\$1,175.29	\$8,227.03
1828OPENAXESSPREMI	Employee & Children	2	\$1,054.53	\$2,109.06
1828OPENAXESSPREMI	Family	1	\$1,648.94	\$1,648.94
1828OPENAXESSSILVE	Employee Only	1	\$460.08	\$460.08
ADD	Employee Only	35	\$8.40**	\$327.18
GUARDHIGH	Employee Only	19	\$47.61	\$904.59
GUARDHIGH	Employee & Spouse Only	3	\$89.81	\$269.43
GUARDHIGH	Employee & Children	2	\$89.81	\$179.62
GUARDHIGH	Family	2	\$160.18	\$320.36
GUARDLOW	Employee Only	20	\$29.44	\$588.80
GUARDLOW	Employee & Spouse Only	10	\$55.54	\$555.40
GUARDLOW	Employee & Children	3	\$74.61	\$223.83
GUARDLOW	Family	2	\$100.74	\$201.48
LIFE	Employee Only	40	\$47.85**	\$841.41
VSP	Employee Only	31	\$8.75	\$271.25
VSP	Employee & Spouse Only	14	\$14.73	\$206.22
VSP	Employee & Children	3	\$15.02	\$45.06
VSP	Family	4	\$23.76	\$95.04
			GRAND TOTAL	\$49,385.90

RFC DRILLING. LLC  
6001 W Murphy St  
ODESSA, TX 79763

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ASHLEY, ERIC	2022-08-01	LIFE		\$41.25
ASHLEY, ERIC	2022-08-01	GUARDLOW	EE	\$29.44
ASHLEY, ERIC	2022-08-01	1828OPENAXESSPLATI	ES	\$1567.40
ASHLEY, ERIC	2022-08-01	VSP	EE	\$8.75
AYALA, CARLOS	2022-08-01	ADD		\$5.04
AYALA, CARLOS	2022-08-01	LIFE		\$7.50
AYALA, CARLOS	2022-08-01	GUARDLOW	ES	\$55.54
AYALA, CARLOS	2022-08-01	1828OPENAXESSBRONZ	ES	\$828.14
AYALA, CARLOS	2022-08-01	VSP	ES	\$14.73
BRISTER, JOSHUA	2022-02-01	GUARDHIGH	EE	\$47.61
BURTON, JERRY	2022-06-01	LIFE		\$19.10
BURTON, JERRY	2022-06-01	GUARDHIGH	EE	\$47.61
BURTON, JERRY	2022-06-01	1828OPENAXESSPREMI	EE	\$574.63
BURTON, JERRY	2022-06-01	VSP	EE	\$8.75
CARTER, JEFFERY	2022-01-01	GUARDLOW	EC2	\$74.61
CARTER, JEFFERY	2022-01-01	VSP	FAM	\$23.76
CASTEEL, AARON	2022-10-01	GUARDHIGH	EE	\$47.61
CASTEEL, AARON	2022-10-01	1828OPENAXESSGOLD	EE	\$712.45
COGGIN, RALPH	2022-08-01	ADD		\$8.40
COGGIN, RALPH	2022-08-01	LIFE		\$47.85
COGGIN, RALPH	2022-08-01	GUARDLOW	ES	\$55.54
COGGIN, RALPH	2022-08-01	1828OPENAXESSPREMI	ES	\$1175.29
COGGIN, RALPH	2022-08-01	VSP	ES	\$14.73
CONTRERAS, LUIS	2022-07-01	GUARDLOW	EE	\$29.44
CONTRERAS, LUIS	2022-07-01	1828OPENAXESSPREMI	EE	\$574.63
CONTRERAS, LUIS	2022-07-01	VSP	EE	\$8.75
COOPER, MILTON	2022-06-01	ADD		\$2.31

RFC DRILLING. LLC  
6001 W Murphy St  
ODESSA, TX 79763

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
COOPER, MILTON	2022-06-01	LIFE		\$8.55
COOPER, MILTON	2022-06-01	GUARDHIGH	EE	\$47.61
COOPER, MILTON	2022-06-01	1828OPENAXESSPREMI	EE	\$574.63
COOPER, MILTON	2022-06-01	VSP	EE	\$8.75
COULTER, AARON	2022-07-01	ADD		\$4.20
COULTER, AARON	2022-07-01	LIFE		\$8.00
COULTER, AARON	2022-07-01	GUARDHIGH	EE	\$47.61
COULTER, AARON	2022-07-01	1828OPENAXESSPREMI	EE	\$574.63
COULTER, AARON	2022-07-01	VSP	EE	\$8.75
COURVILLE, GEORGE	2022-02-01	GUARDHIGH	ES	\$89.81
COURVILLE, GEORGE	2022-01-01	1828OPENAXESSPREMI	ES	\$1175.29
COURVILLE, GEORGE	2022-02-01	VSP	ES	\$14.73
COURVILLE, GEORGE	2022-02-01	LIFE		\$44.46
CRUZ, JOHNATHAN	2022-08-01	GUARDHIGH	EE	\$47.61
CRUZ, JOHNATHAN	2022-08-01	LIFE		\$9.60
DEMPSEY, THOMAS	2022-09-01	ADD		\$10.50
DEMPSEY, THOMAS	2022-09-01	LIFE		\$41.25
DEMPSEY, THOMAS	2022-09-01	GUARDLOW	ES	\$55.54
DEMPSEY, THOMAS	2022-09-01	1828OPENAXESSPLATI	ES	\$1567.40
DEMPSEY, THOMAS	2022-09-01	VSP	ES	\$14.73
DENNIS, JUSTIN	2022-08-01	LIFE		\$6.00
DENNIS, JUSTIN	2022-08-01	GUARDHIGH	EE	\$47.61
DENNIS, JUSTIN	2022-08-01	1828OPENAXESSCOPPE	EE	\$372.66
DENNIS, JUSTIN	2022-08-01	VSP	EE	\$8.75
DOWDEN, CARL	2022-01-01	GUARDHIGH	EE	\$47.61
DOWDEN, CARL	2022-01-01	1828OPENAXESSPREMI	EE	\$574.63
DOWDEN, CARL	2022-01-01	VSP	EE	\$8.75

RFC DRILLING. LLC  
6001 W Murphy St  
ODESSA, TX 79763

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
DOWDEN, CARL	2022-01-01	LIFE		\$19.10
DUBOSE, MICHEAL	2022-09-01	ADD		\$5.04
DUBOSE, MICHEAL	2022-09-01	LIFE		\$9.55
DUBOSE, MICHEAL	2022-09-01	GUARDHIGH	ES	\$89.81
DUBOSE, MICHEAL	2022-09-01	1828OPENAXESSCOPPE	ES	\$745.33
DUBOSE, MICHEAL	2022-09-01	VSP	ES	\$14.73
ESTRADA, ELOY	2022-06-01	GUARDLOW	EC	\$74.61
ESTRADA, ELOY	2022-06-01	1828OPENAXESSCOPPE	EC	\$745.33
ESTRADA, ELOY	2022-06-01	VSP	EE	\$8.75
FAULKNER, CLYDE	2022-01-01	ADD		\$10.50
FAULKNER, CLYDE	2022-01-01	1828OPENAXESSGOLD	EE	\$712.45
FAULKNER, CLYDE	2022-01-01	VSP	EE	\$8.75
FAULKNER, CLYDE	2022-09-01	LIFE		\$35.75
FAULKNER, JONATHON	2022-01-01	ADD		\$4.20
FAULKNER, JONATHON	2022-01-01	GUARDHIGH	EC	\$89.81
FAULKNER, JONATHON	2022-01-01	VSP	EC	\$15.02
FAULKNER, JONATHON	2022-01-01	LIFE		\$9.60
FEAZELL, KELVIN	2022-07-01	ADD	EE	\$21.00
FEAZELL, KELVIN	2022-07-01	LIFE	EE	\$14.40
FEAZELL, KELVIN	2022-07-01	GUARDLOW	EE	\$29.44
FEAZELL, KELVIN	2022-07-01	1828OPENAXESSCOPPE	EE	\$372.66
FERGUSON, JONATHAN	2022-05-01	ADD		\$10.08
FERGUSON, JONATHAN	2022-05-01	GUARDLOW	ES	\$55.54
FERGUSON, JONATHAN	2022-05-01	1828OPENAXESSBRONZ	ES	\$828.14
FERGUSON, JONATHAN	2022-05-01	VSP	ES	\$14.73
FONTENOT, BRYAN	2022-02-01	GUARDHIGH	EE	\$47.61

RFC DRILLING. LLC  
6001 W Murphy St  
ODESSA, TX 79763

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
FONTENOT, BRYAN	2022-01-01	1828OPENAXESSGOLD	EE	\$712.45
FONTENOT, BRYAN	2022-02-01	VSP	EE	\$8.75
FONTENOT, GREGORY	2022-01-01	ADD		\$12.60
FONTENOT, GREGORY	2022-01-01	LIFE		\$61.75
FONTENOT, GREGORY	2022-03-01	GUARDLOW	EE	\$29.44
FONTENOT, GREGORY	2022-03-01	1828OPENAXESSPREMI	EE	\$574.63
FONTENOT, GREGORY	2022-03-01	VSP	EE	\$8.75
FURGUSON, JAMES	2022-07-01	ADD		\$4.20
FURGUSON, JAMES	2022-07-01	LIFE		\$19.10
FURGUSON, JAMES	2022-07-01	GUARDLOW	EC2	\$74.61
FURGUSON, JAMES	2022-07-01	VSP	EE	\$8.75
GARCIA, JOHN	2022-08-01	ADD		\$4.20
GARCIA, JOHN	2022-08-01	LIFE		\$16.50
GARCIA, JOHN	2022-08-01	GUARDLOW	EE	\$29.44
GARCIA, JOHN	2022-08-01	1828OPENAXESSPLATI	EE	\$783.70
GARCIA, JOHN	2022-08-01	VSP	EE	\$8.75
GAYLE, CHARLES	2022-07-01	ADD		\$4.20
GAYLE, CHARLES	2022-07-01	LIFE		\$6.30
GAYLE, CHARLES	2022-07-01	GUARDLOW	EE	\$29.44
GAYLE, CHARLES	2022-07-01	1828OPENAXESSPREMI	EE	\$574.63
GEARLDS, ANDREW	2022-05-01	GUARDHIGH	EE	\$47.61
GEARLDS, ANDREW	2022-05-01	1828OPENAXESSILVE	EE	\$460.08
GEARLDS, JONATHAN	2022-08-01	GUARDHIGH	EE	\$47.61
GEARLDS, JONATHAN	2022-08-01	VSP	EE	\$8.75
HAM, JEFF	2022-01-01	ADD		\$8.40
HAM, JEFF	2022-01-01	GUARDLOW	ES	\$55.54

RFC DRILLING. LLC  
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CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
HAM, JEFF	2022-01-01	1828OPENAXESSPREMI	ES	\$1175.29
HAM, JEFF	2022-01-01	VSP	ES	\$14.73
HAM, JEFF	2022-01-01	LIFE		\$71.50
HANKS, KEVIN	2022-04-01	ADD		\$3.15
HANKS, KEVIN	2022-04-01	GUARDHIGH	EE	\$47.61
HANKS, KEVIN	2022-04-01	1828OPENAXESSBRONZ	EE	\$414.07
HANKS, KEVIN	2022-04-01	VSP	EE	\$8.75
HANKS, KEVIN	2022-04-01	LIFE		\$31.35
HANKS, QUINTON	2022-04-01	1828OPENAXESSCOPPE	EE	\$372.66
HANKS, QUINTON	2022-05-01	GUARDLOW	EE	\$29.44
HANKS, QUINTON	2022-05-01	VSP	EE	\$8.75
HAWKINS, MATTHEW	2022-08-01	ADD		\$42.00
HAWKINS, MATTHEW	2022-08-01	LIFE		\$13.05
HAWKINS, MATTHEW	2022-08-01	GUARDLOW	ES	\$55.54
HAWKINS, MATTHEW	2022-08-01	VSP	ES	\$14.73
HERNANDEZ, JOSE	2022-02-01	1828OPENAXESSPLATI	EE	\$783.70
HILL, ROBERT	2022-02-01	ADD		\$10.50
HILL, ROBERT	2022-01-24	1828OPENAXESSPREMI	EC2	\$1054.53
HILL, ROBERT	2022-02-01	VSP	FAM	\$23.76
HILL, ROBERT	2022-01-24	GUARDHIGH	FAM	\$160.18
HILL, ROBERT	2022-02-01	LIFE		\$29.40
HUMPHREYS, JERRY	2022-06-01	GUARDLOW	EE	\$29.44
HUMPHREYS, JERRY	2022-06-01	1828OPENAXESSPREMI	EE	\$574.63
HUMPHREYS, JERRY	2022-06-01	VSP	EE	\$8.75
IBARRA, RICHARD	2022-07-01	ADD		\$8.40
IBARRA, RICHARD	2022-07-01	LIFE		\$39.60



RFC DRILLING. LLC  
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CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
IBARRA, RICHARD	2022-07-01	VSP	EE	\$8.75
JACKSON, MEGAN	2022-06-01	ADD		\$16.80
JACKSON, MEGAN	2022-06-01	1828OPENAXESSPLATI	EC2	\$1567.40
JACKSON, MEGAN	2022-06-01	LIFE		\$13.30
JACKSON, MEGAN	2022-06-01	GUARDLOW	FAM	\$100.74
JACKSON, MEGAN	2022-06-01	VSP	FAM	\$23.76
JOHNSON, CORY	2022-09-01	GUARDHIGH	ES	\$89.81
JOHNSON, CORY	2022-09-01	VSP	ES	\$14.73
JOHNSON, CORY	2022-09-01	ADD		\$10.50
JONES, JIMMIE	2022-05-01	GUARDLOW	EE	\$29.44
JONES, JIMMIE	2022-04-01	1828OPENAXESSGOLD	EE	\$712.45
LEGER, TRAVIS	2022-08-01	GUARDHIGH	EE	\$47.61
LEMAIRE, MICHAEL	2022-01-01	ADD		\$8.40
LEMAIRE, MICHAEL	2022-01-01	GUARDHIGH	FAM	\$160.18
LEMAIRE, MICHAEL	2022-01-01	1828OPENAXESSPREMI	FAM	\$1648.94
LEMAIRE, MICHAEL	2022-01-01	VSP	FAM	\$23.76
LEMAIRE, MICHAEL	2022-01-01	LIFE		\$15.00
LEWIS, JUSTIN	2022-10-01	ADD		\$4.20
LEWIS, JUSTIN	2022-10-01	LIFE		\$19.10
LEWIS, JUSTIN	2022-10-01	GUARDLOW	FAM	\$100.74
LEWIS, JUSTIN	2022-10-01	1828OPENAXESSCOPPE	EC	\$745.33
LYLES, RODNEY	2022-05-01	ADD		\$21.00
LYLES, RODNEY	2022-05-01	LIFE		\$19.10
LYLES, RODNEY	2022-05-01	GUARDLOW	EE	\$29.44
LYLES, RODNEY	2022-05-01	1828OPENAXESSPREMI	EE	\$574.63
LYLES, RODNEY	2022-05-01	VSP	EE	\$8.75

RFC DRILLING. LLC  
6001 W Murphy St  
ODESSA, TX 79763

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
MALONE, DAVID	2022-02-01	GUARDHIGH	EE	\$47.61
MALONE, DAVID	2022-01-01	1828OPENAXESSPREMI	ES	\$1175.29
MALONE, DAVID	2022-02-01	VSP	ES	\$14.73
MCCLELLAND, CHARLES	2022-07-01	VSP	EE	\$8.75
MCCLELLAND, CHARLES	2022-07-01	GUARDLOW	EE	\$29.44
MCMURRY, BRANDON	2022-05-01	GUARDHIGH	EE	\$47.61
MCMURRY, BRANDON	2022-05-01	1828OPENAXESSGOLD	EE	\$712.45
MCMURRY, BRANDON	2022-05-01	VSP	EE	\$8.75
MENARD, TIMOTHY	2022-08-01	LIFE		\$1.60
MENARD, TIMOTHY	2022-08-01	GUARDHIGH	EE	\$47.61
MIRE, JOSHUA	2022-02-01	GUARDHIGH	EE	\$47.61
MIRE, JOSHUA	2022-01-01	1828OPENAXESSPREMI	EE	\$574.63
MIRE, JOSHUA	2022-02-01	VSP	EE	\$8.75
MIRE, JOSHUA	2022-02-01	LIFE		\$4.50
MITCHELL, TONY	2022-10-01	GUARDLOW	EE	\$29.44
MITCHELL, TONY	2022-10-01	1828OPENAXESSBRONZ	EC	\$828.14
MOTA, ROGELIO	2022-06-01	ADD	EE	\$0.42
MOTA, ROGELIO	2022-06-01	GUARDLOW	ES	\$55.54
MOTA, ROGELIO	2022-06-01	VSP	ES	\$14.73
MURPHY, DAN	2022-07-01	ADD		\$6.30
MURPHY, DAN	2022-07-01	LIFE		\$9.55
MURPHY, DAN	2022-07-01	GUARDLOW	EE	\$29.44
MURPHY, DAN	2022-07-01	1828OPENAXESSPREMI	EE	\$574.63
MURPHY, DAN	2022-07-01	VSP	EE	\$8.75
MURPHY, WENDELL	2022-07-01	ADD		\$12.60

RFC DRILLING. LLC  
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CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
MURPHY, WENDELL	2022-07-01	LIFE		\$71.50
MURPHY, WENDELL	2022-07-01	GUARDLOW	EE	\$29.44
MURPHY, WENDELL	2022-07-01	1828OPENAXESSCOPPE	ES	\$745.33
MURPHY, WENDELL	2022-07-01	VSP	EE	\$8.75
NAVA, HUMBERTO	2022-02-01	ADD		\$4.20
NAVA, HUMBERTO	2022-02-01	GUARDHIGH	EE	\$47.61
NAVA, HUMBERTO	2022-01-01	1828OPENAXESSPREMI	EE	\$574.63
NAVA, HUMBERTO	2022-02-01	LIFE		\$5.60
NAVARRE, NELSON	2022-04-01	1828OPENAXESSBRONZ	EE	\$414.07
NAVARRE, NELSON	2022-05-01	GUARDLOW	EE	\$29.44
ODOM, JOSHUA	2022-10-01	ADD		\$4.20
ODOM, JOSHUA	2022-10-01	LIFE		\$6.00
OWENS, KEVIN	2022-06-01	GUARDLOW	EE	\$29.44
OWENS, KEVIN	2022-06-01	1828OPENAXESSCOPPE	EE	\$372.66
OWENS, KEVIN	2022-06-01	VSP	EE	\$8.75
PEREZ, QUINTILIO	2022-06-01	1828OPENAXESSPREMI	EE	\$574.63
PEREZ, QUINTILIO	2022-06-01	VSP	EE	\$8.75
POWELL, RAMSEY	2022-10-01	ADD		\$4.20
POWELL, RAMSEY	2022-10-01	LIFE		\$13.05
POWELL, RAMSEY	2022-10-01	GUARDLOW	EE	\$29.44
POWELL, RAMSEY	2022-10-01	1828OPENAXESSPREMI	EE	\$574.63
POWELL, RAMSEY	2022-10-01	VSP	EE	\$8.75
PUNCHARD, MICHAEL	2022-05-01	ADD	EE	\$21.00
PUNCHARD, MICHAEL	2022-05-01	GUARDLOW	EE	\$29.44
PUNCHARD, MICHAEL	2022-04-01	1828OPENAXESSBRONZ	EE	\$414.07
PUNCHARD, MICHAEL	2022-05-01	VSP	EE	\$8.75

RFC DRILLING. LLC  
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CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
PUNCHARD, MICHAEL	2022-05-01	LIFE	EE	\$9.60
RICHARD, MURPHY	2022-01-01	ADD		\$2.10
RICHARD, MURPHY	2022-01-01	GUARDLOW	ES	\$55.54
RICHARD, MURPHY	2022-01-01	1828OPENAXESSPREMI	ES	\$1175.29
RICHARD, MURPHY	2022-01-01	VSP	ES	\$14.73
RICHARD, MURPHY	2022-01-01	LIFE		\$19.80
SONNIER, BRENTON	2022-01-01	GUARDLOW	ES	\$55.54
SONNIER, BRENTON	2022-01-01	1828OPENAXESSPREMI	ES	\$1175.29
SONNIER, BRENTON	2022-01-01	VSP	ES	\$14.73
SONNIER, CURTIS	2022-02-01	GUARDLOW	ES	\$55.54
SONNIER, CURTIS	2022-01-01	1828OPENAXESSPREMI	ES	\$1175.29
SONNIER, CURTIS	2022-02-01	VSP	ES	\$14.73
STARKLEY, ALEXANDER	2022-08-01	ADD		\$10.50
STARKLEY, ALEXANDER	2022-08-01	LIFE		\$7.20
STARKLEY, ALEXANDER	2022-08-01	GUARDLOW	EE	\$29.44
STARKLEY, ALEXANDER	2022-08-01	1828OPENAXESSGOLD	EE	\$712.45
TOUCHET, JOSEPH	2022-06-01	GUARDHIGH	EE	\$47.61
TOUCHET, JOSEPH	2022-06-01	1828OPENAXESSPREMI	EE	\$574.63
TOUCHET, JOSEPH	2022-06-01	VSP	EE	\$8.75
VALDEZ, EVARISTO	04/01/2022	1828OPENAXESSPREMI	EC2	\$1054.53
VALDEZ, EVARISTO	05/01/2022	VSP	EC2	\$15.02
VEILLON, DUSTIN	2022-07-01	1828OPENAXESSPREMI	EE	\$574.63
VEILLON, DUSTIN	2022-07-01	ADD		\$0.42
VEILLON, DUSTIN	2022-07-01	LIFE		\$8.00
VEILLON, DUSTIN	2022-07-01	GUARDLOW	EE	\$29.44
VEILLON, DUSTIN	2022-07-01	VSP	EE	\$8.75

RFC DRILLING. LLC  
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## CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
WHITNEY, COREY	2022-04-01	1828OPENAXESSPREMI	EE	\$574.63
WHITNEY, COREY	2022-05-01	VSP	EE	\$8.75
WHITNEY, COREY	2022-05-01	LIFE		\$8.00
YOUNG, BENJI	2022-07-01	ADD		\$21.42
YOUNG, BENJI	2022-07-01	GUARDHIGH	EC	\$89.81
YOUNG, BENJI	2022-07-01	1828OPENAXESSCOPPE	EC	\$745.33
YOUNG, BENJI	2022-07-01	VSP	EC	\$15.02

RFC DRILLING. LLC  
6001 W Murphy St  
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PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
DEMPSEY, THOMAS	2022-09-01	ADD		\$10.50
DEMPSEY, THOMAS	2022-09-01	LIFE		\$41.25
DEMPSEY, THOMAS	2022-09-01	GUARDLOW	ES	\$55.54
DEMPSEY, THOMAS	2022-09-01	1828OPENAXESSPLATI	ES	\$1567.40
DUBOSE, MICHEAL	2022-09-01	ADD		\$5.04
DUBOSE, MICHEAL	2022-09-01	LIFE		\$9.55
DUBOSE, MICHEAL	2022-09-01	GUARDHIGH	ES	\$89.81
DUBOSE, MICHEAL	2022-09-01	1828OPENAXESSCOPPE	ES	\$745.33
DUBOSE, MICHEAL	2022-09-01	VSP	ES	\$14.73
JOHNSON, CORY	2022-09-01	VSP	ES	\$14.73
JOHNSON, CORY	2022-09-01	ADD		\$10.50
JOHNSON, CORY	2022-09-01	GUARDHIGH	ES	\$89.81

MEDICAL PLAN COUNTS

Employee Only	33
Employee & Spouse	13
Employee & Children	4
Family	1



## Account Services

### Monthly Statement

RIGHTPRO STAFFING  
100 Reserve Rd  
Danbury, CT 06810

Invoice Number: 4726-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
0903OPENAXESSBRONZ	Employee Only	4	\$438.62	\$1,754.48
0903OPENAXESSBRONZ	Employee & Children	1	\$888.23	\$888.23
0903OPENAXESSGOLD	Employee Only	8	\$588.38	\$4,707.04
0903OPENAXESSGOLD	Employee & Children	1	\$0.00	\$1,176.86
0903OPENAXESSGOLD	Family	2	\$1,765.29	\$3,530.58
0903OPENAXESSILVER	Employee Only	1	\$493.36	\$493.36
0903OPENAXESSILVER	Employee & Children	2	\$986.72	\$1,973.44
ADD	Employee Only	8	\$0.42**	\$18.90
GUARDHIGH	Employee Only	12	\$47.61	\$571.32
GUARDHIGH	Employee & Spouse Only	1	\$89.81	\$89.81
GUARDHIGH	Employee & Children	2	\$89.81	\$235.98
GUARDHIGH	Family	1	\$160.18	\$160.18
GUARDLOW	Employee Only	8	\$29.44	\$235.52
GUARDLOW	Employee & Children	2	\$74.61	\$149.22
GUARDLOW	Family	4	\$100.74	\$402.96
LIFE	Employee Only	16	\$14.40**	\$283.88
VSP	Employee Only	20	\$8.75	\$175.00
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
VSP	Employee & Children	4	\$15.02	\$60.08
VSP	Family	3	\$23.76	\$71.28
			GRAND TOTAL	\$16,992.85

**RIGHTPRO STAFFING**

100 Reserve Rd  
Danbury, CT 06810

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ADELANWA, OMOBOLANIE	2022-06-01	ADD		\$0.42
ADELANWA, OMOBOLANIE	2022-06-01	LIFE		\$49.40
ADELANWA, OMOBOLANIE	2022-06-01	GUARDHIGH	EE	\$47.61
ADELANWA, OMOBOLANIE	2022-06-01	VSP	EE	\$8.75
AGBASONU, NINIAN	2022-09-01	ADD		\$2.10
AGBASONU, NINIAN	2022-09-01	LIFE		\$12.00
AGBASONU, NINIAN	2022-09-01	GUARDHIGH	EE	\$47.61
AGBASONU, NINIAN	2022-09-01	VSP	EE	\$8.75
BAILEY, SHAYNA	2022-08-01	GUARDLOW	EC2	\$74.61
BECKFORD, ANTIONETTE	2022-07-01	0903OPENAXESSILVER	EC2	\$986.72
BECKFORD, ANTIONETTE	2022-07-01	GUARDHIGH	EC2	\$117.99
BECKFORD, ANTIONETTE	2022-07-01	VSP	EC2	\$15.02
BERNOSKY, LONI LEE	2022-07-01	0903OPENAXESSBRONZ	EC2	\$888.23
BERNOSKY, LONI LEE	2022-07-01	GUARDLOW	EC2	\$74.61
BERNOSKY, LONI LEE	2022-07-01	VSP	EC2	\$15.02
COLEMAN, TONI	2022-07-01	LIFE		\$8.00
COLEMAN, TONI	2022-07-01	GUARDHIGH	EE	\$47.61
COLEMAN, TONI	2022-07-01	VSP	EE	\$8.75
GARRISON, HEATHER	2022-02-01	0903OPENAXESSILVER	EE	\$493.36
GARRISON, HEATHER	2022-02-01	GUARDHIGH	EE	\$47.61
GARRISON, HEATHER	2022-02-01	VSP	EE	\$8.75
GREEN, YANIQUE	2022-08-01	0903OPENAXESSILVER	EC2	\$986.72
GREEN, YANIQUE	2022-08-01	GUARDHIGH	EC2	\$117.99
GREEN, YANIQUE	2022-08-01	VSP	EE	\$8.75
HARRIS, MONEACA	2022-08-01	0903OPENAXESSBRONZ	EE	\$438.62
HARRIS, MONEACA	2022-08-01	LIFE		\$16.50
HARRIS, MONEACA	2022-08-01	GUARDHIGH	EE	\$47.61



**RIGHTPRO STAFFING**

100 Reserve Rd  
Danbury, CT 06810

**CURRENT MONTH ENROLLMENT (CONTINUED)**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
HARRIS, MONEACA	2022-08-01	VSP	EE	\$8.75
HULS, JESSICA	2022-04-01	LIFE		\$0.90
HULS, JESSICA	2022-04-01	GUARDHIGH	EE	\$47.61
KAIN, KYLE	2022-01-01	0903OPENAXESSGOLD	EE	\$588.38
KAIN, SIDNEY	2021-07-01	0903OPENAXESSGOLD	FAM	\$1765.29
KAIN, SIDNEY	07/01/2021	0903OPENAXESSGOLD	FAM	\$1765.29
KAIN, SIDNEY	2021-07-01	GUARDHIGH	FAM	\$160.18
KAIN, SIDNEY	2021-07-01	VSP	FAM	\$23.76
LINDSAY, KIMBERLY	2022-06-01	GUARDHIGH	EE	\$47.61
LINDSAY, KIMBERLY	2022-06-01	VSP	EE	\$8.75
MARTIN, NICOLE	2022-08-01	GUARDLOW	FAM	\$100.74
MARTIN, NICOLE	2022-08-01	VSP	FAM	\$23.76
MARTINS, MONICA	2022-04-01	0903OPENAXESSGOLD	EE	\$588.38
MARTINS, MONICA	2022-04-01	GUARDLOW	EE	\$29.44
MARTINS, MONICA	2022-04-01	VSP	EE	\$8.75
MCGUIRE, AMY	2022-08-01	ADD		\$4.20
MCGUIRE, AMY	2022-08-01	LIFE		\$6.00
MCGUIRE, AMY	2022-08-01	GUARDHIGH	EE	\$47.61
MCGUIRE, AMY	2022-08-01	VSP	EE	\$8.75
MERCADO, JAZMIN	2022-06-01	0903OPENAXESSBRONZ	EE	\$438.62
MERCADO, JAZMIN	2022-06-01	GUARDLOW	EE	\$29.44
MERY, EDELYNE	2022-08-01	0903OPENAXESSGOLD	EC2	\$1176.86
MERY, EDELYNE	2022-08-01	GUARDLOW	FAM	\$100.74
MERY, EDELYNE	2022-08-01	VSP	FAM	\$23.76
MIX, THOMAS	2022-01-01	LIFE		\$29.70

RIGHTPRO STAFFING

100 Reserve Rd

Danbury, CT 06810

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
MOORE, SACHA	2022-07-01	0903OPENAXESSGOLD	EE	\$588.38
MOORE, SACHA	2022-07-01	LIFE		\$9.55
MOORE, SACHA	2022-07-01	GUARDLOW	EE	\$29.44
MOORE, SACHA	2022-07-01	VSP	EE	\$8.75
MUHAMMAD, T'LISECIA	2022-08-01	GUARDLOW	FAM	\$100.74
MUHAMMAD, T'LISECIA	2022-08-01	VSP	EC2	\$15.02
NIETO, EDUARDO	2022-07-01	0903OPENAXESSGOLD	EE	\$588.38
NIETO, EDUARDO	2022-07-01	GUARDHIGH	EE	\$47.61
NIETO, EDUARDO	2022-07-01	VSP	EE	\$8.75
ONWUSI, OBIOMA	2022-08-01	0903OPENAXESSGOLD	EE	\$588.38
ONWUSI, OBIOMA	2022-08-01	GUARDLOW	EE	\$29.44
ONWUSI, OBIOMA	2022-08-01	VSP	EE	\$8.75
PARNELL, ALISA	2022-06-01	0903OPENAXESSGOLD	EE	\$588.38
PARNELL, ALISA	2022-06-01	ADD		\$4.20
PARNELL, ALISA	2022-06-01	LIFE		\$7.20
PARNELL, ALISA	2022-06-01	GUARDHIGH	EE	\$47.61
PARNELL, ALISA	2022-06-01	VSP	EE	\$8.75
PRICE, KIMBERLY	2022-06-01	0903OPENAXESSGOLD	EE	\$588.38
PRICE, KIMBERLY	2022-06-01	GUARDHIGH	EE	\$47.61
PRICE, KIMBERLY	2022-06-01	VSP	EE	\$8.75
RICARDO, CAROLINE	2022-01-01	LIFE		\$7.20
RICARDO, CAROLINE	2022-01-01	0903OPENAXESSBRONZ	EE	\$438.62
RICARDO, CAROLINE	2022-01-01	GUARDLOW	EE	\$29.44
RIDDOCK, GERALDINE	2022-07-01	LIFE		\$90.18
RIDDOCK, GERALDINE	2022-07-01	GUARDHIGH	ES	\$89.81

RIGHTPRO STAFFING

100 Reserve Rd

Danbury, CT 06810

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
RIDDOCK, GERALDINE	2022-07-01	VSP	ES	\$14.73
RODRIGUEZ, JOE	2021-10-01	GUARDLOW	EE	\$29.44
RODRIGUEZ, JOE	2021-10-01	VSP	EE	\$8.75
SAWNER, DANIELLE	2022-07-01	ADD		\$4.20
SAWNER, DANIELLE	2022-07-01	LIFE		\$14.40
SCHESSEL, KAYLE	2022-08-01	ADD		\$0.42
SCHESSEL, KAYLE	2022-08-01	VSP	EE	\$8.75
SIMATOVICH, MCKINLEY	2022-10-01	0903OPENAXESSBRONZ	EE	\$438.62
SIMATOVICH, MCKINLEY	2022-10-01	GUARDLOW	EE	\$29.44
SIMATOVICH, MCKINLEY	2022-10-01	VSP	EE	\$8.75
SINGH, EUSTACE	2022-01-01	GUARDLOW	EE	\$29.44
SINGH, EUSTACE	2022-01-01	VSP	EE	\$8.75
SLOAN, ERIKIA	2022-08-01	LIFE		\$6.60
SLOAN, ERIKIA	2022-06-01	GUARDHIGH	EE	\$47.61
SLOAN, ERIKIA	2022-06-01	VSP	EE	\$8.75
TROVATO, MARCIA	2022-06-01	VSP	EE	\$8.75
VIBBARD, NEMA	2022-03-01	ADD		\$2.10
VIBBARD, NEMA	2022-03-01	LIFE		\$10.70
WARE, KELLI	2022-04-01	ADD		\$1.26
WARE, KELLI	2022-04-01	LIFE		\$6.00
WILLIAMS, YOLANDE	2022-06-01	0903OPENAXESSGOLD	EE	\$588.38
WILLIAMS, YOLANDE	2022-06-01	LIFE		\$9.55
WILLIAMS, YOLANDE	2022-06-01	GUARDLOW	FAM	\$100.74
WILLIAMS, YOLANDE	2022-06-01	VSP	EC2	\$15.02

RIGHTPRO STAFFING

100 Reserve Rd

Danbury, CT 06810

## CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
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## MEDICAL PLAN COUNTS

Employee Only	13
Employee & Spouse	0
Employee & Children	0
Family	2



## Account Services

### Monthly Statement

RIVER RIDERS  
408 ALSTADTS HILL RD  
HARPERS FERRY, WV 25425

Invoice Number: 4221-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$0.00**	\$2.10
GUARDHIGH	Employee Only	2	\$47.61	\$95.22
LIFE	Employee Only	1	\$0.00**	\$15.03
VSP	Employee Only	1	\$0.00	\$8.75
			GRAND TOTAL	\$121.10

RIVER RIDERS  
408 ALSTADTS HILL RD  
HARPERS FERRY, WV 25425

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
GATTON, WILLIAM	2022-01-01	GUARDHIGH	EE	\$47.61
MUMPER, SAMUEL	2022-08-01	ADD		\$2.10
MUMPER, SAMUEL	2022-08-01	LIFE		\$15.03
MUMPER, SAMUEL	2022-08-01	GUARDHIGH	EE	\$47.61
MUMPER, SAMUEL	2022-08-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

RLS FLORIDA  
1943 NW 104TH WAY  
GAINESVILLE, FL 32606

Invoice Number: 4423-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1739OPENAXESSILVE	Family	1	\$1,644.54	\$1,644.54
ADD	Employee Only	1	\$1.26**	\$1.26
			GRAND TOTAL	\$1,645.80

RLS FLORIDA  
1943 NW 104TH WAY  
GAINESVILLE, FL 32606

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
SCOTT, RANDOLPH	2022-01-01	ADD		\$1.26
SCOTT, RANDOLPH	2022-01-01	1739OPENAXESSILVE	FAM	\$1644.54

## MEDICAL PLAN COUNTS

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





## Account Services

### Monthly Statement

ROOSTERS MEN'S GROOMING CENTER  
5361 ROLLINGWOOD DR  
MILFORD, OH 45150

Invoice Number: 4661-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
0666OPENAXESSGOLD	Employee Only	2	\$479.89	\$959.78
0666OPENAXESSGOLD	Employee & Spouse Only	1	\$985.30	\$985.30
0666OPENAXESSGOLD	Employee & Children	1	\$905.15	\$905.15
ADD	Employee Only	2	\$0.84**	\$1.68
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDHIGH	Employee & Spouse Only	1	\$89.81	\$89.81
GUARDHIGH	Employee & Children	1	\$117.99	\$117.99
GUARDLOW	Employee Only	2	\$29.44	\$58.88
GUARDLOW	Employee & Children	1	\$74.61	\$74.61
LIFE	Employee Only	3	\$2.40**	\$18.82
VSP	Employee Only	3	\$8.75	\$26.25
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
VSP	Employee & Children	2	\$15.02	\$30.04
			GRAND TOTAL	\$3,330.65

ROOSTERS MEN'S GROOMING CENTER  
5361 ROLLINGWOOD DR  
MILFORD, OH 45150

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
AGUIRRE, AMY	2020-09-01	0666OPENAXESSGOLD	EE	\$479.89
AGUIRRE, AMY	2017-12-01	GUARDLOW	EC	\$74.61
AGUIRRE, AMY	2018-12-01	VSP	EC	\$15.02
MILLER, DARRELL	2017-12-01	GUARDHIGH	EE	\$47.61
MILLER, DARRELL	2018-12-01	VSP	EE	\$8.75
MILLER, LAUREN	2022-03-01	GUARDLOW	EE	\$29.44
MILLER, LAUREN	2022-03-01	VSP	EE	\$8.75
NELSON, COURTNEY	2022-01-01	0666OPENAXESSGOLD	EC2	\$905.15
NELSON, COURTNEY	2022-01-01	ADD		\$0.84
NELSON, COURTNEY	2022-04-01	LIFE		\$1.60
NELSON, COURTNEY	2022-01-01	GUARDHIGH	EC2	\$117.99
NELSON, COURTNEY	2022-01-01	VSP	EC2	\$15.02
NELSON, JARED	2022-01-01	0666OPENAXESSGOLD	EE	\$479.89
NELSON, JARED	2022-01-01	GUARDLOW	EE	\$29.44
NELSON, JARED	2022-01-01	VSP	EE	\$8.75
NELSON, JARED	2022-01-01	LIFE		\$2.40
NELSON, LISA	2022-01-01	0666OPENAXESSGOLD	ES	\$985.30
NELSON, LISA	2022-01-01	ADD		\$0.84
NELSON, LISA	2022-01-01	GUARDHIGH	ES	\$89.81
NELSON, LISA	2022-01-01	VSP	ES	\$14.73
NELSON, LISA	2022-01-01	LIFE		\$14.82

**MEDICAL PLAN COUNTS**

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



## Account Services

### Monthly Statement

ROSEMIL MANAGEMENT GROUP, LLC  
350 SYCAMORE ROAD  
GENOA, IL 60135

Invoice Number: 4653-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDLOW	Employee Only	2	\$29.44	\$58.88
GUARDLOW	Employee & Spouse Only	1	\$55.54	\$55.54
LIFE	Employee Only	2	\$47.85**	\$36.62
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$159.79

ROSEMIL MANAGEMENT GROUP, LLC  
350 SYCAMORE ROAD  
GENOA, IL 60135

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CRUZ, EDVIN	2019-01-01	GUARDLOW	ES	\$55.54
THIGPEN, HERILANDA	2019-01-01	GUARDLOW	EE	\$29.44
THIGPEN, HERILANDA	2019-01-01	LIFE		\$24.62
WEERTS, SARAH	2019-01-01	GUARDLOW	EE	\$29.44
WEERTS, SARAH	2018-12-01	VSP	EE	\$8.75
WEERTS, SARAH	2021-11-01	LIFE		\$12.00

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

RSL SAFETY CORPORATION  
1409 EAST BLVD  
CHARLOTTE, NC 28203

Invoice Number: 4254-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1483OPENAXESSBRONZ	Employee & Spouse Only	1	\$888.23	\$888.23
1483OPENAXESSGOLD	Employee Only	1	\$0.00	\$588.38
1483OPENAXESSSILVE	Employee & Spouse Only	1	\$0.00	\$986.72
1483OPENAXESSSILVE	Family	1	\$0.00	\$1,480.09
ADD	Employee Only	3	\$0.00**	\$44.10
GUARDHIGH	Employee Only	1	\$0.00	\$47.61
GUARDHIGH	Employee & Spouse Only	1	\$0.00	\$89.81
GUARDLOW	Family	1	\$0.00	\$100.74
LIFE	Employee Only	3	\$0.00**	\$52.82
VSP	Employee Only	1	\$0.00	\$8.75
VSP	Employee & Spouse Only	2	\$14.73	\$29.46
VSP	Family	1	\$0.00	\$23.76
GRAND TOTAL				\$7,733.71

RSL SAFETY CORPORATION  
1409 EAST BLVD  
CHARLOTTE, NC 28203

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
JOHN, MANOJ	2022-09-01	1483OPENAXESSILVE	FAM	\$1480.09
JOHN, MANOJ	2022-09-01	ADD		\$21.00
JOHN, MANOJ	2022-09-01	LIFE		\$19.10
JOHN, MANOJ	2022-09-01	GUARDLOW	FAM	\$100.74
JOHN, MANOJ	2022-09-01	VSP	FAM	\$23.76
KAPLAN, GARY	2022-01-01	1483OPENAXESSBRONZES		\$888.23
KAPLAN, GARY	2022-01-01	VSP	ES	\$14.73
PETRARCA, DENNIS	2022-09-01	1483OPENAXESSGOLD	EE	\$588.38
PETRARCA, DENNIS	2022-09-01	ADD		\$10.50
PETRARCA, DENNIS	2022-09-01	LIFE		\$10.80
PETRARCA, DENNIS	2022-09-01	GUARDHIGH	EE	\$47.61
PETRARCA, DENNIS	2022-09-01	VSP	EE	\$8.75
THORNTON, JAMES	2022-09-01	1483OPENAXESSILVE	ES	\$986.72
THORNTON, JAMES	2022-09-01	GUARDHIGH	ES	\$89.81
THORNTON, JAMES	2022-09-01	VSP	ES	\$14.73
ZUJOVIC, IVAN	2022-10-01	ADD		\$12.60
ZUJOVIC, IVAN	2022-10-01	LIFE		\$22.92

RSL SAFETY CORPORATION  
1409 EAST BLVD  
CHARLOTTE, NC 28203

PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
JOHN, MANOJ	2022-09-01	1483OPENAXESSILVE	FAM	\$1480.09
JOHN, MANOJ	2022-09-01	ADD		\$21.00
JOHN, MANOJ	2022-09-01	LIFE		\$19.10
JOHN, MANOJ	2022-09-01	GUARDLOW	FAM	\$100.74
JOHN, MANOJ	2022-09-01	VSP	FAM	\$23.76
PETRARCA, DENNIS	2022-09-01	1483OPENAXESSGOLD	EE	\$588.38
PETRARCA, DENNIS	2022-09-01	ADD		\$10.50
PETRARCA, DENNIS	2022-09-01	LIFE		\$10.80
PETRARCA, DENNIS	2022-09-01	GUARDHIGH	EE	\$47.61
THORNTON, JAMES	2022-09-01	1483OPENAXESSILVE	ES	\$986.72
THORNTON, JAMES	2022-09-01	GUARDHIGH	ES	\$89.81
THORNTON, JAMES	2022-09-01	VSP	ES	\$14.73

MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

SCGH - SUPERCUTS  
31 LOCKWOOD DRIVE  
PRINCETON, NJ 08540

Invoice Number: 4105-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1045OPENAXESSBRONZ	Employee Only	5	\$321.43	\$1,607.15
1045OPENAXESSBRONZ	Family	1	\$922.12	\$922.12
1045OPENAXESSGOLD	Employee Only	2	\$358.93	\$717.86
1045OPENAXESSSILVE	Employee Only	2	\$340.18	\$680.36
ADD	Employee Only	1	\$21.42**	\$21.42
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDLOW	Employee Only	7	\$29.44	\$206.08
GUARDLOW	Employee & Children	1	\$74.61	\$74.61
LIFE	Employee Only	2	\$9.90**	\$21.20
VSP	Employee Only	2	\$8.75	\$17.50
VSP	Employee & Children	1	\$15.02	\$15.02
GRAND TOTAL				\$4,369.12



SCGH - SUPERCUTS  
31 LOCKWOOD DRIVE  
PRINCETON, NJ 08540

CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ALBERT, MICHELLE	2022-01-01	GUARDLOW	EE	\$29.44
ALBERT, MICHELLE	2022-01-01	1045OPENAXESSBRONZ	EE	\$321.43
ALVEY, CAROL	2022-01-01	1045OPENAXESSBRONZ	EE	\$321.43
ALVEY, CAROL	2022-01-01	GUARDLOW	EE	\$29.44
ALVEY, CAROL	2022-01-01	VSP	EE	\$8.75
BRENNAN, AMANDA	2022-01-01	1045OPENAXESSGOLD	EE	\$358.93
BRENNAN, AMANDA	2022-01-01	GUARDLOW	EE	\$29.44
DICKENS, JILLIAN	2022-01-01	1045OPENAXESSGOLD	EE	\$358.93
DICKENS, JILLIAN	2022-01-01	GUARDLOW	EE	\$29.44
GOEBEL, STACEY	2020-01-01	GUARDHIGH	EE	\$47.61
GOEBEL, STACEY	2020-07-01	1045OPENAXESSBRONZ	EE	\$321.43
JUNE, ERICA	2022-05-01	LIFE		\$9.90
KARAS, SONYA	2020-07-01	1045OPENAXESSBRONZ	FAM	\$922.12
LISA, KATELYN	2021-01-01	ADD		\$21.42
LISA, KATELYN	2021-01-01	GUARDLOW	EC	\$74.61
LISA, KATELYN	2021-01-01	VSP	EC	\$15.02
LISA, KATELYN	2021-01-01	LIFE		\$11.30
MAYHEW, RACHEL	2020-08-01	1045OPENAXESSSILVE	EE	\$340.18
MAYHEW, RACHEL	2021-01-01	GUARDLOW	EE	\$29.44
RIVERA, JACQUELYN	2022-09-01	GUARDLOW	EE	\$29.44
RIVERA, JACQUELYN	2022-09-01	VSP	EE	\$8.75
RODRIGUEZ, ROBERTO	2020-07-01	1045OPENAXESSSILVE	EE	\$340.18
SPRINGFIELD, NICOLE	2021-07-01	1045OPENAXESSBRONZ	EE	\$321.43
SPRINGFIELD, NICOLE	2021-07-01	GUARDLOW	EE	\$29.44
ZANAKIS, ANTONIA	2022-01-01	1045OPENAXESSBRONZ	EE	\$321.43

SCGH - SUPERCUTS  
31 LOCKWOOD DRIVE  
PRINCETON, NJ 08540

## CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
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SCGH - SUPERCUTS  
31 LOCKWOOD DRIVE  
PRINCETON, NJ 08540

## PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
RIVERA, JACQUELYN	2022-09-01	GUARDLOW	EE	\$29.44
RIVERA, JACQUELYN	2022-09-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

Employee Only	9
Employee & Spouse	0
Employee & Children	0
Family	1



## Account Services

### Monthly Statement

SCOOTERS COFFEE KINGSPORT  
4287 Fort Henry Dr  
KINGSPORT, TN 37663

Invoice Number: 4486-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1815OPENAXESSBRONZ	Employee Only	1	\$536.10	\$536.10
GUARDLOW	Employee Only	1	\$29.44	\$29.44
LIFE	Employee Only	1	\$6.00**	\$6.00
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$580.29

## SCOOTERS COFFEE KINGSPORT

4287 Fort Henry Dr

KINGSPORT, TN 37663

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
MORELOCK, CASSIDY	2022-02-01	GUARDLOW	EE	\$29.44
MORELOCK, CASSIDY	2022-02-01	1815OPENAXESSBRONZ	EE	\$536.10
MORELOCK, CASSIDY	2022-02-01	VSP	EE	\$8.75
MORELOCK, CASSIDY	2022-02-01	LIFE		\$6.00

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

SEBENZA  
6320 BELL STATION ROAD  
GLENN DALE, MD 20769

Invoice Number: 4166-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	3	\$47.61	\$142.83
GUARDLOW	Employee Only	2	\$29.44	\$58.88
LIFE	Employee Only	1	\$30.96**	\$6.00
VSP	Employee Only	4	\$8.75	\$35.00
			GRAND TOTAL	\$305.07

SEBENZA  
6320 BELL STATION ROAD  
GLENN DALE, MD 20769

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BOURJOLLY, MICHAEL	2022-07-01	GUARDLOW	EE	\$29.44
DUNN, IVAN	2022-09-01	LIFE		\$6.00
DUNN, IVAN	2022-09-01	GUARDHIGH	EE	\$47.61
DUNN, IVAN	2022-09-01	VSP	EE	\$8.75
FENWICK, JONATHAN	2017-12-01	GUARDHIGH	EE	\$47.61
FENWICK, JONATHAN	2018-12-01	VSP	EE	\$8.75
MATTOS, SAUL	2022-01-01	GUARDHIGH	EE	\$47.61
MATTOS, SAUL	2022-01-01	VSP	EE	\$8.75
PRICE, FREDERICK	2021-01-01	GUARDLOW	EE	\$29.44
PRICE, FREDERICK	2021-01-01	VSP	EE	\$8.75

SEBENZA  
6320 BELL STATION ROAD  
GLENN DALE, MD 20769

## PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
DUNN, IVAN	2022-09-01	LIFE		\$6.00
DUNN, IVAN	2022-09-01	GUARDHIGH	EE	\$47.61
DUNN, IVAN	2022-09-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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





**Account Services**  
**Monthly Statement**

SENIOR CARE AUTHORITY - BOYNTON BEACH

Invoice Number: 6050-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDLOW	Employee Only	2	\$29.44	\$58.88
VSP	Employee Only	2	\$8.75	\$17.50
GRAND TOTAL				\$152.76

## SENIOR CARE AUTHORITY - BOYNTON BEACH

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
GLACER, JODI	2022-09-01	GUARDLOW	EE	\$29.44
GLACER, JODI	2022-09-01	VSP	EE	\$8.75
MCDONALD, TABITHANETHA	2022-09-01	GUARDLOW	EE	\$29.44
MCDONALD, TABITHANETHA	2022-09-01	VSP	EE	\$8.75

## SENIOR CARE AUTHORITY - BOYNTON BEACH

,

## PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
GLACER, JODI	2022-09-01	GUARDLOW	EE	\$29.44
GLACER, JODI	2022-09-01	VSP	EE	\$8.75
MCDONALD, TABITHANETHA	2022-09-01	GUARDLOW	EE	\$29.44
MCDONALD, TABITHANETHA	2022-09-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

SENIOR CARE AUTHORITY, LLC  
755 BAYWOOD DRIVE  
PETALUMA, CA 94954

Invoice Number: 4709-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	2	\$3.36**	\$7.56
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
LIFE	Employee Only	2	\$19.76**	\$47.70
			GRAND TOTAL	\$102.87

SENIOR CARE AUTHORITY, LLC  
755 BAYWOOD DRIVE  
PETALUMA, CA 94954

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ALEXANDER, LAURA	2020-01-01	GUARDHIGH	EE	\$47.61
MARSTON, PHYLLIS	2022-07-01	ADD		\$4.20
MARSTON, PHYLLIS	2022-07-01	LIFE		\$19.10
SIEGWARTH, LORIANN	2020-01-01	ADD		\$3.36
SIEGWARTH, LORIANN	2022-08-01	LIFE		\$28.60

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

SENIOR HELPERS ALPHARETTA GA  
294 So Main Street  
Alpharetta, GA 30009

Invoice Number: 4209-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GRAND TOTAL				\$47.61

SENIOR HELPERS ALPHARETTA GA

294 So Main Street

Alpharetta, GA 30009

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
SILAS, DORIS	2022-05-01	GUARDHIGH	EE	\$47.61

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

SENIOR HELPERS CHRISTIANA DE  
630 CHURCHMANS RD  
NEWARK, DE 19702

Invoice Number: 4205-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDLOW	Employee & Children	1	\$0.00	\$74.61
VSP	Employee Only	1	\$0.00	\$8.75
			GRAND TOTAL	\$83.36



SENIOR HELPERS CHRISTIANA DE  
630 CHURCHMANS RD  
NEWARK, DE 19702

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
DUNN, KIMBERLEY	2022-08-01	GUARDLOW	EC	\$74.61
DUNN, KIMBERLEY	2022-08-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

SENIOR HELPERS FORT COLLINS CO  
3101 Kintzley Ct  
LaPorte, CO 80535

Invoice Number: 4668-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	3	\$2.10**	\$33.60
GUARDHIGH	Employee & Children	1	\$89.81	\$89.81
GUARDLOW	Employee Only	2	\$29.44	\$58.88
GUARDLOW	Family	1	\$100.74	\$100.74
LIFE	Employee Only	2	\$3.82**	\$5.02
VSP	Employee Only	2	\$8.75	\$17.50
VSP	Employee & Children	2	\$15.02	\$30.04
			GRAND TOTAL	\$335.59

**SENIOR HELPERS FORT COLLINS CO**

3101 Kintzley Ct  
LaPorte, CO 80535

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CALEB, EDDY	2022-10-01	LIFE		\$1.20
CERVANTES, BARBARA	2019-01-01	GUARDLOW	EE	\$29.44
CERVANTES, BARBARA	2019-01-01	VSP	EE	\$8.75
LEMPKE, MARY	2022-01-01	ADD		\$21.00
LEMPKE, MARY	2022-01-01	GUARDLOW	EE	\$29.44
LEMPKE, MARY	2022-01-01	VSP	EE	\$8.75
POULIOT, LAWNA	2022-03-01	LIFE		\$3.82
POULIOT, LAWNA	2022-03-01	ADD		\$2.10
PURDY, DANETTE	2021-10-01	ADD		\$10.50
ROSSI, ROSEMARIE	2021-10-01	GUARDHIGH	EC	\$89.81
ROSSI, ROSEMARIE	2021-10-01	VSP	EC	\$15.02
SCHNEIDER, CHRISTINA	2022-01-01	GUARDLOW	FAM	\$100.74
SCHNEIDER, CHRISTINA	2022-01-01	VSP	EC2	\$15.02

**MEDICAL PLAN COUNTS**

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



## Account Services

### Monthly Statement

SENIOR HELPERS GREATER MARIN  
777 Grand Ave Suite 101  
SAN RAFAEL, CA 94901

Invoice Number: 4300-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$21.00**	\$21.00
GUARDLOW	Employee & Children	1	\$74.61	\$74.61
VSP	Employee & Children	1	\$15.02	\$15.02
			GRAND TOTAL	\$110.63

## SENIOR HELPERS GREATER MARIN

777 Grand Ave Suite 101

SAN RAFAEL, CA 94901

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
GARCIA, AMY	2022-01-01	ADD		\$21.00
GARCIA, AMY	2022-01-01	GUARDLOW	EC	\$74.61
GARCIA, AMY	2022-01-01	VSP	EC	\$15.02

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

SENIOR HELPERS HARRISBURG PA  
3806 Market St. Ste 3  
Camp Hill, PA 17011

Invoice Number: 4208-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	2	\$6.30**	\$1.68
GUARDHIGH	Employee Only	5	\$47.61	\$238.05
GUARDLOW	Employee Only	2	\$29.44	\$58.88
GUARDLOW	Employee & Spouse Only	2	\$55.54	\$111.08
LIFE	Employee Only	2	\$6.00**	\$20.40
VSP	Employee Only	11	\$8.75	\$96.25
VSP	Employee & Spouse Only	2	\$14.73	\$29.46
			GRAND TOTAL	\$555.80

**SENIOR HELPERS HARRISBURG PA**

3806 Market St. Ste 3

Camp Hill, PA 17011

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ALLABAUGH, WENDY	2022-01-01	ADD		\$1.26
ALLABAUGH, WENDY	2022-01-01	GUARDHIGH	EE	\$47.61
ALLABAUGH, WENDY	2022-01-01	VSP	EE	\$8.75
BANKS, JEANNINE	2022-01-01	ADD		\$0.42
BANKS, JEANNINE	2022-01-01	VSP	EE	\$8.75
BANKS, JEANNINE	2022-01-01	LIFE		\$6.00
BOWER, CAROL	2022-01-01	GUARDLOW	EE	\$29.44
BOWER, CAROL	2022-01-01	VSP	EE	\$8.75
BUCKLES, BRENDA	2022-01-01	VSP	EE	\$8.75
GARISTO, STEPHEN	2020-01-01	GUARDHIGH	EE	\$47.61
GARISTO, STEPHEN	2020-01-01	VSP	EE	\$8.75
HAWKES, BILLIE	2020-01-01	GUARDLOW	ES	\$55.54
HAWKES, BILLIE	2020-01-01	VSP	ES	\$14.73
HAWKES, BILLIE	2021-11-01	LIFE		\$14.40
HEIM, BELINDA	2022-01-01	GUARDHIGH	EE	\$47.61
HEIM, BELINDA	2022-01-01	VSP	EE	\$8.75
JOWANOWITCH, JESSICA	2020-01-01	GUARDLOW	ES	\$55.54
JOWANOWITCH, JESSICA	2020-01-01	VSP	ES	\$14.73
MOSES, BETHANY	2020-01-01	VSP	EE	\$8.75
NALLY, JENNIFER	2022-01-01	GUARDLOW	EE	\$29.44
NALLY, JENNIFER	2022-01-01	VSP	EE	\$8.75
POST, SUZANNE	2022-01-01	GUARDHIGH	EE	\$47.61
POST, SUZANNE	2022-01-01	VSP	EE	\$8.75
RAGLAND, ANNA	2020-01-01	VSP	EE	\$8.75
VIANDS, AMANDA	2020-06-01	GUARDHIGH	EE	\$47.61

SENIOR HELPERS HARRISBURG PA

3806 Market St. Ste 3

Camp Hill, PA 17011

## CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
VIANDS, AMANDA	2020-06-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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





## Account Services

### Monthly Statement

SENIOR HELPERS HOUSTON CENTRAL  
1919 N Loop W, Suite 443  
HOUSTON, TX 77008

Invoice Number: 4714-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDLOW	Employee & Children	1	\$74.61	\$74.61
GUARDLOW	Family	1	\$100.74	\$100.74
VSP	Employee Only	1	\$8.75	\$8.75
VSP	Employee & Children	1	\$15.02	\$15.02
			GRAND TOTAL	\$246.73

## SENIOR HELPERS HOUSTON CENTRAL

1919 N Loop W, Suite 443

HOUSTON, TX 77008

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
GARCIA, MARIA	2022-04-01	GUARDLOW	EC	\$74.61
GARCIA, MARIA	2022-04-01	VSP	EC2	\$15.02
MOSE, DEIKA	2022-03-01	VSP	EE	\$8.75
SAMPLE, NICKI	2022-02-01	GUARDHIGH	EE	\$47.61
VISBAL-INSIGNARES, EDUARDO	2022-01-01	GUARDLOW	FAM	\$100.74

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

SENIOR HELPERS LEE'S SUMMIT MO  
517 SE 2nd Street  
Lees Summit, MO 64063

Invoice Number: 4297-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDLOW	Employee Only	1	\$29.44	\$29.44
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$38.19

## SENIOR HELPERS LEE'S SUMMIT MO

517 SE 2nd Street

Lees Summit, MO 64063

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BROWN, DENYCEA	2022-05-01	GUARDLOW	EE	\$29.44
BROWN, DENYCEA	2022-05-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

SENIOR HELPERS MCKINNEY TX  
2190 ALCOVE DR  
FRISCO, TX 75034

Invoice Number: 4236-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDLOW	Employee Only	1	\$0.00	\$29.44
VSP	Employee Only	1	\$0.00	\$8.75
			GRAND TOTAL	\$67.63

SENIOR HELPERS MCKINNEY TX  
2190 ALCOVE DR  
FRISCO, TX 75034

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
MONTANO, MARINA	2022-09-01	GUARDLOW	EE	\$29.44
MONTANO, MARINA	2022-09-01	VSP	EE	\$8.75

SENIOR HELPERS MCKINNEY TX  
2190 ALCOVE DR  
FRISCO, TX 75034

## PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
MONTANO, MARINA	2022-09-01	GUARDLOW	EE	\$29.44

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

SH TOWN SQUARE COMPANY STORE  
9708 BELAIR RD  
BALTIMORE, MD 21236

Invoice Number: 4468-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	2	\$16.80**	\$58.80
GUARDHIGH	Family	1	\$160.18	\$160.18
GUARDLOW	Employee Only	3	\$29.44	\$88.32
LIFE	Employee Only	3	\$1.20**	\$28.50
VSP	Employee Only	3	\$8.75	\$26.25
VSP	Family	1	\$23.76	\$23.76
GRAND TOTAL				\$385.81



SH TOWN SQUARE COMPANY STORE  
9708 BELAIR RD  
BALTIMORE, MD 21236

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
DILWORTH, LAURA	2022-03-01	LIFE		\$1.20
DILWORTH, LAURA	2022-03-01	GUARDLOW	EE	\$29.44
DILWORTH, LAURA	2022-03-01	VSP	EE	\$8.75
JORDAN, KEYONNA	2022-01-01	LIFE		\$9.90
JORDAN, KEYONNA	2022-01-01	ADD		\$16.80
JORDAN, KEYONNA	2022-01-01	GUARDLOW	EE	\$29.44
JORDAN, KEYONNA	2022-01-01	VSP	EE	\$8.75
KUHN, SARA	2021-12-01	GUARDHIGH	FAM	\$160.18
KUHN, SARA	2021-05-01	ADD		\$42.00
KUHN, SARA	2021-12-01	VSP	FAM	\$23.76
KUHN, SARA	2021-05-01	LIFE		\$17.40
WOOD, SHABRIA	2022-05-01	GUARDLOW	EE	\$29.44
WOOD, SHABRIA	2022-05-01	VSP	EE	\$8.75

**MEDICAL PLAN COUNTS**

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



## Account Services

### Monthly Statement

SH TOWN SQUARE FRANCHISING  
9708 Belair Rd  
BALTIMORE, MD 21236

Invoice Number: 4359-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	2	\$4.20**	\$8.40
GUARDLOW	Employee Only	1	\$29.44	\$29.44
GUARDLOW	Employee & Children	1	\$74.61	\$74.61
GUARDLOW	Family	1	\$100.74	\$100.74
LIFE	Employee Only	1	\$59.28**	\$59.28
VSP	Employee Only	1	\$8.75	\$8.75
VSP	Employee & Children	1	\$15.02	\$15.02
VSP	Family	1	\$23.76	\$23.76
			GRAND TOTAL	\$320.00

SH TOWN SQUARE FRANCHISING  
 9708 Belair Rd  
 BALTIMORE, MD 21236

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BLACKMAN, BRITTANY	2022-01-01	ADD		\$4.20
BLACKMAN, BRITTANY	2022-01-01	GUARDLOW	EC	\$74.61
BLACKMAN, BRITTANY	2022-01-01	VSP	EC	\$15.02
BOWERS, MARC	2022-01-01	ADD		\$4.20
BOWERS, MARC	2022-01-01	GUARDLOW	EE	\$29.44
BOWERS, MARC	2022-01-01	VSP	EE	\$8.75
BOWERS, MARC	2022-01-01	LIFE		\$59.28
SPILLUM, PETER	2021-11-01	GUARDLOW	FAM	\$100.74
SPILLUM, PETER	2021-11-01	VSP	FAM	\$23.76

**MEDICAL PLAN COUNTS**

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



## Account Services

### Monthly Statement

SKY LLC  
67 TOWER RD  
WHITE PLAINS, NY 10604

Invoice Number: 4313-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1585OPENAXESSGOLD	Employee Only	1	\$653.81	\$653.81
1585OPENAXESSGOLD	Employee & Spouse Only	1	\$1,307.62	\$1,307.62
1585OPENAXESSGOLD	Employee & Children	1	\$1,307.62	\$1,307.62
1585OPENAXESSGOLD	Family	1	\$1,961.43	\$1,961.43
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDHIGH	Employee & Spouse Only	1	\$89.81	\$89.81
GUARDHIGH	Employee & Children	1	\$89.81	\$89.81
GUARDHIGH	Family	1	\$160.18	\$160.18
VSP	Employee Only	1	\$8.75	\$8.75
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
VSP	Employee & Children	1	\$15.02	\$15.02
VSP	Family	1	\$23.76	\$23.76
			GRAND TOTAL	\$5,680.15

SKY LLC  
67 TOWER RD  
WHITE PLAINS, NY 10604

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
DIMITROVA, MARINA	2021-01-01	1585OPENAXESSGOLD	FAM	\$1961.43
DIMITROVA, MARINA	2021-01-01	GUARDHIGH	FAM	\$160.18
DIMITROVA, MARINA	2021-01-01	VSP	FAM	\$23.76
KAHL, MELINDA	2022-07-01	1585OPENAXESSGOLD	EE	\$653.81
KAHL, MELINDA	2022-09-01	GUARDHIGH	EE	\$47.61
KAHL, MELINDA	2022-09-01	VSP	EE	\$8.75
MACKONOCHE, JOANNE	2021-01-01	1585OPENAXESSGOLD	ES	\$1307.62
MACKONOCHE, JOANNE	2021-01-01	GUARDHIGH	ES	\$89.81
MACKONOCHE, JOANNE	2021-01-01	VSP	ES	\$14.73
MENENDEZ, YULISSA	2021-10-13	1585OPENAXESSGOLD	EC	\$1307.62
MENENDEZ, YULISSA	2021-10-13	GUARDHIGH	EC	\$89.81
MENENDEZ, YULISSA	2021-10-13	VSP	EC	\$15.02

**MEDICAL PLAN COUNTS**

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



## Account Services

### Monthly Statement

SOUTHERN MARYLAND ENDOSCOPY CENTER, LLC  
7700 OLD BRANCH AVENUE  
CLINTON, MD 20735

Invoice Number: 4567-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	2	\$47.61	\$95.22
GUARDLOW	Employee Only	2	\$29.44	\$58.88
GUARDLOW	Employee & Children	1	\$74.61	\$74.61
LIFE	Employee Only	1	\$33.00**	\$33.00
VSP	Employee Only	4	\$8.75	\$35.00
VSP	Family	1	\$23.76	\$23.76
GRAND TOTAL				\$320.47

SOUTHERN MARYLAND ENDOSCOPY CENTER, LLC  
 7700 OLD BRANCH AVENUE  
 CLINTON, MD 20735

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CHESLEY, JACQUELINE	2021-01-01	GUARDLOW	EE	\$29.44
CHESLEY, JACQUELINE	2021-01-01	VSP	EE	\$8.75
GUTRICK, DEMETRIA	2018-12-01	VSP	EE	\$8.75
ROBINSON, SHALETA	2022-07-01	GUARDLOW	EE	\$29.44
ROBINSON, SHALETA	2022-01-01	VSP	EE	\$8.75
SMITH, DENISE	2017-12-01	GUARDHIGH	EE	\$47.61
SMITH, DENISE	2018-12-01	VSP	EE	\$8.75
WHITEHEAD, TONYA	2022-01-01	GUARDHIGH	EE	\$47.61
WHITEHEAD, TONYA	2022-01-01	LIFE		\$33.00
WOODHOUSE, SONNA	2017-12-01	GUARDLOW	EC	\$74.61
WOODHOUSE, SONNA	2018-12-01	VSP	FAM	\$23.76

**MEDICAL PLAN COUNTS**

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



## Account Services

### Monthly Statement

STAFFINGMEDICAL USA  
118 WEST 5TH STREET SUITE 202  
COVINGTON, KY 41011

Invoice Number: 4220-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1399OPENAXESSGOLD	Employee Only	7	\$653.81	\$4,576.67
1399OPENAXESSGOLD	Employee & Children	1	\$1,307.62	\$1,307.62
ADD	Employee Only	1	\$1.26**	\$1.26
GUARDHIGH	Employee Only	3	\$47.61	\$142.83
GUARDHIGH	Employee & Children	1	\$117.99	\$117.99
GUARDHIGH	Family	1	\$160.18	\$160.18
GUARDLOW	Employee Only	4	\$29.44	\$117.76
LIFE	Employee Only	1	\$5.73**	\$5.73
VSP	Employee Only	7	\$8.75	\$61.25
VSP	Employee & Children	2	\$15.02	\$30.04
			GRAND TOTAL	\$7,896.58



STAFFINGMEDICAL USA  
118 WEST 5TH STREET SUITE 202  
COVINGTON, KY 41011

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ALBISHARI, OSAMAH	2021-01-01	VSP	EE	\$8.75
ALBISHARI, OSAMAH	2022-07-01	1399OPENAXESSGOLD	EE	\$653.81
ALBISHARI, OSAMAH	2022-08-01	GUARDLOW	EE	\$29.44
BENAVIDES, JANIE	2021-04-01	1399OPENAXESSGOLD	EE	\$653.81
BENAVIDES, JANIE	2021-04-01	GUARDLOW	EE	\$29.44
BENAVIDES, JANIE	2021-04-01	VSP	EE	\$8.75
CAGLE, TARA	2022-01-01	1399OPENAXESSGOLD	EE	\$653.81
CAGLE, TARA	2022-01-01	GUARDHIGH	EE	\$47.61
CAGLE, TARA	2022-01-01	VSP	EE	\$8.75
CATRON, JOSEPH	2021-08-01	1399OPENAXESSGOLD	EC2	\$1307.62
CATRON, JOSEPH	2021-08-01	GUARDHIGH	EC2	\$117.99
CATRON, JOSEPH	2021-08-01	VSP	EC2	\$15.02
DIAZ, GRACE	2022-01-01	1399OPENAXESSGOLD	EE	\$653.81
DIAZ, GRACE	2022-01-01	GUARDHIGH	EE	\$47.61
DIAZ, GRACE	2022-01-01	VSP	EE	\$8.75
NAMAZZI, WINFRED	2022-01-01	GUARDHIGH	FAM	\$160.18
NAMAZZI, WINFRED	2022-01-01	VSP	EC2	\$15.02
PLEMONS, HEATHER	2022-08-01	1399OPENAXESSGOLD	EE	\$653.81
PLEMONS, HEATHER	2022-09-01	GUARDLOW	EE	\$29.44
PLEMONS, HEATHER	2022-09-01	VSP	EE	\$8.75
SCOTT, CATHERINE	2021-01-01	1399OPENAXESSGOLD	EE	\$653.81
SCOTT, CATHERINE	2021-01-01	GUARDHIGH	EE	\$47.61
SCOTT, CATHERINE	2021-01-01	VSP	EE	\$8.75
WILHOIT, RACHEL	2022-03-01	LIFE		\$5.73
WILHOIT, RACHEL	2022-03-01	1399OPENAXESSGOLD	EE	\$653.81
WILHOIT, RACHEL	2022-03-01	ADD		\$1.26
WILHOIT, RACHEL	2022-03-01	GUARDLOW	EE	\$29.44

STAFFINGMEDICAL USA  
118 WEST 5TH STREET SUITE 202  
COVINGTON, KY 41011

## CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
WILHOIT, RACHEL	2022-03-01	VSP	EE	\$8.75

STAFFINGMEDICAL USA  
118 WEST 5TH STREET SUITE 202  
COVINGTON, KY 41011

## PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ALBISHARI, OSAMAH	2022-07-01	1399OPENAXESSGOLD	EE	\$653.81
ALBISHARI, OSAMAH	2022-08-01	GUARDLOW	EE	\$29.44
PLEMONS, HEATHER	2022-08-01	1399OPENAXESSGOLD	EE	\$653.81
PLEMONS, HEATHER	2022-09-01	GUARDLOW	EE	\$29.44
PLEMONS, HEATHER	2022-09-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

Employee Only	7
Employee & Spouse	0
Employee & Children	0
Family	0



## Account Services

### Monthly Statement

STARTEDUP FOUNDATION  
1098 Pebble Brook Dr  
NOBLESVILLE, IN 46062

Invoice Number: 4331-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1608OPENAXESSGOLD	Employee Only	1	\$686.50	\$686.50
			GRAND TOTAL	\$686.50

## STARTEDUP FOUNDATION

1098 Pebble Brook Dr

NOBLESVILLE, IN 46062

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
LINDENSCHMIDT, ALLISON	2021-03-01	1608OPENAXESSGOLD	EE	\$686.50

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

STAT EXPERTS  
4455 Brookfield Corporate Dr  
Chantilly, VA 20151

Invoice Number: 4598-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
0397DENTAL	Employee Only	32	\$36.68	\$1,173.76
0397DENTAL	Employee & Spouse Only	4	\$73.36	\$293.44
0397DENTAL	Employee & Children	3	\$88.03	\$264.09
0397DENTAL	Family	5	\$143.58	\$717.90
0397VIS	Employee Only	28	\$12.94	\$362.32
0397VIS	Employee & Spouse Only	2	\$30.19	\$60.38
0397VIS	Employee & Children	3	\$24.44	\$73.32
0397VIS	Family	3	\$35.94	\$107.82
ADD	Employee Only	15	\$3.36**	\$124.32
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
LIFE	Employee Only	17	\$9.70**	\$437.63
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$3,671.34

**STAT EXPERTS**

4455 Brookfield Corporate Dr  
Chantilly, VA 20151

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ABSALON, ALLEN	2021-12-01	0397VIS	FAM	\$35.94
ABSALON, ALLEN	2021-12-01	0397DENTAL	FAM	\$143.58
ALLEN, CLEOTIS	2021-12-01	0397VIS	EE	\$12.94
ALLEN, CLEOTIS	2021-12-01	0397DENTAL	EE	\$36.68
ALLEN, CLEOTIS	2021-12-01	LIFE		\$14.40
ANDREWS, CARLOS	2021-12-01	0397VIS	EE	\$12.94
ANDREWS, CARLOS	2021-12-01	0397DENTAL	EE	\$36.68
BATES, STEPHEN	2021-12-01	0397DENTAL	EE	\$36.68
BATES, STEPHEN	2021-12-01	0397VIS	EE	\$12.94
BROWN, ANTHEA	2021-12-01	ADD		\$2.10
BROWN, ANTHEA	2022-09-01	LIFE		\$4.50
CAPPENDYCK, STEVEN	2021-12-01	0397DENTAL	FAM	\$143.58
CAPPENDYCK, STEVEN	2021-12-01	0397VIS	FAM	\$35.94
CAPPENDYCK, STEVEN	2021-12-01	ADD		\$6.72
CAPPENDYCK, STEVEN	2021-12-01	LIFE		\$11.58
CEDENO, PAULO	2021-12-01	0397VIS	EE	\$12.94
CEDENO, PAULO	2021-12-01	ADD		\$2.10
CEDENO, PAULO	2021-12-01	LIFE		\$16.70
CEDENO, PAULO	2021-12-01	0397DENTAL	EE	\$36.68
CHAHARBAGHI, HAMED	2021-12-01	0397VIS	ES	\$30.19
CHAHARBAGHI, HAMED	2021-12-01	0397DENTAL	ES	\$73.36
CHAHARBAGHI, MAJID	2021-12-01	0397VIS	EE	\$12.94
CHAHARBAGHI, MAJID	2021-12-01	0397DENTAL	FAM	\$143.58
CHONG, SONG	2022-03-01	ADD		\$21.00
CHONG, SONG	2022-03-01	LIFE		\$59.28
COX, TERESA	2021-12-01	LIFE		\$59.28

STAT EXPERTS  
4455 Brookfield Corporate Dr  
Chantilly, VA 20151

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
DAVIS, DARIUS	2021-12-01	0397VIS	EC	\$24.44
DAVIS, DARIUS	2021-12-01	0397DENTAL	EC	\$88.03
DAVIS, KHADIJA	2021-12-01	0397VIS	EC	\$24.44
DAVIS, KHADIJA	2021-12-01	0397DENTAL	EC	\$88.03
FRANCHINI, AARON	2021-12-01	0397VIS	EE	\$12.94
FRANCHINI, AARON	2021-12-01	0397DENTAL	EE	\$36.68
FRENZEL, DAVID	2021-12-01	0397VIS	EE	\$12.94
FRENZEL, DAVID	2021-12-01	0397DENTAL	EE	\$36.68
FRENZEL-FAZ, BETH	2021-12-01	0397DENTAL	FAM	\$143.58
GOLDSTEIN, SHANNON	2021-12-01	0397VIS	EE	\$12.94
GOLDSTEIN, SHANNON	2021-12-01	0397DENTAL	EE	\$36.68
HAMILTON, JR, BRUCE	2021-12-01	0397VIS	FAM	\$35.94
HAMILTON, JR, BRUCE	2021-12-01	0397DENTAL	FAM	\$143.58
HAMILTON, JR, BRUCE	2021-12-01	LIFE		\$59.28
HARRIS III, WILLIAM	2022-01-31	0397VIS	EE	\$12.94
HASKINS, CHRISTINA	2021-12-01	0397VIS	EC	\$24.44
HASKINS, CHRISTINA	2021-12-01	0397DENTAL	EC	\$88.03
HOLT, WILLIAM	2021-12-01	0397VIS	EE	\$12.94
HOLT, WILLIAM	2021-12-01	0397DENTAL	EE	\$36.68
HUSSAINI, TAMEEM	2021-12-01	0397DENTAL	ES	\$73.36
JACKSON, JOSEPH	2021-12-01	0397VIS	EE	\$12.94
JACKSON, JOSEPH	2021-12-01	0397DENTAL	EE	\$36.68



STAT EXPERTS  
4455 Brookfield Corporate Dr  
Chantilly, VA 20151

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
JEFFERSON, ERICK	2021-12-01	0397VIS	EE	\$12.94
JEFFERSON, ERICK	2021-12-01	0397DENTAL	EE	\$36.68
JENNINGS, CHESTER	2022-04-01	0397DENTAL	EE	\$36.68
JENNINGS, CHESTER	2022-04-01	0397VIS	EE	\$12.94
JENNINGS, CHESTER	2022-04-01	ADD		\$7.14
JENNINGS, CHESTER	2022-04-01	LIFE		\$21.01
JONES, CHARLIE	2021-12-01	ADD		\$4.62
KLEIN, BROY	2021-12-01	0397DENTAL	EE	\$36.68
KLEIN, BROY	2021-12-01	ADD		\$3.36
KLEIN, BROY	2021-12-01	LIFE		\$7.20
LAUER, KURT	2021-12-01	0397VIS	EE	\$12.94
LURKS, LATOYA	2021-12-01	0397VIS	EE	\$12.94
LURKS, LATOYA	2021-12-01	0397DENTAL	EE	\$36.68
MATEO, EZEQUIAS	2022-08-01	ADD		\$21.00
MATEO, EZEQUIAS	2022-08-01	LIFE		\$7.20
MAZUR, MARTHA	2022-01-01	0397DENTAL	EE	\$36.68
MCCABE, KELLY	2021-12-01	0397VIS	EE	\$12.94
MCCABE, KELLY	2021-12-01	0397DENTAL	EE	\$36.68
MCCABE, SEAN	2021-12-01	0397DENTAL	EE	\$36.68
MCKOY, VICTOR	2021-12-01	0397VIS	EE	\$12.94
MCKOY, VICTOR	2021-12-01	0397DENTAL	EE	\$36.68
MCTEER, SEAN	2021-12-01	0397VIS	EE	\$12.94

**STAT EXPERTS**

4455 Brookfield Corporate Dr

Chantilly, VA 20151

**CURRENT MONTH ENROLLMENT (CONTINUED)**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
MCTEER, SEAN	2021-12-01	0397DENTAL	EE	\$36.68
MCTEER, SEAN	2021-12-01	ADD		\$2.10
MOOD, AIMEE	2021-12-01	0397VIS	ES	\$30.19
MOOD, AIMEE	2021-12-01	0397DENTAL	ES	\$73.36
MOOD, AIMEE	2021-12-01	LIFE		\$41.25
MYERS, SANDRA	2021-12-01	0397VIS	EE	\$12.94
MYERS, SANDRA	2021-12-01	0397DENTAL	EE	\$36.68
MYERS, SANDRA	2021-12-01	ADD		\$4.20
MYERS, SANDRA	2021-12-01	LIFE		\$35.75
NABER, TALIB	2021-12-01	0397VIS	EE	\$12.94
NABER, TALIB	2021-12-01	0397DENTAL	EE	\$36.68
NABER, TALIB	2021-12-01	ADD		\$1.26
PAGE, JAMES	2021-12-01	ADD	EE	\$42.42
PAGE, JAMES	2021-12-01	LIFE	EE	\$29.40
RIVERS, ALEXXUS	2021-12-01	0397VIS	EE	\$12.94
RIVERS, ALEXXUS	2021-12-01	0397DENTAL	EE	\$36.68
ROBINSON, CATHY	2021-12-01	0397VIS	EE	\$12.94
ROBINSON, CATHY	2021-12-01	0397DENTAL	EE	\$36.68
ROBINSON, GEORGENA	2022-08-01	0397VIS	EE	\$12.94
ROBINSON, GEORGENA	2022-08-01	0397DENTAL	EE	\$36.68
ROBINSON, GEORGENA	2022-08-01	LIFE		\$7.20
RODRIGUEZ, JANET	2021-12-01	ADD		\$2.10
RODRIGUEZ, JANET	2022-06-01	LIFE		\$4.50
SAMAD, SARA	2022-07-01	0397DENTAL	ES	\$73.36
SHAH, VIPUL	2021-12-01	0397VIS	EE	\$12.94

**STAT EXPERTS**

4455 Brookfield Corporate Dr

Chantilly, VA 20151

**CURRENT MONTH ENROLLMENT (CONTINUED)**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
SHAH, VIPUL	2021-12-01	LIFE		\$49.40
SHAH, VIPUL	2021-12-01	0397DENTAL	EE	\$36.68
SILVERA, CHARESSE	2021-12-01	0397DENTAL	EE	\$36.68
SPANN, BRANDON	2021-12-01	0397DENTAL	EE	\$36.68
SPANN, BRANDON	2021-12-01	ADD		\$0.84
THOMAS, MALCOLM	2022-03-01	0397VIS	EE	\$12.94
THOMAS, MALCOLM	2022-03-01	0397DENTAL	EE	\$36.68
THORNTON, THOMAS	2021-12-01	0397DENTAL	EE	\$36.68
TODD, ALEXIS	2021-12-01	0397DENTAL	EE	\$36.68
TODD, ALEXIS	2021-12-01	0397VIS	EE	\$12.94
TURNER, TIMOTHY	2021-12-01	0397DENTAL	EE	\$36.68
TURNER, TIMOTHY	2021-12-01	0397VIS	EE	\$12.94
WILLIAMS, SHARONDA	2022-08-01	0397DENTAL	EE	\$36.68
WILLIAMS, SHARONDA	2022-08-01	ADD		\$3.36
WILLIAMS, SHARONDA	2022-08-01	LIFE		\$9.70
WINSTON, JORDAN	2021-12-01	0397VIS	EE	\$12.94
WINSTON, JORDAN	2021-12-01	0397DENTAL	EE	\$36.68
YOUNGSIN, ALBERT	2021-02-01	GUARDHIGH	EE	\$47.61
YOUNGSIN, ALBERT	2021-02-01	VSP	EE	\$8.75

**MEDICAL PLAN COUNTS**

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



## Account Services

### Monthly Statement

STAYBRIDGE SUITES RACINE

Invoice Number: 5540-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDHIGH	Employee & Spouse Only	1	\$89.81	\$89.81
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$146.17

STAYBRIDGE SUITES RACINE

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BROWN, DANILLIE	2022-04-01	GUARDHIGH	EE	\$47.61
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



## Account Services

### Monthly Statement

STELLAR TRANSPORT  
4720 Salisbury Rd Ste 215  
JACKSONVILLE, FL 32256

Invoice Number: 4274-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$0.42**	\$0.42
GUARDHIGH	Employee Only	3	\$47.61	\$142.83
LIFE	Employee Only	1	\$4.00**	\$4.00
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$156.00

STELLAR TRANSPORT  
4720 Salisbury Rd Ste 215  
JACKSONVILLE, FL 32256

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
DEJESUS, TOMAS	2022-07-01	GUARDHIGH	EE	\$47.61
DEJESUS, TOMAS	2022-07-01	VSP	EE	\$8.75
TAYLOR, TANYELLE	2022-03-01	GUARDHIGH	EE	\$47.61
WILLIAMS JR, ELIJAH	2022-02-01	ADD		\$0.42
WILLIAMS JR, ELIJAH	2022-02-01	GUARDHIGH	EE	\$47.61
WILLIAMS JR, ELIJAH	2022-02-01	LIFE		\$4.00

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

SUBURBAN EXTENDED STAY HOTEL QUANTICO STAFFORD

Invoice Number: 6066-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$4.20**	\$4.20
LIFE	Employee Only	1	\$14.30**	\$14.30
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$54.50



SUBURBAN EXTENDED STAY HOTEL QUANTICO STAFFORD

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
JACKSON, ANNA	2022-08-01	ADD		\$4.20
JACKSON, ANNA	2022-08-01	LIFE		\$14.30
JACKSON, ANNA	2022-08-01	VSP	EE	\$8.75

SUBURBAN EXTENDED STAY HOTEL QUANTICO STAFFORD

,

## PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
JACKSON, ANNA	2022-08-01	ADD		\$4.20
JACKSON, ANNA	2022-08-01	LIFE		\$14.30
JACKSON, ANNA	2022-08-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

SUBURBAN EXTENDED STAY TRIADELPHIA  
40 ROBINSON DRIVE  
TRIADELPHIA, WV 26059

Invoice Number: 4156-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$2.10**	\$2.10
LIFE	Employee Only	1	\$10.80**	\$10.80
			GRAND TOTAL	\$12.90

SUBURBAN EXTENDED STAY TRIADELPHIA  
40 ROBINSON DRIVE  
TRIADELPHIA, WV 26059

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
NAILL, JOSEPH	2022-01-01	ADD		\$2.10
NAILL, JOSEPH	2022-01-01	LIFE		\$10.80

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

SUPERCUTS MIAMI  
3193 MARY STREET  
MIAMI, FL 33133

Invoice Number: 4099-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$1.26**	\$1.26
GUARDHIGH	Employee Only	2	\$47.61	\$95.22
GUARDLOW	Employee Only	3	\$29.44	\$88.32
LIFE	Employee Only	1	\$21.45**	\$21.45
VSP	Employee Only	4	\$8.75	\$35.00
			GRAND TOTAL	\$241.25

SUPERCUTS MIAMI  
3193 MARY STREET  
MIAMI, FL 33133

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CLAY, ARLENE	2022-01-01	VSP	EE	\$8.75
MODESTI, JOHANNA	2022-01-01	LIFE		\$21.45
MODESTI, JOHANNA	2022-01-01	ADD		\$1.26
NIEBLA, VERONICA	06/01/2019	GUARDHIGH	EE	\$47.61
RODRIGUEZ VIAMONTES, ROSA	05/01/2019	GUARDLOW	EE	\$29.44
RODRIGUEZ VIAMONTES, ROSA	05/01/2019	VSP	EE	\$8.75
ROJAS, ELISA	2019-05-01	GUARDLOW	EE	\$29.44
TARGAN, CHRISTINE	2019-05-01	VSP	EE	\$8.75
TARGAN, CHRISTINE	2019-05-01	GUARDLOW	EE	\$29.44
UCANAN, FELICITA	2019-05-01	VSP	EE	\$8.75
UCANAN, FELICITA	2019-05-01	GUARDHIGH	EE	\$47.61

**MEDICAL PLAN COUNTS**

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



## Account Services

### Monthly Statement

SUPERCUTS MURRO OF BRANCHBURG

Invoice Number: 5504-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDLOW	Employee Only	1	\$29.44	\$29.44
LIFE	Employee Only	1	\$0.60**	\$9.00
GRAND TOTAL				\$38.44

SUPERCUTS MURRO OF BRANCHBURG

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
INTERLANDI, JENNIFER	2019-01-01	GUARDLOW	EE	\$29.44
INTERLANDI, JENNIFER	2022-07-01	LIFE		\$9.00

## MEDICAL PLAN COUNTS

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





## Account Services

### Monthly Statement

SUPERCUTS MURRO OF FLEMINGTON  
32 ROUTE 31 SUITE 400  
FLEMINGTON, NJ 08822

Invoice Number: 4143-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1159OPENAXESSPREMI	Employee Only	2	\$498.36	\$996.72
ADD	Employee Only	1	\$0.42**	\$0.42
LIFE	Employee Only	1	\$85.80**	\$85.80
VSP	Employee Only	2	\$8.75	\$17.50
			GRAND TOTAL	\$1,100.44

SUPERCUTS MURRO OF FLEMINGTON  
32 ROUTE 31 SUITE 400  
FLEMINGTON, NJ 08822

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
GRAY, KELLY	2020-01-01	1159OPENAXESSPREMI	EE	\$498.36
GRAY, KELLY	2020-01-01	ADD		\$0.42
GRAY, KELLY	2019-01-01	VSP	EE	\$8.75
GRAY, KELLY	2021-12-01	LIFE		\$85.80
SCARANO, SARAH	2019-01-01	VSP	EE	\$8.75
SCARANO, SARAH	2020-01-01	1159OPENAXESSPREMI	EE	\$498.36

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

SUPERCUTS PHOENIX  
8205 S Priest Dr #12586  
TEMPE, AZ 85284

Invoice Number: 4080-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	3	\$6.30**	\$27.80
GUARDHIGH	Employee Only	5	\$47.61	\$238.05
GUARDHIGH	Employee & Children	1	\$0.00	\$117.99
GUARDLOW	Employee Only	1	\$29.44	\$29.44
GUARDLOW	Employee & Spouse Only	1	\$0.00	\$55.54
LIFE	Employee Only	2	\$180.36**	\$184.00
VSP	Employee Only	6	\$8.75	\$52.50
VSP	Employee & Spouse Only	1	\$0.00	\$14.73
VSP	Employee & Children	1	\$15.02	\$15.02
			GRAND TOTAL	\$735.07

**SUPERCUTS PHOENIX**

8205 S Priest Dr #12586

TEMPE, AZ 85284

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ABLES, HILLARY	2022-08-01	GUARDLOW	ES	\$55.54
ABLES, HILLARY	2022-08-01	VSP	ES	\$14.73
ALLRED, LAURA	2022-08-01	ADD		\$0.50
ALLRED, LAURA	2022-08-01	LIFE		\$3.64
ALLRED, LAURA	2022-08-01	GUARDHIGH	EE	\$47.61
BROWN, STACIE	2022-01-01	GUARDLOW	EE	\$29.44
BROWN, STACIE	2022-01-01	VSP	EE	\$8.75
CASTRO, EDWARD	2022-07-01	ADD		\$6.30
CASTRO, EDWARD	2022-07-01	GUARDHIGH	EE	\$47.61
CASTRO, EDWARD	2022-07-01	VSP	EE	\$8.75
CUELLAR-PARAMO, ROCIO	2022-07-01	VSP	EE	\$8.75
KULAGA, COLLEEN	2022-08-01	GUARDHIGH	EE	\$47.61
KULAGA, COLLEEN	2022-08-01	VSP	EE	\$8.75
MARTINEZ TEUSCHER, MARIA	2022-01-01	GUARDHIGH	EE	\$47.61
MARTINEZ TEUSCHER, MARIA	2022-01-01	VSP	EE	\$8.75
RAMLJAK, IVANA	2022-06-01	GUARDHIGH	EC2	\$117.99
RAMLJAK, IVANA	2022-06-01	VSP	EC2	\$15.02
TEUSCHER KRUGER, TERESA	2022-01-01	VSP	EE	\$8.75
TEUSCHER KRUGER, TERESA	2022-01-01	ADD		\$21.00
TEUSCHER KRUGER, TERESA	2022-01-01	GUARDHIGH	EE	\$47.61
TEUSCHER KRUGER, TERESA	2022-01-01	LIFE		\$180.36

**MEDICAL PLAN COUNTS**

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



## Account Services

### Monthly Statement

SURE STAY HOTEL BY BEST WESTERN GREENVILLE IL

Invoice Number: 5705-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$2.10**	\$2.10
LIFE	Employee Only	1	\$7.20**	\$7.20
GRAND TOTAL				\$18.60

SURE STAY HOTEL BY BEST WESTERN GREENVILLE IL

,

CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
INTRAVAIA, ALLESSANDRA	2022-09-01	ADD		\$2.10
INTRAVAIA, ALLESSANDRA	2022-09-01	LIFE		\$7.20

SURE STAY HOTEL BY BEST WESTERN GREENVILLE IL

,

## PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
INTRAVAIA, ALLESSANDRA	2022-09-01	ADD		\$2.10
INTRAVAIA, ALLESSANDRA	2022-09-01	LIFE		\$7.20

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

SURESTAY PLUS BY BEST WESTERN MORGANTOWN  
15 Lawless Rd  
MORGANTOWN, WV 26501

Invoice Number: 4262-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$0.00**	\$2.73
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
LIFE	Employee Only	1	\$0.00**	\$5.70
VSP	Employee Only	1	\$8.75	\$8.75
VSP	Employee & Spouse Only	1	\$0.00	\$14.73
			GRAND TOTAL	\$79.52



## SURESTAY PLUS BY BEST WESTERN MORGANTOWN

15 Lawless Rd

MORGANTOWN, WV 26501

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ISNER, BRIANNA	2022-08-01	ADD		\$2.73
ISNER, BRIANNA	2022-08-01	LIFE		\$5.70
ISNER, BRIANNA	2022-08-01	VSP	ES	\$14.73
RUSSELL, MARK	2022-01-01	GUARDHIGH	EE	\$47.61
RUSSELL, MARK	2022-01-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

SWA GROUP  
2200 BRIDGEWAY  
SAUSALITO, CA 94965

Invoice Number: 4556-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1902OPENAXESSPLATI	Employee Only	2	\$784.57	\$1,569.14
1902OPENAXESSPLATI	Employee & Spouse Only	1	\$0.00	\$1,569.14
ADD	Employee Only	1	\$2.10**	\$2.10
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDLOW	Employee & Spouse Only	1	\$55.54	\$55.54
LIFE	Employee Only	1	\$4.00**	\$4.00
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$3,256.28

SWA GROUP  
2200 BRIDGEWAY  
SAUSALITO, CA 94965

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
DOMLESKY, ANYA	2022-02-01	1902OPENAXESSPLATI	EE	\$784.57
LINDLEY, CARSON	2022-02-01	1902OPENAXESSPLATI	EE	\$784.57
LINDLEY, CARSON	2022-02-01	ADD		\$2.10
LINDLEY, CARSON	2022-02-01	GUARDHIGH	EE	\$47.61
LINDLEY, CARSON	2022-02-01	LIFE		\$4.00
WALDO, BENJAMIN	2022-07-01	GUARDLOW	ES	\$55.54
WALDO, BENJAMIN	2022-07-01	1902OPENAXESSPLATI	ES	\$1569.14
WALDO, BENJAMIN	2022-07-01	VSP	EE	\$8.75

**MEDICAL PLAN COUNTS**

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



## Account Services

### Monthly Statement

TALEM HOME CARE  
80 GARDEN CTR  
BROOMFIELD, CO 80020

Invoice Number: 4230-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$21.00**	\$21.00
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDLOW	Employee Only	1	\$29.44	\$29.44
GUARDLOW	Family	1	\$100.74	\$100.74
OPENAXESSBRONZE	Family	1	\$1,332.08	\$1,332.08
OPENAXESSGOLD	Employee Only	2	\$588.38	\$1,176.76
VSP	Employee Only	2	\$8.75	\$17.50
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
			GRAND TOTAL	\$2,739.86

TALEM HOME CARE  
80 GARDEN CTR  
BROOMFIELD, CO 80020

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CRUTCHER, RANDALL	2022-01-01	OPENAXESSBRONZE	FAM	\$1332.08
CRUTCHER, RANDALL	2022-01-01	ADD		\$21.00
CRUTCHER, RANDALL	2022-01-01	GUARDLOW	FAM	\$100.74
CRUTCHER, RANDALL	2022-01-01	VSP	ES	\$14.73
PIERCE, LAURA	2022-01-01	OPENAXESSGOLD	EE	\$588.38
PIERCE, LAURA	2022-01-01	GUARDLOW	EE	\$29.44
PIERCE, LAURA	2022-01-01	VSP	EE	\$8.75
PIERCE, MICHAEL	2022-01-01	OPENAXESSGOLD	EE	\$588.38
PIERCE, MICHAEL	2022-01-01	GUARDHIGH	EE	\$47.61
PIERCE, MICHAEL	2022-01-01	VSP	EE	\$8.75

**MEDICAL PLAN COUNTS**

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



## Account Services

### Monthly Statement

TALEM HOME CARE - BROOMFIELD  
80 GARDEN CTR SUITE A6  
BROOMFIELD, CO 80020

Invoice Number: 4231-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
OPENAXESSCOPPER	Employee Only	1	\$399.75	\$399.75
OPENAXESSGOLD	Employee Only	1	\$588.38	\$588.38
OPENAXESSSILVER	Employee Only	1	\$493.36	\$493.36
VSP	Employee Only	2	\$8.75	\$17.50
			GRAND TOTAL	\$1,546.60

TALEM HOME CARE - BROOMFIELD  
80 GARDEN CTR SUITE A6  
BROOMFIELD, CO 80020

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
PHILLIPS, SAMANTHA	2022-01-01	OPENAXESSGOLD	EE	\$588.38
PHILLIPS, SAMANTHA	2022-01-01	GUARDHIGH	EE	\$47.61
PHILLIPS, SAMANTHA	2022-01-01	VSP	EE	\$8.75
SHAW-PATTON, BECKIE	2020-05-01	OPENAXESSCOPPER	EE	\$399.75
VALDEZ, ROBERT	2020-05-01	OPENAXESSSILVER	EE	\$493.36
VALDEZ, ROBERT	2020-04-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

Employee Only	3
Employee & Spouse	0
Employee & Children	0
Family	0



## Account Services

### Monthly Statement

TALEM HOME CARE - COLORADO SPRINGS  
3230 E WOODMEN RD SUITE 110 G  
COLORADO SPRINGS, CO 80920

Invoice Number: 4258-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
OPENAXESSGOLD	Employee Only	1	\$588.38	\$588.38
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$644.74



TALEM HOME CARE - COLORADO SPRINGS  
3230 E WOODMEN RD SUITE 110 G  
COLORADO SPRINGS, CO 80920

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
WEST, SHAILENE	2021-07-01	OPENAXESSGOLD	EE	\$588.38
WEST, SHAILENE	2021-01-01	GUARDHIGH	EE	\$47.61
WEST, SHAILENE	2021-01-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

TALEM HOME CARE - DENVER  
3600 S BEELER ST. SUITE 320  
DENVER, CO 80237

Invoice Number: 4239-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDLOW	Employee Only	1	\$29.44	\$29.44
OPENAXESSBRONZE	Employee Only	1	\$438.62	\$438.62
OPENAXESSCOPPER	Employee Only	1	\$399.75	\$399.75
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$924.17

TALEM HOME CARE - DENVER  
3600 S BEELER ST. SUITE 320  
DENVER, CO 80237

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
COLANGELO, MARIAH	2022-01-01	OPENAXESSBRONZE	EE	\$438.62
COLANGELO, MARIAH	2022-01-01	GUARDLOW	EE	\$29.44
COLANGELO, MARIAH	2022-01-01	VSP	EE	\$8.75
ROGERS, MATTHEW	2022-01-01	OPENAXESSCOPPER	EE	\$399.75
ROGERS, MATTHEW	2022-01-01	GUARDHIGH	EE	\$47.61

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

TALEM HOME CARE - FORT COLLINS  
2601 S LEMAY AVE SUITE 33  
FORT COLLINS, CO 80525

Invoice Number: 4273-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Family	1	\$160.18	\$160.18
GUARDLOW	Employee Only	2	\$29.44	\$58.88
OPENAXESSBRONZE	Family	1	\$1,332.08	\$1,332.08
OPENAXESSCOPPER	Employee Only	1	\$399.75	\$399.75
OPENAXESSGOLD	Employee Only	1	\$588.38	\$588.38
VSP	Employee Only	2	\$8.75	\$17.50
VSP	Family	1	\$23.76	\$23.76
			GRAND TOTAL	\$2,580.53

TALEM HOME CARE - FORT COLLINS  
 2601 S LEMAY AVE SUITE 33  
 FORT COLLINS, CO 80525

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
KOWALSKI, MARCY	2021-11-01	OPENAXESSBRONZE	FAM	\$1332.08
KOWALSKI, MARCY	2021-11-01	GUARDHIGH	FAM	\$160.18
KOWALSKI, MARCY	2021-11-01	VSP	FAM	\$23.76
METZ, MIKAYLA	2022-04-01	OPENAXESSGOLD	EE	\$588.38
METZ, MIKAYLA	2022-04-01	GUARDLOW	EE	\$29.44
METZ, MIKAYLA	2022-04-01	VSP	EE	\$8.75
RUTH, SAMANTHA	2022-01-01	VSP	EE	\$8.75
RUTH, SAMANTHA	2022-06-01	OPENAXESSCOPPER	EE	\$399.75
RUTH, SAMANTHA	2022-01-01	GUARDLOW	EE	\$29.44

**MEDICAL PLAN COUNTS**

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



## Account Services

### Monthly Statement

TALEM HOME CARE - MILWAUKEE  
10335 W. Oklahoma Ave  
MILWAUKEE, WI 53227

Invoice Number: 4232-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
LIFE	Employee Only	1	\$1.28**	\$9.55
VSP	Employee Only	2	\$8.75	\$17.50
			GRAND TOTAL	\$74.66

TALEM HOME CARE - MILWAUKEE  
10335 W. Oklahoma Ave  
MILWAUKEE, WI 53227

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
DAUDEN, KIMBERLY	2022-10-01	VSP	EE	\$8.75
WEATHERS, LYNETTE	2022-05-01	LIFE		\$9.55
WEATHERS, LYNETTE	2022-05-01	GUARDHIGH	EE	\$47.61
WEATHERS, LYNETTE	2022-05-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

TALEM HOME CARE - NASHVILLE

Invoice Number: 5790-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$5.88**	\$5.88
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDLOW	Employee Only	1	\$29.44	\$29.44
LIFE	Employee Only	1	\$3.20**	\$3.20
VSP	Employee Only	2	\$8.75	\$17.50
			GRAND TOTAL	\$159.99



TALEM HOME CARE - NASHVILLE

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CHAMBERS, ANGELICA	2022-07-01	LIFE		\$3.20
CHAMBERS, ANGELICA	2022-07-01	GUARDLOW	EE	\$29.44
CHAMBERS, ANGELICA	2022-07-01	VSP	EE	\$8.75
CONNER, STELLA	2022-05-01	ADD		\$5.88
MARTIN, TIFFANY	2022-09-01	GUARDHIGH	EE	\$47.61
MARTIN, TIFFANY	2022-09-01	VSP	EE	\$8.75

TALEM HOME CARE - NASHVILLE

,

## PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
MARTIN, TIFFANY	2022-09-01	GUARDHIGH	EE	\$47.61
MARTIN, TIFFANY	2022-09-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

TALENT PRO  
6707 DEMOCRACY BLVD. STE. 905  
BETHESDA, MD 20817

Invoice Number: 4694-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$0.84**	\$0.84
GUARDHIGH	Employee Only	4	\$47.61	\$190.44
GUARDLOW	Employee Only	4	\$29.44	\$117.76
LIFE	Employee Only	1	\$6.00**	\$6.00
VSP	Employee Only	6	\$8.75	\$52.50
			GRAND TOTAL	\$367.54

TALENT PRO  
6707 DEMOCRACY BLVD. STE. 905  
BETHESDA, MD 20817

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BELTRAN, HENRY	2021-01-01	GUARDHIGH	EE	\$47.61
BELTRAN, HENRY	2021-01-01	VSP	EE	\$8.75
BIRHANU, BETELEHEM	2021-01-01	GUARDLOW	EE	\$29.44
BIRHANU, BETELEHEM	2021-01-01	VSP	EE	\$8.75
FAKIR, MOHAMMAD	2022-03-01	GUARDHIGH	EE	\$47.61
FAKIR, MOHAMMAD	2022-03-01	VSP	EE	\$8.75
FARHAN, FARDIN	2021-09-01	GUARDLOW	EE	\$29.44
FOX, JOSEPH	2022-01-01	ADD		\$0.84
FOX, JOSEPH	2022-01-01	GUARDLOW	EE	\$29.44
FOX, JOSEPH	2022-01-01	LIFE		\$6.00
LEATHERLAND, BRANDON	2021-01-01	GUARDLOW	EE	\$29.44
MUSAH, IBRAHIM	2022-01-01	VSP	EE	\$8.75
THOMAS, DANIELLE	2018-02-01	GUARDHIGH	EE	\$47.61
THOMAS, DANIELLE	2018-12-01	VSP	EE	\$8.75
VALLEJO, DAVID	2022-01-01	GUARDHIGH	EE	\$47.61
VALLEJO, DAVID	2022-01-01	VSP	EE	\$8.75

**MEDICAL PLAN COUNTS**

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



## Account Services

### Monthly Statement

TALENTUITION  
8340 NORTHFIELD BLVD  
DENVER, CO 80238

Invoice Number: 4081-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
0993OPENAXESSBRONZ	Employee Only	1	\$487.36	\$487.36
GUARDLOW	Employee Only	1	\$29.44	\$29.44
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$525.55

TALENTUITION  
8340 NORTHFIELD BLVD  
DENVER, CO 80238

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
GAFFNEY, GRETCHEN	2021-11-01	VSP	EE	\$8.75
GAFFNEY, GRETCHEN	2021-01-01	0993OPENAXESSBRONZ	EE	\$487.36
GAFFNEY, GRETCHEN	2020-01-01	GUARDLOW	EE	\$29.44

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

TECH CHAIN SOFTWARE

Invoice Number: 5549-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1920OPENAXESSGOLD	Employee Only	1	\$719.19	\$719.19
1920OPENAXESSPLATI	Family	2	\$2,589.09	\$5,178.18
1920OPENAXESSILVE	Employee Only	1	\$603.00	\$603.00
ADD	Employee Only	5	\$4.20**	\$88.62
GUARDHIGH	Family	2	\$160.18	\$320.36
GUARDLOW	Employee Only	1	\$29.44	\$29.44
GUARDLOW	Family	1	\$100.74	\$100.74
LIFE	Employee Only	5	\$14.40**	\$68.95
VSP	Employee Only	1	\$8.75	\$8.75
VSP	Family	2	\$23.76	\$47.52
			GRAND TOTAL	\$7,164.75

**TECH CHAIN SOFTWARE**

,

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CLARK, COURTNEY	2022-06-01	ADD		\$13.02
CLARK, COURTNEY	2022-06-01	GUARDHIGH	FAM	\$160.18
CLARK, COURTNEY	2022-06-01	VSP	FAM	\$23.76
CLARK, COURTNEY	2022-07-01	LIFE		\$19.10
CUMMINGS, WILLIAM	2022-06-01	ADD		\$4.20
CUMMINGS, WILLIAM	2022-06-01	LIFE		\$14.40
GHANCHI, NIDA	2022-02-01	ADD		\$42.00
GHANCHI, NIDA	2022-02-01	GUARDHIGH	FAM	\$160.18
GHANCHI, NIDA	2022-02-01	VSP	FAM	\$23.76
GHANCHI, NIDA	2022-02-01	LIFE		\$13.05
GHANCHI, NIDA	2022-06-01	1920OPENAXESSPLATI	FAM	\$2589.09
LE, MINDY	2022-03-01	GUARDLOW	EE	\$29.44
LE, MINDY	2022-03-01	VSP	EE	\$8.75
LE, MINDY	2022-06-01	1920OPENAXESSILVE	EE	\$603.00
MALIK, SHAHZAD	2022-03-01	LIFE		\$10.80
MALIK, SHAHZAD	2022-03-01	ADD		\$21.00
MALIK, SHAHZAD	2022-03-01	GUARDLOW	FAM	\$100.74
MALIK, SHAHZAD	2022-03-01	1920OPENAXESSPLATI	FAM	\$2589.09
MARTINEZ, ADRIANA	2022-06-01	1920OPENAXESSGOLD	EE	\$719.19
RAMIREZ, MERY	2022-03-01	ADD		\$8.40
RAMIREZ, MERY	2022-03-01	LIFE		\$11.60

**MEDICAL PLAN COUNTS**

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





## Account Services

### Monthly Statement

TEMUJIN 10 CT, LLC DBA SUPERCUTS  
800 Westchester Avenue  
Rye Brook, NY-NEW YORK 10573

Invoice Number: 4721-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
0893OPENAXESSGOLD	Employee Only	1	\$719.19	\$719.19
0893OPENAXESSGOLD	Employee & Spouse Only	1	\$1,438.38	\$1,438.38
VSP	Employee Only	1	\$9.05	\$9.05
			GRAND TOTAL	\$2,166.62

TEMUJIN 10 CT, LLC DBA SUPERCUTS  
800 Westchester Avenue  
Rye Brook, NY-NEW YORK 10573

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
DAVIDSON, CRYSTAL	2021-09-01	0893OPENAXESSGOLD	ES	\$1438.38
PEREZ, DAVINA	2018-10-01	VSP	EE	\$9.05
REARDON, JESSICA	2021-09-01	0893OPENAXESSGOLD	EE	\$719.19

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

TEMUJIN 11 CT, LLC DBA SUPERCUTS  
800 Westchester Avenue  
Rye Brook, NY 10573

Invoice Number: 4722-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
0893OPENAXESSCOPPE	Employee Only	2	\$495.83	\$991.66
GUARDHIGH	Employee Only	2	\$47.61	\$95.22
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$1,095.63

TEMUJIN 11 CT, LLC DBA SUPERCUTS  
800 Westchester Avenue  
Rye Brook, NY 10573

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CALLAHAN, ALISON	2021-09-01	0893OPENAXESSCOPPE	EE	\$495.83
LINDROTH, LISSA	2022-01-01	GUARDHIGH	EE	\$47.61
LINDROTH, LISSA	2022-01-01	VSP	EE	\$8.75
PEREZ, DAVINA	2018-10-01	GUARDHIGH	EE	\$47.61
PEREZ, DAVINA	2021-09-01	0893OPENAXESSCOPPE	EE	\$495.83

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

TEMUJIN 2 NY, LLC DBA SUPERCUTS  
800 Westchester Avenue  
Rye Brook, NY 10573

Invoice Number: 4720-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
0893OPENAXESSCOPPE	Employee Only	2	\$495.83	\$991.66
0893OPENAXESSGOLD	Employee Only	1	\$0.00	\$719.19
GUARDLOW	Employee Only	2	\$29.44	\$58.88
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$1,778.48

TEMUJIN 2 NY, LLC DBA SUPERCUTS  
 800 Westchester Avenue  
 Rye Brook, NY 10573

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ANDRIOLA, PATRICIA	2021-09-01	0893OPENAXESSCOPPE	EE	\$495.83
BARTICCIOTTO, JULI	2022-01-01	GUARDLOW	EE	\$29.44
BARTICCIOTTO, JULI	2022-01-01	0893OPENAXESSCOPPE	EE	\$495.83
GRANGER, LASHAWNE	2022-06-01	GUARDLOW	EE	\$29.44
GRANGER, LASHAWNE	2022-06-01	0893OPENAXESSGOLD	EE	\$719.19
GRANGER, LASHAWNE	2022-06-01	VSP	EE	\$8.75

**MEDICAL PLAN COUNTS**

Employee Only	3
Employee & Spouse	0
Employee & Children	0
Family	0



## Account Services

### Monthly Statement

TEMUJIN 3 NY, LLC DBA SUPERCUTS  
800 Westchester Avenue  
Rye Brook, NY 10573

Invoice Number: 4713-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
0893OPENAXESSGOLD	Employee Only	2	\$719.19	\$1,438.38
0893OPENAXESSGOLD	Employee & Spouse Only	1	\$1,438.38	\$1,438.38
0893OPENAXESSILVE	Employee Only	1	\$603.00	\$603.00
ADD	Employee Only	3	\$8.40**	\$30.24
GUARDLOW	Employee Only	2	\$29.44	\$58.88
GUARDLOW	Employee & Spouse Only	1	\$55.54	\$55.54
LIFE	Employee Only	2	\$3.30**	\$19.82
VSP	Employee Only	1	\$8.75	\$8.75
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
			GRAND TOTAL	\$3,667.72

TEMUJIN 3 NY, LLC DBA SUPERCUTS  
 800 Westchester Avenue  
 Rye Brook, NY 10573

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
AUSTIN, MAHOGANY	2022-04-01	ADD		\$8.40
HAMZIC, MIRSA DA	2022-01-01	0893OPENAXESSILVE	EE	\$603.00
HEANEY, MADELINE	2022-01-01	0893OPENAXESSGOLD	EE	\$719.19
KAALUND, IRENE	2022-01-01	ADD		\$21.00
KAALUND, IRENE	2022-01-01	LIFE		\$16.52
LICATA, BRIAN	2022-01-01	GUARDLOW	ES	\$55.54
LICATA, BRIAN	2022-01-01	0893OPENAXESSGOLD	ES	\$1438.38
LICATA, BRIAN	2022-01-01	VSP	ES	\$14.73
MCCABE, IVANILDA	2020-06-01	VSP	EE	\$8.75
MERRIMAN, KATHARINE	2022-01-01	GUARDLOW	EE	\$29.44
MERRIMAN, KATHARINE	2022-01-01	0893OPENAXESSGOLD	EE	\$719.19
RIOS, CANDICE	2022-02-01	ADD		\$0.84
RIOS, CANDICE	2022-02-01	GUARDLOW	EE	\$29.44
RIOS, CANDICE	2022-02-01	LIFE		\$3.30

**MEDICAL PLAN COUNTS**

Employee Only	3
Employee & Spouse	1
Employee & Children	0
Family	0





## Account Services

### Monthly Statement

TEMUJIN 4 NY DBA SUPERCUTS  
800 Westchester Avenue  
Rye Brook, NY 10573

Invoice Number: 4111-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
0893OPENAXESSCOPPE	Employee Only	2	\$495.83	\$991.66
0893OPENAXESSILVE	Employee Only	2	\$603.00	\$1,206.00
ADD	Employee Only	2	\$0.84**	\$2.10
GUARDLOW	Employee Only	5	\$29.44	\$147.20
LIFE	Employee Only	1	\$1.80**	\$1.80
VSP	Employee Only	4	\$8.75	\$35.00
GRAND TOTAL				\$2,383.76

TEMUJIN 4 NY DBA SUPERCUTS

800 Westchester Avenue

Rye Brook, NY 10573

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
HUYNH, TUYEN	2019-07-01	VSP	EE	\$8.75
HUYNH, TUYEN	2019-07-01	GUARDLOW	EE	\$29.44
HUYNH, TUYEN	2021-09-01	0893OPENAXESSCOPPE	EE	\$495.83
LINDGREN, SAMANTHA	2022-01-01	0893OPENAXESSCOPPE	EE	\$495.83
LINDGREN, SAMANTHA	2022-01-01	LIFE		\$1.80
LINDGREN, SAMANTHA	2022-01-01	GUARDLOW	EE	\$29.44
OSBORNE, MOLLY	2022-01-01	GUARDLOW	EE	\$29.44
SCIDA, JULIE	2022-01-01	VSP	EE	\$8.75
SCIDA, JULIE	2022-01-01	ADD		\$1.26
SCIDA, JULIE	2022-01-01	GUARDLOW	EE	\$29.44
SCIDA, JULIE	2022-01-01	0893OPENAXESSILVE	EE	\$603.00
TRAINO, MICHELLE	2019-07-01	VSP	EE	\$8.75
TRAINO, MICHELLE	2019-07-01	GUARDLOW	EE	\$29.44
TRAINO, MICHELLE	2021-09-01	0893OPENAXESSILVE	EE	\$603.00
WOLF, EMILY	2022-03-01	ADD		\$0.84
WOLF, EMILY	2022-03-01	VSP	EE	\$8.75

**MEDICAL PLAN COUNTS**

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



## Account Services

### Monthly Statement

TEMUJIN 5 NY DBA SUPERCUTS  
800 Westchester Avenue  
Rye Brook, NY 10573

Invoice Number: 4112-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
0893OPENAXESSCOPPE	Employee Only	1	\$495.83	\$495.83
0893OPENAXESSGOLD	Employee Only	2	\$719.19	\$1,438.38
0893OPENAXESSILVE	Employee Only	2	\$603.00	\$1,206.00
ADD	Employee Only	2	\$42.00**	\$63.42
GUARDHIGH	Employee Only	3	\$47.61	\$142.83
GUARDHIGH	Employee & Spouse Only	1	\$89.81	\$89.81
GUARDLOW	Employee Only	3	\$29.44	\$88.32
LIFE	Employee Only	2	\$27.70**	\$40.75
VSP	Employee Only	4	\$8.75	\$35.00
VSP	Employee & Spouse Only	2	\$14.73	\$29.46
			GRAND TOTAL	\$3,629.80

TEMUJIN 5 NY DBA SUPERCUTS

800 Westchester Avenue

Rye Brook, NY 10573

CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
COON, RONALD	2019-08-01	VSP	EE	\$8.75
COON, RONALD	2020-10-01	GUARDLOW	EE	\$29.44
CZAPLINSKI, SHANNON	2021-11-01	LIFE		\$13.05
LITWINSKI, SHELLEY	2021-11-01	ADD		\$21.42
LITWINSKI, SHELLEY	2021-01-01	GUARDHIGH	EE	\$47.61
LITWINSKI, SHELLEY	2021-09-01	0893OPENAXESSGOLD	EE	\$719.19
LITWINSKI, SHELLEY	2020-01-01	VSP	ES	\$14.73
LUZAK, AMANDA	2022-01-01	0893OPENAXESSGOLD	EE	\$719.19
LUZAK, AMANDA	2022-01-01	GUARDHIGH	EE	\$47.61
MYERS, JASMINE	2022-05-01	VSP	EE	\$8.75
MYERS, JASMINE	2022-05-01	GUARDHIGH	EE	\$47.61
PITZ, JOYCE	2020-08-01	VSP	ES	\$14.73
PITZ, JOYCE	2021-11-01	LIFE		\$27.70
PITZ, JOYCE	2021-11-01	ADD		\$42.00
PITZ, JOYCE	2020-08-01	GUARDHIGH	ES	\$89.81
PITZ, JOYCE	2021-09-01	0893OPENAXESSCOPPE	EE	\$495.83
SCHULER, LEAH	2020-10-01	GUARDLOW	EE	\$29.44
SCHULER, LEAH	2019-08-01	VSP	EE	\$8.75
SNYDER, TAMARA	2022-01-01	VSP	EE	\$8.75
SNYDER, TAMARA	2022-01-01	GUARDLOW	EE	\$29.44
SNYDER, TAMARA	2022-01-01	0893OPENAXESSSILVE	EE	\$603.00
WILEY, ELIZABETH	2021-09-01	0893OPENAXESSSILVE	EE	\$603.00

MEDICAL PLAN COUNTS

Employee Only	5
Employee & Spouse	0
Employee & Children	0
Family	0



## Account Services

### Monthly Statement

TEMUJIN ENTERPRISES 1 LLC , DBA SUPERCUTS  
800 Westchester Avenue  
Rye Brook, NY 10573

Invoice Number: 4723-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
			GRAND TOTAL	\$47.61

TEMUJIN ENTERPRISES 1 LLC , DBA SUPERCUTS  
800 Westchester Avenue  
Rye Brook, NY 10573

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
MOORE, QUINCY	2022-04-01	GUARDHIGH	EE	\$47.61

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

THE FLYING LOCKSMITHS OF JACKSONVILLE, FL  
7933 Baymeadows Way  
JACKSONVILLE, FL 32256

Invoice Number: 4587-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	2	\$6.30**	\$10.50
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
LIFE	Employee Only	2	\$39.60**	\$45.60
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$112.46

THE FLYING LOCKSMITHS OF JACKSONVILLE, FL  
7933 Baymeadows Way  
JACKSONVILLE, FL 32256

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BREWER, CARLIE	2022-01-01	ADD		\$4.20
BREWER, CARLIE	2022-01-01	GUARDHIGH	EE	\$47.61
BREWER, CARLIE	2022-01-01	VSP	EE	\$8.75
BREWER, CARLIE	2022-01-01	LIFE		\$6.00
SAMS, MARK	2022-03-01	ADD		\$6.30
SAMS, MARK	2022-03-01	LIFE		\$39.60

## MEDICAL PLAN COUNTS

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





## Account Services

### Monthly Statement

THE FLYING LOCKSMITHS OF MEMPHIS  
408 Cecilia Dr.  
MEMPHIS, TN 38117

Invoice Number: 4606-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
0433OPENAXESSCOPPE	Employee Only	1	\$495.83	\$495.83
ADD	Employee Only	1	\$0.84**	\$0.84
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDLOW	Employee Only	3	\$29.44	\$88.32
LIFE	Employee Only	1	\$9.88**	\$9.88
VSP	Employee Only	3	\$8.75	\$26.25
GRAND TOTAL				\$668.73

THE FLYING LOCKSMITHS OF MEMPHIS

408 Cecilia Dr.

MEMPHIS, TN 38117

CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BANDY, TERRY	2022-01-01	ADD		\$0.84
BANDY, TERRY	2022-01-01	LIFE		\$9.88
BURT, ANDREW	2022-01-01	GUARDLOW	EE	\$29.44
EDWARDS, DAWN	2022-01-01	VSP	EE	\$8.75
EDWARDS, DAWN	2022-01-01	GUARDLOW	EE	\$29.44
EDWARDS, TIMOTHY	2022-01-01	GUARDLOW	EE	\$29.44
EDWARDS, TIMOTHY	2022-01-01	VSP	EE	\$8.75
HOUSE III, RUSSELL	2022-01-01	0433OPENAXESSCOPPE	EE	\$495.83
SHAW, JOHNATHAN	2022-01-01	GUARDHIGH	EE	\$47.61
SHAW, JOHNATHAN	2022-01-01	VSP	EE	\$8.75

MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

THE FLYING LOCKSMITHS- NASHVILLE EAST  
814 S Church St. Suite 110  
Murfreesboro, TN 37130

Invoice Number: 4748-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDLOW	Employee Only	1	\$29.44	\$29.44
GUARDLOW	Employee & Spouse Only	1	\$55.54	\$55.54
LIFE	Employee Only	1	\$71.63**	\$71.63
VSP	Employee Only	1	\$8.75	\$8.75
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
GRAND TOTAL				\$180.09

THE FLYING LOCKSMITHS- NASHVILLE EAST

814 S Church St. Suite 110

Murfreesboro, TN 37130

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
LEGATO III, ROBERT	2021-01-01	GUARDLOW	EE	\$29.44
LEGATO III, ROBERT	2021-01-01	VSP	EE	\$8.75
LEGATO JR., ROBERT	2020-06-01	VSP	ES	\$14.73
LEGATO JR., ROBERT	2020-01-01	LIFE		\$71.63
LEGATO JR., ROBERT	2020-06-01	GUARDLOW	ES	\$55.54

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

THE LAW OFFICES OF MICHAEL SHAWN  
929 Alton Rd Ste 500  
MIAMI BEACH, FL 33139

Invoice Number: 4482-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1803OPENAXESSPLATI	Employee & Spouse Only	1	\$1,726.05	\$1,726.05
GUARDHIGH	Employee & Spouse Only	1	\$89.81	\$89.81
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
			GRAND TOTAL	\$1,830.59

THE LAW OFFICES OF MICHAEL SHAWN  
929 Alton Rd Ste 500  
MIAMI BEACH, FL 33139

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
SHAWN, MICHAEL	2022-01-01	VSP	ES	\$14.73
SHAWN, MICHAEL	2022-01-01	GUARDHIGH	ES	\$89.81
SHAWN, MICHAEL	2022-01-01	1803OPENAXESSPLATI	ES	\$1726.05

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

THE SAFE MAN  
801 W VULCANITE AVE  
ALPHA, NJ 08865

Invoice Number: 4590-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	1	\$49.08	\$49.08
GUARDLOW	Family	1	\$100.74	\$100.74
			GRAND TOTAL	\$149.82

THE SAFE MAN  
801 W VULCANITE AVE  
ALPHA, NJ 08865

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
LESLIE, MATTHEW	2016-03-01	GUARDHIGH	EE	\$49.08
NABOZNY, NICHOLAS	2019-04-12	GUARDLOW	FAM	\$100.74

## MEDICAL PLAN COUNTS

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





## Account Services

### Monthly Statement

THEIA SENIOR SOLUTIONS  
281 WITHERSPOON STREET  
PRINCETON, NJ 08540

Invoice Number: 4600-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDLOW	Employee & Children	1	\$74.61	\$76.92
			GRAND TOTAL	\$76.92

THEIA SENIOR SOLUTIONS  
281 WITHERSPOON STREET  
PRINCETON, NJ 08540

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BUNN, JACQUELINE	2017-04-01	GUARDLOW	EC2	\$76.92

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

TROUTBROOK DEVELOPMENT LLC  
18 EAST 87TH - GROUND FLOOR  
NEW YORK, NY 10128

Invoice Number: 4599-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
0401OPENAXESSGOLD	Employee Only	1	\$443.13	\$443.13
GUARDLOW	Employee Only	1	\$29.44	\$29.44
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$481.32

TROUTBROOK DEVELOPMENT LLC  
18 EAST 87TH - GROUND FLOOR  
NEW YORK, NY 10128

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
TORAL, GABRIELA	2018-12-01	VSP	EE	\$8.75
TORAL, GABRIELA	2021-01-01	0401OPENAXESSGOLD	EE	\$443.13
TORAL, GABRIELA	2021-11-01	GUARDLOW	EE	\$29.44

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

UNITED PREMIUM FOODS  
1 AMBOY AVE  
WOODBIDGE, NJ 07095

Invoice Number: 4311-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1581OPENAXESSBRONZ	Employee Only	2	\$467.36	\$934.72
1581OPENAXESSBRONZ	Employee & Spouse Only	1	\$986.92	\$986.92
1581OPENAXESSBRONZ	Employee & Children	1	\$986.92	\$986.92
1581OPENAXESSBRONZ	Family	4	\$1,480.09	\$5,920.36
1581OPENAXESSGOLD	Employee Only	1	\$633.81	\$633.81
1581OPENAXESSGOLD	Employee & Spouse Only	1	\$1,307.62	\$1,307.62
1581OPENAXESSGOLD	Family	2	\$1,961.43	\$3,922.86
1581OPENAXESSSILVE	Employee Only	1	\$0.00	\$528.18
1581OPENAXESSSILVE	Employee & Children	1	\$1,096.36	\$1,096.36
ADD	Employee Only	7	\$2.52**	\$65.10
GUARDHIGH	Employee Only	3	\$47.61	\$142.83
GUARDHIGH	Employee & Spouse Only	1	\$89.81	\$89.81
GUARDHIGH	Employee & Children	1	\$89.81	\$89.81
GUARDHIGH	Family	1	\$160.18	\$160.18
GUARDLOW	Employee Only	1	\$29.44	\$29.44
GUARDLOW	Employee & Spouse Only	1	\$55.54	\$55.54
GUARDLOW	Family	6	\$100.74	\$604.44
LIFE	Employee Only	2	\$7.80**	\$18.60
VSP	Employee Only	3	\$8.75	\$26.25
VSP	Employee & Spouse Only	2	\$14.73	\$29.46
VSP	Employee & Children	2	\$15.02	\$30.04
VSP	Family	6	\$23.76	\$142.56
			GRAND TOTAL	\$19,393.14

UNITED PREMIUM FOODS  
1 AMBOY AVE  
WOODBIDGE, NJ 07095

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
AL ABSI, HAMZA	2022-05-01	1581OPENAXESSBRONZ FAM		\$1480.09
AL ABSI, HAMZA	2022-05-01	ADD		\$2.10
AL ABSI, HAMZA	2022-05-01	GUARDLOW	FAM	\$100.74
AL ABSI, HAMZA	2022-05-01	VSP	FAM	\$23.76
ANDREWS, MICHAEL	2022-01-01	1581OPENAXESSBRONZ FAM		\$1480.09
ANDREWS, MICHAEL	2022-01-01	VSP	ES	\$14.73
BRANTLEY, JASON	2022-07-01	1581OPENAXESSBRONZ EE		\$467.36
BRANTLEY, JASON	2022-07-01	ADD		\$12.60
BRANTLEY, JASON	2022-07-01	LIFE		\$10.80
BRANTLEY, JASON	2022-07-01	GUARDHIGH	EE	\$47.61
BRANTLEY, JASON	2022-07-01	VSP	EE	\$8.75
COX, MICHAEL	2021-02-01	1581OPENAXESSGOLD FAM		\$1961.43
COX, MICHAEL	2021-02-01	GUARDLOW	FAM	\$100.74
COX, MICHAEL	2021-02-01	VSP	FAM	\$23.76
DUDITS, ANDREI	2022-10-01	1581OPENAXESSILVE EE		\$528.18
DUDITS, ANDREI	2022-10-01	ADD		\$14.28
ENGROFF, HENRY	2022-01-01	1581OPENAXESSBRONZ ES		\$986.92
ENGROFF, HENRY	2022-01-01	ADD		\$2.10
ENGROFF, HENRY	2022-01-01	GUARDHIGH	ES	\$89.81
ENGROFF, HENRY	2022-01-01	LIFE		\$7.80
HAMMER, JOSEPH	2022-07-01	GUARDLOW	FAM	\$100.74
HAMMER, JOSEPH	2022-07-01	VSP	FAM	\$23.76
LISTON, BRIAN	2021-02-01	1581OPENAXESSGOLD FAM		\$1961.43
LISTON, BRIAN	2021-02-01	GUARDLOW	FAM	\$100.74
LISTON, BRIAN	2021-02-01	VSP	FAM	\$23.76
MARTIN, ROBERT	2022-01-01	VSP	EE	\$8.75
MARTIN, ROBERT	2022-01-01	1581OPENAXESSBRONZ EE		\$467.36

UNITED PREMIUM FOODS  
1 AMBOY AVE  
WOODBIDGE, NJ 07095

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
MARTIN, ROBERT	2022-01-01	GUARDLOW	EE	\$29.44
MAYER, KENNETH	2021-02-01	1581OPENAXESSGOLD	ES	\$1307.62
MAYER, KENNETH	2021-02-01	GUARDLOW	ES	\$55.54
MAYER, KENNETH	2021-02-01	VSP	ES	\$14.73
NORRIS, EBONEE	2022-04-01	1581OPENAXESSGOLD	EE	\$633.81
NORRIS, EBONEE	2022-04-01	GUARDHIGH	EE	\$47.61
NORRIS, EBONEE	2022-04-01	VSP	EE	\$8.75
OGLESBY, CHARTOINE	2022-05-01	1581OPENAXESSBRONZ	EC2	\$986.92
OGLESBY, CHARTOINE	2022-05-01	GUARDLOW	FAM	\$100.74
OGLESBY, CHARTOINE	2022-05-01	VSP	EC2	\$15.02
POON, SINDY	2022-01-01	ADD		\$21.00
POON, SINDY	2022-01-01	GUARDHIGH	EE	\$47.61
POULSON, ALLYSON	2021-09-01	1581OPENAXESSBRONZ	FAM	\$1480.09
POULSON, ALLYSON	2021-09-01	GUARDHIGH	FAM	\$160.18
POULSON, ALLYSON	2021-09-01	VSP	FAM	\$23.76
SANCHEZ, NELFYS	2022-06-01	1581OPENAXESSILVE	EC	\$1096.36
SANCHEZ, NELFYS	2022-06-01	ADD		\$2.52
SANCHEZ, NELFYS	2022-06-01	GUARDHIGH	EC	\$89.81
SANCHEZ, NELFYS	2022-06-01	VSP	EC	\$15.02
YAE, JOHN	2022-09-01	1581OPENAXESSBRONZ	FAM	\$1480.09
YAE, JOHN	2022-09-01	ADD		\$10.50
YAE, JOHN	2022-09-01	GUARDLOW	FAM	\$100.74
YAE, JOHN	2022-09-01	VSP	FAM	\$23.76

UNITED PREMIUM FOODS  
1 AMBOY AVE  
WOODBIDGE, NJ 07095

## PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
YAE, JOHN	2022-09-01	1581OPENAXESSBRONZ FAM		\$1480.09
YAE, JOHN	2022-09-01	ADD		\$10.50
YAE, JOHN	2022-09-01	GUARDLOW	FAM	\$100.74

## MEDICAL PLAN COUNTS

Employee Only	4
Employee & Spouse	2
Employee & Children	1
Family	6





## Account Services

### Monthly Statement

UPLINE MOVING  
30956 San Clemente Street  
HAYWARD, CA 94544

Invoice Number: 4654-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
			GRAND TOTAL	\$47.61

## UPLINE MOVING

30956 San Clemente Street

HAYWARD, CA 94544

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BEGAY, DESIREE	2022-01-01	GUARDHIGH	EE	\$47.61

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

UPSHIFT HR LLC

Invoice Number: 5548-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Family	2	\$160.18	\$320.36
VSP	Family	1	\$23.76	\$23.76
			GRAND TOTAL	\$344.12

UPSHIFT HR LLC

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
HENRY, NICOLE	2022-03-01	GUARDHIGH	FAM	\$160.18
HENRY, NICOLE	2022-03-01	VSP	FAM	\$23.76
SEWARD, DARREN	2022-03-01	GUARDHIGH	FAM	\$160.18

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

VIA MODA GROUP  
2370 N Terrace Ave  
Milwaukee, WI 53211

Invoice Number: 4719-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
0889OPENAXESSBRONZ	Employee Only	2	\$286.06	\$572.12
0889OPENAXESSBRONZ	Employee & Children	1	\$515.64	\$515.64
0889OPENAXESSBRONZ	Family	2	\$798.96	\$1,597.92
0889OPENAXESSBRONZ	Employee Only	3	\$286.06	\$858.18
0889OPENAXESSBRONZ	Family	1	\$798.96	\$798.96
0889OPENAXESSGOLDC	Employee Only	2	\$415.17	\$830.34
0889OPENAXESSGOLDS	Employee Only	2	\$415.17	\$830.34
ADD	Employee Only	1	\$21.00**	\$5.04
GUARDHIGH	Employee Only	6	\$47.61	\$285.66
GUARDHIGH	Employee & Children	1	\$117.99	\$117.99
GUARDLOW	Employee Only	2	\$29.44	\$58.88
GUARDLOW	Employee & Children	2	\$74.61	\$149.22
LIFE	Employee Only	3	\$22.92**	\$31.92
VSP	Employee Only	9	\$8.75	\$78.75
VSP	Employee & Children	2	\$15.02	\$30.04
VSP	Family	2	\$23.76	\$47.52
			GRAND TOTAL	\$6,808.52

VIA MODA GROUP  
2370 N Terrace Ave  
Milwaukee, WI 53211

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BARSCH, SARA	2021-02-01	GUARDHIGH	EE	\$47.61
COE, COLLETTE	2022-01-01	0889OPENAXESSBRONZ	EE	\$286.06
COE, COLLETTE	2022-01-01	GUARDHIGH	EE	\$47.61
COE, COLLETTE	2022-01-01	VSP	EE	\$8.75
CRANK, KELSEY	2022-10-01	0889OPENAXESSGOLDC	EE	\$415.17
CRANK, KELSEY	2022-10-01	ADD		\$5.04
CRANK, KELSEY	2022-10-01	LIFE		\$7.20
CRANK, KELSEY	2022-10-01	GUARDHIGH	EE	\$47.61
CRANK, KELSEY	2022-10-01	VSP	EE	\$8.75
CRAPEAU, SARAH	2022-06-01	LIFE		\$22.92
GERLOFF ROUZAN, VICKI	2022-01-01	0889OPENAXESSBRONZ	EE	\$286.06
GERLOFF ROUZAN, VICKI	2022-01-01	VSP	EE	\$8.75
HENDRICKS, GABRIELLE	2022-01-01	0889OPENAXESSGOLDS	EE	\$415.17
HENDRICKS, GABRIELLE	2022-01-01	GUARDHIGH	EE	\$47.61
HENDRICKS, GABRIELLE	2022-01-01	VSP	EE	\$8.75
JONES, STEPHANIE	2022-03-24	0889OPENAXESSBRONZ	FAM	\$798.96
JONES, STEPHANIE	2022-03-24	GUARDLOW	EC	\$74.61
JONES, STEPHANIE	2022-03-24	VSP	EE	\$8.75
KING, KAREN	2022-01-01	VSP	EE	\$8.75
MUELLER, CANDICE	2022-01-01	0889OPENAXESSGOLDC	EE	\$415.17
MUELLER, CANDICE	2022-01-01	GUARDHIGH	EE	\$47.61
NELSON, JESSICA	2022-01-01	0889OPENAXESSBRONZ	EE	\$286.06
ORCHEL, ALEXANDRA	2020-07-01	GUARDLOW	EE	\$29.44
ORCHEL, ALEXANDRA	2020-07-01	VSP	EE	\$8.75
ROSE, COURTNEY	2022-01-01	VSP	FAM	\$23.76

VIA MODA GROUP  
2370 N Terrace Ave  
Milwaukee, WI 53211

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
RUSCH, KAYLEN	2022-01-01	0889OPENAXESSBRONZ EE		\$286.06
RUSSELL, BETH	2022-01-01	0889OPENAXESSBRONZ EC2		\$515.64
RUSSELL, BETH	2022-01-01	GUARDLOW	EC2	\$74.61
RUSSELL, BETH	2022-01-01	VSP	EC2	\$15.02
SCHAUER, BAILLEY	2022-01-01	0889OPENAXESSGOLDS EE		\$415.17
SCHAUER, BAILLEY	2022-01-01	GUARDLOW	EE	\$29.44
SCHAUER, BAILLEY	2022-01-01	VSP	EE	\$8.75
SCHROEDER, DEBRA	2022-01-01	0889OPENAXESSBRONZ FAM		\$798.96
SCHROEDER, DEBRA	2022-01-01	GUARDHIGH	EC2	\$117.99
SCHROEDER, DEBRA	2022-01-01	VSP	EC	\$15.02
SLOCK, JADEANN	2022-01-01	0889OPENAXESSBRONZ EE		\$286.06
SLOCK, JADEANN	2022-01-01	LIFE		\$1.80
TROLINGER, JESSICA	2022-01-01	GUARDHIGH	EE	\$47.61
TROLINGER, JESSICA	2022-01-01	VSP	EE	\$8.75
VAN DE SYPE, MIRIAM	2022-01-01	0889OPENAXESSBRONZ FAM		\$798.96
VAN DE SYPE, MIRIAM	2022-01-01	VSP	FAM	\$23.76

MEDICAL PLAN COUNTS

Employee Only	9
Employee & Spouse	0
Employee & Children	0
Family	3



## Account Services

### Monthly Statement

VIB BY BEST WESTERN  
6201 N 24th Pkwy  
PHOENIX, AZ 85016

Invoice Number: 4382-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1678OPENAXESSCOPPE	Employee Only	1	\$0.00	\$450.75
1678OPENAXESSGOLD	Family	1	\$1,961.43	\$1,961.43
1678OPENAXESSPLATI	Employee Only	5	\$784.50	\$3,922.50
1678OPENAXESSPLATI	Family	1	\$2,353.72	\$2,353.72
1678OPENAXESSILVE	Employee Only	1	\$548.18	\$548.18
ADD	Employee Only	3	\$2.31**	\$11.97
GUARDHIGH	Employee Only	8	\$47.61	\$380.88
GUARDHIGH	Employee & Spouse Only	1	\$89.81	\$89.81
GUARDLOW	Employee Only	3	\$29.44	\$88.32
GUARDLOW	Family	1	\$100.74	\$100.74
LIFE	Employee Only	5	\$6.00**	\$13.70
VSP	Employee Only	6	\$8.75	\$52.50
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
VSP	Family	1	\$23.76	\$23.76
			GRAND TOTAL	\$10,465.96



VIB BY BEST WESTERN  
6201 N 24th Pkwy  
PHOENIX, AZ 85016

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ANDERSON, ANDREA	2022-04-01	GUARDHIGH	EE	\$47.61
ANDERSON, ANDREA	2022-04-01	VSP	EE	\$8.75
BROWN, JOHNNY	2022-02-01	ADD		\$9.24
BROWN, JOHNNY	2022-02-01	GUARDHIGH	EE	\$47.61
BROWN, JOHNNY	2022-02-01	1678OPENAXESSPLATI	EE	\$784.50
BROWN, JOHNNY	2022-02-01	VSP	EE	\$8.75
CALABRESE, EVENING	2022-09-01	ADD		\$0.42
CALABRESE, EVENING	2022-09-01	LIFE		\$0.60
CALABRESE, EVENING	2022-09-01	1678OPENAXESSCOPPE	EE	\$450.75
EAST, ANTIONETTE	2022-08-01	GUARDHIGH	EE	\$47.61
HANSON, CYNTHIA	2022-01-01	GUARDHIGH	EE	\$47.61
HANSON, CYNTHIA	2022-01-01	1678OPENAXESSPLATI	EE	\$784.50
HANSON, CYNTHIA	2022-01-01	VSP	EE	\$8.75
MANGIONE, NICOLE	2022-08-01	GUARDHIGH	EE	\$47.61
MCCORMICK, LEAH	2022-04-01	LIFE		\$5.00
MCCORMICK, LEAH	2022-04-01	ADD		\$2.31
MCCORMICK, LEAH	2022-04-01	GUARDLOW	FAM	\$100.74
MCCORMICK, LEAH	2022-04-01	1678OPENAXESSPLATI	FAM	\$2353.72
MCCORMICK, LEAH	2022-04-01	VSP	FAM	\$23.76
NEBGEN, ANDREW	2022-03-01	GUARDLOW	EE	\$29.44
NEBGEN, ANDREW	2022-03-01	1678OPENAXESSPLATI	EE	\$784.50
NEBGEN, ANDREW	2022-03-01	VSP	EE	\$8.75
PALMA, MAKALIE	2022-09-01	LIFE		\$1.20
SETTEFRATI, STEVEN	2022-03-01	GUARDLOW	EE	\$29.44
SETTEFRATI, STEVEN	2022-03-01	1678OPENAXESSPLATI	EE	\$784.50
SETTEFRATI, STEVEN	2022-03-01	VSP	EE	\$8.75

VIB BY BEST WESTERN  
6201 N 24th Pkwy  
PHOENIX, AZ 85016

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
SETTEFRATI, STEVEN	2022-07-01	LIFE		\$0.90
VALDEZ, GLORIA	2022-08-01	GUARDHIGH	EE	\$47.61
VILLAGOMEZ-CRUZ, ROSARIO	2022-03-01	GUARDLOW	EE	\$29.44
VILLAGOMEZ-CRUZ, ROSARIO	2022-03-01	1678OPENAXESSILVE	EE	\$548.18
VILLAGOMEZ-CRUZ, ROSARIO	2022-03-01	VSP	EE	\$8.75
VOGT-NILSEN, ERIKA	2022-04-01	GUARDHIGH	EE	\$47.61
VOGT-NILSEN, ERIKA	2022-04-01	1678OPENAXESSPLATI	EE	\$784.50
WATKINS, DAVID	2021-08-01	1678OPENAXESSGOLD	FAM	\$1961.43
WILHELM, ASHLYNN	2022-04-01	GUARDHIGH	ES	\$89.81
WILHELM, ASHLYNN	2022-04-01	VSP	ES	\$14.73
WRAY, BETHANY	2022-06-01	GUARDHIGH	EE	\$47.61
WRAY, BETHANY	2022-06-01	LIFE		\$6.00

VIB BY BEST WESTERN

6201 N 24th Pkwy

PHOENIX, AZ 85016

## PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CALABRESE, EVENING	2022-09-01	ADD		\$0.42
CALABRESE, EVENING	2022-09-01	LIFE		\$0.60
CALABRESE, EVENING	2022-09-01	1678OPENAXESSCOPPE EE		\$450.75
PALMA, MAKALIE	2022-09-01	LIFE		\$1.20

## MEDICAL PLAN COUNTS

Employee Only	7
Employee & Spouse	0
Employee & Children	0
Family	2



## Account Services

### Monthly Statement

VIOTAS TEXAS

Invoice Number: 6071-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Family	1	\$0.00	\$160.18
LIFE	Employee Only	1	\$14.40**	\$14.40
GRAND TOTAL				\$174.58

VIOTAS TEXAS

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## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
LOCKERD, PATRICK	2022-06-01	LIFE		\$14.40
LOCKERD, PATRICK	2022-06-01	GUARDHIGH	FAM	\$160.18

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

VITALITY BOWLS OF MOUNTAIN VIEW

Invoice Number: 5627-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
VSP	Employee Only	1	\$8.75	\$8.75
GRAND TOTAL				\$8.75

## VITALITY BOWLS OF MOUNTAIN VIEW

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
SMITH, ASHLEY	2022-08-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



**Account Services**  
**Monthly Statement**

WAG N WASH MONUMENT  
1150 W. BAPTIST RD  
COLORADO SPRINGS, CO 80921

Invoice Number: 4701-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDLOW	Employee Only	1	\$29.44	\$29.44
			GRAND TOTAL	\$29.44



WAG N WASH MONUMENT  
1150 W. BAPTIST RD  
COLORADO SPRINGS, CO 80921

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CARROS, JUSTIN	2020-11-01	GUARDLOW	EE	\$29.44

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

WAG N WASH PET FOOD AND BAKERY  
5066 S. WADSWORTH BLVD  
LITTLETON, CO 80123

Invoice Number: 4589-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDLOW	Employee Only	1	\$29.44	\$29.44
LIFE	Employee Only	2	\$5.40**	\$49.20
VSP	Employee Only	3	\$8.75	\$26.25
			GRAND TOTAL	\$152.50

WAG N WASH PET FOOD AND BAKERY  
5066 S. WADSWORTH BLVD  
LITTLETON, CO 80123

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BILLE, BERNADETTE	2022-01-01	VSP	EE	\$8.75
BILLE, BERNADETTE	2022-01-01	LIFE		\$39.60
MOORE, AMANDA	2022-01-01	GUARDLOW	EE	\$29.44
MOORE, AMANDA	2022-01-01	LIFE		\$9.60
MOORE, AMANDA	2022-01-01	VSP	EE	\$8.75
RISBY, KRISTEN	2021-01-01	GUARDHIGH	EE	\$47.61
RISBY, KRISTEN	2021-01-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

WAG N WASH SEATTLE WA  
1932 QUEEN ANNE AVE N  
SEATTLE, WA 98109

Invoice Number: 4618-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$8.82**	\$8.82
GUARDHIGH	Employee Only	5	\$47.61	\$238.05
GUARDLOW	Employee Only	4	\$29.44	\$117.76
LIFE	Employee Only	1	\$59.28**	\$59.28
VSP	Employee Only	7	\$8.75	\$61.25
			GRAND TOTAL	\$485.16

WAG N WASH SEATTLE WA  
1932 QUEEN ANNE AVE N  
SEATTLE, WA 98109

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BURLESON, ALEXANDER	2022-01-01	ADD		\$8.82
BURLESON, ALEXANDER	2022-01-01	GUARDHIGH	EE	\$47.61
BURLESON, ALEXANDER	2022-01-01	VSP	EE	\$8.75
CIOTTI, DANTE	2022-01-01	GUARDLOW	EE	\$29.44
CIOTTI, DANTE	2022-01-01	VSP	EE	\$8.75
FARRAR, CARLY	01/01/2019	GUARDHIGH	EE	\$47.61
FARRAR, CARLY	2019-01-01	VSP	EE	\$8.75
FARRAR, CARLY	2019-01-01	GUARDHIGH	EE	\$47.61
GRAHAM, LONNIE	2019-01-01	GUARDLOW	EE	\$29.44
GRAHAM, LONNIE	2019-01-01	VSP	EE	\$8.75
HAYDN, ARTHUR	2021-01-01	GUARDLOW	EE	\$29.44
HAYDN, ARTHUR	2021-01-01	VSP	EE	\$8.75
RUDELL, RUBY	2019-01-01	GUARDHIGH	EE	\$47.61
RUDELL, RUBY	2019-01-01	VSP	EE	\$8.75
SIMON, HOLLY	2022-09-01	GUARDLOW	EE	\$29.44
WILLIAMS, DAVID	2022-01-01	GUARDHIGH	EE	\$47.61
WILLIAMS, DAVID	2022-01-01	VSP	EE	\$8.75
WILLIAMS, DAVID	2022-01-01	LIFE		\$59.28

**MEDICAL PLAN COUNTS**

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



## Account Services

### Monthly Statement

WAG N' WASH - PHOENIX  
4230 N 7TH AVE  
PHOENIX, AZ 85013

Invoice Number: 4158-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee & Spouse Only	1	\$0.00	\$89.81
GUARDLOW	Employee Only	2	\$29.44	\$58.88
VSP	Employee Only	2	\$8.75	\$17.50
VSP	Employee & Spouse Only	1	\$0.00	\$14.73
			GRAND TOTAL	\$270.73

WAG N' WASH - PHOENIX  
4230 N 7TH AVE  
PHOENIX, AZ 85013

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ALCALA, LAURA	2022-09-01	GUARDHIGH	ES	\$89.81
ALCALA, LAURA	2022-09-01	VSP	ES	\$14.73
EDGE, SHELBY	2021-05-01	GUARDLOW	EE	\$29.44
EDGE, SHELBY	2021-05-01	VSP	EE	\$8.75
RICHARDS, CHRISTIAN	2022-06-01	VSP	EE	\$8.75
RICHARDS, CHRISTIAN	2022-06-01	GUARDLOW	EE	\$29.44

WAG N' WASH - PHOENIX  
4230 N 7TH AVE  
PHOENIX, AZ 85013

## PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ALCALA, LAURA	2022-09-01	GUARDHIGH	ES	\$89.81

## MEDICAL PLAN COUNTS

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





## Account Services

### Monthly Statement

WAG N' WASH - SCOTTSDALE  
7777 E INDIAN SCHOOL RD  
SCOTTSDALE, AZ 85251

Invoice Number: 4159-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	4	\$47.61	\$190.44
GUARDHIGH	Employee & Spouse Only	1	\$89.81	\$89.81
GUARDLOW	Employee & Children	1	\$74.61	\$74.61
LIFE	Employee Only	2	\$14.40**	\$15.00
VSP	Employee Only	3	\$8.75	\$26.25
			GRAND TOTAL	\$453.07

WAG N' WASH - SCOTTSDALE  
7777 E INDIAN SCHOOL RD  
SCOTTSDALE, AZ 85251

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BERMUDEZ, JANETTE	2022-01-01	GUARDLOW	EC2	\$74.61
CHAVEZ, DANIEL	2021-07-01	GUARDHIGH	ES	\$89.81
GONZALEZ, JEREMY	2022-01-01	LIFE		\$14.40
MEEKER, SHANE	2022-09-01	GUARDHIGH	EE	\$47.61
PIEPER, AURORA	2022-09-01	LIFE		\$0.60
PIEPER, AURORA	2022-09-01	VSP	EE	\$8.75
RODRIGUEZ MARTINEZ, YESENIA	2022-01-01	GUARDHIGH	EE	\$47.61
RODRIGUEZ MARTINEZ, YESENIA	2022-01-01	VSP	EE	\$8.75
SKARUPINSKI, KELLY	2022-09-01	GUARDHIGH	EE	\$47.61
YOUNG, JASMINE	2022-08-01	GUARDHIGH	EE	\$47.61
YOUNG, JASMINE	2022-08-01	VSP	EE	\$8.75

WAG N' WASH - SCOTTSDALE  
7777 E INDIAN SCHOOL RD  
SCOTTSDALE, AZ 85251

## PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
MEEKER, SHANE	2022-09-01	GUARDHIGH	EE	\$47.61
PIEPER, AURORA	2022-09-01	LIFE		\$0.60
PIEPER, AURORA	2022-09-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

WEBSpace, INC.

Invoice Number: 5974-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$8.40**	\$8.40
GUARDHIGH	Employee & Children	1	\$0.00	\$117.99
LIFE	Employee Only	1	\$27.70**	\$27.70
			GRAND TOTAL	\$154.09

WEBSpace, INC.

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
HELLINGER, MATTHEW	2022-06-30	ADD		\$8.40
HELLINGER, MATTHEW	2022-06-30	LIFE		\$27.70
HELLINGER, MATTHEW	2022-06-30	GUARDHIGH	EC2	\$117.99

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

WECONNECT GLOBAL  
1013 Centre Rd Ste 403B  
WILMINGTON, DE 19805

Invoice Number: 4352-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1643OPENAXESSBRONZ	Employee Only	1	\$487.36	\$487.36
1643OPENAXESSGOLD	Employee Only	1	\$653.81	\$653.81
ADD	Employee Only	1	\$3.36**	\$3.36
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDLOW	Employee Only	1	\$29.44	\$29.44
LIFE	Employee Only	1	\$14.40**	\$9.60
VSP	Employee Only	1	\$8.75	\$8.75
GRAND TOTAL				\$1,239.93

WECONNECT GLOBAL  
1013 Centre Rd Ste 403B  
WILMINGTON, DE 19805

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BEGUE, DEREK	2022-01-01	1643OPENAXESSBRONZ	EE	\$487.36
BEGUE, DEREK	2022-01-01	ADD		\$3.36
BEGUE, DEREK	2022-01-01	GUARDLOW	EE	\$29.44
BEGUE, DEREK	2022-01-01	VSP	EE	\$8.75
BEGUE, DEREK	2022-01-01	LIFE		\$9.60
KLOOSTER, ADAM	2021-05-01	1643OPENAXESSGOLD	EE	\$653.81
KLOOSTER, ADAM	2022-06-01	GUARDHIGH	EE	\$47.61

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

WILD-OX CONSULTING, INC.  
15508 Williston Rd  
SILVER SPRING, MD 20905

Invoice Number: 4499-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1831OPENAXESSCOPPE	Employee Only	1	\$495.83	\$495.83
1831OPENAXESSPLATI	Employee Only	1	\$862.95	\$862.95
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$1,415.14



WILD-OX CONSULTING, INC.  
15508 Williston Rd  
SILVER SPRING, MD 20905

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
CUSHMAN, GARDNER	2022-02-01	1831OPENAXESSCOPPE	EE	\$495.83
WHITTIER, ROBERT	2022-04-01	GUARDHIGH	EE	\$47.61
WHITTIER, ROBERT	2022-04-01	1831OPENAXESSPLATI	EE	\$862.95
WHITTIER, ROBERT	2022-04-01	VSP	EE	\$8.75

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

WILLOW TREE, INC.  
1935 PACIFIC AVE  
SAN FRANCISCO, CA 94109

Invoice Number: 4680-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$42.42**	\$42.42
GUARDHIGH	Family	1	\$160.18	\$160.18
VSP	Family	1	\$23.76	\$23.76
			GRAND TOTAL	\$226.36

WILLOW TREE, INC.  
1935 PACIFIC AVE  
SAN FRANCISCO, CA 94109

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
YEE, STEPHANIE	2022-01-01	ADD		\$42.42
YEE, STEPHANIE	2022-01-01	GUARDHIGH	FAM	\$160.18
YEE, STEPHANIE	2022-01-01	VSP	FAM	\$23.76

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

WILSON ASSET MANAGEMENT  
187 Wolf Rd Ste 101  
ALBANY, NY 12205

Invoice Number: 4470-2022-1  
Coverage Month: OCT  
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1791OPENAXESSPLATI	Family	1	\$2,353.72	\$2,353.72
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
VSP	Family	1	\$23.76	\$23.76
			GRAND TOTAL	\$2,425.09

## WILSON ASSET MANAGEMENT

187 Wolf Rd Ste 101

ALBANY, NY 12205

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BURNS, CATRIONA	2022-01-01	GUARDHIGH	EE	\$47.61
BURNS, CATRIONA	2022-01-01	1791OPENAXESSPLATI	FAM	\$2353.72
BURNS, CATRIONA	2022-01-01	VSP	FAM	\$23.76

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

WIMBERLY GROUP REAL ESTATE

Invoice Number: 5768-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1937OPENAXESSCOPPE	Employee Only	1	\$495.83	\$495.83
1937OPENAXESSCOPPE	Family	2	\$1,419.92	\$2,839.84
GUARDHIGH	Family	1	\$160.18	\$160.18
GUARDLOW	Family	1	\$100.74	\$100.74
VSP	Family	2	\$23.76	\$47.52
GRAND TOTAL				\$3,644.11

WIMBERLY GROUP REAL ESTATE

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
MALONE, HOLLY	2022-03-01	1937OPENAXESSCOPPE	EE	\$495.83
SILVANI, LIANA	2022-04-30	1937OPENAXESSCOPPE	FAM	\$1419.92
SILVANI, LIANA	2022-04-30	GUARDLOW	FAM	\$100.74
SILVANI, LIANA	2022-04-30	VSP	FAM	\$23.76
WIMBERLY, AMBER	2022-03-01	1937OPENAXESSCOPPE	FAM	\$1419.92
WIMBERLY, AMBER	2022-04-01	GUARDHIGH	FAM	\$160.18
WIMBERLY, AMBER	2022-04-01	VSP	FAM	\$23.76

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

WINDOW GENIE OF NORTH INDIANAPOLIS  
4431 SUMMER DR  
ZIONSVILLE, IN 46077

Invoice Number: 4637-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDLOW	Employee Only	1	\$29.44	\$29.44
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$38.19



WINDOW GENIE OF NORTH INDIANAPOLIS  
4431 SUMMER DR  
ZIONSVILLE, IN 46077

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
GAINES, CHRISTOPHER	2019-01-01	VSP	EE	\$8.75
GAINES, CHRISTOPHER	2019-01-01	GUARDLOW	EE	\$29.44

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

WINDOW GENIE OF THE EAST BAY CA  
21001 SAN RAMON VALLEY BLVD, Suite A4-333  
SAN RAMON, CA 94583

Invoice Number: 4619-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
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
VSP	Employee & Spouse Only	2	\$14.73	\$29.46
GRAND TOTAL				\$213.82

WINDOW GENIE OF THE EAST BAY CA  
21001 SAN RAMON VALLEY BLVD, Suite A4-333  
SAN RAMON, CA 94583

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
GARCIA, JESSE	2022-06-01	VSP	EE	\$8.75
GARCIA, JESSE	2022-06-01	GUARDLOW	EE	\$29.44
JOBRAK, ESTHER	2022-07-01	GUARDHIGH	EE	\$47.61
JOBRAK, ESTHER	2022-07-01	VSP	EE	\$8.75
TOWNSLEY, JOHN	2022-01-01	GUARDHIGH	ES	\$89.81
TOWNSLEY, JOHN	2022-01-01	VSP	ES	\$14.73
TOWNSLEY, LISA	2022-01-01	VSP	ES	\$14.73

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

WISE MEDICAL STAFFING, INC

Invoice Number: 5719-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$8.40**	\$8.40
GUARDHIGH	Employee & Children	1	\$117.99	\$117.99
LIFE	Employee Only	1	\$13.70**	\$13.70
VSP	Employee & Children	1	\$15.02	\$15.02
			GRAND TOTAL	\$155.11

WISE MEDICAL STAFFING, INC

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
HARGRAVE, QUINNETTA	2022-07-01	ADD		\$8.40
HARGRAVE, QUINNETTA	2022-07-01	LIFE		\$13.70
HARGRAVE, QUINNETTA	2022-07-01	GUARDHIGH	EC2	\$117.99
HARGRAVE, QUINNETTA	2022-07-01	VSP	EC2	\$15.02

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

WOOF GANG BAKERY INC.  
7575 Dr Phillips Blvd Ste 275  
ORLANDO, FL 32819

Invoice Number: 4457-2022-1  
Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1778OPENAXESSBRONZ	Employee Only	1	\$0.00	\$536.10
1778OPENAXESSGOLD	Employee Only	5	\$719.19	\$3,595.95
1778OPENAXESSGOLD	Family	3	\$2,157.57	\$6,472.71
1778OPENAXESSPLATI	Employee Only	6	\$862.95	\$5,177.70
1778OPENAXESSPLATI	Employee & Spouse Only	2	\$1,726.05	\$3,452.10
1778OPENAXESSPLATI	Family	4	\$2,589.09	\$10,356.36
ADD	Employee Only	5	\$8.40**	\$19.32
GUARDHIGH	Employee Only	6	\$47.61	\$285.66
GUARDHIGH	Family	2	\$160.18	\$320.36
GUARDLOW	Employee Only	4	\$29.44	\$117.76
GUARDLOW	Employee & Spouse Only	1	\$0.00	\$55.54
GUARDLOW	Family	2	\$0.00	\$201.48
LIFE	Employee Only	7	\$30.06**	\$122.21
VSP	Employee Only	7	\$8.75	\$61.25
VSP	Employee & Spouse Only	2	\$14.73	\$29.46
VSP	Family	2	\$23.76	\$47.52
			GRAND TOTAL	\$45,641.79

WOOF GANG BAKERY INC.  
7575 Dr Phillips Blvd Ste 275  
ORLANDO, FL 32819

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
AVERETTE, ALYS	2022-01-01	1778OPENAXESSGOLD	EE	\$719.19
AZEVEDO, RICARDO	2022-09-01	ADD		\$0.42
AZEVEDO, RICARDO	2022-09-01	GUARDLOW	FAM	\$100.74
AZEVEDO, RICARDO	2022-09-01	1778OPENAXESSPLATI	FAM	\$2589.09
AZEVEDO, RICARDO	2022-09-01	VSP	FAM	\$23.76
BARNETT, MARGARITA	2022-09-01	GUARDHIGH	EE	\$47.61
BARNETT, MARGARITA	2022-09-01	1778OPENAXESSPLATI	EE	\$862.95
BRANT, ASHLEY	2022-01-01	GUARDHIGH	EE	\$47.61
BRANT, ASHLEY	2022-01-01	1778OPENAXESSPLATI	EE	\$862.95
BRAZZODURO, SANDRA	2022-09-01	LIFE		\$19.10
BRAZZODURO, SANDRA	2022-09-01	GUARDHIGH	FAM	\$160.18
BRAZZODURO, SANDRA	2022-09-01	1778OPENAXESSGOLD	FAM	\$2157.57
CAETANO, MARCOS	2022-01-01	GUARDHIGH	FAM	\$160.18
CAETANO, MARCOS	2022-01-01	1778OPENAXESSPLATI	FAM	\$2589.09
CAETANO, MARCOS	2022-01-01	VSP	ES	\$14.73
CICIARELLI, ANDREA	2022-09-01	ADD		\$1.26
CICIARELLI, ANDREA	2022-09-01	LIFE		\$7.20
CICIARELLI, ANDREA	2022-09-01	GUARDHIGH	EE	\$47.61
CICIARELLI, ANDREA	2022-08-01	1778OPENAXESSBRONZ	EE	\$536.10
CICIARELLI, ANDREA	2022-09-01	VSP	EE	\$8.75
DE MACEDO, ALEXANDRE	2022-09-01	1778OPENAXESSPLATI	EE	\$862.95
EVANS, PAMELA	2022-01-01	LIFE		\$30.06
EVANS, PAMELA	2022-01-01	VSP	EE	\$8.75
GRITZER, MORGAN	2022-01-01	GUARDLOW	EE	\$29.44
GRITZER, MORGAN	2022-01-01	1778OPENAXESSGOLD	EE	\$719.19
GRITZER, MORGAN	2022-01-01	VSP	EE	\$8.75

WOOF GANG BAKERY INC.  
7575 Dr Phillips Blvd Ste 275  
ORLANDO, FL 32819

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
HERNANDEZ, ERIN	2022-09-01	1778OPENAXESSGOLD	FAM	\$2157.57
LINDE, GUSTAVO	2022-09-01	1778OPENAXESSPLATI	FAM	\$2589.09
LINDE, GUSTAVO	2022-09-01	VSP	FAM	\$23.76
MARIN, JOSEPH	2022-08-01	ADD		\$5.04
MARIN, JOSEPH	2022-08-01	LIFE		\$9.60
MARIN, JOSEPH	2022-08-01	GUARDLOW	FAM	\$100.74
MARIN, JOSEPH	2022-08-01	1778OPENAXESSPLATI	FAM	\$2589.09
MAZZI, NICOLA	2022-08-01	1778OPENAXESSGOLD	FAM	\$2157.57
MORALES, MICHAEL	2022-08-01	GUARDLOW	EE	\$29.44
MORALES, MICHAEL	2022-08-01	1778OPENAXESSGOLD	EE	\$719.19
MORALES, MICHAEL	2022-08-01	VSP	EE	\$8.75
PENA FERRO, JOSE	2022-08-01	GUARDHIGH	EE	\$47.61
PENA FERRO, JOSE	2022-08-01	1778OPENAXESSPLATI	EE	\$862.95
ROUNDS, MICHELLE	2022-08-01	ADD		\$8.40
ROUNDS, MICHELLE	2022-08-01	LIFE		\$41.25
ROUNDS, MICHELLE	2022-08-01	GUARDLOW	ES	\$55.54
ROUNDS, MICHELLE	2022-09-01	1778OPENAXESSPLATI	ES	\$1726.05
ROUNDS, MICHELLE	2022-08-01	VSP	ES	\$14.73
SUAREZ, DIEGO	2022-09-01	GUARDLOW	EE	\$29.44
SUAREZ, DIEGO	2022-09-01	1778OPENAXESSGOLD	EE	\$719.19
TEASDALE, MADISON	2022-03-01	GUARDLOW	EE	\$29.44
TEASDALE, MADISON	2022-03-01	1778OPENAXESSGOLD	EE	\$719.19
TEASDALE, MADISON	2022-03-01	VSP	EE	\$8.75
THOMAS, MICHAEL	2022-08-01	1778OPENAXESSPLATI	ES	\$1726.05



WOOF GANG BAKERY INC.  
7575 Dr Phillips Blvd Ste 275  
ORLANDO, FL 32819

## CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
WESNER, RYAN	2022-08-01	ADD		\$4.20
WESNER, RYAN	2022-08-01	LIFE		\$14.40
WESNER, RYAN	2022-08-01	GUARDHIGH	EE	\$47.61
WESNER, RYAN	2022-08-01	1778OPENAXESSPLATI	EE	\$862.95
WESNER, RYAN	2022-08-01	VSP	EE	\$8.75
WILSON, ALYSSA	2022-01-01	LIFE		\$0.60
WILSON, ALYSSA	2022-01-01	GUARDHIGH	EE	\$47.61
WILSON, ALYSSA	2022-01-01	1778OPENAXESSPLATI	EE	\$862.95
WILSON, ALYSSA	2022-01-01	VSP	EE	\$8.75

WOOF GANG BAKERY INC.  
7575 Dr Phillips Blvd Ste 275  
ORLANDO, FL 32819

PRIOR MONTH UNBILLED ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
AZEVEDO, RICARDO	2022-09-01	ADD		\$0.42
AZEVEDO, RICARDO	2022-09-01	GUARDLOW	FAM	\$100.74
AZEVEDO, RICARDO	2022-09-01	1778OPENAXESSPLATI	FAM	\$2589.09
AZEVEDO, RICARDO	2022-09-01	VSP	FAM	\$23.76
BARNETT, MARGARITA	2022-09-01	GUARDHIGH	EE	\$47.61
BARNETT, MARGARITA	2022-09-01	1778OPENAXESSPLATI	EE	\$862.95
BRAZZODURO, SANDRA	2022-09-01	LIFE		\$19.10
BRAZZODURO, SANDRA	2022-09-01	GUARDHIGH	FAM	\$160.18
BRAZZODURO, SANDRA	2022-09-01	1778OPENAXESSGOLD	FAM	\$2157.57
CICIARELLI, ANDREA	2022-09-01	ADD		\$1.26
CICIARELLI, ANDREA	2022-09-01	LIFE		\$7.20
CICIARELLI, ANDREA	2022-09-01	GUARDHIGH	EE	\$47.61
CICIARELLI, ANDREA	2022-08-01	1778OPENAXESSBRONZ	EE	\$536.10
CICIARELLI, ANDREA	2022-09-01	VSP	EE	\$8.75
DE MACEDO, ALEXANDRE	2022-09-01	1778OPENAXESSPLATI	EE	\$862.95
HERNANDEZ, ERIN	2022-09-01	1778OPENAXESSGOLD	FAM	\$2157.57
LINDE, GUSTAVO	2022-09-01	1778OPENAXESSPLATI	FAM	\$2589.09
LINDE, GUSTAVO	2022-09-01	VSP	FAM	\$23.76
ROUNDS, MICHELLE	2022-08-01	ADD		\$8.40
ROUNDS, MICHELLE	2022-08-01	LIFE		\$41.25
ROUNDS, MICHELLE	2022-08-01	GUARDLOW	ES	\$55.54
ROUNDS, MICHELLE	2022-09-01	1778OPENAXESSPLATI	ES	\$1726.05
ROUNDS, MICHELLE	2022-08-01	VSP	ES	\$14.73
SUAREZ, DIEGO	2022-09-01	GUARDLOW	EE	\$29.44
SUAREZ, DIEGO	2022-09-01	1778OPENAXESSGOLD	EE	\$719.19

MEDICAL PLAN COUNTS

Employee Only	12
Employee & Spouse	2
Employee & Children	0
Family	7



## Account Services

### Monthly Statement

YOGASIX MOUNTAIN VIEW

Invoice Number: 5531-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDLOW	Employee Only	1	\$29.44	\$29.44
VSP	Employee Only	1	\$8.75	\$8.75
			GRAND TOTAL	\$38.19

YOGASIX MOUNTAIN VIEW

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ERICKSON, BONNIE	2021-08-01	VSP	EE	\$8.75
ERICKSON, BONNIE	2021-08-01	GUARDLOW	EE	\$29.44

## MEDICAL PLAN COUNTS

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



## Account Services

### Monthly Statement

ZUGGIT, LLC

Invoice Number: 5641-2022-1

Coverage Month: OCT

Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$2.10**	\$2.10
LIFE	Employee Only	1	\$16.50**	\$16.50
GRAND TOTAL				\$18.60

ZUGGIT, LLC

,

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
FELDE, VICTORIA	2022-08-01	ADD		\$2.10
FELDE, VICTORIA	2022-08-01	LIFE		\$16.50

## MEDICAL PLAN COUNTS

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