



Account Services

Monthly Statement

COUNTY HALL INSURANCE COMPANY

Invoice Number: COU2022-04
Invoice Month: APRIL
Billing Date: 03/15/2022
Payment Due Date: 03/31/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GOLD	Family	1	\$2,570.72	\$2,570.72
SILVER	Employee Only	17	\$588.20	\$9,999.40
SILVER	Employee & Children	2	\$1,506.21	\$3,012.42
SILVER	Family	2	\$2,279.52	\$4,559.04
			GRAND TOTAL	\$37,712.44

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

COUNTY HALL INSURANCE COMPANY

,

CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BRIGHT, CAROL	07/01/2020	SILVER	EE	\$588.2
CHRISTIANSON, ALICIA	07/01/2020	SILVER	EC	\$1506.21
COLEMAN, KEOWA	07/01/2020	SILVER	EE	\$588.2
CURTRIGHT, JENELLE	07/01/2020	SILVER	EE	\$588.2
DEVINE, STEPHANIE	07/01/2020	SILVER	EE	\$588.2
FANOELE, MICHAEL	07/01/2020	SILVER	FAM	\$2279.52
FINEGAN, CARMEN	07/01/2020	SILVER	FAM	\$2279.52
FLORES, MARIAJOSE	07/01/2020	SILVER	EE	\$588.2
FOUAD, LESLEY	07/01/2020	SILVER	EE	\$588.2
GILKEY, MORGAN	01/01/2021	SILVER	EE	\$588.2
HOLLINGSHEAD, PHILLIP	07/01/2020	SILVER	EE	\$588.2
HUNT, BRYAN	07/01/2020	SILVER	EE	\$588.2
MAHAN, JENNIFER	07/01/2020	SILVER	EE	\$588.2
MCCORMICK, KASEY	07/01/2020	SILVER	EE	\$588.2
PARTIDA, DANIEL	07/01/2020	SILVER	EC	\$1506.21
PORTER, CRYSTAL	07/01/2020	SILVER	EE	\$588.2
RADTKE, JANA E	09/01/2020	SILVER	EE	\$588.2
SNEED, ANDREA	07/01/2020	SILVER	EE	\$588.2

COUNTY HALL INSURANCE COMPANY

,

CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
VINCE, MELISSA	07/01/2020	GOLD	FAM	\$2570.72
WARREN, CHEYENNE	07/01/2020	SILVER	EE	\$588.2
WESTRICH, MATTHEW	07/01/2020	SILVER	EE	\$588.2
WILLIS, CHRIS	07/01/2020	SILVER	EE	\$588.2

Employee Only	17
Employee & Spouse	0
Employee & Children	2
Family	3