



## Account Services

### Monthly Statement

AVANCER HOMES  
350 SYCAMORE ROAD  
GENOA, IL 60135

Invoice Number: AVA2022-04  
Invoice Month: APRIL  
Billing Date: 03/15/2022  
Payment Due Date: 03/31/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	2	\$21.42**	\$26.88
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDLOW	Employee Only	1	\$29.44	\$29.44
GUARDLOW	Employee & Children	4	\$74.61	\$298.44
VSP	Employee Only	4	\$8.75	\$35.00
VSP	Employee & Children	3	\$15.02	\$45.06
			GRAND TOTAL	\$482.43

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

AVANCER HOMES  
350 SYCAMORE ROAD  
GENOA, IL 60135

**CURRENT MONTH ENROLLMENT**

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BATES, TEKOLIA	2019-01-01	ADD		\$21.42
BATES, TEKOLIA	2019-01-01	GUARDLOW	EC2	\$74.61
GRAZIANO, ASHLEY	2020-04-01	GUARDHIGH	EE	\$47.61
GRAZIANO, ASHLEY	2020-04-01	VSP	EE	\$8.75
HARRIS, TANETTE	2019-01-01	GUARDLOW	EC2	\$74.61
HARRIS, TANETTE	2019-01-01	VSP	EC2	\$15.02
HOWERTON, ELAINE	2018-01-01	VSP		\$
MOORE, TANYA	2019-01-01	ADD		\$5.46
MOORE, TANYA	2018-01-01	GUARDLOW	EC2	\$74.61
MOORE, TANYA	2018-12-01	VSP	EC2	\$15.02
SHROYER, BRIAN	2022-01-01	VSP	EE	\$8.75
WILLIAMS, DAMONTAE	2020-09-01	GUARDLOW	EC	\$74.61
WILLIAMS, DAMONTAE	2020-09-01	VSP	EC	\$15.02
WRIGHT, KIERYN	2022-01-01	GUARDLOW	EE	\$29.44
WRIGHT, KIERYN	2022-01-01	VSP	EE	\$8.75

**MEDICAL PLAN COUNTS**

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