

CAREFIELD LIVING SALINAS

In order to properly credit your account all payments must be made to

Nuaxess Account Services 5/3 (Fifth-Third) Bank Account

REMINDER: Please put invoice number(s) in the memo or notes on all forms of payment to ensure proper credit is applied to your account.

REMIT TO: Nuaxess Account Services:

ACH Routing: #071923909 Wire Routing: #042000314

Account: #7242568934

IF MAILING CHECKS:

Make payable to: Nuaxess Account Services
Mail to: Nuaxess Account Services

Lock Box #235149

PO Box 85149

Chicago, IL 60689-5149

WE NOW OFFER AUTOMATIC PAYMENT PROGRAMS

Contact: billing@mynuaxess.com OR CALL: (844) 999-5777



Account Services

Monthly Statement

CAREFIELD LIVING SALINAS

Invoice Number:

5072-2210

Coverage For:

OCTOBER

bvel az que z @ Care field living. com

zmunoz@Carefieldliving.com

Payment Due Date:

09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
BRONZE 4K SILVER II	Employee Only Employee Only	1 2	\$695.25 \$791.85	\$695.25 \$1,583.70
			GRAND TOTAL	\$2,278.95

Primary ACH Instructions:

Account Name: Nuaxess Account Services

Bank: 5/3 Bank

Routing Number 071923909 Account Number: 7242568934

Bank Address:

38 Fountain Square Plaza Cincinnati, OH 45263



Account Services

CAREFIELD LIVING SALINAS

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CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BRUNO, CHERYL	01/01/2022	SILVER II	EE	\$791.85
RESQUIR, HEATHER	01/01/2022	SILVER II	EE	\$791.85
ZURITA, MEREDITH	01/01/2022	BRONZE 4K	EE	\$695.25

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