

VSN DENTAL  
510 ROUTE 9 NORTH  
MANALAPAN, NJ 07726

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

**Nuaxess  
Wells Fargo Bank**

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



## Account Services

### Monthly Statement

VSN DENTAL  
510 ROUTE 9 NORTH  
MANALAPAN, NJ 07726  
NISA9803@YAHOO.COM  
robswikart@outlook.com  
support@nuaccess.com

Invoice Number: 5992-2212  
Coverage For: DECEMBER

Payment Due Date: 11/30/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GOLD III	Employee Only	1	\$575.53	\$575.53
GOLD III	Family	1	\$2,295.00	\$2,295.00
			GRAND TOTAL	\$2,870.53

Primary ACH Instructions:  
Account Name: Nuaccess  
Bank: Wells Fargo Bank  
ACH Routing Number 063107513  
Wire Routing Number 121000248  
Account Number: 1079684617  
Bank Address:  
1524 US 1  
Sebastian, FL 32958

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## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BRODSKIY, BRIANNA	2022-01-01	GOLD III	EE	\$575.53
SHIKHMANter, VLADISLAV	2022-01-01	GOLD III	FAM	\$2295.00

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