BlueCross BlueShield of Illinois

Monthly Settlements - Settlement Statement

Settlement ID: 84823030006 - GLENBROOK HIGH SCHOOL DISTRICT 225
Statement Period: 07/01/2012-07/31/2012 Rebill: NO Process Date: 08/01/2012

Settlement Statement

The Settlement Statement presents a high-level overview of charges including claims, administrative fees, stop loss, adjustments, and other charges.

Billing Contact: **HILLARIE SIENA**
GLENBROOK HIGH SCHOOL
DISTRICT 225
3801 WEST LAKE AVE
GLENVIEW, IL 60026-5807

Past Due Date: **08/26/2012**

Settlement Statement

This statement includes claims paid thru 07/31/2012.	
Prior Statement Balance	$334,495.87
Charges	$300,290.81
Cash Applied	($334,495.87)
Disbursements	$0.00
Adjustments	$0.00
Account Balance at 07/31/2012	$300,290.81
Ending Statement Balance as of 07/31/2012	**$300,290.81**

Payment Instructions

Please follow the instructions below when remitting your payment.

For Electronic Payments (Wire or ACH), make payments to:
Mellon Bank
Health Care Service Corporation
ABA#: 043000261
Account#: 120-5032

When remitting electronically via wire or ACH, please indicate: Settlement ID 84823030006 and Settlement Date: 07/12.

For check payments:

- Make check payable to: **Health Care Service Corporation**
- Please provide your Settlement ID 84823030006 and Settlement Date: 07/12 on the check.

If sending payment by **1st Class Mail,** remit to:

Health Care Service Corporation
25551 Network Place
Chicago, IL 60673-1255

If sending via **Overnight Courier:**

JPMorgan Chase
131 S Dearborn, 6th Floor
Chicago, IL 60603
Attn: Health Care Service Corporation - #25551

BlueCross BlueShield of Illinois

Monthly Settlements - Settlement Statement

Settlement ID: 84823030006 - GLENBROOK HIGH SCHOOL DISTRICT 225
Statement Period: 08/01/2012-08/31/2012 Rebill: NO Process Date: 08/31/2012

Settlement Statement

The Settlement Statement presents a high-level overview of charges including claims, administrative fees, stop loss, adjustments, and other charges.

Billing Contact: **HILLARIE SIENA**
GLENBROOK HIGH SCHOOL
DISTRICT 225
3801 WEST LAKE AVE
GLENVIEW, IL 60026-5807

Past Due Date: **09/25/2012**

Settlement Statement

This statement includes claims paid thru 08/31/2012.	
Prior Statement Balance	$300,290.81
Charges	$391,909.13
Cash Applied	($300,290.81)
Disbursements	$0.00
Adjustments	$0.00
Account Balance at 08/31/2012	$391,909.13
Ending Statement Balance as of 08/31/2012	**$391,909.13**

Payment Instructions

Please follow the instructions below when remitting your payment.

For Electronic Payments (Wire or ACH), make payments to:
Mellon Bank
Health Care Service Corporation
ABA#: 043000261
Account#: 120-5032

When remitting electronically via wire or ACH, please indicate: Settlement ID 84823030006 and Settlement Date: 08/12.

For check payments:

- Make check payable to: **Health Care Service Corporation**
- Please provide your Settlement ID 84823030006 and Settlement Date: 08/12 on the check.

If sending payment by **1st Class Mail,** remit to:

Health Care Service Corporation
25551 Network Place
Chicago, IL 60673-1255

If sending via **Overnight Courier:**

JPMorgan Chase
131 S Dearborn, 6th Floor
Chicago, IL 60603
Attn: Health Care Service Corporation - #25551

BlueCross BlueShield of Illinois

Monthly Settlements - Settlement Statement

Settlement ID: 84823030006 - GLENBROOK HIGH SCHOOL DISTRICT 225
Statement Period: 09/01/2012-09/30/2012 Rebill: NO Process Date: 09/28/2012

Settlement Statement

The Settlement Statement presents a high-level overview of charges including claims, administrative fees, stop loss, adjustments, and other charges.

Billing Contact: **HILLARIE SIENA**
GLENBROOK HIGH SCHOOL
DISTRICT 225
3801 WEST LAKE AVE
GLENVIEW, IL 60026-5807

Past Due Date: **10/23/2012**

Settlement Statement

This statement includes claims paid thru 09/30/2012.	
Prior Statement Balance	$391,909.13
Charges	$292,146.52
Cash Applied	($391,909.13)
Disbursements	$0.00
Adjustments	$0.00
Account Balance at 09/30/2012	$292,146.52
Ending Statement Balance as of 09/30/2012	**$292,146.52**

Payment Instructions

Please follow the instructions below when remitting your payment.

For Electronic Payments (Wire or ACH), make payments to:
Mellon Bank
Health Care Service Corporation
ABA#: 043000261
Account#: 120-5032

When remitting electronically via wire or ACH, please indicate: Settlement ID 84823030006 and Settlement Date: 09/12.

For check payments:

- Make check payable to: **Health Care Service Corporation**
- Please provide your Settlement ID 84823030006 and Settlement Date: 09/12 on the check.

If sending payment by **1st Class Mail,** remit to:

Health Care Service Corporation
25551 Network Place
Chicago, IL 60673-1255

If sending via **Overnight Courier:**

JPMorgan Chase
131 S Dearborn, 6th Floor
Chicago, IL 60603
Attn: Health Care Service Corporation - #25551

BlueCross BlueShield of Illinois

Monthly Settlements - Settlement Statement

Settlement ID: 84823030006 - GLENBROOK HIGH SCHOOL DISTRICT 225
Statement Period: 10/01/2012-10/31/2012 Rebill: NO Process Date: 11/01/2012

Settlement Statement

The Settlement Statement presents a high-level overview of charges including claims, administrative fees, stop loss, adjustments, and other charges.

Billing Contact: **HILLARIE SIENA**
GLENBROOK HIGH SCHOOL
DISTRICT 225
3801 WEST LAKE AVE
GLENVIEW, IL 60026-5807

Past Due Date: **11/26/2012**

Settlement Statement

This statement includes claims paid thru 10/31/2012.	
Prior Statement Balance	$292,146.52
Charges	$244,243.79
Cash Applied	($292,146.52)
Disbursements	$0.00
Adjustments	$0.00
Account Balance at 10/31/2012	$244,243.79
Ending Statement Balance as of 10/31/2012	**$244,243.79**

Payment Instructions

Please follow the instructions below when remitting your payment.

For Electronic Payments (Wire or ACH), make payments to:
Mellon Bank
Health Care Service Corporation
ABA#: 043000261
Account#: 120-5032

When remitting electronically via wire or ACH, please indicate: Settlement ID 84823030006 and Settlement Date: 10/12.

For check payments:

- Make check payable to: **Health Care Service Corporation**
- Please provide your Settlement ID 84823030006 and Settlement Date: 10/12 on the check.

If sending payment by **1st Class Mail,** remit to:

Health Care Service Corporation
25551 Network Place
Chicago, IL 60673-1255

If sending via **Overnight Courier:**

JPMorgan Chase
131 S Dearborn, 6th Floor
Chicago, IL 60603
Attn: Health Care Service Corporation - #25551

BlueCross BlueShield of Illinois

Monthly Settlements - Settlement Statement

Settlement ID: 84823030006 - GLENBROOK HIGH SCHOOL DISTRICT 225
Statement Period: 11/01/2012-11/30/2012 Rebill: NO Process Date: 11/30/2012

Settlement Statement

The Settlement Statement presents a high-level overview of charges including claims, administrative fees, stop loss, adjustments, and other charges.

Billing Contact: **HILLARIE SIENA**
GLENBROOK HIGH SCHOOL DISTRICT 225
3801 WEST LAKE AVE
GLENVIEW, IL 60026-5807

Past Due Date: **12/25/2012**

Settlement Statement

This statement includes claims paid thru 11/30/2012.		
Prior Statement Balance		$244,243.79
Claims	$118,697.68	
Fees	$146,788.75	
Charges		$265,486.43
Cash Applied		($244,243.79)
Disbursements		$0.00
Adjustments		$0.00
Account Balance at 11/30/2012		$265,486.43
Ending Statement Balance as of 11/30/2012		**$265,486.43**

Payment Instructions

Please follow the instructions below when remitting your payment.

For Electronic Payments (Wire or ACH), make payments to:
Mellon Bank
Health Care Service Corporation
ABA#: 043000261
Account#: 120-5032

When remitting electronically via wire or ACH, please indicate: Settlement ID 84823030006 and Settlement Date: 11/12.

For check payments:

- Make check payable to: **Health Care Service Corporation**
- Please provide your Settlement ID 84823030006 and Settlement Date: 11/12 on the check.

If sending payment by **1st Class Mail,** remit to:

Health Care Service Corporation
25551 Network Place
Chicago, IL 60673-1255

If sending via **Overnight Courier:**

JPMorgan Chase
131 S Dearborn, 6th Floor
Chicago, IL 60603
Attn: Health Care Service Corporation - #25551

BlueCross BlueShield of Illinois

Monthly Settlements - Settlement Statement

Settlement ID: 84823030006 - GLENBROOK HIGH SCHOOL DISTRICT 225
Statement Period: 12/01/2012-12/31/2012 Rebill: NO Process Date: 01/02/2013

Settlement Statement

The Settlement Statement presents a high-level overview of charges including claims, administrative fees, stop loss, adjustments, and other charges.

Billing Contact: **HILLARIE SIENA**
GLENBROOK HIGH SCHOOL
DISTRICT 225
3801 WEST LAKE AVE
GLENVIEW, IL 60026-5807

Past Due Date: **01/27/2013**

Settlement Statement

This statement includes claims paid thru 12/31/2012.		
Prior Statement Balance		$265,486.43
Claims	$217,891.13	
Fees	$146,046.10	
Charges		$363,937.23
Cash Applied		($265,486.43)
Disbursements		$0.00
Adjustments		$0.00
Account Balance at 12/31/2012		$363,937.23
Ending Statement Balance as of 12/31/2012		**$363,937.23**

Payment Instructions

Please follow the instructions below when remitting your payment.

For Electronic Payments (Wire or ACH), make payments to:
Mellon Bank
Health Care Service Corporation
ABA#: 043000261
Account#: 120-5032

When remitting electronically via wire or ACH, please indicate: Settlement ID 84823030006 and Settlement Date: 12/12.

For check payments:

- Make check payable to: **Health Care Service Corporation**
- Please provide your Settlement ID 84823030006 and Settlement Date: 12/12 on the check.

If sending payment by **1st Class Mail,** remit to:

Health Care Service Corporation
25551 Network Place
Chicago, IL 60673-1255

If sending via **Overnight Courier:**

JPMorgan Chase
131 S Dearborn, 6th Floor
Chicago, IL 60603
Attn: Health Care Service Corporation - #25551

BlueCross BlueShield of Illinois

Monthly Settlements - Settlement Statement

Settlement ID: 84823030006 - GLENBROOK HIGH SCHOOL DISTRICT 225
Statement Period: 01/01/2013-01/31/2013 Rebill: NO Process Date: 02/01/2013

Settlement Statement

The Settlement Statement presents a high-level overview of charges including claims, administrative fees, stop loss, adjustments, and other charges.

Billing Contact: **HILLARIE SIENA**
GLENBROOK HIGH SCHOOL
DISTRICT 225
3801 WEST LAKE AVE
GLENVIEW, IL 60026-5807

Past Due Date: **02/26/2013**

Settlement Statement

This statement includes claims paid thru 01/31/2013.		
Prior Statement Balance		$363,937.23
Claims	$146,697.79	
Fees	$146,327.41	
Charges		$293,025.20
Cash Applied		($363,937.23)
Disbursements		$0.00
Adjustments		($503.00)
Account Balance at 01/31/2013		$292,522.20
Ending Statement Balance as of 01/31/2013		**$292,522.20**

Payment Instructions

Please follow the instructions below when remitting your payment.

For Electronic Payments (Wire or ACH), make payments to:
Mellon Bank
Health Care Service Corporation
ABA#: 043000261
Account#: 120-5032

When remitting electronically via wire or ACH, please indicate: Settlement ID 84823030006 and Settlement Date: 01/13.

For check payments:

- Make check payable to: **Health Care Service Corporation**
- Please provide your Settlement ID 84823030006 and Settlement Date: 01/13 on the check.

If sending payment by **1st Class Mail,** remit to:

Health Care Service Corporation
25551 Network Place
Chicago, IL 60673-1255

If sending via **Overnight Courier:**

JPMorgan Chase
131 S Dearborn, 6th Floor
Chicago, IL 60603
Attn: Health Care Service Corporation - #25551