

W S WILSON CORP 24 HARBOR PARK DRIVE PORT WASHINGTON, NY 11050

In order to properly credit your account all payments must be made to

Nuaxess Wells Fargo Bank

REMINDER: Please put invoice number(s) in the memo or notes on all forms of payment to ensure proper credit is applied to your account.

REMIT TO: Nuaxess:

ACH Routing: #063107513 Wire Routing: #121000248

Account: #1079684617

IF MAILING CHECKS:

Make payable to: Nuaxess Account Services

Mail to: Nuaxess Account Services

Lock Box #235149

PO Box 85149

Chicago, IL 60689-5149

WE NOW OFFER AUTOMATIC PAYMENT PROGRAMS

Contact: dropbox@mynuaxess.com OR CALL: (844) 999-5777



Monthly Statement

W S WILSON CORP 24 HARBOR PARK DRIVE PORT WASHINGTON, NY 11050 516-394-4956 malinowski@wswilson.com harry@hbmillc.net support@nuaxess.com Invoice Number: 5060-2301 Coverage For: JANUARY

Payment Due Date: 12/28/2022

| PLAN | COVERAGE | QTY | PRICE | TOTAL |
|-------------|------------------------|-----|-------------|-------------|
| DENTALGUARD | Employee Only | 13 | \$38.75 | \$503.75 |
| DENTALGUARD | Employee & Spouse Only | 2 | \$78.66 | \$157.32 |
| DENTALGUARD | Employee & Children | 3 | \$89.93 | \$269.79 |
| DENTALGUARD | Family | 12 | \$137.71 | \$1,652.52 |
| GOLD | Employee Only | 2 | \$845.14 | \$1,690.28 |
| GOLD | Employee & Children | 1 | \$1,436.74 | \$1,436.74 |
| PLATINUM | Employee Only | 1 | \$1,067.29 | \$1,067.29 |
| PLATINUM | Employee & Children | 2 | \$1,814.40 | \$3,628.80 |
| SILVER HSA | Family | 2 | \$1,704.52 | \$3,409.04 |
| SILVER II | Employee Only | 10 | \$664.37 | \$6,643.70 |
| SILVER II | Employee & Spouse Only | 1 | \$1,329.06 | \$1,329.06 |
| SILVER II | Family | 6 | \$1,893.91 | \$11,363.46 |
| VSP CHOICE | Employee Only | 13 | \$6.82 | \$88.66 |
| VSP CHOICE | Employee & Spouse Only | 2 | \$11.48 | \$22.96 |
| VSP CHOICE | Employee & Children | 3 | \$11.70 | \$35.10 |
| VSP CHOICE | Family | 12 | \$18.53 | \$222.36 |
| | | | GRAND TOTAL | \$33,520.83 |

Primary ACH Instructions: Account Name: Nuaxess Bank: Wells Fargo Bank

ACH Routing Number 063107513 Wire Routing Number 121000248 Account Number: 1079684617

Bank Address: 1524 US 1

Sebastian, FL 32958



W S WILSON CORP 24 HARBOR PARK DRIVE PORT WASHINGTON, NY 11050

CURRENT MONTH ENROLLMENT

| MEMBER NAME | EFF DATE | PLAN | COVERAGE | PRICE |
|----------------------|------------|-------------|----------|-----------|
| BAUGHER, RALPH | 01/01/2022 | PLATINUM | EC | \$1814.4 |
| BAUGHER, RALPH | 01/01/2022 | DENTALGUARD | EC | \$89.93 |
| BAUGHER, RALPH | 01/01/2022 | VSP CHOICE | EC | \$11.7 |
| BAUGHER, RICHARD | 01/01/2022 | PLATINUM | EC | \$1814.4 |
| BAUGHER, RICHARD | 01/01/2022 | DENTALGUARD | EC | \$89.93 |
| BAUGHER, RICHARD | 01/01/2022 | VSP CHOICE | EC | \$11.7 |
| BINNS, WAYNE | 01/01/2022 | SILVER II | EE | \$664.37 |
| BINNS, WAYNE | 01/01/2022 | DENTALGUARD | EE | \$38.75 |
| BINNS, WAYNE | 01/01/2022 | VSP CHOICE | EE | \$6.82 |
| BOUSRI, ANOOP | 01/01/2022 | SILVER II | FAM | \$1893.91 |
| BOUSRI, ANOOP | 01/01/2022 | DENTALGUARD | FAM | \$137.71 |
| BOUSRI, ANOOP | 01/01/2022 | VSP CHOICE | FAM | \$18.53 |
| CASPER, JOHN | 01/01/2022 | DENTALGUARD | ES | \$78.66 |
| CASPER, JOHN | 01/01/2022 | VSP CHOICE | ES | \$11.48 |
| CONDELL, YOLANDA | 02/01/2022 | GOLD | EE | \$845.14 |
| CONDELL, YOLANDA | 02/01/2022 | DENTALGUARD | EE | \$38.75 |
| CONDELL, YOLANDA | 02/01/2022 | VSP CHOICE | EE | \$6.82 |
| CONROY, MICHAEL | 01/01/2022 | DENTALGUARD | FAM | \$137.71 |
| CONROY, MICHAEL | 01/01/2022 | VSP CHOICE | FAM | \$18.53 |
| CORLEY, ROBERT | 01/01/2022 | SILVER HSA | FAM | \$1704.52 |
| CORLEY, ROBERT | 01/01/2022 | DENTALGUARD | FAM | \$137.71 |
| CORLEY, ROBERT | 01/01/2022 | VSP CHOICE | FAM | \$18.53 |
| CRIVILLARO, ANTONINO | 01/01/2022 | SILVER II | FAM | \$1893.91 |
| CRIVILLARO, ANTONINO | 01/01/2022 | DENTALGUARD | FAM | \$137.71 |
| CRIVILLARO, ANTONINO | 01/01/2022 | VSP CHOICE | FAM | \$18.53 |



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CURRENT MONTH ENROLLMENT (CONTINUED)

| MEMBER NAME | EFF DATE | PLAN | COVERAGE | PRICE |
|-------------------|------------|-------------|----------|-----------|
| D'ANDREA, STEVEN | 01/01/2022 | DENTALGUARI | FAM | \$1893.91 |
| D'ANDREA, STEVEN | 01/01/2022 | | D FAM | \$137.71 |
| D'ANDREA, STEVEN | 01/01/2022 | | FAM | \$18.53 |
| DAHILL, EDWARD | 01/01/2022 | SILVER II | EE | \$6.82 |
| DAHILL, EDWARD | 01/01/2022 | | EE | \$664.37 |
| DAHILL, EDWARD | 01/01/2022 | | D EE | \$38.75 |
| DANIELLE, BARBARA | 01/01/2022 | | D FAM | \$137.71 |
| DANIELLE, BARBARA | 01/01/2022 | | FAM | \$18.53 |
| FANTACI, ANTHONY | 01/01/2022 | DENTALGUARI | FAM | \$1893.91 |
| FANTACI, ANTHONY | 01/01/2022 | | D FAM | \$137.71 |
| FANTACI, ANTHONY | 01/01/2022 | | FAM | \$18.53 |
| FINNEN, KATHERINE | 01/01/2022 | DENTALGUARI | EE | \$664.37 |
| FINNEN, KATHERINE | 01/01/2022 | | D EE | \$38.75 |
| FINNEN, KATHERINE | 01/01/2022 | | EE | \$6.82 |
| GAUDIO , CARMINE | 09/01/2022 | DENTALGUARI | EE | \$664.37 |
| GAUDIO , CARMINE | 09/01/2022 | | D EE | \$38.75 |
| GAUDIO , CARMINE | 09/01/2022 | | EE | \$6.82 |
| HONICKMAN, STEVEN | 01/01/2022 | | D FAM | \$137.71 |
| HONICKMAN, STEVEN | 01/01/2022 | | FAM | \$18.53 |
| KAUR, BALJIT | 01/01/2022 | SILVER II | FAM | \$18.53 |
| KAUR, BALJIT | 01/01/2022 | | FAM | \$1893.91 |
| KAUR, BALJIT | 01/01/2022 | | D FAM | \$137.71 |
| MAGUIRE, JENNIFER | 01/01/2022 | DENTALGUARI | EE | \$664.37 |
| MAGUIRE, JENNIFER | 01/01/2022 | | D EE | \$38.75 |
| MAGUIRE, JENNIFER | 01/01/2022 | | EE | \$6.82 |



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CURRENT MONTH ENROLLMENT (CONTINUED)

| MEMBER NAME | EFF DATE | PLAN | COVERAGE | PRICE |
|--------------------|----------------|------------|----------|-----------|
| MALLICK, JESA | 04/01/2022 | DENTALGUAI | EE | \$664.37 |
| MALLICK, JESA | 04/01/2022 | | RD EE | \$38.75 |
| MALLICK, JESA | 04/01/2022 | | EE | \$6.82 |
| MANAKER, ANNE | 01/01/2022 | DENTALGUAI | FAM | \$1893.91 |
| MANAKER, ANNE | 01/01/2022 | | RD FAM | \$137.71 |
| MANAKER, ANNE | 01/01/2022 | | FAM | \$18.53 |
| MCDONALD, ANDREW | 01/01/2022 | DENTALGUAI | EE | \$664.37 |
| MCDONALD, ANDREW | 01/01/2022 | | RD EE | \$38.75 |
| MCDONALD, ANDREW | 01/01/2022 | | EE | \$6.82 |
| ORR, TIMOTHY | 01/01/2022 | DENTALGUAI | EE | \$664.37 |
| ORR, TIMOTHY | 01/01/2022 | | RD EE | \$38.75 |
| ORR, TIMOTHY | 01/01/2022 | | EE | \$6.82 |
| PATEL, KALPANA | 01/01/2022 | DENTALGUAI | EE | \$664.37 |
| PATEL, KALPANA | 01/01/2022 | | RD EE | \$38.75 |
| PATEL, KALPANA | 01/01/2022 | | EE | \$6.82 |
| PATEL, PRADIP | 01/01/2022 | DENTALGUAI | ES | \$1329.06 |
| PATEL, PRADIP | 01/01/2022 | | RD ES | \$78.66 |
| PATEL, PRADIP | 01/01/2022 | | ES | \$11.48 |
| PINTO, ANA | 01/01/2022 | DENTALGUAI | EE | \$664.37 |
| PINTO, ANA | 01/01/2022 | | RD EE | \$38.75 |
| PINTO, ANA | 01/01/2022 | | EE | \$6.82 |
| RABBITT, PAUL | 01/01/2022 | DENTALGUAI | EC | \$1436.74 |
| RABBITT, PAUL | 01/01/2022 | | RD EC | \$89.93 |
| RABBITT, PAUL | 01/01/2022 | | EC | \$11.7 |
| SHOWERMAN, CHRISTO | FER 01/01/2022 | DENTALGUAI | RD FAM | \$137.71 |



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CURRENT MONTH ENROLLMENT (CONTINUED)

| MEMBER NAME | EFF DATE | PLAN | COVERAGE | PRICE |
|--------------------|----------------|--------------|----------|-----------|
| SHOWERMAN, CHRISTO | OFER 01/01/202 | 2 VSP CHOICE | FAM | \$18.53 |
| STUEK, LARAINE | 01/01/202 | 2 DENTALGUA | EE | \$1067.29 |
| STUEK, LARAINE | 01/01/202 | | RD EE | \$38.75 |
| STUEK, LARAINE | 01/01/202 | | EE | \$6.82 |
| YULE, ROBERT | 01/01/202 | 2 DENTALGUA | EE | \$845.14 |
| YULE, ROBERT | 01/01/202 | | RD EE | \$38.75 |
| YULE, ROBERT | 01/01/202 | | EE | \$6.82 |
| YULE II, ROBERT | 01/01/202 | 2 DENTALGUA | FAM | \$1704.52 |
| YULE II, ROBERT | 01/01/202 | | RD FAM | \$137.71 |
| YULE II, ROBERT | 01/01/202 | | FAM | \$18.53 |

Employee Only 13 Employee & Spouse 1 Employee & Children 3 Family 8