



Account Services

Monthly Statement

UPSHIFT HR LLC

Invoice Number: UPS2022-04
Invoice Month: APRIL
Billing Date: 03/15/2022
Payment Due Date: 03/31/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Family	2	\$160.18	\$320.36
VSP	Family	1	\$23.76	\$23.76
			GRAND TOTAL	\$344.12

** Prices vary in PRISM.
Individual prices shown in census.

UPSHIFT HR LLC

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CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
HENRY, NICOLE	2022-03-01	GUARDHIGH	FAM	\$160.18
HENRY, NICOLE	2022-03-01	VSP	FAM	\$23.76
SEWARD, DARREN	2022-03-01	GUARDHIGH	FAM	\$160.18

MEDICAL PLAN COUNTS

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