

Account Services

Monthly Statement

JAMES S. CHESLEY, JR. M.D. 7700 OLD BRANCH AVENUE CLINTON, MD 20735

Invoice Number: JAM2022-04
Invoice Month: APRIL
Billing Date: 03/15/2022

Payment Due Date: 03/31/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDLOW VSP	Employee Only Employee Only	1 1	\$29.44 \$8.75	\$29.44 \$8.75
			GRAND TOTAL	\$38.19

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



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CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
ROBINSON, SHALETA	2022-01-01	GUARDLOW	EE	\$29.44
ROBINSON, SHALETA	2022-01-01	VSP	EE	\$8.75

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