

RAMANA GORLI			Statement	Page 1 of 4
4925 RASOR BLVD AI	PT 329		Statement Date	February 27, 2023
PLANO	ТХ	75024	ID #	52X535604F

For questions about your payment history, please contact our Customer Care Team at 800-387-9027. Thank you for being our Customer. We appreciate you!

December 2022									
Transaction Date	Payment Applied	Plan/Member Number	Plan Name	Association Membership	Reversal Date	Reason	Payment Amount	Payment Method	Paid To Date
12/13/2022	12/11/2022	52X535604F	HEALTHACCESS II FIXED INDEMNITY				\$428.27		1/11/2023
12/13/2022	12/11/2022	52X535604G	HEALTHACCESS MEDGUARD- 5 Year Term to age 70 with ADB				\$20.32		1/11/2023
12/13/2022	12/11/2022	52X535604J	PREMIERVISION				\$21.30		1/11/2023
12/13/2022	12/11/2022	75GUE08210		ABC ELITE			\$79.95		1/11/2023
							\$549.84	TOTAL	

November 2022									
Transaction Date	Payment Applied	Plan/Member Number	Plan Name	Association Membership	Reversal Date	Reason	Payment Amount	Payment Method	Paid To Date
11/11/2022	11/11/2022	52X535604F	HEALTHACCESS II FIXED INDEMNITY				\$428.27		12/11/2022
11/11/2022	11/11/2022	52X535604G	HEALTHACCESS MEDGUARD- 5 Year Term to age 70 with ADB				\$20.32		12/11/2022
11/11/2022	11/11/2022	52X535604J	PREMIERVISION				\$21.30		12/11/2022
11/11/2022	11/11/2022	75GUE08210		ABC ELITE			\$79.95		12/11/2022
							\$549.84	TOTAL	

October 2022									
Transaction Date	Payment Applied	Plan/Member Number	Plan Name	Association Membership	Reversal Date	Reason	Payment Amount	Payment Method	Paid To Date
10/11/2022	10/11/2022	52X535604F	HEALTHACCESS II FIXED INDEMNITY				\$428.27		11/11/2022
10/11/2022	10/11/2022	52X535604G	HEALTHACCESS MEDGUARD- 5 Year Term to age 70 with ADB				\$20.32		11/11/2022
10/11/2022	10/11/2022	52X535604J	PREMIERVISION				\$21.30		11/11/2022
10/11/2022	10/11/2022	75GUE08210		ABC ELITE			\$79.95		11/11/2022
							\$549.84	TOTAL	

* The Affordable Care Act ("ACA") generally requires individuals to maintain "minimum essential coverage" or be subject to the payment of the annual shared responsibility payment with the payment of their taxes to the federal government from 2014 – 2018. Congress eliminated the shared responsibility payment in 2019 and beyond for individuals who do not maintain ACA "minimum essential coverage" during 2019 or any year thereafter.



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September 2022									
Transaction Date	Payment Applied	Plan/Member Number	Plan Name	Association Membership	Reversal Date	Reason	Payment Amount	Payment Method	Paid To Date
9/13/2022	9/11/2022	52X535604F	HEALTHACCESS II FIXED INDEMNITY				\$428.27		10/11/2022
9/13/2022	9/11/2022	52X535604G	HEALTHACCESS MEDGUARD- 5 Year Term to age 70 with ADB				\$20.32		10/11/2022
9/13/2022	9/11/2022	52X535604J	PREMIERVISION				\$21.30		10/11/2022
9/13/2022	9/11/2022	75GUE08210		ABC ELITE			\$79.95		10/11/2022
							\$549.84	TOTAL	

August 2022									
Transaction Date	Payment Applied	Plan/Member Number	Plan Name	Association Membership	Reversal Date	Reason	Payment Amount	Payment Method	Paid To Date
8/11/2022	8/11/2022	52X535604F	HEALTHACCESS II FIXED INDEMNITY				\$428.27		9/11/2022
8/11/2022	8/11/2022	52X535604G	HEALTHACCESS MEDGUARD- 5 Year Term to age 70 with ADB				\$20.32		9/11/2022
8/11/2022	8/11/2022	52X535604J	PREMIERVISION				\$21.30		9/11/2022
8/11/2022	8/11/2022	75GUE08210		ABC ELITE			\$79.95		9/11/2022
							\$549.84	TOTAL	

July 2022									
Transaction Date	Payment Applied	Plan/Member Number	Plan Name	Association Membership	Reversal Date	Reason	Payment Amount	Payment Method	Paid To Date
7/12/2022	7/11/2022	52X535604F	HEALTHACCESS II FIXED INDEMNITY				\$428.27		8/11/2022
7/12/2022	7/11/2022	52X535604G	HEALTHACCESS MEDGUARD- 5 Year Term to age 70 with ADB				\$20.32		8/11/2022
7/12/2022	7/11/2022	52X535604J	PREMIERVISION				\$21.30		8/11/2022
7/12/2022	7/11/2022	75GUE08210		ABC ELITE			\$79.95		8/11/2022
							\$549.84	TOTAL	

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4925 RASOR BLVD AP	T 329		Statement Date	February 27, 2023
PLANO	ТХ	75024	ID #	52X535604F

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June 2022									
Transaction Date	Payment Applied	Plan/Member Number	Plan Name	Association Membership	Reversal Date	Reason	Payment Amount	Payment Method	Paid To Date
6/13/2022	6/11/2022	52X535604F	HEALTHACCESS II FIXED INDEMNITY				\$428.27		7/11/2022
6/13/2022	6/11/2022	52X535604G	HEALTHACCESS MEDGUARD- 5 Year Term to age 70 with ADB				\$20.32		7/11/2022
6/13/2022	6/11/2022	52X535604J	PREMIERVISION				\$21.30		7/11/2022
6/13/2022	6/11/2022	75GUE08210		ABC ELITE			\$79.95		7/11/2022
							\$549.84	TOTAL	

May 2022									
Transaction Date	Payment Applied	Plan/Member Number	Plan Name	Association Membership	Reversal Date	Reason	Payment Amount	Payment Method	Paid To Date
5/11/2022	5/11/2022	52X535604F	HEALTHACCESS II FIXED INDEMNITY				\$428.27		6/11/2022
5/11/2022	5/11/2022	52X535604G	HEALTHACCESS MEDGUARD- 5 Year Term to age 70 with ADB				\$20.32		6/11/2022
5/11/2022	5/11/2022	52X535604J	PREMIERVISION				\$21.30		6/11/2022
5/11/2022	5/11/2022	75GUE08210		ABC ELITE			\$79.95		6/11/2022
							\$549.84	TOTAL	

April 2022									
Transaction Date	Payment Applied	Plan/Member Number	Plan Name	Association Membership	Reversal Date	Reason	Payment Amount	Payment Method	Paid To Date
4/12/2022	4/11/2022	52X535604F	HEALTHACCESS II FIXED INDEMNITY				\$428.27		5/11/2022
4/12/2022	4/11/2022	52X535604G	HEALTHACCESS MEDGUARD- 5 Year Term to age 70 with ADB				\$20.32		5/11/2022
4/12/2022	4/11/2022	52X535604J	PREMIERVISION				\$21.30		5/11/2022
4/12/2022	4/11/2022	75GUE08210		ABC ELITE			\$79.95		5/11/2022
							\$549.84	TOTAL	

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4925 RASOR BLVD APT 32	9	Statement Date	February 27, 2023		
PLANO	TX 75024	ID #	52X535604F		

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March 2022									
Transaction Date	Payment Applied	Plan/Member Number	Plan Name	Association Membership	Reversal Date	Reason	Payment Amount	Payment Method	Paid To Date
3/18/2022	3/11/2022	52X535604F	HEALTHACCESS II FIXED INDEMNITY				\$428.27		4/11/2022
3/18/2022	3/11/2022	52X535604G	HEALTHACCESS MEDGUARD- 5 Year Term to age 70 with ADB				\$20.32		4/11/2022
3/18/2022	3/11/2022	52X535604J	PREMIERVISION				\$21.30		4/11/2022
3/18/2022	3/11/2022	75GUE08210		ABC ELITE			\$179.95		4/11/2022
							\$649.84	TOTAL	

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