



Account Services

Monthly Statement

ELITE AUTO BODY - GAMBRILLS
738 STATE ROUTE 3 S #B
GAMBRILLS, MD 21054

Invoice Number: ELI2022-04
Invoice Month: APRIL
Billing Date: 03/15/2022
Payment Due Date: 03/31/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	1	\$47.61	\$47.61
GUARDHIGH	Family	1	\$138.96	\$160.18
			GRAND TOTAL	\$207.79

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

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738 STATE ROUTE 3 S #B
GAMBRILLS, MD 21054

CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
FORD, JASON	2017-12-01	GUARDHIGH	FAM	\$160.18
HORN, MICHAEL	2020-01-01	GUARDHIGH	EE	\$47.61

MEDICAL PLAN COUNTS

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