

LYNCH DEVELOPMENT CORP
410 EAST MAIUN ST
CENTERPORT, NY 11721

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

**Nuaxess
Wells Fargo Bank**

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:
 ACH Routing: #063107513
 Wire Routing: #121000248
 Account: #1079684617

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



Account Services

Monthly Statement

LYNCH DEVELOPMENT CORP
410 EAST MAIUN ST
CENTERPORT, NY 11721
dlynch@lynchdevelopment.com
support@nuaccess.com

Invoice Number: 5921-2211
Coverage For: NOVEMBER
Payment Due Date: 10/31/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
BRONZE 4K	Employee Only	1	\$655.36	\$655.36
DENTALGUARD	Family	1	\$137.71	\$137.71
GOLD	Family	1	\$2,481.21	\$2,481.21
SILVER HSA	Employee & Spouse Only	1	\$1,482.73	\$1,482.73
VSP	Family	1	\$18.53	\$18.53
			GRAND TOTAL	\$4,775.54

Primary ACH Instructions:
Account Name: Nuaccess
Bank: Wells Fargo Bank
ACH Routing Number 063107513
Wire Routing Number 121000248
Account Number: 1079684617
Bank Address:
1524 US 1
Sebastian, FL 32958

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CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
GAPP, KATARINA		BRONZE 4K	EE	\$655.36
LYNCH, KEVIN		GOLD	FAM	\$2481.21
LYNCH, KEVIN		DENTALGUARD	FAM	\$137.71
LYNCH, KEVIN		VSP	FAM	\$18.53
MCSWEENEY, JEFFREY	09/01/2022	SILVER HSA	ES	\$1482.73

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