

GEX Management Inc
6995 W Camp Wisdom Road Ste 2044
Dallax, TX 75237

**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

GEX Management Inc
6995 W Camp Wisdom Road Ste 2044
Dallax, TX 75237
678-327-7396
svanamali@gexmanagement.com

Invoice Number: 5941-2210
Coverage For: OCTOBER
Payment Due Date: 09/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
COPPER	Family	1	\$1,393.98	\$1,393.98
DENTAL	Family	1	\$160.18	\$160.18
VISION	Family	1	\$23.76	\$23.76
			GRAND TOTAL	\$1,577.92

Primary ACH Instructions:
Account Name: Nuaxess Account Services
Bank: 5/3 Bank
Routing Number 071923909
Account Number: 7242568934
Bank Address:
38 Fountain Square Plaza
Cincinnati, OH 45263

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CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
PUPPALA, VARALAKSHMI	06/01/2022	COPPER	FAM	\$1393.98
PUPPALA, VARALAKSHMI	06/01/2022	DENTAL	FAM	\$160.18
PUPPALA, VARALAKSHMI	06/01/2022	VISION	FAM	\$23.76

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