

Account Services

Monthly Statement

LED PHANTOM DISTRIBUTION INC. 930 KAY AVE ADDISON, IL 60101

Invoice Number: LED2022-04
Invoice Month: APRIL
Billing Date: 03/15/2022

Payment Due Date: 03/31/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	3	\$0.42**	\$23.52
GUARDHIGH	Employee Only	2	\$47.61	\$95.22
GUARDLOW	Employee Only	2	\$29.44	\$58.88
GUARDLOW	Employee & Children	2	\$74.61	\$149.22
GUARDLOW	Family	2	\$100.74	\$201.48
VSP	Employee Only	2	\$8.75	\$17.50
VSP	Employee & Spouse Only	1	\$14.73	\$14.73
VSP	Employee & Children	1	\$15.02	\$15.02
			GRAND TOTAL	\$575.57

^{**} Prices vary in PRISM. Individual prices shown in census.



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CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
AGRAWAL, PRIYANKA	2022-01-01	GUARDLOW	FAM	\$100.74
HIGGINS, JEFFREY HIGGINS, JEFFREY HIGGINS, JEFFREY	2022-03-01 2022-03-01 2022-03-01	ADD GUARDLOW VSP	FAM ES	\$2.10 \$100.74 \$14.73
HOLLOWAY, JAWANN HOLLOWAY, JAWANN	2021-08-01 2021-08-01	GUARDLOW VSP	EC EC	\$74.61 \$15.02
JACKSON, KENNETH	2022-01-01	ADD		\$21.00
LOPEZ NATAL, EDGARDO LOPEZ NATAL, EDGARDO	2022-01-01 2022-01-01	GUARDLOW VSP	EE EE	\$29.44 \$8.75
MILLER, LAURA	2022-01-01	GUARDLOW	EC	\$74.61
NOLL, JEFFREY NOLL, JEFFREY	2022-01-01 2022-01-01	GUARDHIGH VSP	EE EE	\$47.61 \$8.75
PIETRZAK, JEDRZEJ	2022-01-01	GUARDHIGH	EE	\$47.61
RIENTON, GLEN RIENTON, GLEN	2022-04-01 2022-04-01	ADD GUARDLOW	EE	\$0.42 \$29.44

MEDICAL PLAN COU	NTS
Employee Only	0
Employee & Spouse	0
Employee & Children	0
Family	0