



## Account Services

### Monthly Statement

WILLOW TREE, INC.  
1935 PACIFIC AVE  
SAN FRANCISCO, CA 94109

Invoice Number: WIL2022-04  
Invoice Month: APRIL  
Billing Date: 03/15/2022  
Payment Due Date: 03/31/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
ADD	Employee Only	1	\$42.42**	\$42.42
GUARDHIGH	Family	1	\$160.18	\$160.18
VSP	Family	1	\$23.76	\$23.76
			GRAND TOTAL	\$226.36

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

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## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
YEE, STEPHANIE	2022-01-01	ADD		\$42.42
YEE, STEPHANIE	2022-01-01	GUARDHIGH	FAM	\$160.18
YEE, STEPHANIE	2022-01-01	VSP	FAM	\$23.76

## MEDICAL PLAN COUNTS

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