



Account Services

Monthly Statement

CCB INDUSTRIES INC
13904 W. 108TH STREET
LENEXA, KS 66215

Invoice Number: CCB2022-04
Invoice Month: APRIL
Billing Date: 03/15/2022
Payment Due Date: 03/31/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$8.40**	\$8.40
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDLOW	Employee Only	1	\$29.44	\$29.44
VSP	Employee Only	2	\$8.75	\$17.50
			GRAND TOTAL	\$102.95

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

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CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BAMBICK, FRANCIS	2020-06-01	ADD		\$8.40
BAMBICK, FRANCIS	2021-01-01	GUARDHIGH	EE	\$47.61
BAMBICK, FRANCIS	2020-06-01	VSP	EE	\$8.75
SEXTON, PATRICK	2022-01-01	GUARDLOW		\$
SEXTON, PATRICK	2022-01-01	VSP		\$

MEDICAL PLAN COUNTS

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