



Account Services

Monthly Statement

BUDGET BLINDS OF INDIAN RIVER COUNTY
1100 PEGASUS PL
VERO BEACH, FL 32963

Invoice Number: BUD2022-04
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	Employee & Children	1	\$89.81	\$89.81
GUARDHIGH	Family	1	\$160.18	\$160.18
VSP	Employee Only	3	\$8.75	\$26.25
			GRAND TOTAL	\$323.85

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

BUDGET BLINDS OF INDIAN RIVER COUNTY
1100 PEGASUS PL
VERO BEACH, FL 32963

CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
Fontecchio, Lori	2021-06-01	GUARDHIGH	FAM	\$160.18
Fontecchio, Lori	2021-06-01	VSP	EE	\$8.75
Gonzalez, Penelope	2022-01-01	GUARDHIGH	EC	\$89.81
Gonzalez, Penelope	2022-01-01	VSP	EE	\$8.75
Mahoney, Carolyn	2022-01-01	GUARDHIGH	EE	\$47.61
Mahoney, Carolyn	2022-01-01	VSP	EE	\$8.75

MEDICAL PLAN COUNTS

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