



Account Services

Monthly Statement

ALLENTOWN PARK HOTEL
7471 KEEBLER WAY
ALLENTOWN, PA 18106

Invoice Number: ALL2022-04
Invoice Month: APRIL
Billing Date: 03/15/2022
Payment Due Date: 03/31/2022

| PLAN | COVERAGE | QTY | PRICE | TOTAL |
|-------------|---------------|-----|-------------|----------|
| 0673OPENAXE | Employee Only | 1 | \$420.97 | \$420.97 |
| GUARDHIGH | Employee Only | 1 | \$47.61 | \$47.61 |
| | | | GRAND TOTAL | \$468.58 |

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

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ALLENTOWN, PA 18106

CURRENT MONTH ENROLLMENT

| MEMBER NAME | EFF DATE | PLAN | COVERAGE | PRICE |
|------------------|------------|-------------|----------|----------|
| DELONG, NICHOLAS | 2021-01-01 | 0673OPENAXE | EE | \$420.97 |
| DELONG, NICHOLAS | 2018-01-01 | GUARDHIGH | EE | \$47.61 |

MEDICAL PLAN COUNTS

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