



## Account Services

### Monthly Statement

MADICORP INC  
87 CRESCENT RD  
NEEDHAM HEIGHTS, MA 02494

Invoice Number: MAD2022-04  
Invoice Month: APRIL  
Billing Date: 03/15/2022  
Payment Due Date: 03/31/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GUARDHIGH	Employee Only	2	\$47.61	\$95.22
VSP	Employee Only	2	\$8.75	\$17.50
			GRAND TOTAL	\$112.72

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

MADICORP INC  
87 CRESCENT RD  
NEEDHAM HEIGHTS, MA 02494

## CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
GALT, ROBERT	2022-01-01	GUARDHIGH	EE	\$47.61
GALT, ROBERT	2022-01-01	VSP	EE	\$8.75
MCELENEY, LISA	2022-01-01	VSP	EE	\$8.75
MCELENEY, LISA	2022-01-01	GUARDHIGH	EE	\$47.61

## MEDICAL PLAN COUNTS

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