

Account Services

Monthly Statement

THE SAFE MAN 801 W VULCANITE AVE ALPHA, NJ 08865 Invoice Number: THE2022-04
Invoice Month: APRIL

Billing Date: 03/15/2022 Payment Due Date: 03/31/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH GUARDLOW	Employee Only Family	1 1	\$49.08 \$100.74	\$49.08 \$100.74
			GRAND TOTAL	\$149.82

^{**} Prices vary in PRISM. Individual prices shown in census.



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CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
LESLIE, MATTHEW	2016-03-01	GUARDHIGH	EE	\$49.08
NABOZNY, NICHOLAS	2019-04-12	GUARDLOW	FAM	\$100.74

MEDICAL PLAN COUNTS				
Employee Only	0			
Employee & Spouse	0			
Employee & Children	0			
Family	0			