



LLPS INC.  
6323 W SAGINAW HWY STE E  
LANSING MI 48917-2492

Coverage Period	June 2021
Statement Date:	05/18/2021
Client ID:	30062303
Statement Number:	812349221

Payment Activity		
Previous Statement Balance:	\$	47.23
Payments Received:	\$	0.00
Remaining Balance:	\$	47.23

Current Statement Activity		
Remaining Balance:	\$	47.23
Current Charges:	\$	47.23
Adjustments:	\$	0.00
<b>Amount Due:</b>	\$	<b>94.46</b>
<b>Payment Due Date:</b>	<b>Due Upon Receipt</b>	

Paying your bill has never been easier. Access our online tools at [www.vsp.com](http://www.vsp.com) by clicking the Employers tab, then going to "Manage Your Plan". You'll have tools at your fingertips that will make paying bills and managing eligibility a snap.

**Questions? Please call 800.216.6248 if you have questions regarding your statement.**

**Please detach and return this portion with your payment.**

Client Name: LLPS INC.  
Coverage Period: June 2021  
Statement Date: 05/18/2021

Client ID: 30062303  
Statement Number: 812349221  
Customer Ref: 3476332

**Indicate Amount Paid**

Statement Amount: \$94.46  
Payment Due Date: **Due Upon Receipt**

Other Amount: \_\_\_\_\_

VSP INSURANCE CO. (CT)  
PO BOX 742788  
LOS ANGELES CA 90074-2788

**Payment Activity****Payments Received**

Date	Description	Amount
	<b>Total Payments Received:</b>	<b>\$ 0.00</b>

**Current Statement Activity****Current Charges****Coverage Period June 2021****Division 0001 LLPS INC.**

Coverage	Members Billed	Rate	Amount Due
Member Only	0 @ \$	11.08 \$	0.00
Member + One	1 @ \$	16.91 \$	16.91
Member + Children	0 @ \$	30.32 \$	0.00
Member + Family	1 @ \$	30.32 \$	30.32
<b>Total Membership:</b>	<b>2</b>		<b>\$ 47.23</b>