

URBAN LEAGUE OF ESSEX CTY
ULEC GENERAL OPERATING ACCT
508 CENTRAL AVE
NEWARK, NJ 07107-1430

Bank of America
ACH R/T 021200339

12950

55-33/212 NJ

356

02/01/2020

PAY TO THE
ORDER OF

Horizon Blue Cross Blue Shield of NJ

\$

**19,580.44

Nineteen thousand five hundred eighty and 44/100*****

DOLLARS

Horizon Blue Cross Blue Shield of NJ
P.O. Box 10130
Newark, NJ 07101-3130

MEMO

Empl. Health Ins. 02/15/20 - 03/15/20

Virginia Cox

AUTHORIZED SIGNATURE

Photo Safe Deposit®

Details on Back

12950 01 2950 02 21 200339 000238003973

URBAN LEAGUE OF ESSEX CTY

GENERAL OPERATING ACCT

12950

02/01/2020

Horizon Blue Cross Blue Shield of NJ

Date	Type	Reference	Original Amount	Balance Due	Payment
02/01/2020	Bill		19,580.44	19,580.44	19,580.44
		Check Amount			19,580.44

1010 Cash:Checking Empl. Health Ins. 02/15/20 - 03/15/20 19,580.44

URBAN LEAGUE OF ESSEX CTY

02/01/2020

GENERAL OPERATING ACCT

12950

Date	Type	Reference	Original Amount	Balance Due	Payment
02/01/2020	Bill		19,580.44	19,580.44	19,580.44
		Check Amount			19,580.44

1010 Cash:Checking Empl. Health Ins. 02/15/20 - 03/15/20 19,580.44

ULEC CHECK REQUEST FORM

INVOICE DATE:	<u>2/1/2020</u>	PREPARED BY:	<u>Pat Mise</u>	PERIOD COVERED:	<u>02/15/20 - 03/15/20</u>
INVOICE #	<u>293308978</u>	DUE DATE:	<u>2/15/2020</u>	AMOUNT:	<u>\$19,580.44</u>
PAYABLE TO:	<u>Horizon Blue Cross Blue Shield</u>				
COMMENTS:					

GL CODE: 7241 EMPLOYEE BENEFITS - HEALTH INSURANCE

111 Abbott		112.1 TODDLERS		561 - LISC-HUD/FOC	
Roni Bryant	\$ 865.47	C.E. Fitzpatrick	\$ 1,068.35	451 USJP	3,581.26
Quintella Hollins	\$ 1,346.70	Yolanda Green	\$ 946.06	112 EHS	2,014.41
Daphne L. McMillian	\$ 918.88			111 Abbott	6,576.97
Betrilla Simmons	\$ 768.94	Total	<u>\$ 2,014.41</u>	222 Coding Prog	365.26
Robin Stewart	\$ 1,068.35			368 Wells F N. Revit	1,068.13
Heather Wilson	\$ 1,608.63	467 Workforce		502 - ESG- Housing	679.44 V. Lindsey
		Kyneisha Williams	\$ 625.08	334H NRTC18 - Housing	679.44 V. Lindsey
Total	<u>\$ 6,576.97</u>	Theresa Howard	\$ 746.45	467 Workforce	1,371.53
				620 Admin - Finance	1,028.12
222 Coding		Total	<u>\$ 1,371.53</u>	339 ULEC OPP CORP	<u>1,361.22</u>
Darrin Sharif	\$ 258.42			Total Expense	<u>19,580.44</u>
Greg Ward	\$ 106.84	339 ULEC OPPORTUNITY CORP		Total Bill	<u>19,580.44</u>
		Leonard Robbins	\$ 1,068.35	variance	<u>0.00</u>
Total	<u>\$ 365.26</u>	Curtis McDaniel	<u>\$ 292.87</u>		
		Total	<u>\$ 1,361.22</u>		
334 Housing					
Victoria Lindsey	\$ 1,068.35	620 Admin			
Karimi Guerra	\$ 290.52	Joanna Martinez	\$ 66.61		
Total	<u>\$ 1,358.87</u>	Greg Ward	<u>\$ 961.52</u>		
		Total	<u>\$ 1,028.12</u>		
368 Wells Fargo					
Darrin Sharif	\$ 775.26				
Curtis McDaniel	\$ 292.87				
Total	<u>\$ 1,068.13</u>				
451 USJP - Mature Workers					
Gwendolyn Morris	\$ 1,033.68	Employees with Split Allocations			
Joanna Martinez	\$ 1,265.56	Greg Ward	\$ 1,068.35	Admin 90%, Coding 10%	
Irene Cerna	\$ 1,068.35	Darrin Sharif	\$ 1,033.68	Coding 25%, Wells Fargo 75%	
Patricia Sermon	\$ 213.67	Patricia Sermon	\$ 1,068.35	USJP 20%, LISC/FOC 80%	
Greg Ward	\$ -	Joanna Martinez	\$ 1,332.17	USJP 95%, Admin 5%	
Total	<u>\$ 3,581.26</u>	Curtis McDaniel	<u>\$ 585.73</u>	Wells Fargo 50%, Opport Corp 50%	

FINANCE APPROVAL PROCESS:

INVOICE/SUPPORTING DOCS ATTACHED: YES NO

A/P INITIAL: PM

DATE: 1/30/20

FISCAL OFFICE APPROVAL:

PRESIDENT/CEO'S APPROVAL :

CHECK # 12950



ACCOUNT NUMBER: 310430354

STATEMENT DATE: 01/28/20

PAYMENT DUE DATE: 02/15/20

SUMMARY OF TRANSACTIONS	PREVIOUS BALANCE	-	PAYMENT	+	CURRENT BILLINGS	+	NET ADJUSTMENTS	=	PAY THIS AMOUNT
	\$19,289.92		\$19,289.92		\$19,580.44		\$0.00		\$19,580.44

SUMMARY OF ACCOUNT

DESCRIPTION	PRODUCT	GROUP NUMBER:	DATE	AMOUNT
PREVIOUS BALANCE			12/30/19	\$19,289.92
PAYMENT RECEIVED, THANK YOU			01/08/20	-\$19,289.92
BILL 02/15/20-03/15/20	ADVANTAGE EPO	00-153M8	01/28/20	\$13,003.47
BILL 02/15/20-03/15/20	PRESCRIPTION	00-153M8	01/28/20	\$0.00
BILL 02/15/20-03/15/20	DENTAL-G	01-153M8	01/28/20	\$0.00
BILL 02/15/20-03/15/20	ADVANTAGE EPO	02-153M8	01/28/20	\$6,576.97
BILL 02/15/20-03/15/20	PRESCRIPTION	02-153M8	01/28/20	\$0.00
BILL 02/15/20-03/15/20	DENTAL-G	03-153M8	01/28/20	\$0.00
TOTAL AMOUNT DUE				\$19,580.44
				=====



STATEMENT DATE: 01/28/20

ACCOUNT NUMBER: 310430354

INVOICE NUMBER 293308978

GRP# 153M8

PAST DUE AMOUNT	CURRENT MONTH CHARGES	PAY THIS AMOUNT	DUUE DATE	AMOUNT ENCLOSED
\$0.00	\$19,580.44	\$19,580.44	02/15/20	

ATTN: R.GREGORY WARD/PATRICIA MISE
 URBAN LEAGUE OF ESSEX COUNTY
 508 CENTRAL AVENUE
 NEWARK NJ 07107-1430

HORIZON BLUE CROSS BLUE SHIELD OF NJ
 PO BOX 10130
 NEWARK, NJ 07101-3130



PAST DUE AMOUNT	CURRENT MONTH CHARGES	PAY THIS AMOUNT	DUE DATE	STATEMENT DATE: 01/28/20
\$0.00	\$19,580.44	\$19,580.44	02/15/20	ACCOUNT NUMBER: 310430354 INVOICE NUMBER 293308978

SUMMARY OF ACCOUNT(CONTINUES)

IF YOU HAVE ANY QUESTIONS REGARDING THIS BILL, PLEASE CALL 1-800-225-1955.



3 PENN PLAZA EAST NEWARK NEW JERSEY 07105-2200

ATTN: R.GREGORY WARD/PATRICIA

RATING	YEAR	BILLING	PERIOD	COVERED
FROM	TO	FROM	TO	
10/15/19	10/15/20	02/15/20		03/15/20

ACCT: 310430354
508 CENTRAL AVENUE
NEWARK NJ 07107-1430

DATE PREPARED	GROUP NUMBER
01/28/20	00-153M8

SOCIAL SECURITY NUMBER	EMPLOYEE NUMBER	IDENTIFICATION NUMBER	EMPLOYEE NAME	S E X	CONTRACT TYPE	ADVANTAGE EPO	PREScription	PAY LOCATION CODE	TOTAL
				X					

TEFDEF SUBSCRIBERS

TEFDEF SUBSCRIBERS

Kontrollierte Synthese von Polymeren mit funktionellen Gruppen

JH2V/4903100 CERN/ATLAS
JH2V/4903100 CERN/ATLAS

XXX-XX-0012 3HZN94251270 GREEN Y. F SINGLE \$946.06 \$946.06

XXXX YY-419
342ND0333370 HOWARD, TIM F. SINGLE \$748.45
\$0.00
77A/15

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1004
RUBBING, W. SINCE
1920-1921 \$1,000.33
1005
1928-35



3 PENN PLAZA EAST, NEWARK, NEW JERSEY 07105-2200

ATTN: R.GREGORY WARD/PATRICIA

URBAN LEAGUE OF ESSEX COUNTY
508 CENTRAL AVENUE
NEWARK NJ 07107-1430

ACCT: 310430354

RATING	YEAR	BILLING PERIOD	Covered
FROM	TO	FROM	TO
10/15/19		10/15/20	

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SOCIAL SECURITY NUMBER	EMPLOYEE NUMBER	IDENTIFICATION NUMBER	EMPLOYEE NAME	S CONTRACT TYPE	ADVANTAGE EPO	PREScription	PAY LOCATION CODE	TOTAL
XXX-XX-2811		3HZN69922530	SHARIF,D.S.	M SINGLE	\$1,033.68	\$0.00		\$1,033.68
XXX-XX-4029		3HZN24650320	WILLIAMS,K.J.	F F SINGLE	\$625.08	\$0.00		\$625.08

TOTAL REGULAR								
TOTAL	DETAIL BILL	- GROUP NUMBER	00-153MB		\$13,003.47	\$0.00		\$13,003.47
TOTAL DETAIL		BILL			\$13,003.47	\$0.00		\$13,003.47
TOTAL DEBIT		ADJUSTMENTS		
TOTAL CREDIT		ADJUSTMENTS		
TOTAL NET	BILL							



3 PENN PLAZA EAST, NEWARK, NEW JERSEY 07105-2200

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URBAN LEAGUE OF ESSEX COUNTY

508 CENTRAL AVENUE
NEWARK NJ 07107-1430
ACCT: 310430354

RATING	YEAR	BILLING PERIOD	COVERED
10/1/19	10/15/20	02/15/20	03/15/20
FROM	TO	FROM	TO

PAGE 3

CONTRACTS COUNTS							
	SINGLE	2 ADULTS	FAMILY	TYPE4	TYPE5	P&C	TOTAL
ADVANTAGE EPO							
REGULAR GROUP	12	1	0	0	0	0	13
TEFRA DEFRA	1	0	0	0	0	0	1
TOTAL ADVANTAGE EPO	13	1	0	0	0	0	14
PRESCRIPTION							
REGULAR GROUP	12	1	0	0	0	0	13
TEFRA DEFRA	1	0	0	0	0	0	1
TOTAL PRESCRIPTION	13	1	0	0	0	0	14



3 PENN PLAZA EAST, NEWARK, NEW JERSEY 07105-2200

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URBAN LEAGUE OF ESSEX COUNTY508 CENTRAL AVENUE
NEWARK NJ 07107-1430

ACCT: 310430354

DATE PREPARED	GROUP NUMBER
01/28/20	01-153M8

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SOCIAL SECURITY NUMBER	EMPLOYEE NUMBER	IDENTIFICATION NUMBER	EMPLOYEE NAME	S E	CONTRACT TYPE	DENTAL-G X	PAY LOCATION CODE	TOTAL
***** DETAIL BILL *****								

REGULAR SUBSCRIBERS

XXX-XX-0323	3HZN36279200	BARBER,A.	F	SINGLE	\$0.00
XXX-XX-9241	3HZN14953700	CERNA,I	F	SINGLE	\$0.00
XXX-XX-8733	3HZN17722950	CHAMBERS,C.M.	M	SINGLE	\$0.00
XXX-XX-2266	3HZN121288520	FALLEN,J.L.	F	SINGLE	\$0.00
XXX-XX-5275	3HZN145326490	FITZPATRICK,C.E.	F	SINGLE	\$0.00
XXX-XX-0012	3HZN194251270	GREEN,Y.	F	SINGLE	\$0.00
XXX-XX-9236	3HZN61822430	GROVE,J	M	SINGLE	\$0.00
XXX-XX-5324	3HZN181107590	LITTLE,S.	F	SINGLE	\$0.00
XXX-XX-3964	3HZN17758740	MORRIS,G.J	F	SINGLE	\$0.00
XXX-XX-6006	3HZN159576850	RICHARDSON,S.M.	F	SINGLE	\$0.00
XXX-XX-9664	3HZN25462180	ROBBINS,L.	M	SINGLE	\$0.00



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RATING	YEAR	BILLING	PERIOD	COVERED
FROM	TO	FROM	TO	

NEWARK NJ 07107-1430

SOCIAL SECURITY NUMBER	EMPLOYEE NUMBER	IDENTIFICATION NUMBER	EMPLOYEE NAME	S	CONTRACT TYPE	DENTAL-G	PAY LOCATION CODE	TOTAL
				X				



3 PENN PLAZA EAST, NEWARK, NEW JERSEY 07105-2200

RATING	YEAR
FROM	TO
10/15/19	10/15/20
02/15/20	03/15/20

DENTAL-G	REGULAR GROUP
TOTAL	DENTAL-G

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NEWARK NJ 07107-1430
ACCT: 310430354



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508 CENTRAL AVENUE
NEWARK NJ 07107-1430
ACCT: 310430354

RATING	YEAR	BILLING PERIOD	COVERED
10/15/19		10/15/20	
FROM	TO	FROM	TO
02/15/20		03/15/20	

DATE PREPARED	GROUP NUMBER
01/28/20	02-153M8

SOCIAL SECURITY NUMBER	EMPLOYEE NUMBER	IDENTIFICATION NUMBER	EMPLOYEE NAME	S E X	CONTRACT TYPE	ADVANTAGE EPO	PREScription	PAY LOCATION CODE	TOTAL
***** DETAIL BILL *****									
XXX-XX-1218	3HZN51544610	BRYANT,R.L.		F	SINGLE	\$865.47	\$0.00		\$865.47
XXX-XX-9956	3HZN58396170	HOLLINS,Q.		F	P&C	\$1,346.70	\$0.00		\$1,346.70
XXX-XX-0801	3HZN52497650	MCMILLIAN,D.L.		F	SINGLE	\$918.88	\$0.00		\$918.88
XXX-XX-6066	3HZN13051270	SIMMONS,B.R.		F	SINGLE	\$768.94	\$0.00		\$768.94
XXX-XX-1629	3HZN86974140	STEWART,R.		F	SINGLE	\$1,068.35	\$0.00		\$1,068.35
XXX-XX-5333	3HZN869737660	WILSON,H.		F	2ADULT	\$1,608.63	\$0.00		\$1,608.63
***** TOTAL REGULAR *****									
						\$6,576.97	\$0.00		\$6,576.97
TOTAL	DETAIL BILL	- GROUP NUMBER				\$6,576.97	\$0.00		\$6,576.97
	TOTAL DETAIL	BILL				\$6,576.97	\$0.00		\$6,576.97
***** TOTAL DEBT ADJUSTMENTS *****									
TOTAL CREDIT	ADJUSTMENTS								
TOTAL NET	BILL								



3 PENN PLAZA EAST, NEWARK, NEW JERSEY 07105-2200

RATING	YEAR	BILLING	PERIOD	COVERED
10/1/19	10/1/20	02/15/20	03/15/20	
FROM	TO	FROM	TO	

ATTN: R.GREGORY WARD/PATRICIA
URBAN LEAGUE OF ESSEX COUNTY
508 CENTRAL AVENUE
NEWARK NJ 07107-1430
ACCT: 310430354

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CONTRACTS COUNTS

	SINGLE	2 ADULTS	FAMILY	TYPE4	TYPE5	P&C	TOTAL
ADVANTAGE EPO							
REGULAR GROUP	4	1	0	0	0	1	6
TOTAL ADVANTAGE EPO	4	1	0	0	0	1	6
PRESCRIPTION							
REGULAR GROUP	4	1	0	0	0	1	6
TOTAL PRESCRIPTION	4	1	0	0	0	1	6



3 PENN PLAZA EAST, NEWARK, NEW JERSEY 07105-2200

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FROM	TO	FROM	TO	
10/15/19	10/15/20	02/15/20		03/15/20

508 CENTRAL AVENUE
NEWARK NJ 07107-1430

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DATE PREPARED	GROUP NUMBER
01/28/20	03-153MB



3 PENN PLAZA EAST, NEWARK, NEW JERSEY 07105-2200

ATTN: R.GREGORY WARD/PATRICIA

URBAN LEAGUE OF ESSEX COUNTY

508 CENTRAL AVENUE

NEWARK NJ 07107-1430

ACCT: 310430354

RATING	YEAR	BILLING	PERIOD	COVERED
FROM	TO	FROM	TO	
10/15/19	10/15/20	02/15/20	03/15/20	

PAGE 1

CONTRACTS COUNTS							
	SINGLE	2 ADULTS	FAMILY	TYPE4	TYPE5	P&C	TOTAL
DENTAL-G				3	0	0	3
REGULAR GROUP				0	0	0	0
TOTAL	3	0	0	0	0	0	3
DENTAL-G							