

Account Services

Monthly Statement

EDGE USA, INC. Invoice Number: 5109-2205

Invoice Month: MAY

Billing Date: 04/15/2022

Payment Due Date: edgeusa123@aol.com 04/30/2022

PLAN QTY **TOTAL COVERAGE PRICE Employee Only BRONZE** 1 \$512.36 \$512.36 **GOLD** Employee & Spouse Only 2 \$1,332.62 \$2,665.24 **GRAND TOTAL** \$3,177.60

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

EDGE USA, INC.

,

CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BARAHONA, JESSICA	08/01/2021	BRONZE	EE	\$512.36
DIMECH, EDWINA	03/01/2021	GOLD	ES	\$1332.62
DIMECH, EDWINR	03/01/2021	GOLD	ES	\$1332.62

Employee Only 1 Employee & Spouse 2 Employee & Children 0 Family 0