



Account Services

Monthly Statement

KINGS PEAK TAX CONSULTING, LLC
1881 W Traverse Pkwy Ste E #512
LEHI, UT 84043

Invoice Number: KIN2022-04
Invoice Month: APRIL
Billing Date: 03/15/2022
Payment Due Date: 03/31/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
1770OPENAXE	Family	1	\$1,628.10	\$1,628.10
1770OPENAXE	Employee Only	1	\$719.19	\$719.19
1770OPENAXE	Family	1	\$2,157.57	\$2,157.57
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDHIGH	Family	1	\$160.18	\$160.18
GUARDLOW	Family	2	\$100.74	\$201.48
VSP	Employee Only	1	\$8.75	\$8.75
VSP	Family	2	\$23.76	\$47.52
			GRAND TOTAL	\$4,970.40

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

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CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
COLE, JOSHUA	2022-03-01	GUARDLOW	FAM	\$100.74
COLE, JOSHUA	2022-03-01	1770OPENAXE	FAM	\$1628.10
COLE, JOSHUA	2022-03-01	VSP	FAM	\$23.76
HOLBROOK, JOSEPH	2022-03-01	GUARDLOW	FAM	\$100.74
SCHENCK, SKIP	2022-02-01	GUARDHIGH	FAM	\$160.18
SCHENCK, SKIP	2022-02-01	1770OPENAXE	FAM	\$2157.57
SCHENCK, SKIP	2022-02-01	VSP	FAM	\$23.76
STOLLE, ANDREW	2022-02-01	GUARDHIGH	EE	\$47.61
STOLLE, ANDREW	2022-02-01	1770OPENAXE	EE	\$719.19
STOLLE, ANDREW	2022-02-01	VSP	EE	\$8.75

MEDICAL PLAN COUNTS

Employee Only	1
Employee & Spouse	0
Employee & Children	0
Family	2