WealthCare Saver Prime PO Box 162177 Altamonte Springs, FL 32716

VENU KANCHIBHOTLA 4845 Railway cir Monrovia, MD 21770



Account Number601015171945Last Statement Date12/31/2022This Statement Date12/31/2022Total Days in Statement Period68

## Health Savings Account (HSA) Statement

WealthCare Saver is the Custodian for your Health Savings Account

For inquiries about your HSA or for information regarding your benefits, please contact:

Flores & Associates PO Box 31397 Charlotte, NC 28231 800-532-3327 HSA@flores-associates.com

# **Account Statement**

### Account Number: 601015171945

Beginning Balance	0.00	Annual Percentage Yield Earned (APY)	0.04 %
Additions	2,150.09	Average Balance for APY	1,327.55
Subtractions	-698.83	Interest Earned	0.09
Ending Balance	1,448.92	Current Tax Year Contributions To Date	2,150.00
Total Investment Balance	714.03	Current Tax Year Distributions To Date	0.00

#### **Overdraft and Returned Item Fees**

<b>Fee Type</b>	Total for this Period	Total Year-to-Date
Total Overdraft Fees	0.00	0.00
Total Returned Item Fees	0.00	0.00

# **Account Activity Detail**

#### Subtractions

Date	Description	HSA Transaction Type	Amount
11/08	TRANSFER FROM HSA TO INVESTMENTS Transfer from HSA to WealthCare Investments	Non Reportable	-700.00
12/08	WEALTHCARE INVESTMENTS Wealthcare Investments Account Fee	Non Reportable	1.17
Total Subtractions			-698.83

Ad	diti	ions
	~	0.10

Date	Description	HSA Transaction Type	Amount
10/27	Payroll Deposit - Employee	Normal Contribution	150.00
10/27	Payroll Deposit - Employee	Normal Contribution	150.00
10/27	Payroll Deposit - Employee	Normal Contribution	150.00
10/27	Payroll Deposit - Employee	Normal Contribution	150.00
10/27	Payroll Deposit - Employee	Normal Contribution	150.00
10/27	Payroll Deposit - Employee	Normal Contribution	150.00
10/27	Payroll Deposit - Employee	Normal Contribution	150.00
10/27	Payroll Deposit - Employee	Normal Contribution	150.00
10/27	Payroll Deposit - Employer	Normal Contribution – Employer	500.00
11/08	Payroll Deposit - Employee	Normal Contribution	150.00
11/30	INTEREST PAYMENT Interest payment	Non Reportable	0.05
12/06	Payroll Deposit - Employee	Normal Contribution	150.00
12/06	Payroll Deposit - Employee	Normal Contribution	150.00
12/31	INTEREST PAYMENT Interest payment	Non Reportable	0.04
Total Ad	2,150.09		

Effective January 1, 2023, the interest rates for your WealthCare Saver Health Savings Account (HSA) will be updated. Please review all disclosures, including the WealthCare Saver Privacy Policy at: <a href="https://www.wealthcaresaver.com/disclosures/wcsp">www.wealthcaresaver.com/disclosures/wcsp</a>

Account Number601015171945Last Statement Date12/31/2022Total Days in Statement Period68

### Error Resolution Procedures for Debit Card Transactions and All Other Transactions

If you believe that an error has occurred on your account or appears on your statement or receipt, or you need more information about a transaction or an official dispute form, please contact your Administrator immediately using the phone number on the back of your debit card or listed on your quarterly account statement.

### **Debit Card Transactions**

Should you need to file an official dispute for a debit card transaction please refer to your Debit Card Agreement for instructions.

### **All Other Transactions**

Should you need to file an official dispute for non-debit card transactions with the Custodian, you must complete and submit the appropriate dispute form within 60 days from the date on which the transaction was credited or debited to your account. Please refer to your Health Savings Account Custodial Agreement and Privacy Policy for instructions or contact your Administrator for assistance.