

BERKSHIRE HATHAWAY HOME SERVIC 350 Highway 35 Middletoown, NJ 07748

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

BERKSHIRE HATHAWAY HOME SERVIC 350 Highway 35 Middletoown, NJ 07748 Jenny.Gurrieri@FoxRoach.com william@sonneragency.com Invoice Number: 5064-2206
Invoice Month: JUNE
Billing Date: 05/15/2022
Payment Due Date: 05/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
DENTAL	Employee Only	3	\$38.75	\$116.25
GOLD III	Employee Only	10	\$575.53	\$5,755.30
GOLD III	Employee & Spouse Only	4	\$1,295.18	\$5,180.72
GOLD III	Employee & Children	1	\$1,341.85	\$1,341.85
SILVER IV	Employee Only	4	\$476.70	\$1,906.80
SILVER IV	Employee & Spouse Only	1	\$957.11	\$957.11
SILVER IV	Family	5	\$1,293.38	\$6,466.90
			GRAND TOTAL	\$21,724.93

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

BERKSHIRE HATHAWAY HOME SERVIC 350 Highway 35 Middletoown, NJ 07748

CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ADAMCZYK, MARIJO	01/01/2022	SILVER IV	EE	\$476.70
AGASHE, ANJALI	01/01/2022	SILVER IV	EE	\$476.70
BECKER, STEVEN	01/01/2022	SILVER IV	FAM	\$1293.38
BUSICHIO, KARIN	01/01/2022	GOLD III	EE	\$575.53
D'ESPOSITO, JOETTE	01/01/2022	GOLD III	ES	\$1295.18
DANKO, TERESA	01/01/2022	GOLD III	ES	\$1295.18
DEBREE, DEREK	01/01/2022	SILVER IV	FAM	\$1293.38
DELGALDO, JOHN	01/01/2022	GOLD III	EC	\$1341.85
FALVO, DONNA	01/01/2022	GOLD III	EE	\$575.53
FERROGINE, LINDA	01/01/2022	SILVER IV	FAM	\$1293.38
GEORGE, MARK	01/01/2022	SILVER IV	ES	\$957.11
HARRISON, JULIA HARRISON, JULIA	01/01/2022 01/01/2022	VISION GOLD III	EE EE	\$0 \$575.53
KEATING, JOHN	01/01/2022	GOLD III	EE	\$575.53
KENNY, ROBIN	01/01/2022	SILVER IV	EE	\$476.70
MANNINO, MARYLOU	01/01/2022	SILVER IV	FAM	\$1293.38
MARCHESE, MARGARET	01/01/2022	GOLD III	EE	\$575.53
MELILLO, LORI	01/01/2022	SILVER IV	EE	\$476.70
MORRIS, ANN	01/01/2022	SILVER IV	FAM	\$1293.38



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CURRENT MONTH ENROLLMENT (CONTINUED)

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
O'BRIEN, BROOKE	01/01/202	2 DENTAL	EE	\$38.75
O'BRIEN, BROOKE	01/01/202	2 VISION	EE	\$0
O'BRIEN, BROOKE	01/01/202	2 GOLD III	EE	\$575.53
SCHIANODICOLA, CARO	LINE 01/01/202	2 GOLD III	ES	\$1295.18
SCHNEIDER, MICHELLE	01/01/202	2 DENTAL	EE	\$38.75
SCHNEIDER, MICHELLE	01/01/202	2 VISION	EE	\$0
SCHNEIDER, MICHELLE	01/01/202	2 GOLD III	EE	\$575.53
SCHNEIDER, STEVEN	01/01/202	2 DENTAL	EE	\$38.75
SCHNEIDER, STEVEN	01/01/202	2 VISION	EE	\$0
SCHNEIDER, STEVEN	01/01/202	2 GOLD III	EE	\$575.53
SHEFFER, JEANETTE	01/01/202	2 GOLD III	EE	\$575.53
TILTON, RICHARD	01/01/202	2 GOLD III	ES	\$1295.18
ZANOWIC, JAMES	01/01/202	2 GOLD III	EE	\$575.53

Employee Only 14
Employee & Spouse 5
Employee & Children 1
Family 5