# KENTUCKY-AMERICAN WATER COMPANY <br> CASE NO. 2010-00036 <br> COMMISSION STAFF'S FIRST REQUEST FOR INFORMATION 

Witness: Michael Miller
2. a. State whether Kentucky-American's internal accounting manuals, directives, policies, and procedures that were submitted in Case No. 2008-00427 ${ }^{1}$ have been modified, amended, or replaced.
b. If any of the documents identified in Item 2(a) have been modified, amended, or replaced, provide a complete copy of the current document and identify the areas that differ from the document provided in Case No. 2008-00427.

## Response:

a. None of the accounting manuals, directives, policies and procedures that were submitted in Case No. 2008-00427 have been modified , amended or replaced. However, there have been several policies/procedures added.
b. The new policies/procedures responsive to this question are confidential and proprietary, and, therefore, the Company has filed a Petition for Confidential Treatment contemporaneously with these responses. The Company will provide copies of the requested documents to all parties in this case upon execution of an appropriate confidentiality agreement.

For electronic version see KAW_R_PSCDR1\#2_031610.pdf.

1 Case No. 2008-00427, Application of Kentucky-American Water Company for a General Adjustment of Rates Supported by a Fully Forecasted Test Year (Ky. PSC Jun. 6, 2009), Kentucky-American’s Response to the Commission Staff’s First Set of Information Requests, Item 2.

## KENTUCKY-AMERICAN WATER COMPANY <br> CASE NO. 2010-00036 <br> COMMISSION STAFF'S FIRST REQUEST FOR INFORMATION

Witness: Michael Miller
3. Provide a complete copy of all Kentucky-American budget instructions, assumptions, directives, manuals, policies and procedures, time lines, and descriptions of budget procedures.

## Response:

See attached.
For the electronic version, refer to KAW_R_PSCDR1\#3_031610.pdf.

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## Hyperion Submission to Corporate

 Exec. Team/Corp FP\&A and Svc Co. FinanceOperating Units (FP\&A and Rates)
Internal State Reviews
Senior Leaders
Corporate Planning
State Presidents
Executive Leadership
Executive Leadership

Executive Leadership
Cap Prog Management
Exec. Team / Corp. Planning
CPM/Corp FP\&A / Op. Units Service Company Finance Service Company Finance CPM/Operating Units

Operating Units (Ail Functions) Operating Units (All Functions) Operating Units (FP\&A and Rates)
Service Company Finance
 Operating Units (All Functions)
State Finance

 st!un 6u!!ejedo
evueu! stun 6umejedo
stun 6u!peredo
 Corporate Planning st!uก ถulteaədo

Corporate FP\&A Kick-off with Executive Overview of Hyperion Distribution of Business Plan Guidance including global assumption
Distribution of Business Plan Presentation templates
Distribution of Business Plan Presentation templates
Hyperion BPM Models distributed (Revenue, Workforce Planning, Production Business Development) Corporate Assumptions will be distributed at this time.
Operational Assessments completed

- Strategy Work Session
Tentatively define Mission, Strategic Objective, Mission Critical Initiatives and Key Performance Measures
Capex Plans submitted for Review to Capital Program Management and State Finance
Communicate Mission, Strategic Objective, Mission Critical Initiatives and
Key Performance Measures
Capex Plans Review Sessions
Service Company Business Plan Completed
Capex Plans Finalized
 Including BD (Intemal Meeting i.e. State Only)
- Executive Review of Service Company Plan
- Rate Assessment based on Prelim. Input
- Finai Service Company Fees Distributed
Interest and Tax Assumptions Finalized
- Plan Review Meetings (Internal meetings with State Operations/Finance)
- Business Plan Presentations Completed
- Business Plan Review Sessions with Regions/Divisions
- Action ltems Identified for Remediation
- Second Submission to Corporate Planning
- Working Sessions held with each State (PA: 6/30; Eastern Division States: TBD)

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| Account \# | Clobal Assumption Data |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
|  | Description | 2010 | 2011 | 2012 |
| GA0009 | Bonus Calculation (as a \% of target) | 100.00\% | 100.00\% | 100.00\% |
| GA0002 | Merit Increase-Salary | 3.00\% | 3.50\% | 4.00\% |
| Input | Merit Increase-Hourly Non-Union | \% $3.50 \%$ | 3.50\% | 3.50\% |
| Input | Alton Union Increase November | \% $3.25 \%$ | 3.25\% | 3.25\% |
| Input | Pensacola Union Increase March |  |  |  |
| GA0004 | Group Insurance (Per person/Yr) | 10,284 | 10,901 | 11,555 |
|  |  |  | 6.00\% | 6.00\% |
|  | Group Insurance (Per person/Month) | \$857 | \$908 | \$963 |
| GA0028 | 401K - Before 2005 (1/1/06) | 2.50\% | 2.50\% | 2.50\% |
| GA0029 | 401K - After 2005 (1/1/06) | 3.00\% | 3.00\% | 3.00\% |
| GA0030 | 401K - Max Contribution Limit | 15,500 | 15,500 | 15,500 |
| GA0031 | 401K - Before 12/31/2005 Participation | 72.00\% | 72.00\% | 72.00\% |
| GA0032 | 401K - After 12/31/2005 Participation | 65.00\% | 65.00\% | 65.00\% |
| GA0033 | DCP | 5.25\% | 5.25\% | 5.25\% |
| GA0034 | DCP - Max Eligible Wages | 240,000 | 240,000 | 240,000 |
| GA0035 | DCP Participation | 100.00\% | 100.00\% | 100.00\% |
| GA0036 | FUTA | 0.80\% | 0.80\% | 0.80\% |
| GA0037 | FUTA Limit | 7,000 | 7,000 | 7,000 |
| GA0005 | FICA | 6.20\% | 6.20\% | 6.20\% |
| GA0006 | FICA Limit | 110,800 | 115,000 | 119,600 |
| GA0007 | FICA Medicare | 1.45\% | 1.45\% | 1.45\% |
| GA0001 | Inflation Rate | 1.80\% | 2.40\% | 2.50\% |
| GA0010 | Long Term Incentive Plan - Cash | 50.00\% |  |  |
| GA0011 | Long Term Incentive Plan - Stock | 50.00\% |  |  |




ST Rate

2009Q1
2009 Q 2
2009 Q 3
2009 Q 4
2010
2011
2012
2013

| Tax Status Term |  |  | Base |  |  | Taxable |  | Tax-Exempt |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Taxable | 10 Yr |  | 10 Yr | 20 Yr | 30 Yr | 10 Yr | 30 Yr | 10 Yr | 30 Yr |
| Tax-Exempt | 30 Yr | Spread | 2.73 |  | 3.2 | 2.73 | 3.2 | 2.73 | 3.2 |
|  |  | Tax-Spread |  |  |  |  |  | -1.4 | -1.4 |
|  |  | May, 2008 | 3.52 | 4.5576 | 4.5125 | 6.25 | 7.7125 | 4.85 | 6.3125 |
|  |  | Nov, 2008 | 4.0546 | 4.6658 | 4.6196 | 6.7846 | 7.8196 | 5.3846 | 6.4196 |
|  |  | Feb, 2009 | 4.1534 | 4.7121 | 4.6655 | 6.8834 | 7.8655 | 5.4834 | 6.4655 |
|  |  | May, 2009 | 4.2411 | 4.7531 | 4.7061 | 6.9711 | 7.9061 | 5.5711 | 6.5061 |
|  |  | Aug, 2009 | 4.3392 | 4.7973 | 4.7498 | 7.0692 | 7.9498 | 5.6692 | 6.5498 |
| 15 Yr | 6.55 | Nov, 2009 | 4.4297 | 4.837 | 4.7891 | 7.1597 | 7.9891 | 5.7597 | 6.5891 |
|  |  | May, 2010 | 4.6059 | 4.9125 | 4.8639 | 7.3359 | 8.0639 | 5.9359 | 6.6639 |
|  |  | Jun, 2010 | 4.6204 | 4.9186 | 4.8699 | 7.3504 | 8.0699 | 5.9504 | 6.6699 |
|  |  | Nov, 2010 | 4.7875 | 4.9893 | 4.9399 | 7.5175 | 8.1399 | 6.1175 | 6.7399 |
|  |  | May, 2011 | 4.967 | 5.0638 | 5.0137 | 7.697 | 8.2137 | 6.297 | 6.8137 |
|  |  | Jun, 2011 | 4.9779 | 5.0671 | 5.017 | 7.7079 | 8.217 | 6.3079 | 6.817 |
|  |  | Nov, 2011 | 5.0889 | 5.0988 | 5.0483 | 7.8189 | 8.2483 | 6.4189 | 6.8483 |
|  |  | May, 2012 | 5.1925 | 5.1219 | 5.0712 | 7.9225 | 8.2712 | 6.5225 | 6.8712 |
|  |  | Jun, 2012 | 5.2053 | 5.126 | 5.0753 | 7.9353 | 8.2753 | 6.5353 | 6.8753 |
|  |  | Nov, 2012 | 5.3333 | 5.1652 | 5.1141 | 8.0633 | 8.3141 | 6.6633 | 6.9141 |
|  |  | May, 2013 | 5.4686 | 5.2044 | 5.1529 | 8.1986 | 8.3529 | 6.7986 | 6.9529 |
|  |  | Jun, 2013 | 5.4751 | 5.2069 | 5.1554 | 8.2051 | 8.3554 | 6.8051 | 6.9554 |
|  |  | Nov, 2013 | 5.5294 | 5.2271 | 5.1754 | 8.2594 | 8.3754 | 6.8594 | 6.9754 |

## November 2009 - Five year forecast



# CASE NO. 2010-00036 <br> PUBLIC SERVICE COMMISSION'S FIRST SET OF INFORMATION REQUESTS ITEMS 1 - 33 

Witness Responsible: Michael A. Miller/Sheila Miller
4. a. Provide a comparison of Kentucky-American's monthly operating budgets to the actual results, by account, for each of the following calendar years: 2006, 2007, 2008, and 2009. Kentucky-American’s response shall include comparisons for the following major expense categories:
(1) Fuel and Power Expense; (2) Chemical Expense; (3) Management Fee Expense; (4) Customer Accounting Expense; (5) General Office Expense; (6) Miscellaneous Expense; (7) Maintenance Expense.
b. Provide, for each yearly account variance that exceeds 5 percent, a detailed explanation for the variance.

Response:
a. Please see the attached schedules for 2006, 2007, 2008, and 2009 which detail the actual to budget results by account by month. The comparison for major expense categories is detailed below.

| Description | 2006 |  | 2007 |  | 2008 |  | 2009 |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Actual | Budget | Actual | Budget | Actual | Budget | Actual | Budget |
| Fuel \& Power Expense | 2,638,270 | 2,127,636 | 2,827,611 | 2,960,000 | 3,244,960 | 2,885,689 | 3,014,306 | 4,030,378 |
| Chemical Expense | 1,495,887 | 1,348,523 | 1,691,698 | 1,590,118 | 1,749,092 | 1,637,082 | 2,234,754 | 2,665,298 |
| Management Fees Expense Customer Accounting | 6,612,414 | 6,254,000 | 7,516,223 | 6,987,757 | 7,930,919 | 7,373,898 | 8,147,526 | 7,598,202 |
| Expense | 1,399,605 | 1,160,838 | 1,425,214 | 1,386,901 | 1,536,013 | 1,583,610 | 1,617,110 | 1,724,930 |
| General Office Expense | 470,171 | 329,299 | 463,222 | 479,085 | 646,272 | 463,939 | 531,596 | 589,975 |
| Miscellaneous Expense | 2,933,442 | 2,534,684 | 2,245,208 | 3,044,851 | 2,861,041 | 2,840,795 | 3,141,398 | 3,669,631 |
| Maintenance Expense | 2,284,673 | 1,248,184 | 2,235,322 | 2,740,291 | 2,683,651 | 2,330,353 | 2,769,954 | 2,732,193 |

CASE NO. 2010-00036
PUBLIC SERVICE COMMISSION'S FIRST SET OF INFORMATION REQUESTS
ITEMS 1 - 33
b. Please see the attached explanations for each yearly account variance that exceeds 5 percent.

For the electronic version, refer to KAW_R_PSCDR1\#4___031610.pdf.

Kentucky American Water Works Company Income Statement Fluctuation Analysis December 31, 2006

|  | Balance at 12/31/2006 | Plan Balance at 12/31/2006 | Increase <br> (Decrease) | \% <br> Change |
| :---: | :---: | :---: | :---: | :---: |
| Operating revenues |  |  |  |  |
| Water | 46,795,023 | 49,309,002 | $(2,513,979)$ | -5\% |
| Sewer | 302,692 | 352,692 | $(50,000)$ | -14\% A |
| Other | 1,912,432 | 1,747,596 | 164,836 | 9\% B |
| Management | - | - | - | 0\% |
| Total revenues | 49,010,147 | 51,409,290 | $(2,399,143)$ | -5\% |
| Operating expenses |  |  |  |  |
| Labor | 5,170,885 | 5,156,940 | 13,945 | 0\% |
| Purchased water | 506,626 | 470,500 | 36,126 | 8\% C |
| Fuel \& power | 2,638,270 | 2,127,636 | 510,634 | 24\% D |
| Chemicals | 1,495,887 | 1,348,523 | 147,364 | 11\% E |
| Waste disposal | 324,447 | 253,117 | 71,330 | 28\% F |
| Management Fees | 6,612,414 | 6,254,000 | 358,414 | 6\% G |
| Group insurance | 1,644,303 | 1,824,563 | $(180,260)$ | -10\% H |
| Pensions | 748,274 | 804,072 | $(55,798)$ | -7\% I |
| Regulatory Expense | 370,087 | 353,412 | 16,675 | 5\% J |
| Insurance other than Group | 649,162 | 501,888 | 147,274 | 29\% K |
| Customer Accounting | 1,399,605 | 1,160,838 | 238,767 | 21\% L |
| Rents | 52,237 | 45,072 | 7,165 | 16\% M |
| General office expense | 470,171 | 329,299 | 140,872 | 43\% N |
| Miscellaneous | 2,933,442 | 2,534,684 | 398,758 | 16\% O |
| Other maintenance | 2,284,673 | 1,248,184 | 1,036,489 | 83\% $\mathbf{P}$ |
| Total maintenance and operations expense | 27,300,483 | 24,412,728 | 2,887,755 | 12\% |
| Depreciation | 6,716,503 | 7,339,261 | $(622,758)$ | -8\% Q |
| Amortization | 459,264 | 486,084 | $(26,820)$ | -6\% R |
| General Taxes | 2,860,457 | 2,721,809 | 138,648 | 5\% |
| State Income Taxes | 454,913 | 987,225 | $(532,312)$ | -54\% S |
| Federal Income Taxes | 2,169,470 | 3,588,510 | $(1,419,040)$ | -40\% T |
| Tax Savings Acquisition Adjustment | - | - | - | 0\% |
| Total operating expenses | 39,961,090 | 39,535,617 | 425,473 | 1\% |
| Utility operating income | 9,049,057 | 11,873,673 | $(2,824,616)$ | -24\% |

Other income and deductions
Non-operating rental income
Dividend income-common
Dividend income-preferred
Interest income
AFUDC Equity
M\&J Miscellaneous income
Gain (Loss) on Disposition
Total other income
Miscellaneous amortization
Tax savings acquisition adjustment
Misc. other deductions
General taxes
State income taxes
Federal income taxes
otal other dederal income taxes

Net other income/(deductions)
Income before interest charges

| - | - | - | 0\% |
| :---: | :---: | :---: | :---: |
| - | - | - | 0\% |
| - | - | - | 0\% |
| 2,213 | - | 2,213 | \#DIV/O! |
| 273,684 | 175,832 | 97,852 | 56\% U |
| $(130,318)$ | 66,058 | $(196,376)$ | -297\% V |
| - | - | - | 0\% |
| 145,579 | 241,890 | $(96,311)$ | -40\% |
| (531) | 768 | $(1,299)$ | -169\% |
| - | - | - | 0\% |
| 278,501 | 280,419 | $(1,918)$ | -1\% |
| - | - | - | 0\% |
| $(28,426)$ | $(23,044)$ | $(5,382)$ | 23\% |
| $(142,126)$ | $(89,708)$ | $(52,418)$ | 58\% |
| 107,418 | 168,435 | $(61,017)$ | -36\% |
|  |  |  |  |
| 38,161 | 73,455 | $(35,294)$ | -48\% |
|  |  |  |  |
| 9,087,218 | 11,947,128 | $(2,859,910)$ | -24\% |
| 5,111,245 | 4,738,404 | 372,841 | 8\% W |
| 72,873 | 72,108 | 765 | 1\% |
| 408,695 | 625,948 | $(217,253)$ | -35\% X |
| 4,102 | - | 4,102 | \#DIV/0! |
| $(116,516)$ | $(79,851)$ | $(36,665)$ | 46\% Y |
| 5,480,399 | 5,356,609 | 123,790 | 2\% |
|  |  | - |  |
| 3,606,819 | 6,590,519 | $(2,983,700)$ | -45\% |
| 78,706 | 459,900 | $(381,194)$ | -83\% W |
| 3,528,113 | 6,130,619 | $(2,602,506)$ | $\stackrel{-42 \%}{ }$ |

## Kentucky American Water Works Company

## Income Statement Tickmark Legend

## December 31, 2006

A Owenton commercial sewer revenues
B Interco billing $\$ 11,693$; LFUCG $\$ 34,564$; New services application fee $\$ 96,964$
C Flushing required to maintain water quality in outskirts of system in Northern district and parts of the Central district.
D Budgeted with transfer pumps being used full time. Also there was a fuel adjustment clause increase.
E High turbidities in raw source water

H Increases in active medical costs and actuarially determined OPEB cost
I Changes in actuarial assumptions in latest Towers Perrin provided expense levels.

L Write off of STEP charges $\$ 80,644$; increases in uncollectible charge offs
M $\$ 20,000$ annual payment to Tri-Village Water Board
N Forms 88,936 ;Office \& Admin supplies 23,424; Postage $\$ 46,113$
O Penalty and interest $\$ 217,010$ (not included in rate filing); additional security costs $\$ 75,884$; Other misc expense items $\$ 90,000$
P
Net negative salvage reclassed from depreciation expense $\$ 1,216,519$
Q
R True up amortization - $\$ 34,348$
S Reduced income results in less taxes
T Reduced income results in less taxes
Projects not completed as planned and continue to accumulate AFUDC including Owen County Mains and Scott County booster station.
V M\&J charge offs $\$ 44,560$ : Pineville O\&M expenses over revenues $\$ 179,208$-settlement paid to offset costs paid in 2007
W Reclassed $\$ 4,500,000$ from preferred stock $\$ 380,091$ to long term debt. Budgeted in preferred dividends line 64.
X Less short term debt due to equity infusion in November.
Y
Projects not completed as planned and continue to accumulate AFUDC including Owen County Mains and Scott County booster station.

Kentucky American Water Company

Operating revenues
Water
Sewer

Management
Total revenues
Operating expenses
Labor

Purchased wat
Fuel \& power
Chemicals
Waste disposal
Management fees
Group insurance
Pensions
Regulatory expense
Insurance other than group
Customer accounting
Rents
General office expense
Miscellaneous
Other maintenance
Total maintenance and operations expense
Depreciation
Amortization
General taxes
State income taxes
Federal income taxes
Tax savings acquisition adjustment
Total operating expenses
Utility operating income
Other income and deductions
Non-operating rental income
Dividend income-common
Dividend income-preferred Interest income
AFUDC Equity
M\&J miscellaneous income
Gain (loss) on disposition
Total other income
Miscellaneous amortization
Tax savings acquisition adjustm
Misc other deductions
General taxes
State income taxes
Federal income taxes
Total other deductions
Net other income/(deductions)
Income before interest charges
Interest Charges
Interest on long-term debt
Amortization and debt expense
Interest short-term bank debt
Other interest expense
AFUCD-debt

Total interest

Net income
Preferred dividend declared
Net income to common stock

| Balance at 12/31/2007 | Plan Balance at 12/31/2007 | Increase <br> (Decrease) | \% Change |
| :---: | :---: | :---: | :---: |
| 50,216,427 | 49,911,817 | 304,610 | 1\% |
| 340,120 | 277,659 | 62,461 | 22\% A |
| 2,221,671 | 1,891,358 | 330,313 | 17\% B |
| 52,778,218 | 52,080,834 | 697,384 | 1\% |
| 5,896,230 | 5,836,735 | 59,495 | 1\% C |
| 427,206 | 496,300 | $(69,094)$ | -14\% D |
| 2,827,611 | 2,960,000 | $(132,389)$ | -4\% E |
| 1,691,698 | 1,590,118 | 101,580 | 6\% F |
| 260,565 | 232,325 | 28,240 | 12\% G |
| 7,516,223 | 6,987,757 | 528,466 | 8\% H |
| 1,685,771 | 1,653,852 | 31,919 | 2\% |
| 579,958 | 455,724 | 124,234 | 27\% I |
| 374,035 | 405,531 | $(31,496)$ | -8\% |
| 576,700 | 780,864 | $(204,164)$ | -26\% J |
| 1,425,214 | 1,386,901 | 38,313 | 3\% |
| 30,452 | 32,000 | $(1,548)$ | -5\% |
| 463,222 | 479,085 | $(15,863)$ | -3\% |
| 2,245,208 | 3,044,851 | $(799,643)$ | -26\% K |
| 2,235,322 | 2,740,291 | $(504,969)$ | -18\% L |
| 28,235,415 | 29,082,334 | $(846,919)$ | -3\% |
| 6,287,030 | 6,874,214 | $(587,184)$ | -9\% M |
| 504,092 | 410,580 | 93,512 | 23\% N |
| 3,057,241 | 2,855,510 | 201,731 | 7\% O |
| 621,258 | 364,602 | 256,656 | 70\% P |
| 3,441,773 | 2,595,113 | 846,660 | 33\% Q |
| - | - | - | 0\% |
| 42,146,809 | 42,182,353 | $(35,544)$ | 0\% |
| 10,631,409 | 9,898,481 | 732,928 | 7\% |
| - | - | - | 0\% |
| - | - | - | 0\% |
| - | - | - | 0\% |
| 127,120 | - | 127,120 | \#DIV/0! |
| 842,835 | 681,063 | 161,772 | 24\% R |
| 196,276 | - | 196,276 | \#DIV/0! |
| - | - | - | 0\% |
| 1,166,231 | 681,063 | 485,168 | 71\% |
| (425) | 768 | $(1,193)$ | -155\% |
| - | - | - | 0\% |
| 319,101 | 277,323 | 41,778 | 15\% S |
| - | - | - | 0\% |
| 178 | $(22,877)$ | 23,055 | -101\% |
| 1,406 | $(89,055)$ | 90,461 | -102\% |
| 320,260 | 166,159 | 154,101 | 93\% |
| 845,971 | 514,904 | 331,067 | 64\% |
| 11,477,380 | 10,413,385 | 1,063,995 | 10\% |
| 4,651,663 | 5,686,455 | $(1,034,792)$ | -18\% T |
| 75,069 | 131,465 | $(56,396)$ | -43\% U |
| 1,415,522 | 291,367 | 1,124,155 | 386\% V |
| $(38,175)$ | - | $(38,175)$ | \#DIV/0! |
| $(384,442)$ | $(309,296)$ | $(75,146)$ | 24\% W |
| 5,719,637 | 5,799,991 | $(80,354)$ | -1\% |
| 5,757,743 | 4,613,394 | 1,144,349 | 25\% $\mathbf{x}$ |
| 78,773 | 459,900 | $(381,127)$ | -83\% $\mathbf{Y}$ |
| 5,678,970 | 4,153,494 | 1,525,476 | 37\% |

## December 31, 2007

Sewer revenue is over plan $\$ 62$.
Other revenues are over plan $\$ 330$ due to increased reconnection and application fees associated with increased shut-off non-pay orders.
Labor related expenses are over the plan (\$112) mainly due to the transfer of service company employees to Kentucky.
Water purchased from Georgetown was less than anticipated.
Fuel and power is under the plan by $\$ 132$ due to decreased system delivery.
Chemicals are over the plan (\$102) due to source water quality.
Waste disposal is over the plan by (\$28) due to the increased thiosulfate usage for dechlorination.
Management fees are over plan (\$532) mainly due to SOX related expenses.
Pension expense is over the plan (\$124) due to assumptions used in original plan model.
Insurance other than group is under the plan \$204 due to retro adjustments earlier in the year as well as higher than planned capital credits.
Miscellaneous is under the plan by $\$ 700$ due to transportation $\$ 160$, miscellaneous operations $\$ 98$, communications $\$ 46$ and the reversal of penalties \$396.
Other maintenance is under the plan by $\$ 561$ mainly due to savings in materials and supplies $\$ 188$, miscellaneous maintenance $\$ 110$ and more construction related paving than forecasted $\$ 130$.
Depreciation is under plan $\$ 587$ mainly due to a large number of retirements booked in December.
Amortization is over plan (\$93).
Increase in income results in an increase in taxes.
Increase in income results in an increase in taxes.
Increase in income results in an increase in taxes.
AFUDC Equity is over plan (\$162).
Miscellaneous other deductions is over plan (\$42) mainly due to the contributions to the Community Action Council.
Interest on long-term debt is under plan by $\$ 1,034$.
Amortization and debt expense was under plan \$56.
Interest on short-term debt is over plan by $(\$ 1,125)$.
AFUDC debt was over plan (\$75).
Net income was over plan \$1,307.
Preferred dividend declared was under plan \$381.

Kentucky American Water Company
Income Statement Fluctuation Analysis December 31, 2008

|  | Balance at 12/31/2008 | Plan Balance at 12/31/2008 | Increase (Decrease) | \% Change |
| :---: | :---: | :---: | :---: | :---: |
| Operating revenues |  |  |  |  |
| Water | 57,247 | 57,360 | (113) | 0\% |
| Sewer | 309 | 278 | 31 | 11\% |
| Other | 2,529 | 1,902 | 627 | 33\% A |
| Management |  |  |  |  |
| Total revenues | 60,085 | 59,540 | 545 | 1\% |
| Operating expenses |  |  |  |  |
| Labor | 6585 | 6,735 | (150) | -2\% |
| Purchased water | 126 | 604 | (478) | -79\% B |
| Fuel \& power | 3245 | 2,884 | 361 | 13\% C |
| Chemicals | 1749 | 1,637 | 112 | 7\% |
| Waste disposal | 270 | 295 | (25) | -8\% |
| Management fees | 3899 | 3,488 | 411 | 12\% D |
| Shared business services | 4032 | 3,881 | 151 | 4\% |
| Contracted services | 881 | 829 | 52 | 6\% |
| Group insurance | 1,682 | 1,984 | (302) | -15\% E |
| Pensions | 623 | 518 | 105 | 20\% F |
| Other benefits | 278 | 233 | 45 | 19\% G |
| Regulatory expense | 221 | 607 | (386) | -64\% H |
| Insurance other than group | 490 | 728 | (238) | -33\% I |
| Customer accounting | 1,536 | 1,586 | (50) | -3\% |
| Rents | 35 | 32 | 3 | 9\% |
| General office expense | 646 | 464 | 182 | 39\% J |
| Miscellaneous | 1,702 | 1,780 | (78) | -4\% |
| Other maintenance | 2,684 | 2,330 | 354 | 15\% K |
| Total maintenance and operations expense | 30,684 | 30,615 | 69 | 0\% |
| Depreciation | 5,871 | 7,173 | $(1,302)$ | -18\% L |
| Amortization | 512 | 411 | 101 | 25\% M |
| General taxes | 3,177 | 3,469 | (292) | -8\% |
| State income taxes | 895 | 641 | 254 | 40\% N |
| Federal income taxes | 5,256 | 4,251 | 1,005 | 24\% O |
| Tax savings acquisition adjustment | - | - | - | 0\% |
| Total operating expenses | 46,395 | 46,560 | (165) | 0\% |
| Utility operating income | 13,690 | 12,980 | 710 | 5\% |

Other income and deductions
Non-operating rental income

| - | - | - | 0\% |
| :---: | :---: | :---: | :---: |
| - | - | - | 0\% |
| - | - | - | 0\% |
| 6 |  | 6 | \#DIV/0! |
| 1,330 | 1,507 | (177) | -12\% P |
| 57 |  | 57 | 100\% |
| - | - | - | 0\% |
| 1,393 | 1,507 | (114) | -8\% |
| - | 1 | (1) | -100\% |
|  |  | - | 0\% |
| 279 | 363 | (84) | -23\% Q |
|  |  | - | 0\% |
| (9) | (27) | 18 | -67\% N |
| (45) | (107) | 62 | -58\% O |
| 225 | 230 | (5) | -2\% |
|  |  |  |  |
| 1,168 | 1,277 | (109) | -9\% |
|  |  |  |  |
| 14,858 | 14,257 | 601 | 4\% |

Interest Charges


Amortization and debt expens
Interest short-term bank debt
Other interest expense AFUDC-debt
Total interest charges
Net income
Preferred dividend declared
Net income to common stock

| 5,693 | 5,903 | $(210)$ | $-4 \%$ |
| ---: | ---: | :---: | :---: |
| 90 | 71 | 19 | $27 \%$ |
| 762 | 1,044 | $(282)$ | $-27 \%$ |
|  |  | - | $0 \%$ |
| $(589)$ | $(684)$ | 95 | $-14 \%$ |
| 5,956 | 6,334 | $(378)$ | $-6 \%$ |
| 8,902 | 7,923 |  |  |
| 78 | 460 | 979 | $12 \%$ |
| 8,824 | 7,463 | $(382)$ | $-83 \%$ |
|  |  | 1,361 | $18 \%$ |



## Kentucky American Water Company

Income Statement Fluctuation Analysis

## December 31, 2009

| OPERATING REVENUES |
| :--- |
| Water Revenues |
| Sewer Revenues |
| Other Operating Revenues |
| Management Revenues |
| Operating Revenues |


|  | YTD Actuals | $\begin{aligned} & \text { YTD } \\ & \text { Plan } \\ & \hline \end{aligned}$ | Variance <br> Favorable (Unfavorable) | \% Change |
| :---: | :---: | :---: | :---: | :---: |
| 1 | 59,036 | 65,224 | $(6,227)$ | -10\% A |
| 2 | 318 | 341 | (23) | -7\% |
| 3 | 2,667 | 2,226 | 442 | 20\% B |
| 4 | 0 | 0 | 0 |  |
|  | 62,021 | 67,791 | $(5,808)$ | -9\% |
| 5 | 131 | 141 | (10) | -7\% |
| 6 | 3,014 | 4,030 | $(1,016)$ | -25\% C |
| 7 | 2,235 | 2,665 | (430) | -16\% D |
| 8 | 234 | 297 | (63) | -21\% E |
|  | 5,614 | 7,133 | $(1,519)$ | -21\% |


| O\&M LABOR \& OVERHEAD |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Labor | 9 | 6,848 | 6,943 | (95) | -1\% |
| Pensions | 10 | 1,386 | 605 | 781 | 129\% F |
| Group insurances | 11 | 2,174 | 1,884 | 290 | 15\% G |
| Other benefits | 12 | 282 | 352 | (70) | -20\% H |
| Total employee related |  | 10,690 | 9,784 | 906 | 9\% |
| Management fees | 13 | 4,028 | 3,779 | 249 | 7\% |
| Shared business services | 14 | 4,120 | 3,997 | 123 | 3\% |
| Contracted services | 15 | 1,089 | 940 | 149 | 16\% I |
| Total contracted services |  | 5,209 | 4,937 | 272 | 6\% |
| Regulatory expense | 16 | 245 | 279 | (34) | -12\% J |
| Insurance Other Than Group | 17 | 610 | 719 | (109) | -15\% K |
| Customer Accounting | 18 | 1,617 | 1,725 | (108) | -6\% |
| Rents | 19 | 32 | 57 | (25) | -44\% L |
| General office expense | 20 | 532 | 590 | (58) | -10\% |
| Miscellaneous | 21 | 1,770 | 2,202 | (432) | -20\% M |
| Maintenance | 22 | 2,770 | 2,732 | 38 | 1\% |
| Total operations and maintenance expense |  | 33,117 | 33,937 | (820) | -2\% |
| Depreciation | 23 | 5,898 | 7,034 | $(1,136)$ | -16\% N |
| Amortization | 24 | 516 | 533 | (17) | -3\% |
| Depreciation and amortization |  | 6,414 | 7,567 | $(1,153)$ | -15\% |
| General taxes | 25 | 3,446 | 3,597 | (151) | -4\% |
| Impairment charges | 27 | 0 | 0 | 0 |  |
| Total operating expenses, net |  | 42,977 | 45,101 | $(2,124)$ | -5\% |
| Operating income |  | 19,044 | 22,690 | $(3,684)$ | -16\% |
| OTHER INCOME \& DEDUCTIONS |  |  |  |  |  |
| Interest Income | 28 | 0 | 0 | 0 |  |
| Interest on long-term debt | 29 | 5,481 | 7,765 | $(2,284)$ | -29\% O |
| Interest on Short-Term Bank Debt | 30 | 355 | 1,308 | (953) | -73\% P |
| Other Interest Expense | 31 | 9 | 0 | 9 |  |
| Total interest expense |  | 5,845 | 9,073 | $(3,228)$ | -36\% |
| AFUDC-Equity | 32 | 3,306 | 2,838 | 468 | 16\% Q |
| AFUDC Debt | 33 | 1,591 | 1,289 | 302 | 23\% Q |
| Amortization of Debt Expense | 34 | 105 | 117 | (12) | -10\% |
| Preferred dividends of subsidiaries (Consolidation only) | 35 | 0 | 0 | 0 |  |
| Gain on sale of assets | 26 | 0 | 0 | 0 |  |
| Non-Operating Rental Income | 36 | 0 | 0 | 0 |  |
| Dividend Income - Common | 37 | 0 | 0 | 0 |  |
| Dividend Income - Preferred | 38 | 0 | 0 | 0 |  |
| Miscellaneous Income | 39 | 52 | 0 | 52 |  |
| Total other income |  | 52 | 0 | 52 |  |


| Miscellaneous Amortization | 40 | 0 | 1 | 1 | 100\% |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Miscellaneous Other Deductions | 41 | 548 | 336 | 212 | 63\% R |
| Total Other Deductions |  | 548 | 337 | 213 | 63\% |
| Other, net |  | (496) | (337) | (161) | 48\% |
| Total other income (deductions) |  | $(1,549)$ | $(5,400)$ | 3,849 | -71\% |
| Income (loss) before income taxes |  | 17,495 | 17,290 | 205 | 1\% |
| State Income Taxes | 42 | 1,186 | 819 | 367 | 45\% S |
| Federal Income Taxes | 43 | 5,888 | 5,915 | (27) | 0\% T |
| Tax Saving Acquisition Adjustment |  | 0 | 0 | 0 |  |
| State income taxes (non-operating) | 46 | (30) | (28) | (2) | 7\% S |
| Federal income taxes (non-operating) | 47 | (163) | (108) | (55) | 51\% ${ }^{\text {T }}$ |
| Provision (Benefit ) for Income Taxes |  | 6,881 | 6,598 | 283 | 4\% |
| Net income (loss) |  | 10,614 | 10,692 | (78) | -1\% |
| Preferred Dividend Declared | 48 | 78 | 78 | 0 |  |
| Net Income To Common Stock |  | 10,536 | 10,614 | (78) | -1\% |
| Common Dividend Declared |  | 8,103 | 7,252 | 851 | 12\% |
| Current Year Retained Earnings |  | 2,433 | 3,362 | (929) | -28\% |

A due to lower usage due to wet and cool weather and economy (3773k) and rate case settlement (2454k) offset by AFUDC and tax exempt financing
B due to higher reconnect fees
C due to lower system delivery (down $12.2 \%$ ) and lower than planned non revenue water ( $14 \%$ budget, $10 \%$ actual)
D due to more favorable chemical pricing per contracts negotiated in summer 2009
E Improved raw water turbidity from plan
F Due to increased FAS 106 actuarial costs related to financial market conditions (lower discount rate, lower market returns)
G Due to increased FAS 87 actuarial costs related to financial market conditions (lower discount rate, lower market returns)
H Lower DCP employees than planned
I due to higher than planned audit fees (54k), legal fees (88k), and temp labor - Volt Services (43k)
J Plan overstated for amtz of 2009 rate case
K Favorable premiums based on favorable claims history
L Expiration of small office equipment rentals
M due to lower actual gas prices than planned prices, offset by water study write off (\$159k)
N driven by higher composite rates used in the plan
O due to financing of $\$ 71 \mathrm{~m}$ with tax exempt financing, offset by lower AFUDC \& revenues vs budget (AFUDC/Revenues offset due to outcomes of rate case)
P driven by lower than planned short-term interest rates
Q due to the treatment of CWIP in rate base from the settled case, offset by the tax exempt financing
R due to the approved spend on communications regarding the new $\$ 162 \mathrm{~m}$ water treatment plant
S Impact of net change in revenues and expenses
T Impact of net change in revenues and expenses

| Kentucky-American Water Company |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
| Case No. 2010-00036 |  |  |  |  |
| Response to PSCDR1 \#4 |  |  |  |  |
|  |  |  |  |  |
| Year: 2006 |  |  |  |  |
|  |  |  |  |  |
| AWW | DESCRIPTION | ACTUAL | BUDGET | VARIANCE |
| 403000 | DEPRECIATION EXPENSE | 7,943,022.00 | 7,339,261.00 | 603,761.00 |
| 404430 | AMORT REG ASSET - AFUDC | 25,728.00 | 25,728.00 | - |
| 406000 | AMORT UT PLT ACQ ADJUST | 21,611.00 | 21,612.00 | (1.00) |
| 407000 | AMORT PROPERTY LOSSES | 405,026.00 | 438,744.00 | (33,718.00) |
| 408030 | OTHER GENERAL TAXES | 79,808.00 | 4,000.00 | 75,808.00 |
| 408100 | REAL \& PERSON PROP TAXES | 2,376,846.00 | 2,160,000.00 | 216,846.00 |
| 408110 | GROSS INC \& RECPTS TAXES | - | 93,684.00 | (93,684.00) |
| 408140 | FEDERAL UNEMPLYMNT TXS | 6,033.00 | - | 6,033.00 |
| 408160 | FICA | 388,802.00 | 464,125.00 | $(75,323.00)$ |
| 408180 | STATE UNEMPLYMNT TXS | 8,968.00 | - | 8,968.00 |
| 409100 | SIT-CURRENT | 617,481.00 | 766,015.00 | $(148,534.00)$ |
| 409110 | SIT-ADJUST PRIOR YEARS | $(368,236.00)$ | - | $(368,236.00)$ |
| 409120 | SIT-ACQUISITION ADJUST | - | - | - |
| 409150 | FIT-CURRENT | 3,472,508.00 | 3,048,737.00 | 423,771.00 |
| 409160 | FIT-ADJUST PRIOR YEARS | $(915,089.00)$ | - | (915,089.00) |
| 409210 | SIT-OTH INC \& DED-REG | $(28,426.00)$ | (23,044.00) | $(5,382.00)$ |
| 409220 | FIT-OTH INC \& DED-REG | $(142,126.00)$ | (89,708.00) | (52,418.00) |
| 410400 | DEF SIT-REG ASSET/LIAB | 11,676.00 | - | 11,676.00 |
| 410600 | DEF SIT-OTHER | 193,992.00 | 221,210.00 | (27,218.00) |
| 410650 | DEF SIT-CURRENT | - | - | - |
| 410700 | DEF FIT-REG ASSET/LIAB | 146,601.00 | - | 146,601.00 |
| 410900 | DEF FIT-OTHER | (449,793.00) | 624,570.00 | (1,074,363.00) |
| 410950 | DEF FIT-CURRENT | - | - | - |
| 412210 | ITC RESTORED-3\% | (7,652.00) | - | (7,652.00) |
| 412220 | ITC RESTORED-4\% | $(6,265.00)$ | - | $(6,265.00)$ |
| 412230 | ITC RESTORED-10\% | $(70,840.00)$ | (84,797.00) | 13,957.00 |
| 415100 | M\&J REVENUES-OUTSIDE | (1,839,606.00) | (1,707,318.00) | (132,288.00) |
| 415110 | M\&J REVENUES-INSIDE | $(20,381.00)$ | - | (20,381.00) |
| 416100 | M\&J EXPENSES-OUTSIDE | 232,131.00 | - | 232,131.00 |
| 416110 | M\&J EXPENSES-INSIDE | 1,758,174.00 | 1,641,260.00 | 116,914.00 |
| 417220 | NON-UT OPER-IN-EXPENSES | - | - | - |
| 419300 | INT OTHER SECURITIES-OUT | - | - | - |
| 419510 | OTHER INTEREST INCOME-IN | (2,213.00) | - | (2,213.00) |
| 420100 | AFUDC - EQUITY | (273,684.00) | $(175,832.00)$ | (97,852.00) |
| 420210 | AFUDC - DEBT | $(116,516.00)$ | $(79,851.00)$ | $(36,665.00)$ |
| 422000 | GAINS-LOSSES DISP PROP | - | - | - |
| 425100 | AMORT UT PLT ACQ ADJUST | (531.00) | - | (531.00) |
| 425200 | AMORT OTHER UT PLT ADJUST | 6,900.00 | - | 6,900.00 |
| 425300 | AMORT PREFERRED STOCK EXP | 771.00 | 768.00 | 3.00 |
| 426100 | DONATIONS | 155,310.00 | 140,236.00 | 15,074.00 |
| 426160 | OTHER LOBBYING EXPENSES | 26,274.00 | 19,000.00 | 7,274.00 |
| 426200 | OTHER INCOME DEDUCTIONS | 96,917.00 | 121,183.00 | (24,266.00) |
| 426410 | NON-OPER EMPLOYEE EXP | - | - | - |
| 426420 | NON-OPER EMPLOYEE EXP - TAXABL | - | - | - |
| 427100 | INTEREST LTD-OUT-REG | 1,652,550.00 | 4,738,404.00 | (3,085,854.00) |
| 427110 | INTEREST LTD-OUT-TFB | (1,632.00) | - | (1,632.00) |


| Kentucky-American Water Company |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
| Case No. 2010-00036 |  |  |  |  |
| Response to PSCDR1 \#4 |  |  |  |  |
|  |  |  |  |  |
| Year: 2006 |  |  |  |  |
|  |  |  |  |  |
| AWW | DESCRIPTION | ACTUAL | BUDGET | VARIANCE |
| 427120 | INTEREST LTD - INSIDE | 3,080,236.00 |  | 3,080,236.00 |
| 428000 | AMORT DEBT DISCOUNT \& EXP | 72,102.00 | 72,108.00 | (6.00) |
| 431100 | INTEREST ON BANK DEBT |  |  |  |
| 431200 | OTHER INTEREST EXPENSE | 4,102.00 | - | 4,102.00 |
| 433100 | INTEREST ON BANK DEBT | 408,695.00 | 625,948.00 | (217,253.00) |
| 437100 | DIV DEC PREF STK-OUTSIDE | 458,797.00 | 459,900.00 | $(1,103.00)$ |
| 438100 | DIV DEC COMMON STK - OUT |  |  |  |
| 438200 | DIV DEC COMMON STK - IN | 2,006,260.00 | 6,059,749.00 | (4,053,489.00) |
| 461000 | DOMESTIC SEWER SERV BILLED | (279,284.00) | (352,692.00) | 73,408.00 |
| 461100 | RES SALES BILLED METERED | (27,262,686.00) | (26,591,052.00) | (671,634.00) |
| 461110 | RES SALES UNBILL METERED | 1,361,414.00 | - | 1,361,414.00 |
| 461130 | DOMESTIC SEWER SERV UNBILLED |  |  |  |
| 461200 | COM SALES BILLED METERED | (12,143,005.00) | (12,476,615.00) | 333,610.00 |
| 461210 | COM SALES UNBILL METERED | 433,841.00 |  | 433,841.00 |
| 461300 | IND SALES BILLED METERED | (1,444,547.00) | (1,718,899.00) | 274,352.00 |
| 461310 | IND SALES UNBILL METERED | 67,313.00 | - | 67,313.00 |
| 461400 | MISC SALES BILLED METERED | (19,513.00) | - | (19,513.00) |
| 462000 | PRIV FIR PROT SER BILLED | (1,052,049.00) | (1,039,128.00) | (12,921.00) |
| 462100 | PRIV FIR PROT SER UNBILL | (495.00) |  | (495.00) |
| 462110 | INDUST WASTE SER UNBILL |  |  |  |
| 462210 | INDUSTRIAL WASTE SERVICE | (23,475.00) | - | (23,475.00) |
| 463000 | PUB FIRE PROT SER BILLED | (2,182,373.00) | (2,247,012.00) | 64,639.00 |
| 463300 | PUB AUTH SEWER SERV BILLED | 67.00 | - | 67.00 |
| 464200 | PUB AUTH SLS BILLED METRD | (3,565,255.00) | (3,794,496.00) | 229,241.00 |
| 464210 | PUB AUTH SLS UNBILL METRD | 145,184.00 |  | 145,184.00 |
| 466000 | SALES FOR RESALE BILLED | (1,109,393.00) | (1,441,800.00) | 332,407.00 |
| 466100 | SALES FOR RESALE UNBILL | $(23,458.00)$ |  | (23,458.00) |
| 471100 | RECONNECTION CHARGES | (210,086.00) | (767,040.00) | 556,954.00 |
| 471200 | OTHER MISC SERV REVENUES | (689,795.00) | $(22,200.00)$ | (667,595.00) |
| 472000 | RENTS FROM WATER PROPERTY | (114,921.00) | $(87,624.00)$ | $(27,297.00)$ |
| 474100 | BILL \& COLL SERV FOR OTH | (905,296.00) | (870,732.00) | (34,564.00) |
| 474300 | MISCELLANEOUS | 7,666.00 |  | 7,666.00 |
| 600000 | SS OPERATION SUPERV \& ENG |  | - | - |
| 602000 | PURCHASED WATER | 506,626.00 | 470,500.00 | 36,126.00 |
| 603100 | MISCELLANEOUS SS EXPENSES | 111,232.00 | 118,938.00 | (7,706.00) |
| 604000 | SS RENTS |  | - |  |
| 610000 | SS ORDNY MAINT SUPR \& ENG | 334,029.00 | 4,998,327.00 | (4,664,298.00) |
| 611100 | OR MN SS STRUCT \& IMP MAT | 77,775.00 | 261,016.00 | (183,241.00) |
| 613120 | AMORT DEF EXP LAK RIV \& OTH | 6,624.00 | 5,796.00 | 828.00 |
| 614120 | AMORT DEF EXP WELLS \& SPR | (1,449.00) | - | $(1,449.00)$ |
| 617100 | OR MN MISC WAT SS PLT MAT |  |  |  |
| 622100 | POWER PRODUCTION EXP. | 6,678.00 | 51,579.00 | $(44,901.00)$ |
| 623110 | POWER PURCH FOR PUMP ELEC | 254,749.00 | 346,127.00 | (91,378.00) |
| 623210 | FUEL PURCH FOR PUMP OTHER | 2,376,844.00 | 1,729,930.00 | 646,914.00 |
| 624100 | PUMPING EXPENSE | $(4,311.00)$ | 4,960.00 | (9,271.00) |
| 624500 | PUMPING EXPENSES ELECTRIC | (92.00) | - | (92.00) |


| Kentucky-American Water Company |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
| Case No. 2010-00036 |  |  |  |  |
| Response to PSCDR1 \#4 |  |  |  |  |
|  |  |  |  |  |
| Year: 2006 |  |  |  |  |
|  |  |  |  |  |
| AWW | DESCRIPTION | ACTUAL | BUDGET | VARIANCE |
| 626500 | MISC PUMPING EXP ELECTRIC | 555.00 | 200.00 | 355.00 |
| 627300 | RENTS OTHER | - | - | - |
| 630200 | OR MN PUMP SUP \& ENG ELEC | 61,524.00 | - | 61,524.00 |
| 633200 | OR MN PUMP EQPT MAT ELEC | 61,326.00 | 103,232.00 | (41,906.00) |
| 640000 | WT OPERATION SUPERV \& ENG | 527,702.00 | - | 527,702.00 |
| 641100 | GENERAL CHEMICALS | 1,495,887.00 | 1,348,523.00 | 147,364.00 |
| 642100 | GENERAL WT LABOR | 839,591.00 | - | 839,591.00 |
| 642300 | GENERAL WT EXPENSES | 186,340.00 | 167,775.00 | 18,565.00 |
| 643100 | MISC WT EXPENSES-CURRENT | 56,974.00 | 43,272.00 | 13,702.00 |
| 643300 | WASTE DISPOSAL EXP (CUR) | 245,687.00 | 110,800.00 | 134,887.00 |
| 643310 | AMORT WASTE DISPOSAL EXP | 78,761.00 | 142,317.00 | (63,556.00) |
| 644000 | WT RENTS | - | - | - |
| 650000 | OR MN WT SUPR \& ENG | 95,659.00 | - | 95,659.00 |
| 651100 | OR MN WT STRUCT \& IMP MAT | 82,579.00 | 107,575.00 | (24,996.00) |
| 651120 | AMORT DEF EXP WT STRUCT | 144,676.00 | 139,995.00 | 4,681.00 |
| 661200 | STORAGE FACILITIES LABOR | 924,089.00 | - | 924,089.00 |
| 662100 | T\&D LINES EXPENSE | 109,115.00 | 124,808.00 | (15,693.00) |
| 662200 | T\&D LINES LABOR | 688,980.00 | - | 688,980.00 |
| 663300 | MISC METER EXPENSES | 109,622.00 | 73,200.00 | 36,422.00 |
| 665300 | MISC T\&D EXPENSES-CURRENT | 143,110.00 | 53,991.00 | 89,119.00 |
| 666000 | T\&D RENTS | 22,726.00 | 5,220.00 | 17,506.00 |
| 667100 | MISC SEWER T \& D EXP | 4,764.00 | 3,204.00 | 1,560.00 |
| 670000 | OR MN T\&D SUPR \& ENG | 434,734.00 | - | 434,734.00 |
| 671100 | OR MN T\&D STRUCT \& IMP-MAT | 216,906.00 | 127,200.00 | 89,706.00 |
| 672120 | AMORT DEF EXP RES \& STAND | 152,376.00 | 184,236.00 | (31,860.00) |
| 675200 | OR MN SERVICES LAB | 206,295.00 | - | 206,295.00 |
| 676200 | OR MN METERS LAB | 47,991.00 | - | 47,991.00 |
| 677200 | OR MN HYDRANTS LAB | 83,323.00 | - | 83,323.00 |
| 678100 | OR MN OTHER T\&D PLANT MAT | 217,057.00 | 273,000.00 | (55,943.00) |
| 902200 | METER READING LABOR | 592,661.00 | - | 592,661.00 |
| 903100 | CONTRACT \& ORDERS EXPENS | 10,212.00 | 3,600.00 | 6,612.00 |
| 903200 | CONTRACTS \& ORDERS LABOR | 290,510.00 | - | 290,510.00 |
| 903300 | COLLECTING EXPENSES | 224,562.00 | 205,056.00 | 19,506.00 |
| 903520 | BILLING \& ACCTNG OTH EXP | 344,406.00 | 155,395.00 | 189,011.00 |
| 903521 | CUST ACCTG-BILLING/TELEPHONE | 73,389.00 | 94,560.00 | (21,171.00) |
| 903523 | CUST ACCTG-BILLING/POSTAGE | 506,205.00 | 460,092.00 | 46,113.00 |
| 904000 | UNCOLLECTIBLE ACCOUNTS | 405,811.00 | 335,010.00 | 70,801.00 |
| 905100 | MISC CUST ACCTNG EXPENSES | 124,727.00 | 40,305.00 | 84,422.00 |
| 910110 | ANNUAL REPORT EXPENSES | 314,802.00 | 204,230.00 | 110,572.00 |
| 920000 | ADM \& GENERAL SALARIES | - | - | - |
| 920200 | SALARIES OFFICERS | - | - | - |
| 920500 | INCENTIVE PLAN EXPENSE | - | - | - |
| 920520 | INCENTIVE PLAN EXP OFFICERS | 43,796.00 | 158,613.00 | (114,817.00) |
| 921100 | EXPENSES OF EMPLOYEES | 100,769.00 | 19,154.00 | 81,615.00 |
| 921200 | MISC OFFICE EXPENSES | 104,453.00 | 65,158.00 | 39,295.00 |
| 921210 | MISC OFFICE EXP TEL | 94,260.00 | 66,744.00 | 27,516.00 |


| Kentucky-American Water Company |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
| Case No. 2010-00036 |  |  |  |  |
| Response to PSCDR1 \#4 |  |  |  |  |
| Year: 2006 |  |  |  |  |
| AWW | DESCRIPTION | ACTUAL | BUDGET | VARIANCE |
| 921220 | MISC OFFICE EXP SUP | 57,910.00 | 54,197.00 | 3,713.00 |
| 921250 | OFFICE BUILDING OPERATION | 537.00 | 1,230.00 | (693.00) |
| 921300 | PERSONAL/VEHICLE | 382,035.00 | 227,796.00 | 154,239.00 |
| 923100 | SERVICE COMPANY CHARGES | 6,612,414.00 | 6,254,000.00 | 358,414.00 |
| 923200 | AUDITING SERVICES | 66,367.00 | - | 66,367.00 |
| 923300 | LEGAL SERVICES | 50,103.00 | 70,000.00 | $(19,897.00)$ |
| 923400 | ENGINEERING SERVICES | 15,779.00 | - | 15,779.00 |
| 923500 | OTHER SERVICES-CURRENT | 484,932.00 | 547,927.00 | $(62,995.00)$ |
| 924000 | PROPERTY INSURANCE | 111,368.00 | 36,000.00 | 75,368.00 |
| 925110 | WORKMENS COMP PREMIUM EXP | 113,814.00 | 112,884.00 | 930.00 |
| 925300 | INJURIES \& DAMAGES EXP | 1,314.00 | 12,000.00 | $(10,686.00)$ |
| 925400 | GENERAL LIABILITY | 423,980.00 | 353,004.00 | 70,976.00 |
| 926100 | ACCRUED OPEB EXPENSE | 660,373.00 | 787,166.00 | $(126,793.00)$ |
| 926110 | GROUP INSURANCE PREM EXP | 983,931.00 | 1,037,397.00 | $(53,466.00)$ |
| 926200 | OTHER WELFARE EXPENSES | 33,176.00 | 34,950.00 | $(1,774.00)$ |
| 926220 | ESOP CONTRIBUTIONS EXPENSE | (14,241.00) | 16,431.00 | $(30,672.00)$ |
| 926250 | 401-K CONTRIBUTIONS EXPENSE | 48,764.00 | 141,998.00 | $(93,234.00)$ |
| 926400 | PENSION PLAN EXPENSE | 748,274.00 | 804,072.00 | $(55,798.00)$ |
| 926600 | OTHER PENSION PLAN EXPENSE | 51,624.00 | - | 51,624.00 |
| 928100 | AMORT EXP RATE PROCEEDING | 361,517.00 | 353,412.00 | 8,105.00 |
| 928400 | OTH REGULATORY EXP-CURRENT | 159,408.00 | 153,065.00 | 6,343.00 |
| 930130 | OTHER GENERAL EXPENSE | (61,486.00) | 9,096.00 | (70,582.00) |
| 930200 | AMORTIZE MISC CHARGES | $(15,828.00)$ | - | $(15,828.00)$ |
| 930210 | MISC GENERAL EXP-CURRENT | 144,968.00 | 66,300.00 | 78,668.00 |
| 930230 | AMORT MISC GENERAL EXP | 25,915.00 | - | 25,915.00 |
| 930260 | MEALS \& TRAVEL EXPENSES-TAXABL | 16,507.00 | 13,388.00 | 3,119.00 |
| 930270 | DONATIONS-ILL | - | - | - |
| 930300 | RESEARCH \& DEV EXP | (970.00) | 3,996.00 | $(4,966.00)$ |
| 930510 | LOBBYING EXPENSES | - | - | - |
| 930600 | TRANSPORTATION EXPENSES | 115,909.00 | 316,555.00 | (200,646.00) |
| 930850 | MISC GEN EXP-DIRECTORS FEES | 21,771.00 | 21,000.00 | 771.00 |
| 930880 | MISC GEN EXP-COMPANY DUES | 41,001.00 | 4,025.00 | 36,976.00 |
| 930890 | MISC GEN EXP-OTHER | 26,797.00 | 112,350.00 | $(85,553.00)$ |
| 930900 | TAX PENALTY | 217,010.00 | - | 217,010.00 |
| 931000 | ADM \& GENERAL RENTS | 29,512.00 | 39,852.00 | $(10,340.00)$ |
| 932700 | OR MN A\&G MISC PROPTY MAT | 21,876.00 | 24,999.00 | $(3,123.00)$ |


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|  |  |  |  |  |
| YEAR: 2007 |  |  |  |  |
|  |  |  |  |  |
| AWW | Description | Actual | Budget | Variance |
| 403000 | DEPRECIATION EXPENSE | 9,057,606 | 8,134,214 | 923,392 |
| 403100 | DEPR EXPENSE-CONTR PROP | (1,603,601) |  | $(1,603,601)$ |
| 404430 | AMORT REG ASSET - AFUDC | 63,389 | - | 63,389 |
| 404440 | AMORT REG ASSET - AFUDC | 6,900 |  | 6,900 |
| 406000 | AMORT UT PLT ACQ ADJUST | 21,614 |  | 21,614 |
| 407000 | AMORT PROPERTY LOSSES | 412,188 | 410,580 | 1,608 |
| 408030 | OTHER GENERAL TAXES | 88,098 | 169,636 | (81,538) |
| 408100 | REAL \& PERSON PROP TAXES | 2,519,386 | 2,160,000 | 359,386 |
| 408140 | FEDERAL UNEMPLYMNT TXS | 7,871 | - | 7,871 |
| 408160 | FICA | 429,634 | 525,874 | (96,240) |
| 408180 | STATE UNEMPLYMNT TXS | 7,735 |  | 7,735 |
| 409100 | SIT-CURRENT | 396,112 | 448,973 | $(52,861)$ |
| 409110 | SIT-CURRENT | 286,383 |  | 286,383 |
| 409150 | FIT-CURRENT | 2,900,386 | 1,884,659 | 1,015,727 |
| 409160 | FIT-CURRENT | 1,499,708 | - | 1,499,708 |
| 410400 | DEF SIT-REG ASSET/LIAB | 7,169 |  | 7,169 |
| 410600 | DEF SIT-OTHER | $(101,774)$ | $(84,371)$ | $(17,403)$ |
| 410700 | DEF FIT-REG ASSET/LIAB | 168,191 | - | 168,191 |
| 410900 | DEF FIT-OTHER | (1,334,333) | 795,251 | $(2,129,584)$ |
| 412210 | ITC RESTORED-3\% | $(7,653)$ |  | $(7,653)$ |
| 412220 | ITC RESTORED-4\% | $(6,304)$ | - | $(6,304)$ |
| 412230 | ITC RESTORED-10\% | $(70,879)$ | (84,797) | 13,918 |
| 415100 | M\&J REVENUES-OUTSIDE | $(402,244)$ |  | $(402,244)$ |
| 416100 | M\&J EXPENSES-OUTSIDE | 127,629 | - | 127,629 |
| 416110 | M\&J EXPENSES-OUTSIDE | 77,087 | - | 77,087 |
| 420100 | AFUDC - EQUITY | $(842,571)$ | (681,063) | $(161,508)$ |
| 420210 | AFUDC - DEBT | $(384,277)$ | $(309,296)$ | $(74,981)$ |
| 425100 | AFUDC UT PLT ACQ ADJUST | (425) | 768 | $(1,193)$ |
| 425300 | AMORT PREFERRED STOCK EXP | 771 |  | 771 |
| 426100 | DONATIONS | 182,687 | 185,390 | $(2,703)$ |
| 426160 | OTHER LOBBYING EXPENSES | 14,030 | $(111,932)$ | 125,962 |
| 426200 | OTHER INCOME DEDUCTIONS | 123,968 | 91,933 | 32,035 |
| 427100 | INTEREST LTD-OUT-REG | 1,631,081 | - | 1,631,081 |
| 427120 | INTEREST LTD-OUT-REG | 2,639,432 | 5,686,455 | $(3,047,023)$ |
| 428000 | AMORT DEBT DISCOUNT \& EXP | 66,246 |  | 66,246 |
| 431100 | INTEREST ON BANK DEBT | 1,438,452 | 291,367 | 1,147,085 |
| 437100 | DIV DEC PREF STK-OUTSIDE | 4,629,183 | 459,900 | 4,169,283 |
| 461000 | DOMESTIC SEWER SERV BILLED | $(28,465)$ | $(152,322)$ | 123,857 |
| 461020 | DOMESTIC SEWER SERV BILLED | $(17,633)$ | $(76,685)$ | 59,052 |
| 461100 | RES SALES BILLED METERED | $(27,579,361)$ | $(27,715,647)$ | 136,286 |
| 461110 | RES SALES UNBILL METERED | $(81,378)$ | - | $(81,378)$ |
| 461200 | COM SALES BILLED METERED | $(12,387,137)$ | (12,345,169) | $(41,968)$ |
| 461210 | COM SALES UNBILL METERED | 54,059 |  | 54,059 |
| 461300 | IND SALES BILLED METERED | $(1,479,862)$ | (1,552,979) | 73,117 |
| 461310 | IND SALES UNBILL METERED | $(18,828)$ | - | $(18,828)$ |


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|  |  |  |  |  |
| YEAR: 2007 |  |  |  |  |
|  |  |  |  |  |
| AWW | Description | Actual | Budget | Variance |
| 461400 | MISC SALES BILLED METERED | $(18,789)$ |  | $(18,789)$ |
| 462000 | PRIV FIR PROT SER BILLED | (1,138,372) | (1,041,746) | $(96,626)$ |
| 462100 | PRIV FIR PROT SER BILLED | 577 | - | 577 |
| 462210 | INDUSTRIAL WASTE SERVICE | $(3,126)$ | $(14,566)$ | 11,440 |
| 463000 | PUB FIRE PROT SER BILLED | $(2,216,224)$ | (2,200,805) | $(15,419)$ |
| 464200 | PUB AUTH SLS BILLED METRD | $(3,896,261)$ | $(3,787,531)$ | $(108,730)$ |
| 464210 | PUB AUTH SLS UNBILL METRD | $(22,706)$ |  | $(22,706)$ |
| 466000 | SALES FOR RESALE BILLED | (1,151,111) | $(1,267,940)$ | 116,829 |
| 466100 | SALES FOR RESALE UNBILL | $(264,067)$ | - | $(264,067)$ |
| 471100 | RECONNECTION CHARGES | $(493,660)$ | $(210,000)$ | $(283,660)$ |
| 471200 | OTHER MISC SERV REVENUES | $(627,682)$ | $(691,476)$ | 63,794 |
| 472000 | RENTS FROM WATER PROPERTY | $(111,988)$ | $(86,354)$ | $(25,634)$ |
| 474100 | BILL \& COLL SERV FOR OTH | $(976,746)$ | $(903,528)$ | $(73,218)$ |
| 474300 | MISCELLANEOUS | $(16,017)$ |  | $(16,017)$ |
| 602000 | PURCHASED WATER | 427,063 | 496,300 | $(69,237)$ |
| 603100 | MISCELLANEOUS SS EXPENSES | 34,565 | 33,275 | 1,290 |
| 617100 | OR MN MISC WAT SS PLT MAT | 93,224 | 153,100 | $(59,876)$ |
| 623110 | POWER PURCH FOR PUMP ELEC | 2,776,467 | 2,915,420 | $(138,953)$ |
| 626500 | MISC PUMPING EXP ELECTRIC | 2,168 | 5,000 | $(2,832)$ |
| 630200 | MISC PUMPING EXP OTHER | 62,202 | - | 62,202 |
| 641100 | GENERAL CHEMICALS | 1,691,774 | 1,575,318 | 116,456 |
| 642100 | GENERAL WT LABOR | 2,429,490 |  | 2,429,490 |
| 642300 | GENERAL WT EXPENSES | 142,421 | 151,300 | $(8,879)$ |
| 643100 | MISC WT EXPENSES-CURRENT | 155,681 | 142,496 | 13,185 |
| 643300 | WASTE DISPOSAL EXP (CUR) | 138,189 | 134,075 | 4,114 |
| 643310 | AMORT WASTE DISPOSAL EXP | 101,250 | 96,000 | 5,250 |
| 650000 | OR MN WT SUPR \& ENG | 130,723 | - | 130,723 |
| 651100 | OR MN WT STRUCT \& IMP MAT | 308,527 | 414,100 | $(105,573)$ |
| 662100 | T\&D LINES EXPENSE | 17,806 | 22,620 | $(4,814)$ |
| 662200 | T\&D LINES LABOR | 1,859,504 | - | 1,859,504 |
| 665300 | MISC T\&D EXPENSES-CURRENT | 275,111 | 314,080 | $(38,969)$ |
| 666000 | T\&D RENTS | 6,454 | 7,200 | (746) |
| 670000 | OR MN T\&D SUPR \& ENG | 35,044 | - | 35,044 |
| 671200 | OR MN T\&D STRUCT \& IMP-LAB | 15,070 | - | 15,070 |
| 672120 | AMORT DEF EXP RES \& STAND | 125,477 | 163,555 | $(38,078)$ |
| 672200 | AMORT DEF EXP RES \& STAND | 16,887 | - | 16,887 |
| 673200 | OR MN T\&D MAINS LAB | 363,713 | - | 363,713 |
| 675200 | OR MN SERVICES LAB | 196,186 | - | 196,186 |
| 676200 | OR MN METERS LAB | 17,326 | - | 17,326 |
| 676400 | OR MN METER INSTALL LAB | 95,607 | - | 95,607 |
| 678100 | OR MN OTHER T\&D PLANT MAT | 337,737 | 552,000 | $(214,263)$ |
| 903100 | CONTRACT \& ORDERS EXPENS | 2,104 | - | 2,104 |
| 903200 | CONTRACTS \& ORDERS LABOR | 804,073 | - | 804,073 |
| 903300 | COLLECTING EXPENSES | 241,492 | 209,196 | 32,296 |
| 903520 | BILLING \& ACCTNG OTH EXP | 1,147,599 | 1,068,000 | 79,599 |


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| YEAR: 2007 |  |  |  |  |
| AWW | Description | Actual | Budget | Variance |
| 904000 | UNCOLLECTIBLE ACCOUNTS | 383,880 | 439,225 | $(55,345)$ |
| 905100 | MISC CUST ACCTNG EXPENSES | 4,172 | 3,840 | 332 |
| 920000 | ADM \& GENERAL SALARIES | 531,818 | 5,593,137 | $(5,061,319)$ |
| 920500 | INCENTIVE PLAN EXPENSE | 488,411 | 487,196 | 1,215 |
| 921100 | EXPENSES OF EMPLOYEES | 163,101 | 97,535 | 65,566 |
| 921130 | DUES FOR CLUBS-TAXABLE | 14,951 | 25,674 | $(10,723)$ |
| 921220 | MISC OFFICE EXP SUP | 22,093 | 20,866 | 1,227 |
| 923100 | SERVICE COMPANY CHARGES | 7,516,223 | 6,987,757 | 528,466 |
| 923200 | AUDITING SERVICES | 101,038 | 72,000 | 29,038 |
| 923300 | LEGAL SERVICES | 65,589 | 75,000 | $(9,411)$ |
| 923500 | OTHER SERVICES-CURRENT | 551,705 | 636,555 | $(84,850)$ |
| 924000 | PROPERTY INSURANCE | 117,599 | 36,000 | 81,599 |
| 925110 | WORKMENS COMP PREMIUM EXP | 153,210 | 117,864 | 35,346 |
| 925300 | INJURIES \& DAMAGES EXP | (514) | 18,000 | $(18,514)$ |
| 925400 | GENERAL LIABILITY | 304,483 | 627,000 | $(322,517)$ |
| 926100 | ACCRUED OPEB EXPENSE | 578,575 | 485,556 | 93,019 |
| 926110 | GROUP INSURANCE PREM EXP | 1,085,967 | 1,168,296 | $(82,329)$ |
| 926200 | OTHER WELFARE EXPENSES | 59,790 | 96,400 | $(36,610)$ |
| 926250 | 401-K CONTRIBUTIONS EXPENSE | 86,196 | 51,798 | 34,398 |
| 926400 | PENSION PLAN EXPENSE | 74,964 | 42,334 | 32,630 |
| 928100 | PENSIONS CAP (C \& R) | 373,198 | 405,531 | $(32,333)$ |
| 928300 | AMORT OTHER REGULATRY EXP | 837 | - | 837 |
| 930210 | MISC GENERAL EXP-CURRENT | 226,634 | 501,162 | $(274,528)$ |
| 930230 | MISC GENERAL EXP-CURRENT | 40,894 | 33,600 | 7,294 |
| 930260 | MEALS \& TRAVEL EXPENSES-TAXA | 19,210 | 28,312 | $(9,102)$ |
| 930600 | TRANSPORTATION EXPENSES | 534,527 | 715,140 | $(180,613)$ |
| 930880 | MISC GEN EXP-COMPANY DUES | 48,839 | 48,425 | 414 |
| 930890 | MISC GEN EXP-OTHER | 38,608 | 42,050 | $(3,442)$ |
| 931000 | ADM \& GENERAL RENTS | 27,551 | 28,400 | (849) |
| 932100 | OR MN A\&G STRUC \& IMP MAT | 17,684 | 39,996 | $(22,312)$ |
| 932700 | OR MN A\&G MISC PROPTY MAT | 101,103 | 140,740 | $(39,637)$ |


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| YEAR: 2008 |  |  |  |  |
|  |  |  |  |  |
| AWW | Description | Actual | Budget | Variance |
| 403000 | DEPRECIATION EXPENSE | 8,217,154 | 8,021,081 | 196,073 |
| 403100 | DEPRECIATION EXPENSE-CONTR PROP | $(993,159)$ | - | $(993,159)$ |
| 404100 | AMORT LIM TERM UT PLT | 6,900 | - | 6,900 |
| 404430 | AMORT REG ASSET - AFUDC | 70,370 | - | 70,370 |
| 406000 | AMORT UT PLT ACQ ADJUST | 22,668 | - | 22,668 |
| 407000 | AMORT PROPERTY LOSSES | 412,188 | 410,580 | 1,608 |
| 408030 | OTHER GENERAL TAXES | 84,538 | 94,456 | $(9,918)$ |
| 408100 | REAL \& PERSON PROP TAXES | 2,576,598 | 2,841,252 | $(264,654)$ |
| 408140 | FEDERAL UNEMPLYMNT TXS | 6,801 | - | 6,801 |
| 408160 | FICA | 494,545 | 534,422 | $(39,877)$ |
| 408180 | STATE UNEMPLYMNT TXS | 9,078 | - | 9,078 |
| 409100 | SIT-CURRENT | 519,821 | 661,227 | $(141,406)$ |
| 409110 | SIT-ADJUST PRIOR YEARS | $(42,843)$ |  | $(42,843)$ |
| 409140 | SIT OTHER | 312,775 | $(12,722)$ | 325,497 |
| 409150 | FIT-CURRENT | 3,001,087 | 2,428,534 | 572,553 |
| 409160 | FIT-ADJUST PRIOR YEARS | $(1,888,574)$ | - | $(1,888,574)$ |
| 409210 | SIT-OTH INC \& DED-REG | $(8,699)$ | $(29,914)$ | 21,215 |
| 409220 | FIT-OTH INC \& DED-REG | $(45,061)$ | $(116,445)$ | 71,384 |
| 410400 | DEF SIT-REG ASSET/LIAB | 61,994 | - | 61,994 |
| 410600 | DEF SIT-OTHER | 43,379 | - | 43,379 |
| 410700 | DEF FIT-REG ASSET/LIAB | 339,910 | - | 339,910 |
| 410900 | DEF FIT-OTHER | 3,888,608 | 1,920,399 | 1,968,209 |
| 412210 | ITC RESTORED- 3\% | $(7,652)$ |  | $(7,652)$ |
| 412220 | ITC RESTORED-4\% | $(6,305)$ | - | $(6,305)$ |
| 412230 | ITC RESTORED-10\% | $(70,840)$ | $(84,797)$ | 13,957 |
| 415100 | M\&J REVENUES-OUTSIDE | $(128,795)$ | - | $(128,795)$ |
| 416100 | M\&J EXPENSES-OUTSIDE | 122,921 | - | 122,921 |
| 416110 | M\&J EXPENSES-OUTSIDE | 2,491 | - | 2,491 |
| 419300 | INT OTHER SECURITIES | $(5,843)$ | - | $(5,843)$ |
| 420100 | AFUDC - EQUITY | $(1,329,407)$ | (1,507,094) | 177,687 |
| 420210 | AFUDC - DEBT | $(589,341)$ | $(684,424)$ | 95,083 |
| 425100 | AFUDC UT PLT ACQ ADJUST | (425) | - | (425) |
| 425300 | AMORT PREFERRED STOCK EXP | 771 | 768 | 3 |
| 426100 | DONATIONS | 165,135 | 196,421 | $(31,286)$ |
| 426160 | OTHER LOBBYING EXPENSES | 393 | 6,500 | $(6,107)$ |
| 426200 | OTHER INCOME DEDUCTIONS | 111,235 | 159,692 | $(48,457)$ |
| 426410 | NON-OPER EMPLOYEE EXP | 1,953 |  | 1,953 |
| 427100 | INTEREST LTD-OUT-REG | 1,521,899 | - | 1,521,899 |
| 427120 | INTEREST LTD-OUT-REG | 3,790,271 | 5,900,277 | (2,110,006) |
| 428000 | AMORT DEBT DISCOUNT \& EXP | 88,769 | 71,448 | 17,321 |
| 431100 | INTEREST ON BANK DEBT | 761,822 | 1,045,249 | $(283,427)$ |
| 431200 | OTHER INTEREST EXPENSE | 3 | - | 3 |
| 437100 | DIV DEC PREF STK-OUTSIDE | 459,457 | 459,900 | (443) |
| 438200 | DIVIDENDS DECLARED COMMON - IN | 6,003,108 | 4,882,323 | 1,120,785 |
| 461000 | DOMESTIC SEWER SERVICE BILLED | 13 | - | 13 |


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| YEAR: 2008 |  |  |  |  |
|  |  |  |  |  |
| AWW | Description | Actual | Budget | Variance |
| 461100 | RES SALES BILLED METERED | (30,854,938) | (30,529,500) | $(325,438)$ |
| 461110 | RES SALES UNBILL METERED | $(194,318)$ | - | $(194,318)$ |
| 461200 | COM SALES BILLED METERED | (14,530,582) | $(15,312,175)$ | 781,593 |
| 461210 | COM SALES UNBILL METERED | $(141,492)$ |  | $(141,492)$ |
| 461300 | IND SALES BILLED METERED | $(1,480,364)$ | (1,875,230) | 394,866 |
| 461310 | IND SALES UNBILL METERED | 14,168 |  | 14,168 |
| 461400 | MISC SALES BILLED METERED | $(26,577)$ | - | $(26,577)$ |
| 462000 | PRIV FIR PROT SER BILLED | $(1,354,716)$ | $(2,332,380)$ | 977,664 |
| 462210 | INDUSTRIAL WASTE SERVICE | $(1,500)$ | - | $(1,500)$ |
| 463000 | PUB FIRE PROT SER BILLED | $(2,333,248)$ | $(1,225,032)$ | $(1,108,216)$ |
| 464200 | PUB AUTH SLS BILLED METRD | $(4,890,969)$ | $(4,516,895)$ | $(374,074)$ |
| 464210 | PUB AUTH SLS UNBILL METRD | $(19,171)$ |  | $(19,171)$ |
| 466000 | SALES FOR RESALE BILLED | $(1,438,391)$ | (1,494,452) | 56,061 |
| 466100 | SALES FOR RESALE UNBILL | 3,113 |  | 3,113 |
| 471100 | RECONNECTION CHARGES | $(694,652)$ | $(241,542)$ | (453,110) |
| 471200 | OTHER MISC SERV REVENUES | $(646,163)$ | $(745,008)$ | 98,845 |
| 471400 | BILLING \& COLLECTIONS FOR OTHERS | (1,071,239) | $(903,528)$ | $(167,711)$ |
| 472000 | RENTS FROM WATER PROPERTY | $(105,144)$ | $(86,354)$ | $(18,790)$ |
| 474300 | MISCELLANEOUS | $(8,500)$ | - | $(8,500)$ |
| 601100 | SS OPERATION EXPENSE | 3,230 | - | 3,230 |
| 602000 | PURCHASED WATER | 125,985 | 510,050 | $(384,065)$ |
| 603100 | MISCELLANEOUS SS EXPENSES | 31,814 | 44,940 | $(13,126)$ |
| 610000 | SS ORDNY MAINT SUPR \& ENG | 85,276 |  | 85,276 |
| 617100 | OR MN MISC WAT SS PLT MAT | 255,135 | 168,410 | 86,725 |
| 623110 | POWER PURCH FOR PUMP ELEC | 292,769 | - | 292,769 |
| 623210 | FUEL PURCH FOR PUMP OTHER | 2,902,036 | 2,756,449 | 145,587 |
| 626500 | MISC PUMPING EXP ELECTRIC | $(165,541)$ | 5,500 | $(171,041)$ |
| 630200 | MISC PUMPING EXP OTHER | 67,652 | - | 67,652 |
| 641100 | GENERAL CHEMICALS | 1,749,285 | 1,637,082 | 112,203 |
| 642100 | GENERAL WT LABOR | 1,547,613 |  | 1,547,613 |
| 642300 | GENERAL WT EXPENSES | 127,496 | 167,516 | $(40,020)$ |
| 643100 | MISC WT EXPENSES-CURRENT | 97,723 | 109,805 | $(12,082)$ |
| 643300 | WASTE DISPOSAL EXP (CUR) | 154,251 | 166,847 | $(12,596)$ |
| 643310 | AMORT WASTE DISPOSAL EXP | 92,813 | 101,000 | $(8,187)$ |
| 650000 | OR MN WT SUPR \& ENG | 84,093 | - | 84,093 |
| 651100 | OR MN WT STRUCT \& IMP MAT | 200,343 | 275,074 | $(74,731)$ |
| 651120 | AMORT DEF EXP WT STRUCT | 181,597 | 132,140 | 49,457 |
| 660000 | T\&D RENTS | 27,468 | - | 27,468 |
| 662100 | T\&D LINES EXPENSE | 20,154 | 21,900 | $(1,746)$ |
| 662200 | T\&D LINES LABOR | 1,924,372 | - | 1,924,372 |
| 665300 | MISC T\&D EXPENSES-CURRENT | 268,554 | 346,853 | $(78,299)$ |
| 666000 | T\&D RENTS | 6,859 | 3,780 | 3,079 |
| 670000 | OR MN T\&D SUPR \& ENG | 14,278 | - | 14,278 |
| 671200 | OR MN T\&D STRUCT \& IMP-LAB | 14,877 | - | 14,877 |
| 672120 | AMORT DEF EXP RES \& STAND | 94,639 | 162,783 | $(68,144)$ |


| Kentucky American Water Company |  |  |  |  |
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|  |  |  |  |  |
| YEAR: 2008 |  |  |  |  |
|  |  |  |  |  |
| AWW | Description | Actual | Budget | Variance |
| 672200 | AMORT DEF EXP RES \& STAND | 18,263 | - | 18,263 |
| 673200 | OR MN T\&D MAINS LAB | 307,014 | - | 307,014 |
| 675200 | OR MN SERVICES LAB | 200,514 | - | 200,514 |
| 676200 | OR MN METERS LAB | 45,719 | - | 45,719 |
| 676400 | OR MN METER INSTALL LAB | 123,789 | - | 123,789 |
| 678100 | OR MN OTHER T\&D PLANT MAT | 362,263 | 543,450 | $(181,187)$ |
| 902200 | METER READING LABOR | 139,966 | - | 139,966 |
| 903100 | CONTRACT \& ORDERS EXPENS | 676 | - | 676 |
| 903200 | CONTRACTS \& ORDERS LABOR | 671,355 | - | 671,355 |
| 903300 | COLLECTING EXPENSES | 217,690 | 274,656 | $(56,966)$ |
| 903520 | BILLING \& ACCTNG OTH EXP | 845,225 | 798,840 | 46,385 |
| 904000 | UNCOLLECTIBLE ACCOUNTS | 467,213 | 504,114 | $(36,901)$ |
| 905100 | MISC CUST ACCTNG EXPENSES | 5,209 | 6,000 | (791) |
| 920000 | ADM \& GENERAL SALARIES | 847,339 | 6,380,770 | (5,533,431) |
| 920500 | INCENTIVE PLAN EXPENSE | 397,284 | 354,238 | 43,046 |
| 921100 | EXPENSES OF EMPLOYEES | 104,822 | 92,351 | 12,471 |
| 921130 | DUES FOR CLUBS-TAXABLE | 19,565 | 26,233 | $(6,668)$ |
| 921200 | MISC OFFICE EXP SUP | 515,181 | 334,540 | 180,641 |
| 923100 | SERVICE COMPANY CHARGES | 7,930,917 | 7,373,898 | 557,019 |
| 923300 | LEGAL SERVICES | 144,444 | 75,000 | 69,444 |
| 923500 | OTHER SERVICES-CURRENT | 654,862 | 689,127 | $(34,265)$ |
| 924000 | PROPERTY INSURANCE | 115,933 | 36,000 | 79,933 |
| 925110 | WORKMENS COMP PREMIUM EXP | 136,714 | 157,704 | $(20,990)$ |
| 925300 | INJURIES \& DAMAGES EXP | $(3,549)$ | 18,000 | $(21,549)$ |
| 925400 | GENERAL LIABILITY | 237,500 | 531,996 | $(294,496)$ |
| 926100 | ACCRUED OPEB EXPENSE | 577,728 | 684,336 | $(106,608)$ |
| 926110 | GROUP INS PREMIUM EXPENSE | 1,104,724 | 1,300,060 | $(195,336)$ |
| 926200 | OTHER WELFARE EXPENSES | 53,367 | 60,400 | $(7,033)$ |
| 926250 | 401-K CONTRIBUTIONS EXPENSE | 99,336 | 97,037 | 2,299 |
| 926400 | PENSION PLAN EXPENSE | 622,650 | 518,280 | 104,370 |
| 926600 | OTHER PENSION PLAN EXP | 89,162 | 30,500 | 58,662 |
| 928100 | PENSIONS CAP (C \& R) | 208,297 | 607,390 | $(399,093)$ |
| 928300 | AMORT OTHER REGULATRY EXP | 12,448 | - | 12,448 |
| 928400 | OTH REGULATORY EXP-CURRENT | 133,927 | 155,952 | $(22,025)$ |
| 930200 | AMORT MISC CHARGES | - | 4,300 | $(4,300)$ |
| 930210 | MISC GENERAL EXP-CURRENT | 302,993 | 341,349 | $(38,356)$ |
| 930230 | MISC GENERAL EXP-CURRENT | 37,509 | 27,600 | 9,909 |
| 930260 | MEALS \& TRAVEL EXPENSES-TAXA | 19,889 | 25,131 | $(5,242)$ |
| 930300 | RESEARCH \& DEVELOPMENT EXP | 54 | - | 54 |
| 930600 | TRANSPORTATION EXPENSES | 755,901 | 492,000 | 263,901 |
| 930880 | MISC GEN EXP-COMPANY DUES | 54,134 | 50,245 | 3,889 |
| 930890 | MISC GEN EXP-OTHER | 48,888 | 42,520 | 6,368 |
| 931000 | ADM \& GENERAL RENTS | 28,045 | 28,400 | (355) |
| 932100 | OR MN A\&G STRUC \& IMP MAT | 111,323 | 154,636 | $(43,313)$ |
| 932700 | OR MN A\&G MISC PROPTY MAT | 44,311 | 31,300 | 13,011 |


| Kentucky American Water Company |  |  |  |  |
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|  |  |  |  |  |
| YEAR: 2009 |  |  |  |  |
|  |  |  |  |  |
| AWW |  | Actual | Budget | Variance |
| 403000 | DEPRECIATION EXPENSE | 8,718,319 | 8,542,956 | 175,363 |
| 403100 | DEPRECIATION EXPENSE-CONTR PROP | (1,371,321) | - | (1,371,321) |
| 404100 | AMORT LIM TERM UT PLT | 6,900 | 6,900 | - |
| 404430 | AMORT REG ASSET - AFUDC | 75,985 | 72,000 | 3,985 |
| 406000 | AMORT UT PLT ACQ ADJUST | 20,661 | 21,612 | (951) |
| 407000 | AMORT PROPERTY LOSSES | 412,188 | 432,192 | $(20,004)$ |
| 408030 | OTHER GENERAL TAXES | 88,508 | 111,668 | $(23,160)$ |
| 408100 | REAL \& PERSON PROP TAXES | 2,789,817 | 2,963,352 | $(173,535)$ |
| 408110 | GROSS INC \& RECPTS TAXES | 57,549 |  | 57,549 |
| 408140 | FEDERAL UNEMPLYMNT TXS | 4,643 |  | 4,643 |
| 408160 | FICA | 488,239 | 523,498 | $(35,259)$ |
| 408180 | STATE UNEMPLYMNT TXS | 10,748 | - | 10,748 |
| 409100 | SIT-CURRENT | 659,192 | 785,867 | $(126,675)$ |
| 409110 | SIT-ADJUST PRIOR YEARS | $(91,862)$ | - | $(91,862)$ |
| 409150 | FIT-CURRENT | 1,551,487 | 3,190,303 | $(1,638,816)$ |
| 409160 | FIT-ADJUST PRIOR YEARS | $(209,463)$ | - | $(209,463)$ |
| 409210 | SIT-OTH INC \& DED-REG | $(29,728)$ | $(27,757)$ | $(1,971)$ |
| 409220 | FIT-OTH INC \& DED-REG | $(163,006)$ | $(108,041)$ | $(54,965)$ |
| 410400 | DEF SIT-REG ASSET/LIAB | 4,565 |  | 4,565 |
| 410600 | DEF SIT-OTHER | 209,981 | - | 209,981 |
| 410700 | DEF FIT-REG ASSET/LIAB | 370,225 | - | 370,225 |
| 410900 | DEF FIT-OTHER | 4,262,897 | 2,809,078 | 1,453,819 |
| 412210 | ITC RESTORED- 3\% | $(7,652)$ | - | $(7,652)$ |
| 412220 | ITC RESTORED-4\% | $(6,305)$ | - | $(6,305)$ |
| 412230 | ITC RESTORED-10\% | $(70,840)$ | (84,797) | 13,957 |
| 415100 | M\&J REVENUES-OUTSIDE | $(114,035)$ |  | $(114,035)$ |
| 416100 | M\&J EXPENSES-OUTSIDE | 122,194 | - | 122,194 |
| 416110 | M\&J EXPENSES-OUTSIDE | 3,326 | - | 3,326 |
| 420100 | AFUDC - EQUITY | $(3,306,351)$ | $(2,837,597)$ | $(468,754)$ |
| 420210 | AFUDC - DEBT | $(1,591,224)$ | $(1,288,656)$ | $(302,568)$ |
| 425100 | AFUDC UT PLT ACQ ADJUST | (425) | - | (425) |
| 425300 | AMORT PREFERRED STOCK EXP | 771 | 768 | 3 |
| 426100 | DONATIONS | 144,473 | 171,413 | $(26,940)$ |
| 426160 | OTHER LOBBYING EXPENSES | 46,532 | 7,500 | 39,032 |
| 426200 | OTHER INCOME DEDUCTIONS | 356,187 | 157,532 | 198,655 |
| 426410 | NON-OPER EMPLOYEE EXP | 940 | - | 940 |
| 427100 | INTEREST LTD-OUT-REG | 1,521,899 | - | 1,521,899 |
| 427120 | INTEREST LTD-OUT-REG | 3,577,301 | 7,765,096 | $(4,187,795)$ |
| 428000 | AMORT DEBT DISCOUNT \& EXP | 104,459 | 117,262 | $(12,803)$ |
| 431100 | INTEREST ON BANK DEBT | 355,136 | 1,308,150 | $(953,014)$ |
| 431200 | OTHER INTEREST EXPENSE | 8,920 | - | 8,920 |
| 437100 | DIV DEC PREF STK-OUTSIDE | 460,552 | 78,132 | 382,420 |
| 438200 | DIVIDENDS DECLARED COMMON - IN | 8,103,411 | - | 8,103,411 |
| 461100 | RES SALES BILLED METERED | (31,956,121) | (35,224,291) | 3,268,170 |
| 461110 | RES SALES UNBILL METERED | $(91,673)$ | - | $(91,673)$ |
| 461200 | COM SALES BILLED METERED | (14,949,949) | $(17,248,761)$ | 2,298,812 |
| 461210 | COM SALES UNBILL METERED | $(200,394)$ | - | $(200,394)$ |
| 461300 | IND SALES BILLED METERED | $(1,403,661)$ | $(1,998,815)$ | 595,154 |
| 461310 | IND SALES UNBILL METERED | $(32,721)$ |  | $(32,721)$ |
| 461400 | MISC SALES BILLED METERED | $(13,740)$ | - | $(13,740)$ |
| 462000 | PRIV FIR PROT SER BILLED | $(1,538,493)$ | (2,747,927) | 1,209,434 |
| 463000 | PUB FIRE PROT SER BILLED | $(2,567,693)$ | $(1,421,505)$ | (1,146,188) |
| 464200 | PUB AUTH SLS BILLED METRD | $(4,808,636)$ | $(5,173,145)$ | 364,509 |


| Kentucky American Water Company |  |  |  |  |
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|  |  |  |  |  |
| YEAR: 2009 |  |  |  |  |
|  |  |  |  |  |
| AWW |  | Actual | Budget | Variance |
| 464210 | PUB AUTH SLS UNBILL METRD | 16,019 | - | 16,019 |
| 466000 | SALES FOR RESALE BILLED | $(1,456,417)$ | (1,409,161) | $(47,256)$ |
| 466100 | SALES FOR RESALE UNBILL | $(33,145)$ | - | $(33,145)$ |
| 470000 | FORFEITED DISCOUNTS | 35 | - | 35 |
| 471100 | RECONNECTION CHARGES | $(707,460)$ | $(499,200)$ | $(208,260)$ |
| 471200 | OTHER MISC SERV REVENUES | (644,265) | $(622,188)$ | $(22,077)$ |
| 471400 | BILLING \& COLLECTIONS FOR OTHERS | (1,111,400) | (1,010,412) | $(100,988)$ |
| 472000 | RENTS FROM WATER PROPERTY | $(190,047)$ | $(94,020)$ | $(96,027)$ |
| 474300 | MISCELLANEOUS | $(10,618)$ | - | $(10,618)$ |
| 601100 | SS OPERATION EXPENSE | 8,626 | - | 8,626 |
| 602000 | PURCHASED WATER | 120,260 | 140,661 | $(20,401)$ |
| 603100 | MISCELLANEOUS SS EXPENSES | 43,165 | 13,125 | 30,040 |
| 610000 | SS ORDNY MAINT SUPR \& ENG | 1,926 | - | 1,926 |
| 617100 | OR MN MISC WAT SS PLT MAT | 205,998 | 168,900 | 37,098 |
| 623110 | POWER PURCH FOR PUMP ELEC | 356,769 | - | 356,769 |
| 623210 | FUEL PURCH FOR PUMP OTHER | 2,608,188 | 3,957,598 | (1,349,410) |
| 626500 | MISC PUMPING EXP ELECTRIC | $(92,522)$ | 3,000 | $(95,522)$ |
| 630200 | MISC PUMPING EXP OTHER | 73,933 | 12,860 | 61,073 |
| 641100 | GENERAL CHEMICALS | 2,216,654 | 2,606,698 | $(390,044)$ |
| 642100 | GENERAL WT LABOR | 1,487,402 | 146,062 | 1,341,340 |
| 642300 | GENERAL WT EXPENSES | 153,999 | 151,356 | 2,643 |
| 643100 | MISC WT EXPENSES-CURRENT | 77,200 | 100,750 | $(23,550)$ |
| 643300 | WASTE DISPOSAL EXP (CUR) | 180,132 | 183,354 | $(3,222)$ |
| 643310 | AMORT WASTE DISPOSAL EXP | 53,850 | 100,000 | $(46,150)$ |
| 650000 | OR MN WT SUPR \& ENG | 228,688 | 12,860 | 215,828 |
| 651100 | OR MN WT STRUCT \& IMP MAT | 156,288 | 222,200 | $(65,912)$ |
| 651120 | AMORT DEF EXP WT STRUCT | 147,771 | 172,909 | $(25,138)$ |
| 660000 | T\&D RENTS | 77,345 | - | 77,345 |
| 662100 | T\&D LINES EXPENSE | 20,969 | 17,700 | 3,269 |
| 662200 | T\&D LINES LABOR | 1,958,236 | - | 1,958,236 |
| 663400 | MISC METER LABOR | 27,920 | - | 27,920 |
| 665300 | MISC T\&D EXPENSES-CURRENT | 307,653 | 368,612 | $(60,959)$ |
| 666000 | T\&D RENTS | 10,120 | 3,780 | 6,340 |
| 670000 | OR MN T\&D SUPR \& ENG | 17,473 | - | 17,473 |
| 671200 | OR MN T\&D STRUCT \& IMP-LAB | 17,728 | - | 17,728 |
| 672120 | AMORT DEF EXP RES \& STAND | 123,566 | 8,652 | 114,914 |
| 672200 | AMORT DEF EXP RES \& STAND | 15,382 | - | 15,382 |
| 673200 | OR MN T\&D MAINS LAB | 297,543 | - | 297,543 |
| 675200 | OR MN SERVICES LAB | 231,135 | - | 231,135 |
| 676200 | OR MN METERS LAB | 47,090 | - | 47,090 |
| 676400 | OR MN METER INSTALL LAB | 153,539 | - | 153,539 |
| 678100 | OR MN OTHER T\&D PLANT MAT | 454,617 | 483,800 | $(29,183)$ |
| 902200 | METER READING LABOR | 258,658 | - | 258,658 |
| 903100 | CONTRACT \& ORDERS EXPENS | 820 | - | 820 |
| 903200 | CONTRACTS \& ORDERS LABOR | 638,766 | - | 638,766 |
| 903300 | COLLECTING EXPENSES | 276,759 | 250,800 | 25,959 |
| 903520 | BILLING \& ACCTNG OTH EXP | 944,955 | 900,386 | 44,569 |
| 904000 | UNCOLLECTIBLE ACCOUNTS | 445,903 | 567,444 | $(121,541)$ |
| 905100 | MISC CUST ACCTNG EXPENSES | 2,797 | 6,300 | $(3,503)$ |
| 920000 | ADM \& GENERAL SALARIES | 868,874 | 6,404,807 | $(5,535,933)$ |
| 920500 | INCENTIVE PLAN EXPENSE | 360,347 | 366,355 | $(6,008)$ |
| 921100 | EXPENSES OF EMPLOYEES | 65,888 | 128,375 | $(62,487)$ |
| 921130 | DUES FOR CLUBS-TAXABLE | 34,015 | 25,385 | 8,630 |


| Kentucky American Water Company |  |  |  |  |
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|  |  |  |  |  |
| YEAR: 2009 |  |  |  |  |
|  |  |  |  |  |
| AWW |  | Actual | Budget | Variance |
| 921200 | MISC OFFICE EXP SUP | 429,127 | 420,697 | 8,430 |
| 923100 | SERVICE COMPANY CHARGES | 8,147,527 | 7,598,202 | 549,325 |
| 923300 | LEGAL SERVICES | 166,370 | 78,600 | 87,770 |
| 923500 | OTHER SERVICES-CURRENT | 803,647 | 788,430 | 15,217 |
| 924000 | PROPERTY INSURANCE | 160,021 | 40,416 | 119,605 |
| 925110 | WORKMENS COMP PREMIUM EXP | 143,523 | 152,160 | $(8,637)$ |
| 925300 | INJURIES \& DAMAGES EXP | $(13,323)$ | 12,000 | $(25,323)$ |
| 925400 | GENERAL LIABILITY | 306,836 | 526,440 | $(219,604)$ |
| 926100 | ACCRUED OPEB EXPENSE | 2,428,235 | 1,884,996 | 543,239 |
| 926160 | GROUP INS CAP (A \& B) | $(254,836)$ | - | $(254,836)$ |
| 926200 | OTHER WELFARE EXPENSES | 28,927 | 93,350 | $(64,423)$ |
| 926250 | 401-K CONTRIBUTIONS EXPENSE | 106,973 | 110,301 | $(3,328)$ |
| 926400 | PENSION PLAN EXPENSE | 1,386,324 | 605,748 | 780,576 |
| 926600 | OTHER PENSION PLAN EXP | 105,489 | 116,400 | $(10,911)$ |
| 928100 | PENSIONS CAP ( C \& R) | 230,421 | 269,069 | $(38,648)$ |
| 928300 | AMORT OTHER REGULATRY EXP | 14,200 | 10,236 | 3,964 |
| 928400 | OTH REGULATORY EXP-CURRENT | 143,696 | 160,632 | $(16,936)$ |
| 930210 | MISC GENERAL EXP-CURRENT | 432,315 | 386,275 | 46,040 |
| 930230 | MISC GENERAL EXP-CURRENT | 25,680 | 55,200 | $(29,520)$ |
| 930260 | MEALS \& TRAVEL EXPENSES-TAXA | 14,140 | 25,566 | $(11,426)$ |
| 930270 | DONATIONS-ILL | 20 | - | 20 |
| 930510 | LOBBYING EXPENSES | 8,040 | - | 8,040 |
| 930600 | TRANSPORTATION EXPENSES | 568,412 | 998,640 | $(430,228)$ |
| 930880 | MISC GEN EXP-COMPANY DUES | 62,690 | 58,849 | 3,841 |
| 930890 | MISC GEN EXP-OTHER | 45,983 | 40,603 | 5,380 |
| 931000 | ADM \& GENERAL RENTS | 21,569 | 52,968 | $(31,399)$ |
| 932100 | OR MN A\&G STRUC \& IMP MAT | 108,272 | 117,696 | $(9,424)$ |
| 932700 | OR MN A\&G MISC PROPTY MAT | 30,649 | 22,466 | 8,183 |


| $\begin{gathered} \text { YEAR-2006 } \\ \text { AWW } \\ \hline \end{gathered}$ | AWW_DESC | 2006 <br> January <br> Actual | $\begin{gathered} 2006 \\ \text { January } \\ \text { Budget } \\ \hline \end{gathered}$ | Variance | 2006 <br> February Actual | $\begin{gathered} 2006 \\ \text { February } \\ \text { Budget } \\ \hline \end{gathered}$ | Variance | March <br> Actual |  | Variance |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 403000 | DEPRECIATION EXPENSE | 614,585 | 601,138 | 13,447 | 618,182 | 604,931 | 13,251 | 622,392 | 605,993 | 16,399 |
| 404430 | AMORT REG ASSET - AFUDC | 2,719 | 2,144 | 575 | 2,719 | 2,144 | 575 | 2,719 | 2,144 | 575 |
| 406000 | AMORT UT PLT ACQ ADJUST | 1,801 | 1,801 | - | 1,801 | 1,801 | - | 1,801 | 1,801 | - |
| 407000 | AMORT PROPERTY LOSSES | 35,957 | 36,562 | (605) | 35,957 | 36,562 | (605) | $(41,268)$ | 36,562 | $(77,830)$ |
| 408030 | OTHER GENERAL TAXES | 5,914 | - | 5,914 | 5,914 | - | 5,914 | 5,914 | - | 5,914 |
| 408100 | REAL \& PERSON PROP TAXES | 195,058 | 180,000 | 15,058 | 195,986 | 180,000 | 15,986 | 158,737 | 180,000 | $(21,263)$ |
| 408110 | GROSS INC \& RECPTS TAXES | - | 7,807 | $(7,807)$ | - | 7,807 | $(7,807)$ | - | 7,807 | $(7,807)$ |
| 408140 | FEDERAL UNEMPLYMNT TXS | 3,002 | - | 3,002 | 2,116 | - | 2,116 | 351 | - | 351 |
| 408160 | FICA | 18,636 | 37,206 | $(18,570)$ | 26,249 | 35,657 | $(9,408)$ | 32,342 | 40,305 | $(7,963)$ |
| 408180 | STATE UNEMPLYMNT TXS | 4,627 | - | 4,627 | 3,070 | - | 3,070 | 708 | - | 708 |
| 409100 | SIT-CURRENT | 17,579 | 52,031 | $(34,452)$ | 17,579 | 18,359 | (780) | 17,579 | 67,076 | $(49,497)$ |
| 409110 | SIT-ADJUST PRIOR YEARS | - | - | - | - | - | - | - | - | - |
| 409150 | FIT-CURRENT | 70,986 | 205,205 | $(134,219)$ | 70,986 | 74,729 | $(3,743)$ | 77,986 | 265,164 | $(187,178)$ |
| 409160 | FIT-ADJUST PRIOR YEARS | - | - | - | - | - | - | - | - | - |
| 409210 | SIT-OTH INC \& DED-REG | $(7,326)$ | $(7,815)$ | 489 | $(7,326)$ | $(1,040)$ | $(6,286)$ | $(7,326)$ | $(1,071)$ | $(6,255)$ |
| 409220 | FIT-OTH INC \& DED-REG | $(31,079)$ | $(30,421)$ | (658) | $(31,079)$ | $(4,048)$ | $(27,031)$ | $(31,079)$ | $(4,169)$ | $(26,910)$ |
| 410400 | DEF SIT-REG ASSET/LIAB | 3,173 | - | 3,173 | 3,173 | - | 3,173 | 3,173 | - | 3,173 |
| 410600 | DEF SIT-OTHER | 16,792 | 471 | 16,321 | 18,547 | 39,248 | $(20,701)$ | 12,159 | 1,012 | 11,147 |
| 410700 | DEF FIT-REG ASSET/LIAB | 6,005 | - | 6,005 | 6,005 | - | 6,005 | 6,005 | - | 6,005 |
| 410900 | DEF FIT-OTHER | 85,815 | $(17,395)$ | 103,210 | 93,001 | 138,407 | $(45,406)$ | 66,840 | $(25,038)$ | 91,878 |
| 412210 | ITC RESTORED-3\% | (719) | - | (719) | (719) | - | (719) | (719) | - | (719) |
| 412220 | ITC RESTORED-4\% | (592) | - | (592) | (592) | - | (592) | (592) | - | (592) |
| 412230 | ITC RESTORED-10\% | $(6,655)$ | (628) | $(6,027)$ | $(6,655)$ | $(7,797)$ | 1,142 | $(6,655)$ | 4,789 | $(11,444)$ |
| 415100 | M\&J REVENUES-OUTSIDE | $(145,330)$ | $(141,761)$ | $(3,569)$ | $(149,515)$ | $(141,761)$ | $(7,754)$ | $(151,608)$ | $(141,761)$ | $(9,847)$ |
| 415110 | M\&J REVENUES-INSIDE | - | - | - | - | - | - | - |  | - |
| 416100 | M\&J EXPENSES-OUTSIDE | 23,471 | - | 23,471 | 10,592 | - | 10,592 | 12,319 | - | 12,319 |
| 416110 | M\&J EXPENSES-INSIDE | 146,028 | 135,139 | 10,889 | 101,976 | 133,823 | $(31,847)$ | 159,031 | 134,663 | 24,368 |
| 419510 | OTHER INTEREST INCOME-IN | - | - | - | - | - | - | - | - | - |
| 420100 | AFUDC - EQUITY | $(44,243)$ | $(17,106)$ | $(27,137)$ | $(31,089)$ | $(16,999)$ | $(14,090)$ | $(29,588)$ | $(18,084)$ | $(11,504)$ |
| 420210 | AFUDC - DEBT | $(18,902)$ | $(7,769)$ | $(11,133)$ | $(13,628)$ | $(7,720)$ | $(5,908)$ | $(13,028)$ | $(8,212)$ | $(4,816)$ |
| 425100 | AMORT UT PLT ACQ ADJUST | - | - | - | - | - | - | - | - | - |
| 425300 | AMORT PREFERRED STOCK EXP | 64 | 64 | - | 64 | 64 | - | 64 | 64 | - |
| 426100 | DONATIONS | 26,691 | 25,733 | 958 | 5,030 | 7,633 | $(2,603)$ | 14,230 | 12,683 | 1,547 |
| 426160 | OTHER LOBBYING EXPENSES | 4,277 | 1,000 | 3,277 | 4,025 | 1,000 | 3,025 | 3,865 | 1,000 | 2,865 |
| 426200 | OTHER INCOME DEDUCTIONS | 48,317 | 68,622 | $(20,305)$ | 5,500 | 5,913 | (413) | 150 | 400 | (250) |
| 427100 | INTEREST LTD-OUT-REG | 137,713 | 394,867 | $(257,154)$ | 137,713 | 394,867 | $(257,154)$ | 137,713 | 394,867 | $(257,154)$ |
| 427110 | INTEREST LTD-OUT-TFB | - | - | - | - | - | - | - | - | - |
| 427120 | INTEREST LTD - INSIDE | 257,154 | - | 257,154 | 257,154 | - | 257,154 | 257,154 | - | 257,154 |
| 428000 | AMORT DEBT DISCOUNT \& EXP | 6,009 | 6,009 | - | 6,009 | 6,009 | - | 6,009 | 6,009 | - |
| 431200 | OTHER INTEREST EXPENSE | - | - | - | - | - | - | 16 | - | 16 |
| 433100 | INTEREST ON BANK DEBT | 46,982 | 48,801 | $(1,819)$ | 28,455 | 46,418 | $(17,963)$ | 32,056 | 48,018 | $(15,962)$ |
| 437100 | DIV DEC PREF STK-OUTSIDE | 38,331 | 38,325 | 6 | 38,331 | 38,325 | 6 | 38,320 | 38,325 | (5) |
| 438200 | DIV DEC COMMON STK - IN | - | - | - | - | - | - | - | 2,757,116 | (2,757,116) |
| 461000 | DOMESTIC SEWER SERV BILLED | $(28,191)$ | $(29,391)$ | 1,200 | $(26,831)$ | $(29,391)$ | 2,560 | (492) | $(29,391)$ | 28,899 |
| 461100 | RES SALES BILLED METERED | $(2,624,359)$ | $(2,143,569)$ | $(480,790)$ | $(1,957,111)$ | $(2,054,419)$ | 97,308 | $(2,458,341)$ | $(2,145,865)$ | $(312,476)$ |
| 461110 | RES SALES UNBILL METERED | 525,937 | - | 525,937 | 21,769 | - | 21,769 | 560,287 | - | 560,287 |
| 461200 | COM SALES BILLED METERED | $(1,128,492)$ | $(930,574)$ | $(197,918)$ | $(790,225)$ | $(900,634)$ | 110,409 | $(1,099,271)$ | $(997,860)$ | $(101,411)$ |
| 461210 | COM SALES UNBILL METERED | 289,615 | - | 289,615 | $(28,930)$ | - | $(28,930)$ | 174,666 | - | 174,666 |
| 461300 | IND SALES BILLED METERED | $(135,440)$ | $(121,085)$ | $(14,355)$ | $(105,251)$ | $(132,141)$ | 26,890 | $(114,228)$ | $(129,295)$ | 15,067 |
| 461310 | IND SALES UNBILL METERED | 31,600 | - | 31,600 | $(27,176)$ | - | $(27,176)$ | 59,182 | - | 59,182 |
| 461400 | MISC SALES BILLED METERED | 5 | - | 5 | 5 | - | 5 | $(4,299)$ | - | $(4,299)$ |
| 462000 | PRIV FIR PROT SER BILLED | $(84,946)$ | $(86,594)$ | 1,648 | $(84,191)$ | $(86,594)$ | 2,403 | $(84,583)$ | $(86,594)$ | 2,011 |
| 462100 | PRIV FIR PROT SER UNBILL | (358) | - | (358) | (36) | - | (36) | 394 | - | 394 |
| 462210 | INDUSTRIAL WASTE SERVICE | (239) | - | (239) | (462) | - | (462) | (856) | - | (856) |
| 463000 | PUB FIRE PROT SER BILLED | $(178,250)$ | $(187,251)$ | 9,001 | $(189,633)$ | $(187,251)$ | $(2,382)$ | $(173,313)$ | $(187,251)$ | 13,938 |
| 463100 | PUB FIRE PROT SER UNBILL | $(5,201)$ | - | $(5,201)$ | 5,201 |  | 5,201 | - | - | - |
| 463300 | PUB AUTH SEWER SERV BILLED | (86) | - | (86) | (257) | - | (257) | - | - | - |
| 464200 | PUB AUTH SLS BILLED METRD | $(327,522)$ | $(182,313)$ | $(145,209)$ | $(234,031)$ | $(193,588)$ | $(40,443)$ | $(253,214)$ | $(265,027)$ | 11,813 |
| 464210 | PUB AUTH SLS UNBILL METRD | 257,040 | - | 257,040 | $(20,839)$ | - | $(20,839)$ | 2,770 | - | 2,770 |
| 466000 | SALES FOR RESALE BILLED | $(72,745)$ | $(120,150)$ | 47,405 | $(81,015)$ | $(120,150)$ | 39,135 | $(76,699)$ | $(120,150)$ | 43,451 |
| 466100 | SALES FOR RESALE UNBILL | $(35,015)$ | - | $(35,015)$ | $(5,952)$ | - | $(5,952)$ | 11,766 | - | 11,766 |
| 471100 | RECONNECTION CHARGES | $(21,255)$ | $(63,920)$ | 42,665 | $(11,859)$ | $(63,920)$ | 52,061 | $(23,814)$ | $(63,920)$ | 40,106 |
| 471200 | OTHER MISC SERV REVENUES | $(1,576)$ | $(1,850)$ | 274 | $(1,635)$ | $(1,850)$ | 215 | $(1,848)$ | $(1,850)$ | 2 |
| 472000 | RENTS FROM WATER PROPERTY | $(7,303)$ | $(7,302)$ | (1) | $(7,303)$ | $(7,302)$ | (1) | $(7,303)$ | $(7,302)$ | (1) |
| 474100 | BILL \& COLL SERV FOR OTH | $(73,030)$ | $(72,561)$ | (469) | $(77,428)$ | $(72,561)$ | $(4,867)$ | $(64,549)$ | $(72,561)$ | 8,012 |
| 474300 | MISCELLANEOUS | $(57,170)$ | - | $(57,170)$ | $(42,934)$ | - | $(42,934)$ | $(55,853)$ | - | $(55,853)$ |
| 602000 | PURCHASED WATER | 40,516 | 37,250 | 3,266 | 27,894 | 37,250 | $(9,356)$ | 38,693 | 37,250 | 1,443 |
| 603100 | MISCELLANEOUS SS EXPENSES | 6,256 | 7,270 | $(1,014)$ | 5,743 | 6,105 | (362) | 44,966 | 6,285 | 38,681 |
| 611100 | OR MN SS STRUCT \& IMP MAT | 5,097 | 6,043 | (946) | 9,724 | 8,043 | 1,681 | 3,840 | 8,043 | $(4,203)$ |
| 613120 | AMORT DEF EXP LAK RIV \& OTH | 995 | 483 | 512 | 502 | 483 | 19 | 402 | 483 | (81) |
| 614120 | AMORT DEF EXP WELLS \& SPR | $(1,449)$ | - | $(1,449)$ | - | - | - | - | - | - |
| 622100 | POWER PRODUCTION EXP. | - | - | - | - | - | - | 4,120 | - | 4,120 |
| 623110 | POWER PURCH FOR PUMP ELEC | 42,603 | 63,607 | $(21,004)$ | 4,632 | 21,508 | $(16,876)$ | 33,196 | 28,254 | 4,942 |
| 623210 | FUEL PURCH FOR PUMP OTHER | 200,913 | 90,556 | 110,357 | 175,045 | 136,208 | 38,837 | 128,786 | 153,597 | $(24,811)$ |
| 624100 | PUMPING EXPENSE | $(4,252)$ | 200 | $(4,452)$ | 8 | 200 | (192) | (34) | 200 | (234) |
| 624500 | PUMPING EXPENSES ELECTRIC | (147) | - | (147) | - | - | - | 55 | - | 55 |
| 626500 | MISC PUMPING EXP ELECTRIC | (127) | 30 | (157) | 1 | 30 | (29) | (12) | - | (12) |
| 633200 | OR MN PUMP EQPT MAT ELEC | 2,314 | 4,850 | $(2,536)$ | 3,179 | 5,404 | $(2,225)$ | 9,161 | 27,104 | $(17,943)$ |
| 641100 | GENERAL CHEMICALS | 127,751 | 154,874 | $(27,123)$ | 40,197 | 88,113 | $(47,916)$ | 105,743 | 91,023 | 14,720 |
| 642300 | GENERAL WT EXPENSES | 9,633 | 13,950 | $(4,317)$ | 15,076 | 14,160 | 916 | 13,171 | 15,785 | $(2,614)$ |


| $\begin{gathered} \hline \text { YEAR-2006 } \\ \text { AWW } \\ \hline \end{gathered}$ | AWW_DESC | $\begin{gathered} \hline 2006 \\ \text { April } \\ \text { Actual } \\ \hline \end{gathered}$ | $2006$ <br> April <br> Budget | Variance | $\begin{gathered} \hline 2006 \\ \text { May } \\ \text { Actual } \\ \hline \end{gathered}$ |  | Variance | $\begin{gathered} \hline 2006 \\ \text { June } \\ \text { Actual } \\ \hline \end{gathered}$ |  | Variance |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 403000 | DEPRECIATION EXPENSE | 624,817 | 607,056 | 17,761 | 627,568 | 609,079 | 18,489 | 630,273 | 610,141 | 20,132 |
| 404430 | AMORT REG ASSET - AFUDC | 2,719 | 2,144 | 575 | 2,719 | 2,144 | 575 | 2,719 | 2,144 | 575 |
| 406000 | AMORT UT PLT ACQ ADJUST | 1,801 | 1,801 | - | 1,801 | 1,801 | - | 1,801 | 1,801 | - |
| 407000 | AMORT PROPERTY LOSSES | 35,957 | 36,562 | (605) | 35,957 | 36,562 | (605) | 34,349 | 36,562 | $(2,213)$ |
| 408030 | OTHER GENERAL TAXES | 5,914 | - | 5,914 | 5,914 | 2,800 | 3,114 | 5,914 | - | 5,914 |
| 408100 | REAL \& PERSON PROP TAXES | 195,058 | 180,000 | 15,058 | 195,058 | 180,000 | 15,058 | 195,058 | 180,000 | 15,058 |
| 408110 | GROSS INC \& RECPTS TAXES | - | 7,807 | $(7,807)$ | - | 7,807 | $(7,807)$ | - | 7,807 | $(7,807)$ |
| 408140 | FEDERAL UNEMPLYMNT TXS | 152 | - | 152 | 200 | - | 200 | 41 | - | 41 |
| 408160 | FICA | 27,759 | 37,643 | $(9,884)$ | 43,512 | 39,213 | 4,299 | 43,302 | 39,213 | 4,089 |
| 408180 | STATE UNEMPLYMNT TXS | 375 | - | 375 | 288 | - | 288 | 66 | - | 66 |
| 409100 | SIT-CURRENT | 355,630 | 63,628 | 292,002 | 102,090 | 39,471 | 62,619 | 96,363 | 51,675 | 44,688 |
| 409110 | SIT-ADJUST PRIOR YEARS | - | - | - | - | - | - | - | - | - |
| 409150 | FIT-CURRENT | 1,738,280 | 257,712 | 1,480,568 | 487,810 | 157,165 | 330,645 | 495,941 | 204,284 | 291,657 |
| 409160 | FIT-ADJUST PRIOR YEARS | - | - | - | - | - | - | - | - | - |
| 409210 | SIT-OTH INC \& DED-REG | 13,645 | $(1,091)$ | 14,736 | $(2,083)$ | $(3,400)$ | 1,317 | (618) | $(6,532)$ | 5,914 |
| 409220 | FIT-OTH INC \& DED-REG | 51,570 | $(4,249)$ | 55,819 | $(10,417)$ | $(13,236)$ | 2,819 | $(3,087)$ | $(25,427)$ | 22,340 |
| 410400 | DEF SIT-REG ASSET/LIAB | 3,173 | - | 3,173 | 3,173 | - | 3,173 | 3,173 | - | 3,173 |
| 410600 | DEF SIT-OTHER | $(309,493)$ | 558 | $(310,051)$ | $(104,022)$ | 39,389 | $(143,411)$ | $(35,438)$ | 28,239 | $(63,677)$ |
| 410700 | DEF FIT-REG ASSET/LIAB | 6,005 | - | 6,005 | 6,005 | - | 6,005 | 6,005 | - | 6,005 |
| 410900 | DEF FIT-OTHER | $(1,530,054)$ | $(11,692)$ | $(1,518,362)$ | $(478,881)$ | 136,448 | $(615,329)$ | $(235,906)$ | 89,388 | $(325,294)$ |
| 412210 | ITC RESTORED-3\% | (719) | - | (719) | (719) | - | (719) | (719) | - | (719) |
| 412220 | ITC RESTORED-4\% | (592) | - | (592) | (592) | - | (592) | (592) | - | (592) |
| 412230 | ITC RESTORED-10\% | $(6,655)$ | $(9,565)$ | 2,910 | $(6,655)$ | $(8,953)$ | 2,298 | $(6,655)$ | $(4,891)$ | $(1,764)$ |
| 415100 | M\&J REVENUES-OUTSIDE | $(162,312)$ | $(141,761)$ | $(20,551)$ | $(153,508)$ | $(141,761)$ | $(11,747)$ | $(131,823)$ | $(141,761)$ | 9,938 |
| 415110 | M\&J REVENUES-INSIDE | - | - | - | $(10,802)$ | - | $(10,802)$ | - | - | - |
| 416100 | M\&J EXPENSES-OUTSIDE | 8,950 | - | 8,950 | 25,519 | - | 25,519 | 12,008 | - | 12,008 |
| 416110 | M\&J EXPENSES-INSIDE | 117,231 | 135,175 | $(17,944)$ | 168,269 | 132,066 | 36,203 | 162,414 | 170,400 | $(7,986)$ |
| 419510 | OTHER INTEREST INCOME-IN | - | - | - | - | - | - | - | - | - |
| 420100 | AFUDC - EQUITY | $(24,926)$ | $(11,862)$ | $(13,064)$ | $(19,284)$ | $(8,410)$ | $(10,874)$ | $(19,783)$ | $(11,395)$ | $(8,388)$ |
| 420210 | AFUDC - DEBT | $(11,122)$ | $(5,387)$ | $(5,735)$ | $(8,864)$ | $(3,819)$ | $(5,045)$ | $(9,207)$ | $(5,175)$ | $(4,032)$ |
| 425100 | AMORT UT PLT ACQ ADJUST | - | - | - | - | - | - | - | - | - |
| 425300 | AMORT PREFERRED STOCK EXP | 64 | 64 | - | 64 | 64 | - | 64 | 64 | - |
| 426100 | DONATIONS | 8,745 | 10,133 | $(1,388)$ | 21,289 | 21,163 | 126 | 43,385 | 37,733 | 5,652 |
| 426160 | OTHER LOBBYING EXPENSES | 9,943 | 1,000 | 8,943 | 4,165 | 1,000 | 3,165 | - | 2,000 | $(2,000)$ |
| 426200 | OTHER INCOME DEDUCTIONS | 92 | 2,686 | $(2,594)$ | 1,000 | 22,750 | $(21,750)$ | 27,186 | 5,810 | 21,376 |
| 427100 | INTEREST LTD-OUT-REG | 137,713 | 394,867 | $(257,154)$ | 137,713 | 394,867 | $(257,154)$ | 137,713 | 394,867 | $(257,154)$ |
| 427110 | INTEREST LTD-OUT-TFB | - | - | - | - | - | - | - | - | - |
| 427120 | INTEREST LTD - INSIDE | 257,154 | - | 257,154 | 257,154 | - | 257,154 | 257,154 | - | 257,154 |
| 428000 | AMORT DEBT DISCOUNT \& EXP | 6,009 | 6,009 | - | 6,009 | 6,009 | - | 6,009 | 6,009 | - |
| 431200 | OTHER INTEREST EXPENSE | 23 | - | 23 | - | - | - | 6 | - | 6 |
| 433100 | INTEREST ON BANK DEBT | 33,009 | 49,976 | $(16,967)$ | 24,381 | 49,126 | $(24,745)$ | 43,051 | 52,868 | $(9,817)$ |
| 437100 | DIV DEC PREF STK-OUTSIDE | 38,325 | 38,325 | - | 38,325 | 38,325 | - | 38,325 | 38,325 | - |
| 438200 | DIV DEC COMMON STK - IN | - | - | - | - | - | - | 62,696 | 788,283 | $(725,587)$ |
| 461000 | DOMESTIC SEWER SERV BILLED | $(27,502)$ | $(29,391)$ | 1,889 | $(25,867)$ | $(29,391)$ | 3,524 | $(24,443)$ | $(29,391)$ | 4,948 |
| 461100 | RES SALES BILLED METERED | $(1,560,317)$ | $(2,105,486)$ | 545,169 | $(2,763,361)$ | $(2,199,583)$ | $(563,778)$ | $(2,297,843)$ | $(2,251,385)$ | $(46,458)$ |
| 461110 | RES SALES UNBILL METERED | $(458,322)$ | - | $(458,322)$ | 931,520 | - | 931,520 | $(282,753)$ | - | $(282,753)$ |
| 461200 | COM SALES BILLED METERED | $(764,026)$ | $(955,834)$ | 191,808 | $(1,092,504)$ | $(1,100,383)$ | 7,879 | $(1,013,956)$ | $(1,061,374)$ | 47,418 |
| 461210 | COM SALES UNBILL METERED | $(147,938)$ | - | $(147,938)$ | 262,844 | - | 262,844 | $(106,424)$ | - | $(106,424)$ |
| 461300 | IND SALES BILLED METERED | $(117,221)$ | $(147,181)$ | 29,960 | $(111,577)$ | $(107,520)$ | $(4,057)$ | $(128,151)$ | $(138,241)$ | 10,090 |
| 461310 | IND SALES UNBILL METERED | $(59,205)$ | (1) | $(59,205)$ | 86,584 | - | 86,584 | $(26,482)$ | - | $(26,482)$ |
| 461400 | MISC SALES BILLED METERED | (517) | - | (517) | 196 | - | 196 | 171 | - | 171 |
| 462000 | PRIV FIR PROT SER BILLED | $(88,492)$ | $(86,594)$ | $(1,898)$ | $(86,828)$ | $(86,594)$ | (234) | $(87,221)$ | $(86,594)$ | (627) |
| 462100 | PRIV FIR PROT SER UNBILL | $(4,989)$ | - | $(4,989)$ | 13,621 | - | 13,621 | $(26,469)$ | - | $(26,469)$ |
| 462210 | INDUSTRIAL WASTE SERVICE | $(1,180)$ | - | $(1,180)$ | $(1,341)$ | - | $(1,341)$ | $(1,078)$ | - | $(1,078)$ |
| 463000 | PUB FIRE PROT SER BILLED | $(180,300)$ | $(187,251)$ | 6,951 | $(184,568)$ | $(187,251)$ | 2,683 | $(180,335)$ | $(187,251)$ | 6,916 |
| 463100 | PUB FIRE PROT SER UNBILL | $(12,483)$ | - | $(12,483)$ | 42,685 | - | 42,685 | $(30,202)$ | - | $(30,202)$ |
| 463300 | PUB AUTH SEWER SERV BILLED | - | - | - | - | - | - | - | - | - |
| 464200 | PUB AUTH SLS BILLED METRD | $(261,403)$ | $(358,081)$ | 96,678 | $(255,153)$ | $(389,283)$ | 134,130 | $(298,897)$ | $(270,605)$ | $(28,292)$ |
| 464210 | PUB AUTH SLS UNBILL METRD | $(126,946)$ | - | $(126,946)$ | 103,691 | - | 103,691 | 27,910 | - | 27,910 |
| 466000 | SALES FOR RESALE BILLED | $(84,545)$ | $(120,150)$ | 35,605 | $(84,740)$ | $(120,150)$ | 35,410 | $(104,967)$ | $(120,150)$ | 15,183 |
| 466100 | SALES FOR RESALE UNBILL | $(4,728)$ | (1) | $(4,728)$ | 24,108 | (1) | 24,108 | $(13,294)$ | - | $(13,294)$ |
| 471100 | RECONNECTION CHARGES | $(13,818)$ | $(63,920)$ | 50,102 | $(18,550)$ | $(63,920)$ | 45,370 | $(17,059)$ | $(63,920)$ | 46,861 |
| 471200 | OTHER MISC SERV REVENUES | $(1,171)$ | $(1,850)$ | 679 | $(1,870)$ | $(1,850)$ | (20) | $(2,103)$ | $(1,850)$ | (253) |
| 472000 | RENTS FROM WATER PROPERTY | $(7,303)$ | $(7,302)$ | (1) | $(15,817)$ | $(7,302)$ | $(8,515)$ | $(12,320)$ | $(7,302)$ | $(5,018)$ |
| 474100 | BILL \& COLL SERV FOR OTH | $(78,216)$ | $(72,561)$ | $(5,655)$ | $(71,764)$ | $(72,561)$ | 797 | $(87,665)$ | $(72,561)$ | $(15,104)$ |
| 474300 | MISCELLANEOUS | $(36,214)$ | - | $(36,214)$ | $(61,729)$ | - | $(61,729)$ | $(65,224)$ | - | $(65,224)$ |
| 602000 | PURCHASED WATER | 41,346 | 37,250 | 4,096 | 47,904 | 37,250 | 10,654 | 34,563 | 36,250 | $(1,687)$ |
| 603100 | MISCELLANEOUS SS EXPENSES | 7,879 | 7,335 | 544 | 21,480 | 6,085 | 15,395 | $(50,451)$ | 7,560 | $(58,011)$ |
| 611100 | OR MN SS STRUCT \& IMP MAT | 8,693 | 172,043 | $(163,350)$ | 7,078 | 7,043 | 35 | 5,460 | 10,043 | $(4,583)$ |
| 613120 | AMORT DEF EXP LAK RIV \& OTH | 374 | 483 | (109) | 483 | 483 | - | 483 | 483 | - |
| 614120 | AMORT DEF EXP WELLS \& SPR | - | - | - | - | - | - | - | - | - |
| 622100 | POWER PRODUCTION EXP. | - | - | - | 583 | 40,544 | $(39,961)$ | - | 3,697 | $(3,697)$ |
| 623110 | POWER PURCH FOR PUMP ELEC | 19,526 | 20,452 | (926) | 11,628 | 19,146 | $(7,518)$ | 29,511 | 25,795 | 3,716 |
| 623210 | FUEL PURCH FOR PUMP OTHER | 148,352 | 133,804 | 14,548 | 134,618 | 144,822 | $(10,204)$ | 203,353 | 150,903 | 52,450 |
| 624100 | PUMPING EXPENSE | 15 | 200 | (185) | (60) | 1,480 | $(1,540)$ | - | 200 | (200) |
| 624500 | PUMPING EXPENSES ELECTRIC | - | - | - | - | - | - | - | - | - |
| 626500 | MISC PUMPING EXP ELECTRIC | - | - | - | - | 50 | (50) | 659 | - | 659 |
| 633200 | OR MN PUMP EQPT MAT ELEC | (875) | 4,850 | $(5,725)$ | 3,708 | 5,404 | $(1,696)$ | 5,168 | 7,104 | $(1,936)$ |
| 641100 | GENERAL CHEMICALS | 114,620 | 77,931 | 36,689 | 57,901 | 120,056 | $(62,155)$ | 151,046 | 129,176 | 21,870 |
| 642300 | GENERAL WT EXPENSES | 19,746 | 13,575 | 6,171 | 8,913 | 11,970 | $(3,057)$ | 26,684 | 18,775 | 7,909 |


| $\begin{gathered} \text { YEAR-2006 } \\ \text { AWW } \\ \hline \end{gathered}$ | AWW_DESC | $\begin{gathered} \hline 2006 \\ \text { July } \\ \text { Actual } \\ \hline \end{gathered}$ |  | Variance | 2006 <br> August <br> Actual |  | Variance | 2006 September Actual | 2006 September Budget | Variance |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 403000 | DEPRECIATION EXPENSE | 916,999 | 611,206 | 305,793 | 634,238 | 614,195 | 20,043 | 637,749 | 615,264 | 22,485 |
| 404430 | AMORT REG ASSET - AFUDC | 2,719 | 2,144 | 575 | 2,719 | 2,144 | 575 | 2,719 | 2,144 | 575 |
| 406000 | AMORT UT PLT ACQ ADJUST | 1,801 | 1,801 | - | 1,801 | 1,801 | - | 1,801 | 1,801 | - |
| 407000 | AMORT PROPERTY LOSSES | 35,957 | 36,562 | (605) | 83,574 | 36,562 | 47,012 | 40,714 | 36,562 | 4,152 |
| 408030 | OTHER GENERAL TAXES | 5,914 | - | 5,914 | 10,015 | - | 10,015 | 7,811 | 1,200 | 6,611 |
| 408100 | REAL \& PERSON PROP TAXES | 195,058 | 180,000 | 15,058 | 195,058 | 180,000 | 15,058 | 195,058 | 180,000 | 15,058 |
| 408110 | GROSS INC \& RECPTS TAXES | - | 7,807 | $(7,807)$ | - | 7,807 | $(7,807)$ | - | 7,807 | $(7,807)$ |
| 408140 | FEDERAL UNEMPLYMNT TXS | 14 | - | 14 | 45 | - | 45 | 24 | - | 24 |
| 408160 | FICA | 29,623 | 37,643 | $(8,020)$ | 29,262 | 40,782 | $(11,520)$ | 37,015 | 39,213 | $(2,198)$ |
| 408180 | STATE UNEMPLYMNT TXS | 28 | - | 28 | (359) | - | (359) | 33 | - | 33 |
| 409100 | SIT-CURRENT | 141,592 | 108,842 | 32,750 | $(258,165)$ | 56,167 | $(314,332)$ | 194,233 | 85,055 | 109,178 |
| 409110 | SIT-ADJUST PRIOR YEARS | - | - | - | - | - | - | - | - | - |
| 409150 | FIT-CURRENT | 680,242 | 427,489 | 252,753 | $(1,181,403)$ | 231,182 | $(1,412,585)$ | 715,563 | 335,480 | 380,083 |
| 409160 | FIT-ADJUST PRIOR YEARS | 88,115 | - | 88,115 | - | - | - | - | - | - |
| 409210 | SIT-OTH INC \& DED-REG | $(7,922)$ | (67) | $(7,855)$ | - | (71) | 71 | 209 | $(2,153)$ | 2,362 |
| 409220 | FIT-OTH INC \& DED-REG | $(39,609)$ | (264) | $(39,345)$ | - | (278) | 278 | 1,046 | $(8,382)$ | 9,428 |
| 410400 | DEF SIT-REG ASSET/LIAB | $(12,227)$ | - | $(12,227)$ | 973 | - | 973 | 973 | - | 973 |
| 410600 | DEF SIT-OTHER | $(112,839)$ | 2,149 | $(114,988)$ | 325,062 | 54,320 | 270,742 | $(118,354)$ | 811 | $(119,165)$ |
| 410700 | DEF FIT-REG ASSET/LIAB | 49,491 | - | 49,491 | 12,216 | - | 12,216 | 12,216 | - | 12,216 |
| 410900 | DEF FIT-OTHER | $(507,302)$ | $(11,014)$ | $(496,288)$ | 1,454,216 | 199,149 | 1,255,067 | $(297,038)$ | $(25,224)$ | $(271,814)$ |
| 412210 | ITC RESTORED-3\% | (149) | - | (149) | (638) | - | (638) | (638) | - | (638) |
| 412220 | ITC RESTORED-4\% | (87) | - | (87) | (525) | - | (525) | (525) | - | (525) |
| 412230 | ITC RESTORED-10\% | $(1,394)$ | $(13,325)$ | 11,931 | $(5,903)$ | $(20,315)$ | 14,412 | $(5,903)$ | 956 | $(6,859)$ |
| 415100 | M\&J REVENUES-OUTSIDE | $(157,301)$ | $(142,792)$ | $(14,509)$ | $(137,356)$ | $(142,792)$ | 5,436 | $(121,629)$ | $(142,792)$ | 21,163 |
| 415110 | M\&J REVENUES-INSIDE | - | - | - | - | - | - | - | - | - |
| 416100 | M\&J EXPENSES-OUTSIDE | 26,741 | - | 26,741 | 8,763 | - | 8,763 | 12,191 | - | 12,191 |
| 416110 | M\&J EXPENSES-INSIDE | 114,166 | 134,001 | $(19,835)$ | 126,775 | 131,575 | $(4,800)$ | 160,592 | 134,709 | 25,883 |
| 419510 | OTHER INTEREST INCOME-IN | - | - | - | - | - | - | - | - | - |
| 420100 | AFUDC - EQUITY | $(18,646)$ | $(11,473)$ | $(7,173)$ | $(17,934)$ | $(13,341)$ | $(4,593)$ | $(22,025)$ | $(14,613)$ | $(7,412)$ |
| 420210 | AFUDC - DEBT | $(8,601)$ | $(5,210)$ | $(3,391)$ | $(8,139)$ | $(6,059)$ | $(2,080)$ | $(8,983)$ | $(6,636)$ | $(2,347)$ |
| 425100 | AMORT UT PLT ACQ ADJUST | (354) | - | (354) | (35) | - | (35) | (35) | - | (35) |
| 425300 | AMORT PREFERRED STOCK EXP | 64 | 64 | - | 64 | 64 | - | 64 | 64 | - |
| 426100 | DONATIONS | 4,575 | 2,113 | 2,462 | 4,493 | 4,233 | 260 | 5,387 | 14,983 | $(9,596)$ |
| 426160 | OTHER LOBBYING EXPENSES | - | 2,000 | $(2,000)$ | - | 2,000 | $(2,000)$ | - | 2,000 | $(2,000)$ |
| 426200 | OTHER INCOME DEDUCTIONS | 150 | 500 | (350) | 6,395 | 850 | 5,545 | 4,392 | 12,202 | $(7,810)$ |
| 427100 | INTEREST LTD-OUT-REG | 137,713 | 394,867 | $(257,154)$ | 137,713 | 394,867 | $(257,154)$ | 137,713 | 394,867 | $(257,154)$ |
| 427110 | INTEREST LTD-OUT-TFB | - | - | - | - | - | - | - | - | - |
| 427120 | INTEREST LTD - INSIDE | 257,154 | - | 257,154 | 257,154 | - | 257,154 | 257,154 | - | 257,154 |
| 428000 | AMORT DEBT DISCOUNT \& EXP | 6,009 | 6,009 | - | 6,009 | 6,009 | - | 6,009 | 6,009 | - |
| 431200 | OTHER INTEREST EXPENSE | - | - | - | - | - | - | - | - | - |
| 433100 | INTEREST ON BANK DEBT | 35,358 | 55,276 | $(19,918)$ | 31,664 | 51,635 | $(19,971)$ | 32,354 | 53,726 | $(21,372)$ |
| 437100 | DIV DEC PREF STK-OUTSIDE | 38,325 | 38,325 | - | 38,325 | 38,325 | - | 38,325 | 38,325 | - |
| 438200 | DIV DEC COMMON STK - IN | - | - | - | - | - | - | 689,652 | 1,015,211 | $(325,559)$ |
| 461000 | DOMESTIC SEWER SERV BILLED | $(24,499)$ | $(29,391)$ | 4,892 | $(25,851)$ | $(29,391)$ | 3,540 | $(19,087)$ | $(29,391)$ | 10,304 |
| 461100 | RES SALES BILLED METERED | $(2,218,509)$ | $(2,355,629)$ | 137,120 | $(2,402,430)$ | $(2,374,387)$ | $(28,043)$ | $(2,746,802)$ | $(2,289,318)$ | $(457,484)$ |
| 461110 | RES SALES UNBILL METERED | 15,306 | - | 15,306 | 56,091 | - | 56,091 | $(196,074)$ | - | $(196,074)$ |
| 461200 | COM SALES BILLED METERED | $(1,090,423)$ | $(1,135,766)$ | 45,343 | $(1,093,076)$ | $(1,149,981)$ | 56,905 | $(1,247,024)$ | $(1,085,791)$ | $(161,233)$ |
| 461210 | COM SALES UNBILL METERED | 64,606 | - | 64,606 | 35,787 | - | 35,787 | $(139,563)$ | - | $(139,563)$ |
| 461300 | IND SALES BILLED METERED | $(144,823)$ | $(179,162)$ | 34,339 | $(121,161)$ | $(151,805)$ | 30,644 | $(153,135)$ | $(175,746)$ | 22,611 |
| 461310 | IND SALES UNBILL METERED | $(2,210)$ | - | $(2,210)$ | 5,067 | - | 5,067 | $(20,162)$ | - | $(20,162)$ |
| 461400 | MISC SALES BILLED METERED | (237) | - | (237) | $(16,623)$ | - | $(16,623)$ | 5,535 | - | 5,535 |
| 462000 | PRIV FIR PROT SER BILLED | $(88,604)$ | $(86,594)$ | $(2,010)$ | $(85,077)$ | $(86,594)$ | 1,517 | $(88,087)$ | $(86,594)$ | $(1,493)$ |
| 462100 | PRIV FIR PROT SER UNBILL | 19,814 | - | 19,814 | 11,081 | - | 11,081 | $(16,089)$ | - | $(16,089)$ |
| 462210 | INDUSTRIAL WASTE SERVICE | $(2,063)$ | - | $(2,063)$ | $(1,313)$ | - | $(1,313)$ | $(6,759)$ | - | $(6,759)$ |
| 463000 | PUB FIRE PROT SER BILLED | $(184,337)$ | $(187,251)$ | 2,914 | $(182,010)$ | $(187,251)$ | 5,241 | $(181,639)$ | $(187,251)$ | 5,612 |
| 463100 | PUB FIRE PROT SER UNBILL | 18,121 | - | 18,121 | 19,329 | - | 19,329 | $(43,523)$ | - | $(43,523)$ |
| 463300 | PUB AUTH SEWER SERV BILLED | - | - | - | 410 | - | 410 | - | - | - |
| 464200 | PUB AUTH SLS BILLED METRD | $(372,159)$ | $(352,591)$ | $(19,568)$ | $(367,278)$ | $(404,086)$ | 36,808 | $(343,041)$ | $(226,554)$ | $(116,487)$ |
| 464210 | PUB AUTH SLS UNBILL METRD | $(5,687)$ | - | $(5,687)$ | 63,705 | - | 63,705 | $(41,252)$ | - | $(41,252)$ |
| 466000 | SALES FOR RESALE BILLED | $(102,753)$ | $(120,150)$ | 17,397 | $(112,742)$ | $(120,150)$ | 7,408 | $(121,362)$ | $(120,150)$ | $(1,212)$ |
| 466100 | SALES FOR RESALE UNBILL | 16,395 | - | 16,395 | 3,230 | - | 3,230 | $(14,200)$ | - | $(14,200)$ |
| 471100 | RECONNECTION CHARGES | $(19,333)$ | $(63,920)$ | 44,587 | $(14,284)$ | $(63,920)$ | 49,636 | $(18,540)$ | $(63,920)$ | 45,380 |
| 471200 | OTHER MISC SERV REVENUES | $(1,789)$ | $(1,850)$ | 61 | $(1,170)$ | $(1,850)$ | 680 | $(2,163)$ | $(1,850)$ | (313) |
| 472000 | RENTS FROM WATER PROPERTY | $(5,303)$ | $(7,302)$ | 1,999 | $(10,624)$ | $(7,302)$ | $(3,322)$ | $(12,303)$ | $(7,302)$ | $(5,001)$ |
| 474100 | BILL \& COLL SERV FOR OTH | $(62,854)$ | $(72,561)$ | 9,707 | $(71,876)$ | $(72,561)$ | 685 | $(86,024)$ | $(72,561)$ | $(13,463)$ |
| 474300 | MISCELLANEOUS | $(57,168)$ | - | $(57,168)$ | $(63,281)$ | - | $(63,281)$ | $(81,182)$ | - | $(81,182)$ |
| 602000 | PURCHASED WATER | 30,946 | 40,250 | $(9,304)$ | 53,614 | 41,250 | 12,364 | 37,545 | 45,250 | $(7,705)$ |
| 603100 | MISCELLANEOUS SS EXPENSES | 3,402 | 7,180 | $(3,778)$ | 7,736 | 6,215 | 1,521 | 6,677 | 6,160 | 517 |
| 611100 | OR MN SS STRUCT \& IMP MAT | 3,742 | 14,543 | $(10,801)$ | 4,457 | 7,043 | $(2,586)$ | 7,114 | 7,043 | 71 |
| 613120 | AMORT DEF EXP LAK RIV \& OTH | 483 | 483 | - | 967 | 483 | 484 | 483 | 483 | - |
| 614120 | AMORT DEF EXP WELLS \& SPR | - | - | - | - | - | - | - | - | - |
| 622100 | POWER PRODUCTION EXP. | - | 5,023 | $(5,023)$ | - | 1,139 | $(1,139)$ | - | - | - |
| 623110 | POWER PURCH FOR PUMP ELEC | 9,827 | 24,427 | $(14,600)$ | 18,047 | 26,883 | $(8,836)$ | 18,664 | 27,857 | $(9,193)$ |
| 623210 | FUEL PURCH FOR PUMP OTHER | 259,997 | 150,324 | 109,673 | 259,976 | 154,377 | 105,599 | 344,917 | 142,499 | 202,418 |
| 624100 | PUMPING EXPENSE | - | 200 | (200) | - | 200 | (200) | - | 200 | (200) |
| 624500 | PUMPING EXPENSES ELECTRIC | - | - | - | - | - | - | - | - | - |
| 626500 | MISC PUMPING EXP ELECTRIC | - | 30 | (30) | - | - | - | 33 | - | 33 |
| 633200 | OR MN PUMP EQPT MAT ELEC | 5,823 | 4,850 | 973 | 13,622 | 20,904 | $(7,282)$ | 7,205 | 7,104 | 101 |
| 641100 | GENERAL CHEMICALS | 141,634 | 110,211 | 31,423 | 171,563 | 94,940 | 76,623 | 231,970 | 139,985 | 91,985 |
| 642300 | GENERAL WT EXPENSES | 9,280 | 11,625 | $(2,345)$ | 14,391 | 12,720 | 71 | 23,857 | 14,635 | 2 |


| $\begin{gathered} \hline \text { YEAR-2006 } \\ \text { AWW } \\ \hline \end{gathered}$ | AWW_DESC | $2006$ <br> October Actual | $2006$ <br> October Budget | Variance | 2006 November Actual | 2006 November Budget | Variance | 2006 December Actual | 2006 December Budget | Variance |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 403000 | DEPRECIATION EXPENSE | 643,832 | 616,334 | 27,498 | 645,112 | 617,402 | 27,710 | 727,274 | 626,522 | 100,752 |
| 404430 | AMORT REG ASSET - AFUDC | 2,719 | 2,144 | 575 | 2,719 | 2,144 | 575 | 2,719 | 2,144 | 575 |
| 406000 | AMORT UT PLT ACQ ADJUST | 1,801 | 1,801 | - | 1,801 | 1,801 | - | 1,801 | 1,801 | - |
| 407000 | AMORT PROPERTY LOSSES | 35,957 | 36,562 | (605) | 35,957 | 36,562 | (605) | 35,957 | 36,562 | (605) |
| 408030 | OTHER GENERAL TAXES | 6,862 | - | 6,862 | 6,862 | - | 6,862 | 6,862 | - | 6,862 |
| 408100 | REAL \& PERSON PROP TAXES | 195,058 | 180,000 | 15,058 | 523,569 | 180,000 | 343,569 | $(61,914)$ | 180,000 | $(241,914)$ |
| 408110 | GROSS INC \& RECPTS TAXES | - | 7,807 | $(7,807)$ | - | 7,807 | $(7,807)$ | - | 7,807 | $(7,807)$ |
| 408140 | FEDERAL UNEMPLYMNT TXS | 41 | - | 41 | 38 | - | 38 | 9 | - | 9 |
| 408160 | FICA | 28,669 | 37,643 | $(8,974)$ | 39,110 | 40,265 | $(1,155)$ | 33,322 | 39,342 | $(6,020)$ |
| 408180 | STATE UNEMPLYMNT TXS | 52 | - | 52 | 57 | - | 57 | 22 | - | 22 |
| 409100 | SIT-CURRENT | 76,053 | 115,469 | $(39,416)$ | 76,053 | 28,780 | 47,273 | $(219,105)$ | 79,462 | $(298,567)$ |
| 409110 | SIT-ADJUST PRIOR YEARS | - | - |  | $(368,236)$ | - | $(368,236)$ |  | - | - |
| 409150 | FIT-CURRENT | 354,377 | 453,182 | $(98,805)$ | 1,489,377 | 115,897 | 1,373,480 | $(1,527,637)$ | 321,248 | $(1,848,885)$ |
| 409160 | FIT-ADJUST PRIOR YEARS | - | - | - | $(1,003,204)$ | - | $(1,003,204)$ | - | - | - |
| 409210 | SIT-OTH INC \& DED-REG | $(2,083)$ | (133) | $(1,950)$ | $(2,083)$ | 66 | $(2,149)$ | $(5,513)$ | 263 | $(5,776)$ |
| 409220 | FIT-OTH INC \& DED-REG | $(10,415)$ | (518) | $(9,897)$ | $(10,415)$ | 257 | $(10,672)$ | $(27,562)$ | 1,027 | $(28,589)$ |
| 410400 | DEF SIT-REG ASSET/LIAB | 973 | - | 973 | 973 |  | 973 | 973 |  | 973 |
| 410600 | DEF SIT-OTHER | $(41,954)$ | 2,124 | $(44,078)$ | $(19,386)$ | 53,089 | $(72,475)$ | 562,919 | (200) | 563,119 |
| 410700 | DEF FIT-REG ASSET/LIAB | 12,216 | - | 12,216 | 12,216 |  | 12,216 | 12,216 | - | 12,216 |
| 410900 | DEF FIT-OTHER | $(169,090)$ | $(14,917)$ | $(154,173)$ | $(170,837)$ | 183,578 | $(354,415)$ | 1,239,443 | $(17,120)$ | 1,256,563 |
| 412210 | ITC RESTORED-3\% | (638) | ( | (638) | (638) | - | (638) | (638) |  | (638) |
| 412220 | ITC RESTORED-4\% | (525) | - | (525) | (525) | - | (525) | (525) | - | (525) |
| 412230 | ITC RESTORED-10\% | $(5,903)$ | $(10,785)$ | 4,882 | $(5,903)$ | $(4,012)$ | $(1,891)$ | $(5,903)$ | $(10,271)$ | 4,368 |
| 415100 | M\&J REVENUES-OUTSIDE | $(140,728)$ | $(142,792)$ | 2,064 | $(220,525)$ | $(142,792)$ | $(77,733)$ | $(167,971)$ | $(142,792)$ | $(25,179)$ |
| 415110 | M\&J REVENUES-INSIDE | $(8,880)$ | - | $(8,880)$ | - | - | - | (699) | - | (699) |
| 416100 | M\&J EXPENSES-OUTSIDE | 16,498 | - | 16,498 | 52,725 | - | 52,725 | 22,353 | - | 22,353 |
| 416110 | M\&J EXPENSES-INSIDE | 143,748 | 134,074 | 9,674 | 157,195 | 133,076 | 24,119 | 200,751 | 132,559 | 68,192 |
| 419510 | OTHER INTEREST INCOME-IN | - | - | - | - |  |  | $(2,213)$ | - | $(2,213)$ |
| 420100 | AFUDC - EQUITY | $(16,199)$ | $(15,446)$ | (753) | $(14,151)$ | $(19,830)$ | 5,679 | $(15,815)$ | $(17,273)$ | 1,458 |
| 420210 | AFUDC - DEBT | $(7,356)$ | $(7,015)$ | (341) | $(6,426)$ | $(9,005)$ | 2,579 | $(2,262)$ | $(7,844)$ | 5,582 |
| 425100 | AMORT UT PLT ACQ ADJUST | (35) | - | (35) | (35) | - | (35) | (35) | - | (35) |
| 425300 | AMORT PREFERRED STOCK EXP | 64 | 64 | ( | 64 | 64 | ( | 64 | 64 | (35) |
| 426100 | DONATIONS | 4,176 | 2,683 | 1,493 | 13,531 | 1,513 | 12,018 | 3,779 | (367) | 4,146 |
| 426160 | OTHER LOBBYING EXPENSES | - | 2,000 | $(2,000)$ | - | 2,000 | $(2,000)$ | - | 2,000 | $(2,000)$ |
| 426200 | OTHER INCOME DEDUCTIONS | 1,737 | 650 | 1,087 | 848 | 400 | 448 | 1,150 | 400 | 750 |
| 427100 | INTEREST LTD-OUT-REG | 137,713 | 394,867 | $(257,154)$ | 137,713 | 394,867 | $(257,154)$ | 137,713 | 394,867 | $(257,154)$ |
| 427110 | INTEREST LTD-OUT-TFB | - | - | - | - | - | - | $(1,632)$ | - | $(1,632)$ |
| 427120 | INTEREST LTD - INSIDE | 257,154 | - | 257,154 | 257,154 | - | 257,154 | 251,541 | - | 251,541 |
| 428000 | AMORT DEBT DISCOUNT \& EXP | 6,009 | 6,009 | - | 6,009 | 6,009 | - | 6,009 | 6,009 | - |
| 431200 | OTHER INTEREST EXPENSE | 1,599 | - | 1,599 | - | - | - | 2,457 | - | 2,457 |
| 433100 | INTEREST ON BANK DEBT | 31,522 | 57,151 | $(25,629)$ | 31,985 | 55,518 | $(23,533)$ | 37,878 | 57,435 | $(19,557)$ |
| 437100 | DIV DEC PREF STK-OUTSIDE | 38,325 | 38,325 | - | 38,325 | 38,325 | - | 37,219 | 38,325 | $(1,106)$ |
| 438200 | DIV DEC COMMON STK - IN | - | - | - | - | - | - | 1,253,913 | 1,499,139 | $(245,226)$ |
| 461000 | DOMESTIC SEWER SERV BILLED | $(29,247)$ | $(29,391)$ | 144 | $(23,227)$ | $(29,391)$ | 6,164 | $(24,047)$ | $(29,391)$ | 5,344 |
| 461100 | RES SALES BILLED METERED | $(2,011,655)$ | $(2,324,033)$ | 312,378 | $(2,290,126)$ | $(2,213,377)$ | $(76,749)$ | $(1,931,832)$ | $(2,134,001)$ | 202,169 |
| 461110 | RES SALES UNBILL METERED | 144,356 | - | 144,356 | 4,773 |  | 4,773 | 38,525 | - | 38,525 |
| 461200 | COM SALES BILLED METERED | $(966,022)$ | $(1,124,527)$ | 158,505 | $(999,070)$ | $(997,784)$ | $(1,286)$ | $(858,917)$ | $(1,036,107)$ | 177,190 |
| 461210 | COM SALES UNBILL METERED | 106,092 |  | 106,092 | 1,788 | (1) | 1,788 | $(78,702)$ | - | $(78,702)$ |
| 461300 | IND SALES BILLED METERED | $(99,279)$ | $(178,042)$ | 78,763 | $(113,226)$ | $(135,511)$ | 22,285 | $(101,056)$ | $(123,170)$ | 22,114 |
| 461310 | IND SALES UNBILL METERED | 9,556 | $(178,042)$ | 9,556 | (620) | (135,511) | (620) | 11,178 | (123,170) | 11,178 |
| 461400 | MISC SALES BILLED METERED | $(2,835)$ | - | $(2,835)$ | (91) | - | (91) | (822) | - | (822) |
| 462000 | PRIV FIR PROT SER BILLED | $(90,127)$ | $(86,594)$ | $(3,533)$ | $(89,790)$ | $(86,594)$ | $(3,196)$ | $(94,103)$ | $(86,594)$ | $(7,509)$ |
| 462100 | PRIV FIR PROT SER UNBILL | 12,066 | (86,59) | 12,066 | $(12,043)$ | (86,59) | $(12,043)$ | 2,514 |  | 2,514 |
| 462210 | INDUSTRIAL WASTE SERVICE | $(3,083)$ | - | $(3,083)$ | $(2,193)$ | - | $(2,193)$ | $(2,908)$ | - | $(2,908)$ |
| 463000 | PUB FIRE PROT SER BILLED | $(182,108)$ | $(187,251)$ | 5,143 | $(182,104)$ | $(187,251)$ | 5,147 | $(183,777)$ | $(187,251)$ | 3,474 |
| 463100 | PUB FIRE PROT SER UNBILL | 30,234 | - | 30,234 | $(30,403)$ | - | $(30,403)$ | 6,242 | - | 6,242 |
| 463300 | PUB AUTH SEWER SERV BILLED | - | - | - | - | - | - | - | - | - |
| 464200 | PUB AUTH SLS BILLED METRD | $(326,784)$ | $(440,778)$ | 113,994 | $(274,725)$ | $(308,713)$ | 33,988 | $(251,049)$ | $(402,877)$ | 151,828 |
| 464210 | PUB AUTH SLS UNBILL METRD | $(75,758)$ | - | $(75,758)$ | 39,466 | - | 39,466 | $(78,914)$ | - | $(78,914)$ |
| 466000 | SALES FOR RESALE BILLED | $(90,150)$ | $(120,150)$ | 30,000 | $(89,316)$ | $(120,150)$ | 30,834 | $(88,358)$ | $(120,150)$ | 31,792 |
| 466100 | SALES FOR RESALE UNBILL | 10,794 | - | 10,794 | $(26,085)$ | - | $(26,085)$ | 9,525 | - | 9,525 |
| 471100 | RECONNECTION CHARGES | $(17,191)$ | $(63,920)$ | 46,729 | $(17,582)$ | $(63,920)$ | 46,338 | $(16,800)$ | $(63,920)$ | 47,120 |
| 471200 | OTHER MISC SERV REVENUES | $(1,581)$ | $(1,850)$ | 269 | $(1,397)$ | $(1,850)$ | 453 | $(1,416)$ | $(1,850)$ | 434 |
| 472000 | RENTS FROM WATER PROPERTY | $(11,560)$ | $(7,302)$ | $(4,258)$ | $(8,892)$ | $(7,302)$ | $(1,590)$ | $(8,892)$ | $(7,302)$ | $(1,590)$ |
| 474100 | BILL \& COLL SERV FOR OTH | $(73,058)$ | $(72,561)$ | (497) | $(80,729)$ | $(72,561)$ | $(8,168)$ | $(78,103)$ | $(72,561)$ | $(5,542)$ |
| 474300 | MISCELLANEOUS | $(55,112)$ | - | $(55,112)$ | $(45,937)$ | - | $(45,937)$ | $(40,608)$ | - | $(40,608)$ |
| 602000 | PURCHASED WATER | 74,118 | 38,250 | 35,868 | 41,358 | 41,250 | 108 | 38,130 | 41,750 | $(3,620)$ |
| 603100 | MISCELLANEOUS SS EXPENSES | 4,964 | 7,085 | $(2,121)$ | 7,345 | 6,465 | 880 | 4,225 | 8,085 | $(3,860)$ |
| 611100 | OR MN SS STRUCT \& IMP MAT | 5,143 | 7,043 | $(1,900)$ | 12,652 | 7,043 | 5,609 | 4,777 | 7,043 | $(2,266)$ |
| 613120 | AMORT DEF EXP LAK RIV \& OTH | 483 | 483 | (1) | 483 | 483 | - | 483 | 483 | ) |
| 614120 | AMORT DEF EXP WELLS \& SPR | - | - | - | - | - | - | - | - | - |
| 622100 | POWER PRODUCTION EXP. | - | 1,176 | $(1,176)$ | - | - | - | 1,975 | - | 1,975 |
| 623110 | POWER PURCH FOR PUMP ELEC | 15,824 | 27,461 | $(11,637)$ | 28,757 | 26,256 | 2,501 | 22,535 | 34,481 | $(11,946)$ |
| 623210 | FUEL PURCH FOR PUMP OTHER | 111,226 | 153,686 | $(42,460)$ | 186,208 | 141,835 | 44,373 | 223,455 | 177,319 | 46,136 |
| 624100 | PUMPING EXPENSE | - | 200 | (200) |  | 200 | (200) | 12 | 1,480 | $(1,468)$ |
| 624500 | PUMPING EXPENSES ELECTRIC | - | - |  | - | - | - | - | - | - |
| 626500 | MISC PUMPING EXP ELECTRIC | 96 | 30 | 66 | 88 | - | 88 | (182) | 30 | (212) |
| 633200 | OR MN PUMP EQPT MAT ELEC | 5,581 | 5,404 | 177 | 3,744 | 4,850 | $(1,106)$ | 2,697 | 5,404 | $(2,707)$ |
| 641100 | GENERAL CHEMICALS | 126,162 | 104,913 | 21,249 | 132,139 | 106,334 | 25,805 | 95,161 | 130,967 | $(35,806)$ |
| 642300 | GENERAL WT EXPENSES | 10,892 | 11,650 | (758) | 15,895 | 12,915 | 2,980 | 18,800 | 16,015 | 2,785 |


| $\begin{gathered} \hline \text { YEAR-2006 } \\ \text { AWW } \\ \hline \end{gathered}$ | AWW_DESC | $2006$ <br> January Actual | $\begin{gathered} \hline 2006 \\ \text { January } \\ \text { Budget } \\ \hline \end{gathered}$ | Variance | $2006$ <br> February Actual | $2006$ <br> February Budget | Variance | $\begin{gathered} \hline 2006 \\ \text { March } \\ \text { Actual } \\ \hline \end{gathered}$ |  | Variance |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 643100 | MISC WT EXPENSES-CURRENT | 7,283 | 10,499 | $(3,216)$ | 3,409 | 4,587 | $(1,178)$ | 6,918 | 3,297 | 3,621 |
| 643300 | WASTE DISPOSAL EXP (CUR) | 15,723 | 7,400 | 8,323 | 6,807 | 7,400 | (593) | 7,144 | 7,400 | (256) |
| 643310 | AMORT WASTE DISPOSAL EXP | 7,814 | 7,813 | 1 | 7,814 | 7,813 | 1 | 7,814 | 7,813 | 1 |
| 651100 | OR MN WT STRUCT \& IMP MAT | 56,270 | 41,975 | 14,295 | $(9,538)$ | 6,975 | $(16,513)$ | 6,358 | 3,975 | 2,383 |
| 651120 | AMORT DEF EXP WT STRUCT | 7,078 | 11,734 | $(4,656)$ | 13,722 | 11,734 | 1,988 | 11,293 | 11,734 | (441) |
| 662100 | T\&D LINES EXPENSE | 3,397 | 9,543 | $(6,146)$ | 19,241 | 9,543 | 9,698 | 5,942 | 11,616 | $(5,674)$ |
| 663300 | MISC METER EXPENSES | 9,249 | 3,900 | 5,349 | 6,249 | 3,900 | 2,349 | 17,484 | 3,900 | 13,584 |
| 665300 | MISC T\&D EXPENSES-CURRENT | 1,187 | 5,918 | $(4,731)$ | 19,180 | 5,893 | 13,287 | 20,803 | 5,718 | 15,085 |
| 666000 | T\&D RENTS | 550 | 435 | 115 | 200 | 435 | (235) | - | 435 | (435) |
| 667100 | MISC SEWER T \& D EXP | (353) | 267 | (620) | 10 | 267 | (257) | 211 | 267 | (56) |
| 671100 | OR MN T\&D STRUCT \& IMP-MAT | 9,845 | 10,600 | (755) | 20,321 | 10,600 | 9,721 | 22,463 | 10,600 | 11,863 |
| 672120 | AMORT DEF EXP RES \& STAND | 5,772 | 15,353 | $(9,581)$ | 14,423 | 15,353 | (930) | 11,244 | 15,353 | $(4,109)$ |
| 678100 | OR MN OTHER T\&D PLANT MAT | 29,223 | 24,000 | 5,223 | 22,096 | 24,000 | $(1,904)$ | 30,195 | 24,000 | 6,195 |
| 903100 | CONTRACT \& ORDERS EXPENS | 139 | 300 | (161) | 359 | 300 | 59 | 883 | 300 | 583 |
| 903300 | COLLECTING EXPENSES | 16,543 | 17,088 | (545) | 18,610 | 17,088 | 1,522 | 15,341 | 17,088 | $(1,747)$ |
| 903520 | BILLING \& ACCTNG OTH EXP | 21,532 | 12,390 | 9,142 | 17,746 | 12,390 | 5,356 | 19,848 | 13,295 | 6,553 |
| 903521 | CUST ACCTG-BILLING/TELEPHONE | 9,937 | 7,880 | 2,057 | 6,091 | 7,880 | $(1,789)$ | 6,744 | 7,880 | $(1,136)$ |
| 903523 | CUST ACCTG-BILLING/POSTAGE | 30,057 | 38,341 | $(8,284)$ | 45,129 | 38,341 | 6,788 | 42,720 | 38,341 | 4,379 |
| 904000 | UNCOLLECTIBLE ACCOUNTS | $(7,567)$ | 27,917 | $(35,484)$ | 33,433 | 27,917 | 5,516 | 13,862 | 27,917 | $(14,055)$ |
| 905100 | MISC CUST ACCTNG EXPENSES | 4,384 | 4,200 | 184 | 12,580 | 5,350 | 7,230 | 19,532 | 4,185 | 15,347 |
| 910110 | ANNUAL REPORT EXPENSES | 8,635 | 32,962 | $(24,327)$ | 32,214 | 31,180 | 1,034 | 17,816 | 28,320 | $(10,504)$ |
| 920000 | ADM \& GENERAL SALARIES | 446,264 | 400,924 | 45,340 | 355,038 | 384,308 | $(29,270)$ | 454,083 | 434,161 | 19,922 |
| 920520 | INCENTIVE PLAN EXP OFFICERS | 7,500 | 12,481 | $(4,981)$ | 7,500 | 11,885 | $(4,385)$ | $(124,872)$ | 13,672 | $(138,544)$ |
| 921100 | EXPENSES OF EMPLOYEES | 915 | 3,945 | $(3,030)$ | 67,814 | 3,370 | 64,444 | 999 | 6,550 | $(5,551)$ |
| 921200 | MISC OFFICE EXPENSES | 1,485 | 4,798 | $(3,313)$ | 16,270 | 5,098 | 11,172 | 4,428 | 4,918 | (490) |
| 921210 | MISC OFFICE EXP TEL | (728) | 1,295 | $(2,023)$ | 768 | 1,295 | (527) | 4,571 | 1,295 | 3,276 |
| 921210 | MISC OFFICE EXP TEL | 4,949 | 5,552 | (603) | 1,175 | 5,582 | $(4,407)$ | 8,214 | 5,552 | 2,662 |
| 921220 | MISC OFFICE EXP SUP | 1,700 | 5,196 | $(3,496)$ | 6,238 | 4,361 | 1,877 | 4,487 | 4,336 | 151 |
| 921250 | OFFICE BUILDING OPERATION | (76) | - | (76) | 172 | 300 | (128) | 15 | 120 | (105) |
| 921300 | PERSONAL/VEHICLE | 10,802 | 13,150 | $(2,348)$ | 6,183 | 13,150 | $(6,967)$ | 3,391 | 13,150 | $(9,759)$ |
| 923100 | SERVICE COMPANY CHARGES | 344,408 | 545,000 | $(200,592)$ | 546,511 | 489,000 | 57,511 | 496,076 | 541,000 | $(44,924)$ |
| 923200 | AUDITING SERVICES | 8,242 | - | 8,242 | 3,352 | - | 3,352 | 3,352 | - | 3,352 |
| 923300 | LEGAL SERVICES | 6,908 | 12,500 | $(5,592)$ | 1,146 | 12,500 | $(11,354)$ | 3,086 | 12,500 | $(9,414)$ |
| 923400 | ENGINEERING SERVICES | (142) | - | (142) | - | - | - | 15,921 | - | 15,921 |
| 923500 | OTHER SERVICES-CURRENT | 65,303 | 41,470 | 23,833 | 37,357 | 41,555 | $(4,198)$ | 54,316 | 39,520 | 14,796 |
| 924000 | PROPERTY INSURANCE | 12,508 | 3,000 | 9,508 | 5,323 | 3,000 | 2,323 | 6,082 | 3,000 | 3,082 |
| 925110 | WORKMENS COMP PREMIUM EXP | 8,877 | 9,407 | (530) | 11,044 | 9,407 | 1,637 | 9,869 | 9,407 | 462 |
| 925300 | INJURIES \& DAMAGES EXP | 933 | 1,000 | (67) | 39 | 1,000 | (961) | (168) | 1,000 | $(1,168)$ |
| 925400 | GENERAL LIABILITY | 22,232 | 29,417 | $(7,185)$ | 60,989 | 29,417 | 31,572 | 87,876 | 29,417 | 58,459 |
| 926100 | ACCRUED OPEB EXPENSE | 58,725 | 65,597 | $(6,872)$ | 49,062 | 65,597 | $(16,535)$ | 53,422 | 65,597 | $(12,175)$ |
| 926110 | GROUP INSURANCE PREM EXP | 74,422 | 83,035 | $(8,613)$ | 83,278 | 79,414 | 3,864 | 81,555 | 90,278 | $(8,723)$ |
| 926200 | OTHER WELFARE EXPENSES | 3,790 | 100 | 3,690 | 5,244 | 9,000 | $(3,756)$ | 3,154 | 400 | 2,754 |
| 926220 | ESOP CONTRIBUTIONS EXPENSE | $(3,491)$ | 1,716 | $(5,207)$ | (21) | 1,493 | $(1,514)$ | (257) | 1,465 | $(1,722)$ |
| 926250 | 401-K CONTRIBUTIONS EXPENSE | 2,527 | 11,956 | $(9,429)$ | $(2,778)$ | 11,243 | $(14,021)$ | $(8,511)$ | 12,159 | $(20,670)$ |
| 926400 | PENSION PLAN EXPENSE | 55,709 | 67,006 | $(11,297)$ | 45,217 | 67,006 | $(21,789)$ | 52,244 | 67,006 | $(14,762)$ |
| 926600 | OTHER PENSION PLAN EXPENSE | 3,067 | - | 3,067 | 2,925 | - | 2,925 | 3,289 | - | 3,289 |
| 928100 | AMORT EXP RATE PROCEEDING | 30,091 | 29,451 | 640 | 30,091 | 29,451 | 640 | 30,091 | 29,451 | 640 |
| 928400 | OTH REGULATRY EXP-CURRENT | 14,074 | 5,615 | 8,459 | 22,395 | 25,300 | $(2,905)$ | 1,167 | 5,615 | $(4,448)$ |
| 930130 | OTHER GENERAL EXPENSE | 6,106 | 758 | 5,348 | 11,155 | 758 | 10,397 | 7,242 | 758 | 6,484 |
| 930200 | AMORTIZE MISC CHARGES | - | - | - | $(15,828)$ | - | $(15,828)$ | - | - | - |
| 930210 | MISC GENERAL EXP-CURRENT | 1,975 | $(3,000)$ | 4,975 | 17,370 | $(4,200)$ | 21,570 | 13,863 | $(3,200)$ | 17,063 |
| 930230 | AMORT MISC GENERAL EXP | 2,369 | - | 2,369 | 2,068 | - | 2,068 | 2,261 | - | 2,261 |
| 930260 | MEALS \& TRAVEL EXPENSES-TAXAB | 1,754 | 834 | 920 | 720 | 859 | (139) | 1,060 | 1,959 | (899) |
| 930300 | RESEARCH \& DEV EXP | (852) | 333 | $(1,185)$ | 13 | 333 | (320) | (56) | 333 | (389) |
| 930600 | TRANSPORTATION EXPENSES | 9,544 | 30,652 | $(21,108)$ | 17,931 | 32,387 | $(14,456)$ | 30,188 | 28,732 | 1,456 |
| 930850 | MISC GEN EXP-DIRECTORS FEES | 1,729 | 4,250 | $(2,521)$ | $(2,907)$ | - | $(2,907)$ | 4,716 | - | 4,716 |
| 930890 | MISC GEN EXP-OTHER | 4,825 | 8,306 | $(3,481)$ | 4,611 | 6,200 | $(1,589)$ | $(1,574)$ | 2,970 | $(4,544)$ |
| 930900 | TAX PENALTY | - | - | - | - | - | - | 374 | - | 374 |
| 931000 | ADM \& GENERAL RENTS | 2,324 | 3,321 | (997) | 5,720 | 3,321 | 2,399 | 2,305 | 3,321 | $(1,016)$ |
| 932700 | OR MN A\&G MISC PROPTY MAT | 3,699 | 4,629 | (930) | 2,567 | 3,404 | (837) | 5,804 | 1,451 | 4,353 |


| YEAR-2006 <br> AWW | AWW_DESC | $\begin{gathered} \hline 2006 \\ \text { April } \\ \text { Actual } \end{gathered}$ | $\begin{gathered} 2006 \\ \text { April } \\ \text { Budget } \end{gathered}$ | Variance | $\begin{gathered} 2006 \\ \text { May } \\ \text { Actual } \end{gathered}$ | $\begin{gathered} 2006 \\ \text { May } \\ \text { Budget } \end{gathered}$ | Variance | 2006 <br> June <br> Actual | $\begin{gathered} 2006 \\ \text { June } \\ \text { Budget } \\ \hline \end{gathered}$ | Variance |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 643100 | MISC WT EXPENSES-CURRENT | 3,840 | 2,832 | 1,008 | 5,300 | 3,167 | 2,133 | 5,330 | 2,462 | 2,868 |
| 643300 | WASTE DISPOSAL EXP (CUR) | 9,833 | 7,400 | 2,433 | 3,867 | 29,400 | $(25,533)$ | 13,531 | 7,400 | 6,131 |
| 643310 | AMORT WASTE DISPOSAL EXP | 7,814 | 15,813 | $(7,999)$ | 7,814 | 15,813 | $(7,999)$ | 7,814 | 15,813 | $(7,999)$ |
| 651100 | OR MN WT STRUCT \& IMP MAT | 2,991 | 4,275 | $(1,284)$ | 3,008 | 4,975 | $(1,967)$ | 6,055 | 2,975 | 3,080 |
| 651120 | AMORT DEF EXP WT STRUCT | 10,615 | 11,734 | $(1,119)$ | 13,264 | 11,734 | 1,530 | 13,264 | 11,734 | 1,530 |
| 662100 | T\&D LINES EXPENSE | 5,574 | 9,543 | $(3,969)$ | 4,097 | 9,543 | $(5,446)$ | 10,591 | 11,616 | $(1,025)$ |
| 663300 | MISC METER EXPENSES | 12,731 | 3,900 | 8,831 | 6,116 | 3,900 | 2,216 | 12,618 | 3,900 | 8,718 |
| 665300 | MISC T\&D EXPENSES-CURRENT | 13,614 | 4,718 | 8,896 | 15,361 | 3,718 | 11,643 | 7,640 | 3,718 | 3,922 |
| 666000 | T\&D RENTS | 926 | 435 | 491 | 222 | 435 | (213) | - | 435 | (435) |
| 667100 | MISC SEWER T \& D EXP | 607 | 267 | 340 | (21) | 267 | (288) | 961 | 267 | 694 |
| 671100 | OR MN T\&D STRUCT \& IMP-MAT | 16,240 | 10,600 | 5,640 | 11,687 | 10,600 | 1,087 | 31,966 | 10,600 | 21,366 |
| 672120 | AMORT DEF EXP RES \& STAND | 10,357 | 15,353 | $(4,996)$ | 13,823 | 15,353 | $(1,530)$ | 13,823 | 15,353 | $(1,530)$ |
| 678100 | OR MN OTHER T\&D PLANT MAT | 29,339 | 24,000 | 5,339 | 11,241 | 24,000 | $(12,759)$ | 25,378 | 24,000 | 1,378 |
| 903100 | CONTRACT \& ORDERS EXPENS | 22 | 300 | (278) | 558 | 300 | 258 | 243 | 300 | (57) |
| 903300 | COLLECTING EXPENSES | 7,418 | 17,088 | $(9,670)$ | 25,709 | 17,088 | 8,621 | 16,613 | 17,088 | (475) |
| 903520 | BILLING \& ACCTNG OTH EXP | 25,011 | 12,950 | 12,061 | 78,271 | 12,050 | 66,221 | 29,754 | 13,250 | 16,504 |
| 903521 | CUST ACCTG-BILLING/TELEPHONE | 3,466 | 7,880 | $(4,414)$ | 3,116 | 7,880 | $(4,764)$ | 3,377 | 7,880 | $(4,503)$ |
| 903523 | CUST ACCTG-BILLING/POSTAGE | 39,441 | 38,341 | 1,100 | 39,020 | 38,341 | 679 | 45,776 | 38,341 | 7,435 |
| 904000 | UNCOLLECTIBLE ACCOUNTS | 23,397 | 27,917 | $(4,520)$ | 17,468 | 27,917 | $(10,449)$ | 36,878 | 27,917 | 8,961 |
| 905100 | MISC CUST ACCTNG EXPENSES | 8,043 | 3,500 | 4,543 | 8,340 | 3,100 | 5,240 | 19,677 | 2,485 | 17,192 |
| 910110 | ANNUAL REPORT EXPENSES | 8,157 | 26,095 | $(17,938)$ | 29,558 | 23,513 | 6,045 | 32,971 | 25,920 | 7,051 |
| 920000 | ADM \& GENERAL SALARIES | 393,637 | 405,337 | $(11,700)$ | 376,861 | 422,161 | $(45,300)$ | 495,526 | 422,161 | 73,365 |
| 920520 | INCENTIVE PLAN EXP OFFICERS | 8,490 | 12,919 | $(4,429)$ | 11,318 | 13,534 | $(2,216)$ | 12,762 | 13,534 | (772) |
| 921100 | EXPENSES OF EMPLOYEES | 2,763 | 3,805 | $(1,042)$ | 4,082 | 3,615 | 467 | 4,061 | 9,884 | $(5,823)$ |
| 921200 | MISC OFFICE EXPENSES | 11,152 | 4,798 | 6,354 | 5,398 | 4,963 | 435 | 15,680 | 4,918 | 10,762 |
| 921210 | MISC OFFICE EXP TEL | 2,442 | 1,295 | 1,147 | 5,127 | 1,295 | 3,832 | 3,181 | 1,295 | 1,886 |
| 921210 | MISC OFFICE EXP TEL | 11,867 | 5,552 | 6,315 | 13,706 | 5,582 | 8,124 | 10,178 | 5,552 | 4,626 |
| 921220 | MISC OFFICE EXP SUP | 4,994 | 5,471 | (477) | 3,747 | 4,186 | (439) | 4,992 | 4,021 | 971 |
| 921250 | OFFICE BUILDING OPERATION | 50 | - | 50 | 32 | 165 | (133) | (5) | 120 | (125) |
| 921300 | PERSONAL/VEHICLE | 14,791 | 13,150 | 1,641 | 5,719 | 13,150 | $(7,431)$ | 5,874 | 13,150 | $(7,276)$ |
| 923100 | SERVICE COMPANY CHARGES | 488,414 | 530,000 | $(41,586)$ | 534,309 | 531,000 | 3,309 | 657,298 | 532,000 | 125,298 |
| 923200 | AUDITING SERVICES | - | - | - | 865 | - | 865 | 13,297 | - | 13,297 |
| 923300 | LEGAL SERVICES | 4,408 | $(12,500)$ | 16,908 | 5,507 | 12,500 | $(6,993)$ | 3,385 | 12,500 | $(9,115)$ |
| 923400 | ENGINEERING SERVICES | - |  | - | - |  | - | - | - | - |
| 923500 | OTHER SERVICES-CURRENT | 28,794 | 48,615 | $(19,821)$ | 47,357 | 45,565 | 1,792 | 44,190 | 52,910 | $(8,720)$ |
| 924000 | PROPERTY INSURANCE | 186 | 3,000 | $(2,814)$ | 24,408 | 3,000 | 21,408 | 10,331 | 3,000 | 7,331 |
| 925110 | WORKMENS COMP PREMIUM EXP | $(1,616)$ | 9,407 | $(11,023)$ | 19,823 | 9,407 | 10,416 | 9,883 | 9,407 | 476 |
| 925300 | INJURIES \& DAMAGES EXP | 75 | 1,000 | (925) | 100 | 1,000 | (900) | 135 | 1,000 | (865) |
| 925400 | GENERAL LIABILITY | 4,219 | 29,417 | $(25,198)$ | 55,763 | 29,417 | 26,346 | 22,198 | 29,417 | $(7,219)$ |
| 926100 | ACCRUED OPEB EXPENSE | 58,180 | 65,597 | $(7,417)$ | 50,459 | 65,597 | $(15,138)$ | 56,635 | 65,597 | $(8,962)$ |
| 926110 | GROUP INSURANCE PREM EXP | 82,803 | 84,022 | $(1,219)$ | 72,395 | 87,689 | $(15,294)$ | 86,970 | 87,689 | (719) |
| 926200 | OTHER WELFARE EXPENSES | (24) | 200 | (224) | 750 | 1,150 | (400) | - | 2,500 | $(2,500)$ |
| 926220 | ESOP CONTRIBUTIONS EXPENSE | $(9,238)$ | 1,337 | $(10,575)$ | (194) | 1,099 | $(1,293)$ | 162 | 1,525 | $(1,363)$ |
| 926250 | 401-K CONTRIBUTIONS EXPENSE | 5,901 | 11,525 | $(5,624)$ | 4,416 | 11,450 | $(7,034)$ | 8,934 | 12,242 | $(3,308)$ |
| 926400 | PENSION PLAN EXPENSE | 96,177 | 67,006 | 29,171 | 58,772 | 67,006 | $(8,234)$ | 63,246 | 67,006 | $(3,760)$ |
| 926600 | OTHER PENSION PLAN EXPENSE | 3,500 | - | 3,500 | 6,160 | - | 6,160 | 3,892 | - | 3,892 |
| 928100 | AMORT EXP RATE PROCEEDING | 30,091 | 29,451 | 640 | 30,086 | 29,451 | 635 | 38,656 | 29,451 | 9,205 |
| 928400 | OTH REGULATRY EXP-CURRENT | 7,136 | 7,615 | (479) | 3,830 | 25,375 | $(21,545)$ | 6,517 | 17,375 | $(10,858)$ |
| 930130 | OTHER GENERAL EXPENSE | 4,477 | 758 | 3,719 | $(3,442)$ | 758 | $(4,200)$ | 71,733 | 758 | 70,975 |
| 930200 | AMORTIZE MISC CHARGES | - | - | - | - | - | - | - | - | - |
| 930210 | MISC GENERAL EXP-CURRENT | 6,434 | $(3,800)$ | 10,234 | 13,777 | 3,800 | 9,977 | 22,262 | $(3,700)$ | 25,962 |
| 930230 | AMORT MISC GENERAL EXP | 2,068 | - | 2,068 | 2,068 | - | 2,068 | 2,236 | - | 2,236 |
| 930260 | MEALS \& TRAVEL EXPENSES-TAXAB | 601 | 1,379 | (778) | 776 | 1,129 | (353) | 1,910 | 1,479 | 431 |
| 930300 | RESEARCH \& DEV EXP | 25 | 333 | (308) | (100) | 333 | (433) | - | 333 | (333) |
| 930600 | TRANSPORTATION EXPENSES | 28,931 | 33,027 | $(4,096)$ | 29,937 | 32,720 | $(2,783)$ | 44,547 | 32,692 | 11,855 |
| 930850 | MISC GEN EXP-DIRECTORS FEES | - | 4,250 | $(4,250)$ | 3,000 | - | 3,000 | 3,233 | - | 3,233 |
| 930890 | MISC GEN EXP-OTHER | (250) | 1,400 | $(1,650)$ | 227 | 65,694 | $(65,467)$ | 2,079 | 100 | 1,979 |
| 930900 | TAX PENALTY | 171 | - | 171 | - | - | - | 25 | - | 25 |
| 931000 | ADM \& GENERAL RENTS | (355) | 3,321 | $(3,676)$ | 814 | 3,321 | $(2,507)$ | 882 | 3,321 | $(2,439)$ |
| 932700 | OR MN A\&G MISC PROPTY MAT | 310 | 1,575 | $(1,265)$ | 3,662 | 919 | 2,743 | 765 | 3,999 | $(3,234)$ |


| YEAR-2006 <br> AWW | AWW_DESC | $\begin{gathered} 2006 \\ \text { July } \\ \text { Actual } \end{gathered}$ | $\begin{gathered} \hline 2006 \\ \text { July } \\ \text { Budget } \end{gathered}$ | Variance | 2006 August Actual | 2006 <br> August <br> Budget | Variance | $\begin{gathered} 2006 \\ \text { September } \\ \text { Actual } \end{gathered}$ | $\begin{gathered} 2006 \\ \text { September } \\ \text { Budget } \end{gathered}$ | Variance |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 643100 | MISC WT EXPENSES-CURRENT | 1,803 | 3,867 | $(2,064)$ | 2,942 | 2,817 | 125 | 6,872 | 4,127 | 2,745 |
| 643300 | WASTE DISPOSAL EXP (CUR) | 12,135 | 7,400 | 4,735 | 13,442 | 7,400 | 6,042 | 15,148 | 7,400 | 7,748 |
| 643310 | AMORT WASTE DISPOSAL EXP | 7,814 | 15,813 | $(7,999)$ | 7,814 | 15,813 | $(7,999)$ | 7,814 | 15,813 | $(7,999)$ |
| 651100 | OR MN WT STRUCT \& IMP MAT | 4,126 | 4,475 | (349) | 2,290 | 2,975 | (685) | 3,380 | 2,975 | 405 |
| 651120 | AMORT DEF EXP WT STRUCT | 13,264 | 11,734 | 1,530 | 13,264 | 11,734 | 1,530 | 13,264 | 11,734 | 1,530 |
| 662100 | T\&D LINES EXPENSE | 11,263 | 9,543 | 1,720 | 3,604 | 9,543 | $(5,939)$ | 23,027 | 11,616 | 11,411 |
| 663300 | MISC METER EXPENSES | 4,836 | 8,700 | $(3,864)$ | 6,442 | 8,700 | $(2,258)$ | 11,337 | 8,700 | 2,637 |
| 665300 | MISC T\&D EXPENSES-CURRENT | 12,243 | 3,718 | 8,525 | 8,586 | 3,718 | 4,868 | 11,265 | 3,718 | 7,547 |
| 666000 | T\&D RENTS | - | 435 | (435) | - | 435 | (435) | 227 | 435 | (208) |
| 667100 | MISC SEWER T \& D EXP | 117 | 267 | (150) | 426 | 267 | 159 | 194 | 267 | (73) |
| 671100 | OR MN T\&D STRUCT \& IMP-MAT | $(3,529)$ | 10,600 | $(14,129)$ | 26,291 | 10,600 | 15,691 | 24,402 | 10,600 | 13,802 |
| 672120 | AMORT DEF EXP RES \& STAND | 13,823 | 15,353 | $(1,530)$ | 13,823 | 15,353 | $(1,530)$ | 13,823 | 15,353 | $(1,530)$ |
| 678100 | OR MN OTHER T\&D PLANT MAT | 10,868 | 24,000 | $(13,132)$ | $(34,035)$ | 24,000 | $(58,035)$ | $(9,501)$ | 24,000 | $(33,501)$ |
| 903100 | CONTRACT \& ORDERS EXPENS | 365 | 300 | 65 | 202 | 300 | (98) | 964 | 300 | 664 |
| 903300 | COLLECTING EXPENSES | 16,645 | 17,088 | (443) | 27,547 | 17,088 | 10,459 | 18,329 | 17,088 | 1,241 |
| 903520 | BILLING \& ACCTNG OTH EXP | 16,488 | 13,070 | 3,418 | 22,378 | 13,850 | 8,528 | 26,879 | 14,150 | 12,729 |
| 903521 | CUST ACCTG-BILLING/TELEPHONE | 6,860 | 7,880 | $(1,020)$ | 9,144 | 7,880 | 1,264 | 7,492 | 7,880 | (388) |
| 903523 | CUST ACCTG-BILLING/POSTAGE | 48,035 | 38,341 | 9,694 | 40,499 | 38,341 | 2,158 | 49,040 | 38,341 | 10,699 |
| 904000 | UNCOLLECTIBLE ACCOUNTS | 54,038 | 27,917 | 26,121 | 20,359 | 27,917 | $(7,558)$ | 23,415 | 27,917 | $(4,502)$ |
| 905100 | MISC CUST ACCTNG EXPENSES | 3,013 | 2,500 | 513 | 17,187 | 2,300 | 14,887 | 4,286 | 2,685 | 1,601 |
| 910110 | ANNUAL REPORT EXPENSES | 20,092 | 22,115 | $(2,023)$ | 4,738 | 21,910 | $(17,172)$ | 6,142 | 22,165 | $(16,023)$ |
| 920000 | ADM \& GENERAL SALARIES | 393,568 | 405,337 | $(11,769)$ | 388,587 | 438,991 | $(50,404)$ | 492,828 | 422,161 | 70,667 |
| 920520 | INCENTIVE PLAN EXP OFFICERS | 12,762 | 12,919 | (157) | 15,134 | 14,148 | 986 | 50,641 | 13,534 | 37,107 |
| 921100 | EXPENSES OF EMPLOYEES | 5,748 | 3,635 | 2,113 | 2,786 | 4,695 | $(1,909)$ | 3,586 | 4,410 | (824) |
| 921200 | MISC OFFICE EXPENSES | 12,613 | 4,798 | 7,815 | 9,868 | 4,963 | 4,905 | 10,092 | 4,918 | 5,174 |
| 921210 | MISC OFFICE EXP TEL | 220 | 1,295 | $(1,075)$ | (133) | 1,295 | $(1,428)$ | 3,862 | 1,295 | 2,567 |
| 921210 | MISC OFFICE EXP TEL | 5,167 | 5,552 | (385) | 7,012 | 5,582 | 1,430 | 9,218 | 5,552 | 3,666 |
| 921220 | MISC OFFICE EXP SUP | 6,753 | 4,871 | 1,882 | 3,729 | 4,186 | (457) | 5,689 | 4,236 | 1,453 |
| 921250 | OFFICE BUILDING OPERATION | (92) | - | (92) | (127) | 165 | (292) | 125 | 120 | 5 |
| 921300 | PERSONAL/VEHICLE | 12,385 | 13,150 | (765) | 14,055 | 13,150 | 905 | 10,714 | 13,150 | $(2,436)$ |
| 923100 | SERVICE COMPANY CHARGES | 513,424 | 502,000 | 11,424 | 482,704 | 532,000 | $(49,296)$ | 753,665 | 517,000 | 236,665 |
| 923200 | AUDITING SERVICES | 2,980 | - | 2,980 | 3,308 | - | 3,308 | 13,811 | - | 13,811 |
| 923300 | LEGAL SERVICES | 12,310 | 12,500 | (190) | $(8,772)$ | $(12,500)$ | 3,728 | 8,087 | 12,500 | $(4,413)$ |
| 923400 | ENGINEERING SERVICES | - | - |  | - | - |  | - | - | - |
| 923500 | OTHER SERVICES-CURRENT | 40,729 | 49,580 | $(8,851)$ | 42,230 | 47,130 | $(4,900)$ | 41,182 | 52,090 | $(10,908)$ |
| 924000 | PROPERTY INSURANCE | 8,755 | 3,000 | 5,755 | 8,755 | 3,000 | 5,755 | 8,755 | 3,000 | 5,755 |
| 925110 | WORKMENS COMP PREMIUM EXP | 9,502 | 9,407 | 95 | 9,557 | 9,407 | 150 | 8,478 | 9,407 | (929) |
| 925300 | INJURIES \& DAMAGES EXP | 100 | 1,000 | (900) | 100 | 1,000 | (900) | - | 1,000 | $(1,000)$ |
| 925400 | GENERAL LIABILITY | 33,950 | 29,417 | 4,533 | 33,950 | 29,417 | 4,533 | $(51,655)$ | 29,417 | $(81,072)$ |
| 926100 | ACCRUED OPEB EXPENSE | 56,064 | 65,597 | $(9,533)$ | 57,312 | 65,597 | $(8,285)$ | 50,763 | 65,597 | $(14,834)$ |
| 926110 | GROUP INSURANCE PREM EXP | 84,585 | 84,022 | 563 | 85,514 | 91,357 | $(5,843)$ | 72,129 | 87,689 | $(15,560)$ |
| 926200 | OTHER WELFARE EXPENSES | 639 | 4,000 | $(3,361)$ | 3,226 | 9,000 | $(5,774)$ | 1,492 | 3,000 | $(1,508)$ |
| 926220 | ESOP CONTRIBUTIONS EXPENSE | 177 | 1,320 | $(1,143)$ | 193 | 1,333 | $(1,140)$ | 180 | 1,277 | $(1,097)$ |
| 926250 | 401-K CONTRIBUTIONS EXPENSE | 5,203 | 11,617 | $(6,414)$ | 5,271 | 12,296 | $(7,025)$ | 6,432 | 11,880 | $(5,448)$ |
| 926400 | PENSION PLAN EXPENSE | 63,580 | 67,006 | $(3,426)$ | 63,540 | 67,006 | $(3,466)$ | 57,455 | 67,006 | $(9,551)$ |
| 926600 | OTHER PENSION PLAN EXPENSE | 3,817 | - | 3,817 | 3,772 | - | 3,772 | 5,666 | - | 5,666 |
| 928100 | AMORT EXP RATE PROCEEDING | 30,086 | 29,451 | 635 | 30,086 | 29,451 | 635 | 30,549 | 29,451 | 1,098 |
| 928400 | OTH REGULATRY EXP-CURRENT | 33,444 | 19,375 | 14,069 | 31,974 | 24,575 | 7,399 | 11,800 | 10,375 | 1,425 |
| 930130 | OTHER GENERAL EXPENSE | $(10,395)$ | 758 | $(11,153)$ | 15,774 | 758 | 15,016 | 24,794 | 758 | 24,036 |
| 930200 | AMORTIZE MISC CHARGES | - | - | - | - | - | - | - | - | - |
| 930210 | MISC GENERAL EXP-CURRENT | 10,593 | $(3,200)$ | 13,793 | 6,810 | $(3,200)$ | 10,010 | 16,209 | $(2,900)$ | 19,109 |
| 930230 | AMORT MISC GENERAL EXP | 2,110 | - | 2,110 | 2,110 | - | 2,110 | 2,110 | - | 2,110 |
| 930260 | MEALS \& TRAVEL EXPENSES-TAXAB | 1,691 | 879 | 812 | 806 | 759 | 47 | 1,585 | 1,164 | 421 |
| 930300 | RESEARCH \& DEV EXP | - | 333 | (333) | - | 333 | (333) | - | 333 | (333) |
| 930600 | TRANSPORTATION EXPENSES | 23,063 | 32,702 | $(9,639)$ | 38,974 | 32,760 | 6,214 | 34,170 | 32,726 | 1,444 |
| 930850 | MISC GEN EXP-DIRECTORS FEES | 6,000 | 8,250 | $(2,250)$ | - | - | - | - | - | - |
| 930890 | MISC GEN EXP-OTHER | 3,937 | 5,980 | $(2,043)$ | 4,425 | 4,700 | (275) | 249 | 5,700 | $(5,451)$ |
| 930900 | TAX PENALTY | - | - | - | - | - | - | 42,185 | - | 42,185 |
| 931000 | ADM \& GENERAL RENTS | 4,989 | 3,321 | 1,668 | 792 | 3,321 | $(2,529)$ | 3,170 | 3,321 | (151) |
| 932700 | OR MN A\&G MISC PROPTY MAT | 390 | 3,334 | $(2,944)$ | 1,624 | 1,275 | 349 | 372 | 1,699 | $(1,327)$ |


| YEAR-2006 <br> AWW | AWW_DESC |  | $\begin{gathered} \hline 2006 \\ \text { October } \\ \text { Budget } \end{gathered}$ | Variance | $\begin{gathered} 2006 \\ \text { November } \\ \text { Actual } \end{gathered}$ | $\begin{gathered} \hline 2006 \\ \text { November } \\ \text { Budget } \end{gathered}$ | Variance | $\begin{gathered} 2006 \\ \text { December } \\ \text { Actual } \end{gathered}$ | 2006 December Budget | Variance |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 643100 | MISC WT EXPENSES-CURRENT | 2,531 | 1,727 | 804 | 3,512 | 2,078 | 1,434 | 7,234 | 1,812 | 5,422 |
| 643300 | WASTE DISPOSAL EXP (CUR) | 10,806 | 7,400 | 3,406 | 3,759 | 7,400 | $(3,641)$ | 133,490 | 7,400 | 126,090 |
| 643310 | AMORT WASTE DISPOSAL EXP | - | 8,000 | $(8,000)$ | - | 8,000 | $(8,000)$ | 8,438 | 8,000 | 438 |
| 651100 | OR MN WT STRUCT \& IMP MAT | 2,268 | 24,050 | $(21,782)$ | 3,573 | 3,975 | (402) | 1,799 | 3,975 | $(2,176)$ |
| 651120 | AMORT DEF EXP WT STRUCT | 12,993 | 11,463 | 1,530 | 9,663 | 11,463 | $(1,800)$ | 12,993 | 11,463 | 1,530 |
| 662100 | T\&D LINES EXPENSE | 1,494 | 9,543 | $(8,049)$ | 12,061 | 10,543 | 1,518 | 8,825 | 12,616 | $(3,791)$ |
| 663300 | MISC METER EXPENSES | 8,429 | 3,900 | 4,529 | 8,390 | 9,900 | $(1,510)$ | 5,740 | 9,900 | $(4,160)$ |
| 665300 | MISC T\&D EXPENSES-CURRENT | 10,004 | 3,718 | 6,286 | 13,346 | 4,718 | 8,628 | 9,886 | 4,718 | 5,168 |
| 666000 | T\&D RENTS | - | 435 | (435) | - | 435 | (435) | 20,600 | 435 | 20,165 |
| 667100 | MISC SEWER T \& D EXP | 365 | 267 | 98 | 255 | 267 | (12) | 1,992 | 267 | 1,725 |
| 671100 | OR MN T\&D STRUCT \& IMP-MAT | 30,288 | 10,600 | 19,688 | 10,349 | 10,600 | (251) | 16,582 | 10,600 | 5,982 |
| 672120 | AMORT DEF EXP RES \& STAND | 13,823 | 15,353 | $(1,530)$ | 13,823 | 15,353 | $(1,530)$ | 13,823 | 15,353 | $(1,530)$ |
| 678100 | OR MN OTHER T\&D PLANT MAT | 17,105 | 24,000 | $(6,895)$ | 52,295 | 19,000 | 33,295 | 32,853 | 14,000 | 18,853 |
| 903100 | CONTRACT \& ORDERS EXPENS | 449 | 300 | 149 | (84) | 300 | (384) | 6,112 | 300 | 5,812 |
| 903300 | COLLECTING EXPENSES | 22,430 | 17,088 | 5,342 | 18,969 | 17,088 | 1,881 | 20,410 | 17,088 | 3,322 |
| 903520 | BILLING \& ACCTNG OTH EXP | 35,117 | 12,020 | 23,097 | 26,131 | 13,990 | 12,141 | 25,251 | 11,990 | 13,261 |
| 903521 | CUST ACCTG-BILLING/TELEPHONE | 6,932 | 7,880 | (948) | 9,024 | 7,880 | 1,144 | 1,204 | 7,880 | $(6,676)$ |
| 903523 | CUST ACCTG-BILLING/POSTAGE | 39,208 | 38,341 | 867 | 47,152 | 38,341 | 8,811 | 40,130 | 38,341 | 1,789 |
| 904000 | UNCOLLECTIBLE ACCOUNTS | 32,305 | 27,917 | 4,388 | 134,914 | 27,917 | 106,997 | 26,967 | 27,923 | (956) |
| 905100 | MISC CUST ACCTNG EXPENSES | 2,528 | 2,900 | (372) | 18,303 | 3,500 | 14,803 | 6,858 | 3,600 | 3,258 |
| 910110 | ANNUAL REPORT EXPENSES | 10,576 | 26,320 | $(15,744)$ | $(24,440)$ | 21,425 | $(45,865)$ | 168,350 | 21,305 | 147,045 |
| 920000 | ADM \& GENERAL SALARIES | 380,189 | 405,337 | $(25,148)$ | 511,607 | 433,851 | 77,756 | 438,909 | 423,598 | 15,311 |
| 920520 | INCENTIVE PLAN EXP OFFICERS | 17,025 | 12,919 | 4,106 | 17,491 | 13,534 | 3,957 | 8,046 | 13,534 | $(5,488)$ |
| 921100 | EXPENSES OF EMPLOYEES | 7,385 | 3,745 | 3,640 | 5,062 | 5,665 | (603) | 24,675 | 5,295 | 19,380 |
| 921200 | MISC OFFICE EXPENSES | 11,728 | 4,798 | 6,930 | 9,953 | 6,818 | 3,135 | 7,686 | 7,018 | 668 |
| 921210 | MISC OFFICE EXP TEL | 1,534 | 1,295 | 239 | 1,140 | 1,295 | (155) | 995 | 1,295 | (300) |
| 921210 | MISC OFFICE EXP TEL | 6,183 | 5,552 | 631 | 6,763 | 5,582 | 1,181 | 9,829 | 5,552 | 4,277 |
| 921220 | MISC OFFICE EXP SUP | 3,846 | 4,261 | (415) | 4,570 | 5,311 | (741) | 7,165 | 3,761 | 3,404 |
| 921250 | OFFICE BUILDING OPERATION | 303 | - | 303 | 38 | 120 | (82) | 103 | 120 | (17) |
| 921300 | PERSONAL/VEHICLE | 10,743 | 13,150 | $(2,407)$ | 12,285 | 13,150 | (865) | 14,054 | 13,150 | 904 |
| 923100 | SERVICE COMPANY CHARGES | 507,919 | 505,000 | 2,919 | 570,758 | 509,000 | 61,758 | 716,929 | 521,000 | 195,929 |
| 923200 | AUDITING SERVICES | 6,535 | - | 6,535 | 4,625 | - | 4,625 | 6,002 | - | 6,002 |
| 923300 | LEGAL SERVICES | 14,822 | 12,500 | 2,322 | (790) | 12,500 | $(13,290)$ | 6 | $(17,500)$ | 17,506 |
| 923400 | ENGINEERING SERVICES | - | - | - | (70) | - | (13,20) | - | (17,500) |  |
| 923500 | OTHER SERVICES-CURRENT | 20,408 | 47,695 | $(27,287)$ | 27,793 | 43,625 | $(15,832)$ | 35,270 | 38,172 | $(2,902)$ |
| 924000 | PROPERTY INSURANCE | 8,755 | 3,000 | 5,755 | 8,755 | 3,000 | 5,755 | 8,755 | 3,000 | 5,755 |
| 925110 | WORKMENS COMP PREMIUM EXP | 9,346 | 9,407 | (61) | 9,361 | 9,407 | (46) | 9,690 | 9,407 | 283 |
| 925300 | INJURIES \& DAMAGES EXP | - | 1,000 | $(1,000)$ | - | 1,000 | $(1,000)$ | - | 1,000 | $(1,000)$ |
| 925400 | GENERAL LIABILITY | 33,950 | 29,417 | 4,533 | 33,950 | 29,417 | 4,533 | 86,558 | 29,417 | 57,141 |
| 926100 | ACCRUED OPEB EXPENSE | 55,848 | 65,597 | $(9,749)$ | 56,428 | 65,597 | $(9,169)$ | 57,475 | 65,599 | $(8,124)$ |
| 926110 | GROUP INSURANCE PREM EXP | 82,585 | 84,022 | $(1,437)$ | 85,412 | 90,189 | $(4,777)$ | 92,284 | 87,991 | 4,293 |
| 926200 | OTHER WELFARE EXPENSES | 763 | 2,000 | $(1,237)$ | 3,967 | 100 | 3,867 | 10,174 | 3,500 | 6,674 |
| 926220 | ESOP CONTRIBUTIONS EXPENSE | 170 | 1,107 | (937) | 168 | 1,320 | $(1,152)$ | 1,600 | 1,439 | 161 |
| 926250 | 401-K CONTRIBUTIONS EXPENSE | 5,818 | 11,457 | $(5,639)$ | 6,090 | 12,173 | $(6,083)$ | 5,803 | 12,000 | $(6,197)$ |
| 926400 | PENSION PLAN EXPENSE | 63,360 | 67,006 | $(3,646)$ | 63,952 | 67,006 | $(3,054)$ | 65,022 | 67,006 | $(1,984)$ |
| 926600 | OTHER PENSION PLAN EXPENSE | 3,973 |  | 3,973 | 3,678 |  | 3,678 | 4,195 |  | 4,195 |
| 928100 | AMORT EXP RATE PROCEEDING | 30,086 | 29,451 | 635 | 30,086 | 29,451 | 635 | 30,086 | 29,451 | 635 |
| 928400 | OTH REGULATRY EXP-CURRENT | 128 | 5,615 | $(5,487)$ | - | 5,615 | $(5,615)$ | 18,374 | 615 | 17,759 |
| 930130 | OTHER GENERAL EXPENSE | 21,898 | 758 | 21,140 | 41,736 | 758 | 40,978 | $(252,562)$ | 758 | $(253,320)$ |
| 930200 | AMORTIZE MISC CHARGES |  | - | 10 |  | - | - | ( | - | (1) |
| 930210 | MISC GENERAL EXP-CURRENT | 10,626 | $(2,900)$ | 13,526 | 7,195 | $(3,200)$ | 10,395 | 17,844 | $(3,200)$ | 21,044 |
| 930230 | AMORT MISC GENERAL EXP | 2,026 | - | 2,026 | 2,334 | - | 2,334 | 2,156 | - | 2,156 |
| 930260 | MEALS \& TRAVEL EXPENSES-TAXAB | 1,665 | 834 | 831 | 2,463 | 1,429 | 1,034 | 1,477 | 684 | 793 |
| 930300 | RESEARCH \& DEV EXP | - | 333 | (333) | - | 333 | (333) | - | 333 | (333) |
| 930600 | TRANSPORTATION EXPENSES | 39,726 | 32,703 | 7,023 | 25,943 | 32,698 | $(6,755)$ | 53,999 | 32,752 | 21,247 |
| 930850 | MISC GEN EXP-DIRECTORS FEES | 3,000 | 4,250 | $(1,250)$ | 1,500 | - | 1,500 | 1,500 |  | 1,500 |
| 930890 | MISC GEN EXP-OTHER | 295 | 200 | 95 | 3,803 | 9,900 | $(6,097)$ | 4,170 | 1,200 | 2,970 |
| 930900 | TAX PENALTY | $(3,607)$ | - | $(3,607)$ | $(12,381)$ | - | $(12,381)$ | 190,243 | - | 190,243 |
| 931000 | ADM \& GENERAL RENTS | 5,180 | 3,321 | 1,859 | 264 | 3,321 | $(3,057)$ | 3,428 | 3,321 | 107 |
| 932700 | OR MN A\&G MISC PROPTY MAT | 933 | 975 | (42) | 425 | 1,264 | (839) | 1,324 | 475 | 849 |


| YEAR-200 <br> AWW | Description | 2007 <br> January <br> Actual | $\begin{gathered} \hline 2007 \\ \text { January } \\ \text { Budget } \\ \hline \end{gathered}$ | Variance | 2007 February Actual | 2007 February Budget | Variance | 2007 <br> March <br> Actual |  | Variance |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 403000 | DEPRECIATION EXPENSE | 753,162 | 664,655 | 88,507 | 756,066 | 665,616 | 90,450 | 758,449 | 667,355 | 91,094 |
| 403100 | DEPRECIATION EXPENSE-CONTR PROP | $(107,109)$ | - | $(107,109)$ | $(107,371)$ | - | $(107,371)$ | $(107,795)$ | - | $(107,795)$ |
| 404430 | AMORT REG ASSET - AFUDC | 2,719 | - | 2,719 | 2,719 | - | 2,719 | 2,719 | - | 2,719 |
| 406000 | AMORT UT PLT ACQ ADJUST | 1,803 | - | 1,803 | 1,801 | - | 1,801 | 1,801 | - | 1,801 |
| 407000 | AMORT PROPERTY LOSSES | 34,349 | 34,215 | 134 | 34,349 | 34,215 | 134 | 34,349 | 34,215 | 134 |
| 408030 | OTHER GENERAL TAXES | 37,817 | 13,903 | 23,914 | $(24,016)$ | 13,903 | $(37,919)$ | $(27,149)$ | 13,903 | $(41,052)$ |
| 408100 | REAL \& PERSON PROP TAXES | 212,152 | 180,000 | 32,152 | 212,152 | 180,000 | 32,152 | 93,575 | 180,000 | $(86,425)$ |
| 408140 | FEDERAL UNEMPLYMNT TXS | 5,345 |  | 5,345 | 714 | - | 714 | 259 |  | 259 |
| 408160 | FICA | 36,421 | 45,420 | $(8,999)$ | 29,403 | 39,739 | $(10,336)$ | 46,425 | 43,314 | 3,111 |
| 408180 | STATE UNEMPLYMNT TXS | 6,787 | - | 6,787 | 1,702 | - | 1,702 | $(1,825)$ | - | $(1,825)$ |
| 409100 | SIT-CURRENT | 1,903 | 5,338 | $(3,435)$ | $(4,621)$ | $(10,192)$ | 5,571 | 35,584 | 8,065 | 27,519 |
| 409110 | SIT-ADJUST PRIOR YEARS | $(14,767)$ | - | $(14,767)$ | $(18,315)$ | - | $(18,315)$ | 62,097 | - | 62,097 |
| 409150 | FIT-CURRENT | 8,848 | 32,201 | $(23,353)$ | $(21,489)$ | $(28,251)$ | 6,762 | 185,076 | 42,816 | 142,260 |
| 409160 | FIT-ADJUST PRIOR YEARS | - | - | - | - | - | - |  | - | - |
| 410400 | DEF SIT-REG ASSET/LIAB | - | 5,737 | $(5,737)$ | - | 16,298 | $(16,298)$ |  | 1,244 | $(1,244)$ |
| 410600 | DEF SIT-OTHER | 1,430 | - | 1,430 | 1,430 | - | 1,430 | 1,930 | - | 1,930 |
| 410700 | DEF FIT-REG ASSET/LIAB | - | 17,678 | $(17,678)$ | - | 78,635 | $(78,635)$ | - | 15,511 | $(15,511)$ |
| 410900 | DEF FIT-OTHER | 10,635 | - | 10,635 | 9,763 | - | 9,763 | 31,124 | - | 31,124 |
| 412210 | ITC RESTORED- $3 \%$ | (638) | - | (638) | (638) | - | (638) | (638) | - | (638) |
| 412220 | ITC RESTORED-4\% | (525) | - | (525) | (525) | - | (525) | (525) | - | (525) |
| 412230 | ITC RESTORED-10\% | $(5,903)$ | (628) | $(5,275)$ | $(5,903)$ | $(7,797)$ | 1,894 | $(5,903)$ | 4,789 | $(10,692)$ |
| 415100 | M\&J REVENUES-OUTSIDE | $(2,763)$ |  | $(2,763)$ | $(56,095)$ |  | $(56,095)$ | $(40,894)$ |  | $(40,894)$ |
| 415100 | M\&J REVENUES-OUTSIDE | $(5,638)$ | - | $(5,638)$ | $(56,095)$ | - | $(56,095)$ | $(40,894)$ | - | $(40,894)$ |
| 416100 | M\&J EXPENSES-OUTSIDE | 23,090 | - | 23,090 | $(2,689)$ | - | $(2,689)$ | 8,801 | - | 8,801 |
| 416110 | M\&J EXPENSES-OUTSIDE | 2,367 | - | 2,367 | 25,814 | - | 25,814 | 1,220 |  | 1,220 |
| 419510 | INT INCOME INSIDE | $(1,569)$ | - | $(1,569)$ | (743) | - | (743) | (120) | - | (120) |
| 420100 | AFUDC - EQUITY | $(37,148)$ | $(24,653)$ | $(12,495)$ | $(44,798)$ | $(33,334)$ | $(11,464)$ | $(48,261)$ | $(41,968)$ | $(6,293)$ |
| 420210 | AFUDC - DEBT | $(16,870)$ | $(11,196)$ | $(5,674)$ | $(20,352)$ | $(15,138)$ | $(5,214)$ | $(21,928)$ | $(19,059)$ | $(2,869)$ |
| 425100 | AFUDC UT PLT ACQ ADJUST | (35) | 64 | (99) | (35) | 64 | (99) | (35) | 64 | (99) |
| 425300 | AMORT PREFERRED STOCK EXP | 64 | - | 64 | 64 | - | 64 | 64 | - | 64 |
| 426100 | DONATIONS | 32,250 | 45,500 | $(13,250)$ | 10,628 | 6,300 | 4,328 | 18,058 | 17,750 | 308 |
| 426160 | OTHER LOBBYING EXPENSES | $(24,912)$ | $(45,457)$ | 20,545 | 5,542 | $(3,113)$ | 8,655 | 747 | $(7,325)$ | 8,072 |
| 426200 | OTHER INCOME DEDUCTIONS | 52,754 | 52,122 | 632 | - | 1,413 | $(1,413)$ | 2,850 | 400 | 2,450 |
| 427100 | INTEREST LTD-OUT-REG | 137,713 | - | 137,713 | 137,713 | - | 137,713 | 137,713 | - | 137,713 |
| 427120 | INTEREST LTD-OUT-REG | 257,154 | 442,117 | $(184,963)$ | 257,154 | 442,117 | $(184,963)$ | 256,563 | 424,369 | $(167,806)$ |
| 428000 | AMORT DEBT DISCOUNT \& EXP | 6,009 | 7,134 | $(1,125)$ | 6,009 | 7,134 | $(1,125)$ | 6,009 | 7,244 | $(1,235)$ |
| 431100 | INTEREST ON BANK DEBT | 35,471 | 1,848 | 33,623 | 97,867 | 6,627 | 91,240 | 53,951 | 16,251 | 37,700 |
| 437100 | DIV DEC PREF STK-OUTSIDE | 38,320 | 38,325 | (5) | 38,320 | 38,325 | (5) | 1,010,105 | 38,325 | 971,780 |
| 461000 | DOMESTIC SEWER SERV BILLED | $(14,464)$ | $(12,895)$ | $(1,569)$ | $(14,001)$ | $(12,895)$ | $(1,106)$ | - | $(12,895)$ | 12,895 |
| 461020 | COMMERCIAL SEWER SERV BILLED | $(9,233)$ | $(6,018)$ | $(3,215)$ | $(8,400)$ | $(5,588)$ | $(2,812)$ | - | $(5,588)$ | 5,588 |
| 461100 | RES SALES BILLED METERED | $(2,090,914)$ | $(2,098,082)$ | 7,168 | $(1,954,808)$ | $(1,928,074)$ | $(26,734)$ | $(2,112,863)$ | $(2,009,161)$ | $(103,702)$ |
| 461110 | RES SALES UNBILL METERED | $(2,085)$ |  | $(2,085)$ | 66,363 |  | 66,363 | 4,419 | (2,09,161) | 4,419 |
| 461200 | COM SALES BILLED METERED | $(876,375)$ | $(855,250)$ | $(21,125)$ | $(887,986)$ | $(826,227)$ | $(61,759)$ | $(914,952)$ | $(903,791)$ | $(11,161)$ |
| 461210 | COM SALES UNBILL METERED | 130,334 | - | 130,334 | 46,367 | - | 46,367 | $(68,612)$ | - | $(68,612)$ |
| 461300 | IND SALES BILLED METERED | $(97,562)$ | $(115,309)$ | 17,747 | $(117,454)$ | $(110,531)$ | $(6,923)$ | $(103,476)$ | $(105,520)$ | 2,044 |
| 461310 | IND SALES UNBILL METERED | 7,072 |  | 7,072 | 7,491 |  | 7,491 | (569) | - | (569) |
| 461400 | MISC SALES BILLED METERED | (195) | - | (195) | (41) | - | (41) | 25 | - | 25 |
| 462000 | PRIV FIR PROT SER BILLED | $(90,185)$ | $(83,512)$ | $(6,673)$ | $(100,353)$ | $(83,930)$ | $(16,423)$ | $(93,425)$ | $(84,347)$ | $(9,078)$ |
| 462100 | PRIV FIR PROT SER UNBILL | 195 |  | 195 | (813) | (1) | (813) | 897 | - | 897 |
| 462210 | INDUSTRIAL WASTE SERVICE | $(1,565)$ | $(1,118)$ | (447) | $(1,750)$ | $(1,032)$ | (718) | - | $(1,032)$ | 1,032 |
| 463000 | PUB FIRE PROT SER BILLED | $(183,386)$ | $(179,492)$ | $(3,894)$ | $(183,620)$ | $(179,805)$ | $(3,815)$ | $(183,933)$ | $(180,118)$ | $(3,815)$ |
| 464200 | PUB AUTH SLS BILLED METRD | $(227,882)$ | $(224,485)$ | $(3,397)$ | $(238,605)$ | $(234,533)$ | $(4,072)$ | $(246,204)$ | $(207,576)$ | $(38,628)$ |
| 464210 | PUB AUTH SLS UNBILL METRD | 123,868 | - | 123,868 | 2,459 | - | 2,459 | 9,985 | - | 9,985 |
| 464230 | PUB AUTH SLS BILLED METRD SEWER | - | - | - | - | - | - | - | - | - |
| 466000 | SALES FOR RESALE BILLED | $(85,534)$ | $(94,839)$ | 9,305 | $(96,941)$ | $(79,583)$ | $(17,358)$ | $(78,493)$ | $(79,494)$ | 1,001 |
| 466100 | SALES FOR RESALE UNBILL | 19,133 | ( | 19,133 | 16,853 | (79,583) | 16,853 | $(2,593)$ | ( | $(2,593)$ |
| 471100 | RECONNECTION CHARGES | $(16,696)$ | $(17,500)$ | 804 | $(18,952)$ | $(17,500)$ | $(1,452)$ | $(20,350)$ | $(17,500)$ | $(2,850)$ |
| 471200 | OTHER MISC SERV REVENUES | $(42,481)$ | $(57,623)$ | 15,142 | $(42,457)$ | $(57,623)$ | 15,166 | $(46,271)$ | $(57,623)$ | 11,352 |
| 472000 | RENTS FROM WATER PROPERTY | $(7,303)$ | $(7,197)$ | (106) | $(7,303)$ | $(7,197)$ | (106) | $(7,303)$ | $(7,197)$ | (106) |
| 474100 | BILL \& COLL SERV FOR OTH | $(78,121)$ | $(75,294)$ | $(2,827)$ | $(78,996)$ | $(75,294)$ | $(3,702)$ | $(70,945)$ | $(75,294)$ | 4,349 |
| 474300 | MISCELLANEOUS | (950) | - | (950) | 700 | - | 700 | $(1,495)$ | - | $(1,495)$ |
| 602000 | PURCHASED WATER | 29,318 | 39,550 | $(10,232)$ | 1,751 | 37,800 | $(36,049)$ | 24,265 | 39,650 | $(15,385)$ |
| 603100 | MISCELLANEOUS SS EXPENSES | 3,516 | 2,735 | 781 | 40 | 2,635 | $(2,595)$ | 5,399 | 2,735 | 2,664 |
| 617100 | OR MN MISC WAT SS PLT MAT | 10,794 | 8,800 | 1,994 | 1,433 | 8,300 | $(6,867)$ | 8,631 | 8,800 | (169) |
| 623110 | POWER PURCH FOR PUMP ELEC | 82,454 | 188,911 | $(106,457)$ | 195,482 | 166,900 | 28,582 | 193,154 | 171,665 | 21,489 |
| 626500 | MISC PUMPING EXP ELECTRIC | - | 200 | (200) | 287 | 200 | 87 | (146) | 200 | (346) |
| 630200 | MISC PUMPING EXP OTHER | 4,036 | - | 4,036 | 7,022 | - | 7,022 | 4,742 | - | 4,742 |
| 641100 | GENERAL CHEMICALS | 114,814 | 129,724 | $(14,910)$ | 87,084 | 106,968 | $(19,884)$ | 124,263 | 115,066 | 9,197 |
| 642100 | GENERAL WT LABOR | 114,098 | - | 114,098 | 150,151 | - | 150,151 | 99,181 | - | 99,181 |
| 642300 | GENERAL WT EXPENSES | 11,729 | 9,850 | 1,879 | 10,374 | 14,600 | $(4,226)$ | 14,485 | 12,950 | 1,535 |
| 643100 | MISC WT EXPENSES-CURRENT | 9,149 | 6,273 | 2,876 | 4,539 | 7,275 | $(2,736)$ | 5,874 | 6,350 | (476) |
| 643300 | WASTE DISPOSAL EXP (CUR) | 16,629 | 10,725 | 5,904 | 15,371 | 16,800 | $(1,429)$ | 15,133 | 10,725 | 4,408 |
| 643310 | AMORT WASTE DISPOSAL EXP | 8,438 | 8,000 | 438 | 8,438 | 8,000 | 438 | 8,438 | 8,000 | 438 |
| 650000 | OR MN WT SUPR \& ENG | 4,882 | - | 4,882 | 11,624 | - | 11,624 | 8,018 | - | 8,018 |
| 651100 | OR MN WT STRUCT \& IMP MAT | 67,296 | 73,900 | $(6,604)$ | 21,785 | 24,900 | $(3,115)$ | 20,104 | 22,900 | $(2,796)$ |
| 662100 | T\&D LINES EXPENSE | 1,303 | 1,885 | (582) | 2,079 | 1,885 | 194 | 1,908 | 1,885 | 23 |
| 662200 | T\&D LINES LABOR | 142,215 | - | 142,215 | 186,962 | - | 186,962 | 143,029 | - | 143,029 |
| 665300 | MISC T\&D EXPENSES-CURRENT | 35,122 | 24,640 | 10,482 | 12,922 | 24,640 | $(11,718)$ | 29,834 | 24,640 | 5,194 |
| 666000 | T\&D RENTS | (538) | 300 | (838) | 1,000 | 300 | 700 | 215 | 300 | (85) |
| 670000 | OR MN T\&D SUPR \& ENG | 1,897 | - | 1,897 | 4,532 | - | 4,532 | 581 | - | 581 |
| 671200 | OR MN T\&D STRUCT \& IMP-LAB | 274 | - | 274 | 1,953 | - | 1,953 | 1,518 | - | 1,518 |
| 672120 | AMORT DEF EXP RES \& STAND | 13,823 | 19,244 | $(5,421)$ | 13,823 | 15,973 | $(2,150)$ | 13,823 | 15,973 | $(2,150)$ |
| 672200 | AMORT DEF EXP RES \& STAND | 794 |  | 794 | 1,097 | 硣 | 1,097 | 889 |  | 889 |
| 673200 | OR MN T\&D MAINS LAB | 15,839 | - | 15,839 | 47,578 | - | 47,578 | 26,076 | - | 26,076 |
| 675200 | OR MN SERVICES LAB | 13,376 |  | 13,376 | 27,564 |  | 27,564 | 18,294 |  | 18,294 |
| 676200 | OR MN METERS LAB | 13,551 | - | 13,551 | $(23,625)$ | - | $(23,625)$ | 7,986 | - | 7,986 |


| YEAR-2007 | 1 Description | 2007 April <br> Actual |  | Variance |  |  | Variance | $\begin{gathered} 2007 \\ \text { June } \\ \text { Actual } \end{gathered}$ | $\begin{gathered} 2007 \\ \text { June } \\ \text { Budget } \end{gathered}$ | Variance |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 403000 | DEPRECIATION EXPENSE | 686,956 | 669,073 | 17,883 | 687,331 | 670,852 | 16,479 | 755,932 | 675,348 | 80,584 |
| 403100 | DEPRECIATION EXPENSE-CONTR PROP | $(107,790)$ | - | $(107,790)$ | $(107,790)$ | - | $(107,790)$ | $(107,790)$ | - | $(107,790)$ |
| 404430 | AMORT REG ASSET - AFUDC | 2,719 | - | 2,719 | 2,719 | - | 2,719 | 2,719 | - | 2,719 |
| 406000 | AMORT UT PLT ACQ ADJUST | 1,801 | - | 1,801 | 1,801 | - | 1,801 | 1,801 | - | 1,801 |
| 407000 | AMORT PROPERTY LOSSES | 34,349 | 34,215 | 134 | 34,349 | 34,215 | 134 | 34,349 | 34,215 | 134 |
| 408030 | OTHER GENERAL TAXES | 6,862 | 13,903 | $(7,041)$ | 6,862 | 13,903 | $(7,041)$ | 40,873 | 13,903 | 26,970 |
| 408100 | REAL \& PERSON PROP TAXES | 212,152 | 180,000 | 32,152 | 212,152 | 180,000 | 32,152 | 233,371 | 180,000 | 53,371 |
| 408140 | FEDERAL UNEMPLYMNT TXS | (580) | - | (580) | 99 | - | 99 | 187 | - | 187 |
| 408160 | FICA | 32,262 | 42,504 | $(10,242)$ | 35,099 | 46,201 | $(11,102)$ | 34,562 | 44,325 | $(9,763)$ |
| 408180 | STATE UNEMPLYMNT TXS | (862) | - | (862) | 84 | - | 84 | 163 | - | 163 |
| 409100 | SIT-CURRENT | 20,364 | 5,214 | 15,150 | 54,174 | 3,319 | 50,855 | $(18,620)$ | 89,177 | $(107,797)$ |
| 409110 | SIT-ADJUST PRIOR YEARS | 39,711 | - | 39,711 | 84,303 | - | 84,303 | 22,375 | - | 22,375 |
| 409150 | FIT-CURRENT | 106,841 | 31,718 | 75,123 | 284,231 | 24,341 | 259,890 | 230,696 | 358,537 | $(127,841)$ |
| 409160 | FIT-ADJUST PRIOR YEARS | - | - | - | - | - | - | - | - | - |
| 410400 | DEF SIT-REG ASSET/LIAB | - | 2,664 | $(2,664)$ | - | 11,264 | $(11,264)$ | - | $(35,139)$ | 35,139 |
| 410600 | DEF SIT-OTHER | 1,930 | - | 1,930 | 1,930 | - | 1,930 | 1,930 | - | 1,930 |
| 410700 | DEF FIT-REG ASSET/LIAB | - | 29,889 | $(29,889)$ | - | 83,304 | $(83,304)$ | - | 49,299 | $(49,299)$ |
| 410900 | DEF FIT-OTHER | 25,446 | - | 25,446 | 38,863 | - | 38,863 | 53,199 | - | 53,199 |
| 412210 | ITC RESTORED- $3 \%$ | (638) | - | (638) | (638) | - | (638) | (638) | - | (638) |
| 412220 | ITC RESTORED-4\% | (525) | - | (525) | (525) | - | (525) | (525) | - | (525) |
| 412230 | ITC RESTORED-10\% | $(5,903)$ | $(9,565)$ | 3,662 | $(5,903)$ | $(8,953)$ | 3,050 | $(5,903)$ | $(13,325)$ | 7,422 |
| 415100 | M\&J REVENUES-OUTSIDE | $(157,716)$ |  | $(157,716)$ | $(8,487)$ |  | $(8,487)$ | $(14,657)$ |  | $(14,657)$ |
| 415100 | M\&J REVENUES-OUTSIDE | $(159,382)$ | - | $(159,382)$ | $(8,487)$ | - | $(8,487)$ | $(14,657)$ | - | $(14,657)$ |
| 416100 | M\&J EXPENSES-OUTSIDE | 3,488 | - | 3,488 | 3,475 |  | 3,475 | 12,689 |  | 12,689 |
| 416110 | M\&J EXPENSES-OUTSIDE | 3,374 | - | 3,374 | 8,475 |  | 8,475 | 4,501 | - | 4,501 |
| 419510 | INT INCOME INSIDE | (45) | - | (45) | (256) | - | (256) | $(124,386)$ | - | $(124,386)$ |
| 420100 | AFUDC - EQUITY | $(59,288)$ | $(50,625)$ | $(8,663)$ | $(69,181)$ | $(57,585)$ | $(11,596)$ | $(59,431)$ | $(71,104)$ | 11,673 |
| 420210 | AFUDC - DEBT | $(26,907)$ | $(22,991)$ | $(3,916)$ | $(31,394)$ | $(26,152)$ | $(5,242)$ | $(26,963)$ | $(32,291)$ | 5,328 |
| 425100 | AFUDC UT PLT ACQ ADJUST | (35) | 64 | (99) | (35) | 64 | (99) | (35) | 64 | (99) |
| 425300 | AMORT PREFERRED STOCK EXP | 64 | - | 64 | 64 | - | 64 | 64 | - | 64 |
| 426100 | DONATIONS | 20,620 | 32,500 | $(11,880)$ | 11,125 | 20,830 | $(9,705)$ | 44,735 | 5,780 | 38,955 |
| 426160 | OTHER LOBBYING EXPENSES | 41,672 | $(8,147)$ | 49,819 | $(6,311)$ | $(11,737)$ | 5,426 | 16,216 | $(2,535)$ | 18,751 |
| 426200 | OTHER INCOME DEDUCTIONS | 2,715 | 2,686 | 29 | 5,280 | 8,250 | $(2,970)$ | 21,705 | 500 | 21,205 |
| 427100 | INTEREST LTD-OUT-REG | 137,713 | - | 137,713 | 137,713 | - | 137,713 | 137,713 | - | 137,713 |
| 427120 | INTEREST LTD-OUT-REG | 239,407 | 471,728 | $(232,321)$ | 239,407 | 471,728 | $(232,321)$ | 171,607 | 471,728 | $(300,121)$ |
| 428000 | AMORT DEBT DISCOUNT \& EXP | 6,009 | 12,217 | $(6,208)$ | 6,009 | 12,217 | $(6,208)$ | 5,955 | 12,217 | $(6,262)$ |
| 431100 | INTEREST ON BANK DEBT | 86,160 | 27,709 | 58,451 | 40,484 | 35,095 | 5,389 | 260,062 | 42,513 | 217,549 |
| 437100 | DIV DEC PREF STK-OUTSIDE | 38,323 | 38,325 | (2) | 38,323 | 38,325 | (2) | 273,432 | 38,325 | 235,107 |
| 461000 | DOMESTIC SEWER SERV BILLED | - | $(13,485)$ | 13,485 | - | $(11,159)$ | 11,159 | - | $(13,182)$ | 13,182 |
| 461020 | COMMERCIAL SEWER SERV BILLED | (2,051,- | $(5,588)$ | 5,588 | - ${ }^{-}$ | $(7,315)$ | 7,315 | ( ${ }^{-}$ | $(6,945)$ | 6,945 |
| 461100 | RES SALES BILLED METERED | (2,051,050) | $(1,991,446)$ | $(59,604)$ | (2,076,381) | $(2,145,709)$ | 69,328 | (2,738,641) | $(2,688,885)$ | $(49,756)$ |
| 461110 | RES SALES UNBILL METERED | 50,887 | - | 50,887 | $(202,658)$ |  | $(202,658)$ | $(64,488)$ | - | $(64,488)$ |
| 461200 | COM SALES BILLED METERED | $(945,236)$ | $(880,771)$ | $(64,465)$ | $(922,720)$ | $(958,797)$ | 36,077 | $(1,154,404)$ | $(1,170,708)$ | 16,304 |
| 461210 | COM SALES UNBILL METERED | 32,266 | - | 32,266 | $(98,636)$ | - | $(98,636)$ | 12,360 | - | 12,360 |
| 461300 | IND SALES BILLED METERED | $(140,683)$ | $(119,283)$ | $(21,400)$ | $(120,965)$ | $(110,650)$ | $(10,315)$ | $(124,489)$ | $(127,976)$ | 3,487 |
| 461310 | IND SALES UNBILL METERED | $(10,078)$ | - | $(10,078)$ | 3,195 |  | 3,195 | $(4,731)$ |  | $(4,731)$ |
| 461400 | MISC SALES BILLED METERED | - | - | - | (516) | - | (516) | $(2,037)$ | - | $(2,037)$ |
| 462000 | PRIV FIR PROT SER BILLED | $(94,387)$ | $(84,765)$ | $(9,622)$ | $(92,667)$ | $(85,182)$ | $(7,485)$ | $(93,018)$ | $(86,017)$ | $(7,001)$ |
| 462100 | PRIV FIR PROT SER UNBILL | 94 | - | 94 | $(3,223)$ | - | $(3,223)$ | $(1,357)$ | - | $(1,357)$ |
| 462210 | INDUSTRIAL WASTE SERVICE | - | $(1,014)$ | 1,014 | - | (916) | 916 | - | $(1,289)$ | 1,289 |
| 463000 | PUB FIRE PROT SER BILLED | $(183,930)$ | $(180,430)$ | $(3,500)$ | $(183,894)$ | $(180,743)$ | $(3,151)$ | $(190,185)$ | $(181,369)$ | $(8,816)$ |
| 464200 | PUB AUTH SLS BILLED METRD | $(277,214)$ | $(283,208)$ | 5,994 | $(268,406)$ | $(282,613)$ | 14,207 | $(379,656)$ | $(412,835)$ | 33,179 |
| 464210 | PUB AUTH SLS UNBILL METRD | $(42,358)$ | - | $(42,358)$ | $(14,219)$ | - | $(14,219)$ | 42,087 | - | 42,087 |
| 464230 | PUB AUTH SLS BILLED METRD SEWER | - | - | - | - | - | - | - | - | - |
| 466000 | SALES FOR RESALE BILLED | $(90,744)$ | $(83,379)$ | $(7,365)$ | $(89,301)$ | $(78,522)$ | $(10,779)$ | $(178,769)$ | $(155,878)$ | $(22,891)$ |
| 466100 | SALES FOR RESALE UNBILL | $(1,800)$ | - | $(1,800)$ | 773 |  | 773 | $(14,747)$ |  | $(14,747)$ |
| 471100 | RECONNECTION CHARGES | $(20,860)$ | $(17,500)$ | $(3,360)$ | $(18,814)$ | $(17,500)$ | $(1,314)$ | $(38,438)$ | $(17,500)$ | $(20,938)$ |
| 471200 | OTHER MISC SERV REVENUES | $(49,206)$ | $(57,623)$ | 8,417 | $(45,943)$ | $(57,623)$ | 11,680 | $(62,235)$ | $(57,623)$ | $(4,612)$ |
| 472000 | RENTS FROM WATER PROPERTY | $(18,658)$ | $(7,197)$ | $(11,461)$ | $(8,496)$ | $(7,197)$ | $(1,299)$ | $(9,256)$ | $(7,197)$ | $(2,059)$ |
| 474100 | BILL \& COLL SERV FOR OTH | $(94,387)$ | $(75,294)$ | $(19,093)$ | $(78,274)$ | $(75,294)$ | $(2,980)$ | $(80,913)$ | $(75,294)$ | $(5,619)$ |
| 474300 | MISCELLANEOUS | $(1,495)$ | - | $(1,495)$ | 121 | (1) | 121 | - | - |  |
| 602000 | PURCHASED WATER | 34,029 | 40,750 | $(6,721)$ | 17,402 | 41,200 | $(23,798)$ | 56,499 | 44,650 | 11,849 |
| 603100 | MISCELLANEOUS SS EXPENSES | 2,684 | 2,835 | (151) | 3,100 | 2,635 | 465 | 3,352 | 2,550 | 802 |
| 617100 | OR MN MISC WAT SS PLT MAT | 3,347 | 26,300 | $(22,953)$ | 3,000 | 21,300 | $(18,300)$ | 2,854 | 23,800 | $(20,946)$ |
| 623110 | POWER PURCH FOR PUMP ELEC | 155,553 | 207,000 | $(51,447)$ | 272,763 | 216,754 | 56,009 | 329,350 | 314,457 | 14,893 |
| 626500 | MISC PUMPING EXP ELECTRIC | 637 | 200 | 437 | 716 | 1,500 | (784) | (60) | 200 | (260) |
| 630200 | MISC PUMPING EXP OTHER | 5,695 | - | 5,695 | 4,132 | - | 4,132 | 3,511 | - | 3,511 |
| 641100 | GENERAL CHEMICALS | 130,675 | 116,793 | 13,882 | 147,818 | 139,120 | 8,698 | 141,091 | 149,370 | $(8,279)$ |
| 642100 | GENERAL WT LABOR | 106,442 | - | 106,442 | 103,047 | - | 103,047 | 121,040 | - | 121,040 |
| 642300 | GENERAL WT EXPENSES | 14,403 | 13,800 | 603 | 10,229 | 10,850 | (621) | 8,207 | 9,700 | $(1,493)$ |
| 643100 | MISC WT EXPENSES-CURRENT | 8,089 | 7,409 | 680 | 5,257 | 5,750 | (493) | 6,689 | 5,903 | 786 |
| 643300 | WASTE DISPOSAL EXP (CUR) | 20,016 | 10,725 | 9,291 | 15,740 | 16,800 | $(1,060)$ | 14,551 | 16,800 | $(2,249)$ |
| 643310 | AMORT WASTE DISPOSAL EXP | 8,438 | 8,000 | 438 | 8,438 | 8,000 | 438 | 8,438 | 8,000 | 438 |
| 650000 | OR MN WT SUPR \& ENG | 5,661 | - | 5,661 | 4,731 | - | 4,731 | 3,957 | - | 3,957 |
| 651100 | OR MN WT STRUCT \& IMP MAT | 21,385 | 25,300 | $(3,915)$ | 16,465 | 19,900 | $(3,435)$ | 19,002 | 49,900 | $(30,898)$ |
| 662100 | T\&D LINES EXPENSE | 787 | 1,885 | $(1,098)$ | 1,564 | 1,885 | (321) | 956 | 1,885 | (929) |
| 662200 | T\&D LINES LABOR | 154,185 | - | 154,185 | 130,198 | - | 130,198 | 150,943 | - | 150,943 |
| 665300 | MISC T\&D EXPENSES-CURRENT | 21,993 | 24,640 | $(2,647)$ | 34,292 | 24,640 | 9,652 | 14,495 | 29,440 | $(14,945)$ |
| 666000 | T\&D RENTS | 100 | 300 | (200) | 227 | 300 | (73) | 1,002 | 300 | 702 |
| 670000 | OR MN T\&D SUPR \& ENG | 406 | - | 406 | 4,219 | - | 4,219 | 3,314 | - | 3,314 |
| 671200 | OR MN T\&D STRUCT \& IMP-LAB | 1,006 | - | 1,006 | 1,194 | - | 1,194 | 979 | - | 979 |
| 672120 | AMORT DEF EXP RES \& STAND | 80,660 | 15,973 | 64,687 | 75,847 | 10,924 | 64,923 | 8,773 | 10,924 | $(2,151)$ |
| 672200 | AMORT DEF EXP RES \& STAND | 1,253 | - | 1,253 | 680 | - | 680 | 364 | - | 364 |
| 673200 | OR MN T\&D MAINS LAB | 17,949 | - | 17,949 | 22,652 | - | 22,652 | 30,198 | - | 30,198 |
| 675200 | OR MN SERVICES LAB | 13,708 |  | 13,708 | 14,225 |  | 14,225 | 13,379 |  | 13,379 |
| 676200 | OR MN METERS LAB | 6,278 | - | 6,278 | 10,710 | - | 10,710 | 5,789 | - | 5,789 |

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| $\begin{gathered} \text { YEAR-200 } \\ \text { AWW } \end{gathered}$ | Description | $\begin{gathered} 2007 \\ \text { July } \\ \text { Actual } \end{gathered}$ | $\begin{gathered} 2007 \\ \text { July } \\ \text { Budget } \end{gathered}$ | Variance | 2007 August <br> Actual |  | Variance | 2007 September Actual | 2007 <br> September <br> Budget | Variance |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 403000 | DEPRECIATION EXPENSE | 758,142 | 675,348 | 82,794 | 761,410 | 677,542 | 83,868 | 895,739 | 679,431 | 216,308 |
| 403100 | DEPRECIATION EXPENSE-CONTR PROP | $(107,790)$ | - | $(107,790)$ | $(116,806)$ | - | $(116,806)$ | $(113,827)$ | - | $(113,827)$ |
| 404430 | AMORT REG ASSET - AFUDC | 2,719 | - | 2,719 | 2,719 | - | 2,719 | 30,965 | - | 30,965 |
| 406000 | AMORT UT PLT ACQ ADJUST | 1,801 | - | 1,801 | 1,801 |  | 1,801 | 1,801 |  | 1,801 |
| 407000 | AMORT PROPERTY LOSSES | 34,349 | 34,215 | 134 | 34,349 | 34,215 | 134 | 34,349 | 34,215 | 134 |
| 408030 | OTHER GENERAL TAXES | 13,830 | 13,903 | (73) | 105 | 13,903 | $(13,798)$ | 6,968 | 16,703 | $(9,735)$ |
| 408100 | REAL \& PERSON PROP TAXES | 195,020 | 180,000 | 15,020 | 212,152 | 180,000 | 32,152 | 212,152 | 180,000 | 32,152 |
| 408140 | FEDERAL UNEMPLYMNT TXS | - | - | - | 9 | - | 9 | 24 | - | 24 |
| 408160 | FICA | 37,819 | 44,325 | $(6,506)$ | 37,210 | 45,908 | $(8,698)$ | 31,616 | 40,795 | $(9,179)$ |
| 408180 | STATE UNEMPLYMNT TXS | 19 | - | 19 | 8 | - | 8 | 20 | - | 20 |
| 409100 | SIT-CURRENT | 46,905 | 89,177 | $(42,272)$ | 41,974 | 67,541 | $(25,567)$ | 43,135 | 96,429 | $(53,294)$ |
| 409110 | SIT-ADJUST PRIOR YEARS | 98,887 | - | 98,887 | 91,253 | - | 91,253 | 39,042 | - | 39,042 |
| 409150 | FIT-CURRENT | 419,580 | 358,537 | 61,043 | 375,480 | 274,320 | 101,160 | 696,689 | 386,767 | 309,922 |
| 409160 | FIT-ADJUST PRIOR YEARS | - | - | - | - | - |  | 1,494,668 |  | 1,494,668 |
| 410400 | DEF SIT-REG ASSET/LIAB | - | $(35,139)$ | 35,139 | - | $(10,453)$ | 10,453 |  | $(38,497)$ | 38,497 |
| 410600 | DEF SIT-OTHER | (721) | - | (721) | 1,408 | - | 1,408 | $(317,912)$ |  | $(317,912)$ |
| 410700 | DEF FIT-REG ASSET/LIAB | - | 49,299 | $(49,299)$ | - | 162,766 | $(162,766)$ | - | 34,762 | $(34,762)$ |
| 410900 | DEF FIT-OTHER | 65,908 | - | 65,908 | 57,215 |  | 57,215 | $(1,519,447)$ | - | $(1,519,447)$ |
| 412210 | ITC RESTORED-3\% | (638) | - | (638) | (638) |  | (638) | (638) |  | (638) |
| 412220 | ITC RESTORED-4\% | (525) | - | (525) | (525) | - | (525) | (525) | - | (525) |
| 412230 | ITC RESTORED-10\% | $(5,903)$ | $(13,325)$ | 7,422 | $(5,903)$ | $(20,315)$ | 14,412 | $(5,903)$ | 956 | $(6,859)$ |
| 415100 | M\&J REVENUES-OUTSIDE | $(3,414)$ |  | $(3,414)$ | $(26,204)$ |  | $(26,204)$ | $(17,723)$ |  | $(17,723)$ |
| 415100 | M\&J REVENUES-OUTSIDE | $(3,414)$ | - | $(3,414)$ | $(30,642)$ |  | $(30,642)$ | $(17,723)$ |  | $(17,723)$ |
| 416100 | M\&J EXPENSES-OUTSIDE | 22,002 | - | 22,002 | 21,279 |  | 21,279 | 12,165 |  | 12,165 |
| 416110 | M\&J EXPENSES-OUTSIDE | 7,497 | - | 7,497 | 4,520 |  | 4,520 | 5,510 | - | 5,510 |
| 419510 | INT INCOME INSIDE | - | - | - | - | - | - | - | - | - |
| 420100 | AFUDC - EQUITY | $(75,965)$ | $(71,104)$ | $(4,861)$ | $(85,278)$ | $(78,630)$ | $(6,648)$ | $(87,193)$ | $(72,930)$ | $(14,263)$ |
| 420210 | AFUDC - DEBT | $(34,476)$ | $(32,291)$ | $(2,185)$ | $(38,722)$ | $(35,709)$ | $(3,013)$ | $(39,591)$ | $(33,120)$ | $(6,471)$ |
| 425100 | AFUDC UT PLT ACQ ADJUST | (35) | 64 | (99) | (35) | 64 | (99) | (35) | 64 | (99) |
| 425300 | AMORT PREFERRED STOCK EXP | 64 | - | 64 | 64 | - | 64 | 64 | - | 64 |
| 426100 | DONATIONS | 5,375 | 5,780 | (405) | 9,750 | 5,300 | 4,450 | 7,140 | 6,150 | 990 |
| 426160 | OTHER LOBBYING EXPENSES | $(9,601)$ | $(2,535)$ | $(7,066)$ | (935) | $(2,684)$ | 1,749 | $(1,352)$ | $(3,371)$ | 2,019 |
| 426200 | OTHER INCOME DEDUCTIONS | 85 | 500 | (415) | 372 | 1,350 | (978) | 2,476 | 2,202 | 274 |
| 427100 | INTEREST LTD-OUT-REG | 137,713 | - | 137,713 | 137,713 | - | 137,713 | 137,713 | - | 137,713 |
| 427120 | INTEREST LTD-OUT-REG | 126,407 | 471,728 | $(345,321)$ | 126,407 | 471,728 | $(345,321)$ | 126,407 | 471,728 | $(345,321)$ |
| 428000 | AMORT DEBT DISCOUNT \& EXP | 5,955 | 12,217 | $(6,262)$ | 5,990 | 12,217 | $(6,227)$ | 5,953 | 12,217 | $(6,264)$ |
| 431100 | INTEREST ON BANK DEBT | 197,241 | 42,513 | 154,728 | 206,362 | 43,099 | 163,263 | 199,457 | 45,333 | 154,124 |
| 437100 | DIV DEC PREF STK-OUTSIDE | 38,323 | 38,325 | (2) | 38,386 | 38,325 | 61 | 1,088,475 | 38,325 | 1,050,150 |
| 461000 | DOMESTIC SEWER SERV BILLED | - | $(13,182)$ | 13,182 | - | $(12,320)$ | 12,320 | - | $(13,342)$ | 13,342 |
| 461020 | COMMERCIAL SEWER SERV BILLED | - | $(6,945)$ | 6,945 | - | $(6,863)$ | 6,863 | - | $(7,234)$ | 7,234 |
| 461100 | RES SALES BILLED METERED | (2,615,243) | $(2,688,885)$ | 73,642 | $(2,502,781)$ | $(2,702,948)$ | 200,167 | $(2,730,797)$ | $(2,609,829)$ | $(120,968)$ |
| 461110 | RES SALES UNBILL METERED | $(71,109)$ | - | $(71,109)$ | $(114,014)$ | - | $(114,014)$ | 432,133 | - | 432,133 |
| 461200 | COM SALES BILLED METERED | $(1,166,358)$ | $(1,170,708)$ | 4,350 | $(1,217,206)$ | $(1,206,886)$ | $(10,320)$ | $(1,254,110)$ | $(1,207,069)$ | $(47,041)$ |
| 461210 | COM SALES UNBILL METERED | $(108,596)$ | - | $(108,596)$ | $(64,465)$ | - | $(64,465)$ | 73,281 | - | 73,281 |
| 461300 | IND SALES BILLED METERED | $(133,395)$ | $(127,976)$ | $(5,419)$ | $(122,043)$ | $(142,861)$ | 20,818 | $(158,189)$ | $(168,247)$ | 10,058 |
| 461310 | IND SALES UNBILL METERED | 4,982 | - | 4,982 | $(19,758)$ |  | $(19,758)$ | $(2,676)$ | - | $(2,676)$ |
| 461400 | MISC SALES BILLED METERED | - | - | - | $(1,760)$ | - | $(1,760)$ | $(11,637)$ | - | $(11,637)$ |
| 462000 | PRIV FIR PROT SER BILLED | $(91,050)$ | $(86,017)$ | $(5,033)$ | $(92,013)$ | $(86,434)$ | $(5,579)$ | $(95,869)$ | $(86,852)$ | $(9,017)$ |
| 462100 | PRIV FIR PROT SER UNBILL | 4,702 | - | 4,702 | - |  | - | $(8,475)$ | - | $(8,475)$ |
| 462210 | INDUSTRIAL WASTE SERVICE | - | $(1,289)$ | 1,289 | - | $(1,289)$ | 1,289 | - | $(1,289)$ | 1,289 |
| 463000 | PUB FIRE PROT SER BILLED | $(178,043)$ | $(181,369)$ | 3,326 | $(184,080)$ | $(181,682)$ | $(2,398)$ | $(196,161)$ | $(181,995)$ | $(14,166)$ |
| 464200 | PUB AUTH SLS BILLED METRD | $(373,229)$ | $(412,835)$ | 39,606 | $(377,941)$ | $(368,258)$ | $(9,683)$ | $(506,736)$ | $(418,106)$ | $(88,630)$ |
| 464210 | PUB AUTH SLS UNBILL METRD | $(106,009)$ | - | $(106,009)$ | 9,400 |  | 9,400 | $(3,816)$ | - | $(3,816)$ |
| 464230 | PUB AUTH SLS BILLED METRD SEWER | - | - | - | 140 | - | 140 | - | - | - |
| 466000 | SALES FOR RESALE BILLED | $(121,822)$ | $(155,878)$ | 34,056 | 65,702 | $(127,686)$ | 193,388 | $(148,312)$ | $(150,368)$ | 2,056 |
| 466100 | SALES FOR RESALE UNBILL | $(47,376)$ | - | $(47,376)$ | $(172,908)$ | - | $(172,908)$ | $(36,887)$ | - | $(36,887)$ |
| 471100 | RECONNECTION CHARGES | $(49,869)$ | $(17,500)$ | $(32,369)$ | $(61,969)$ | $(17,500)$ | $(44,469)$ | $(73,460)$ | $(17,500)$ | $(55,960)$ |
| 471200 | OTHER MISC SERV REVENUES | $(63,878)$ | $(57,623)$ | $(6,255)$ | $(66,800)$ | $(57,623)$ | $(9,177)$ | $(72,982)$ | $(57,623)$ | $(15,359)$ |
| 472000 | RENTS FROM WATER PROPERTY | $(5,835)$ | $(7,197)$ | 1,362 | $(8,496)$ | $(7,197)$ | $(1,299)$ | $(13,835)$ | $(7,197)$ | $(6,638)$ |
| 474100 | BILL \& COLL SERV FOR OTH | $(81,063)$ | $(75,294)$ | $(5,769)$ | $(79,819)$ | $(75,294)$ | $(4,525)$ | $(81,172)$ | $(75,294)$ | $(5,878)$ |
| 474300 | MISCELLANEOUS | 139 | - | 139 | 55 | - | 55 | (743) | - | (743) |
| 602000 | PURCHASED WATER | 32,362 | 44,650 | $(12,288)$ | 23,244 | 46,700 | $(23,456)$ | 43,275 | 46,200 | $(2,925)$ |
| 603100 | MISCELLANEOUS SS EXPENSES | 2,719 | 2,550 | 169 | 2,754 | 2,650 | 104 | 3,118 | 2,550 | 568 |
| 617100 | OR MN MISC WAT SS PLT MAT | 3,086 | 23,800 | $(20,714)$ | 4,773 | 8,300 | $(3,527)$ | 6,728 | 8,800 | $(2,072)$ |
| 623110 | POWER PURCH FOR PUMP ELEC | 253,852 | 314,457 | $(60,605)$ | 292,373 | 296,478 | $(4,105)$ | 281,079 | 331,533 | $(50,454)$ |
| 626500 | MISC PUMPING EXP ELECTRIC | 1,696 | 200 | 1,496 | $(1,182)$ | 200 | $(1,382)$ | 58 | 200 | (142) |
| 630200 | MISC PUMPING EXP OTHER | 5,834 | - | 5,834 | 4,582 | - | 4,582 | 4,978 | - | 4,978 |
| 641100 | GENERAL CHEMICALS | 129,148 | 149,370 | $(20,222)$ | 183,569 | 158,594 | 24,975 | 166,609 | 149,377 | 17,232 |
| 642100 | GENERAL WT LABOR | 180,069 | - | 180,069 | 107,136 | - | 107,136 | 111,757 | - | 111,757 |
| 642300 | GENERAL WT EXPENSES | 10,962 | 9,700 | 1,262 | 8,715 | 16,150 | $(7,435)$ | 18,628 | 14,100 | 4,528 |
| 643100 | MISC WT EXPENSES-CURRENT | 9,691 | 5,128 | 4,563 | 10,490 | 4,683 | 5,807 | 4,558 | 4,933 | (375) |
| 643300 | WASTE DISPOSAL EXP (CUR) | 13,715 | 16,800 | $(3,085)$ | 6,610 | 5,725 | 885 | 5,545 | 11,800 | $(6,255)$ |
| 643310 | AMORT WASTE DISPOSAL EXP | 8,438 | 8,000 | 438 | 8,438 | 8,000 | 438 | 8,438 | 8,000 | 438 |
| 650000 | OR MN WT SUPR \& ENG | 8,271 | - | 8,271 | 4,585 | - | 4,585 | 7,052 | - | 7,052 |
| 651100 | OR MN WT STRUCT \& IMP MAT | 16,202 | 49,900 | $(33,698)$ | 18,096 | 19,900 | $(1,804)$ | 28,084 | 28,900 | (816) |
| 662100 | T\&D LINES EXPENSE | 874 | 1,885 | $(1,011)$ | 1,274 | 1,885 | (611) | 1,671 | 1,885 | (214) |
| 662200 | T\&D LINES LABOR | 187,257 | - | 187,257 | 142,386 | - | 142,386 | 139,897 | - | 139,897 |
| 665300 | MISC T\&D EXPENSES-CURRENT | 15,347 | 29,115 | $(13,768)$ | 21,863 | 29,315 | $(7,452)$ | 26,582 | 29,165 | $(2,583)$ |
| 666000 | T\&D RENTS | 5,593 | 3,000 | 2,593 | 602 | 2,500 | $(1,898)$ | 790 | 2,500 | $(1,710)$ |
| 670000 | OR MN T\&D SUPR \& ENG | 11,225 | - | 11,225 | 3,288 | - | 3,288 | 1,238 | - | 1,238 |
| 671200 | OR MN T\&D STRUCT \& IMP-LAB | 2,480 | - | 2,480 | 906 | - | 906 | 1,294 | - | 1,294 |
| 672120 | AMORT DEF EXP RES \& STAND | 8,773 | 10,924 | $(2,151)$ | 8,773 | 10,924 | $(2,151)$ | $(125,138)$ | 10,924 | $(136,062)$ |
| 672200 | AMORT DEF EXP RES \& STAND | 2,820 | - | 2,820 | 1,162 | - | 1,162 | 3,593 |  | 3,593 |
| 673200 | OR MN T\&D MAINS LAB | 42,059 | - | 42,059 | 24,132 | - | 24,132 | 24,743 | - | 24,743 |
| 675200 | OR MN SERVICES LAB | 22,504 |  | 22,504 | 14,756 |  | 14,756 | 11,797 |  | 11,797 |
| 676200 | OR MN METERS LAB | $(17,043)$ | - | $(17,043)$ | 11,114 | - | 11 | 3,334 | - | 3,334 |


| YEAR-200 <br> AWW | Description | $2007$ <br> October Actual |  | Variance | 2007 November Actual | 2007 November Budget | Variance | 2007 December Actual | 2007 December Budget | Variance |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 403000 | DEPRECIATION EXPENSE | 766,437 | 691,117 | 75,320 | 776,868 | 693,098 | 83,770 | 701,113 | 707,068 | $(5,955)$ |
| 403100 | DEPRECIATION EXPENSE-CONTR PROP | $(108,845)$ | - | $(108,845)$ | $(364,125)$ | - | $(364,125)$ | $(146,561)$ | - | $(146,561)$ |
| 404430 | AMORT REG ASSET - AFUDC | 5,857 | - | 5,857 | 5,857 | - | 5,857 | 5,857 | - | 5,857 |
| 406000 | AMORT UT PLT ACQ ADJUST | 1,801 | - | 1,801 | 1,801 | - | 1,801 | 1,801 | - | 1,801 |
| 407000 | AMORT PROPERTY LOSSES | 34,349 | 34,215 | 134 | 34,349 | 34,215 | 134 | 34,349 | 34,215 | 134 |
| 408030 | OTHER GENERAL TAXES | 12,010 | 13,903 | $(1,893)$ | 6,968 | 13,903 | $(6,935)$ | 6,968 | 13,903 | $(6,935)$ |
| 408100 | REAL \& PERSON PROP TAXES | 241,503 | 180,000 | 61,503 | 241,503 | 180,000 | 61,503 | 241,503 | 180,000 | 61,503 |
| 408140 | FEDERAL UNEMPLYMNT TXS | 25 | - | 25 | (7) | - | (7) | 1,795 | - | 1,795 |
| 408160 | FICA | 37,434 | 45,908 | $(8,474)$ | 33,724 | 45,654 | $(11,930)$ | 37,659 | 43,843 | $(6,184)$ |
| 408180 | STATE UNEMPLYMNT TXS | 22 | - | 22 | 3 | - | 3 | 1,614 | - | 1,614 |
| 409100 | SIT-CURRENT | 70,530 | 78,542 | $(8,012)$ | 15,133 | 21,606 | $(6,473)$ | 89,652 | 80,886 | 8,766 |
| 409110 | SIT-ADJUST PRIOR YEARS | $(785,097)$ | - | $(785,097)$ | $(38,961)$ | - | $(38,961)$ | 705,856 | - | 705,856 |
| 409150 | FIT-CURRENT | 1,164,824 | 317,140 | 847,684 | 180,550 | 95,522 | 85,028 | $(730,939)$ | 326,263 | $(1,057,202)$ |
| 409160 | FIT-ADJUST PRIOR YEARS | - | - |  | 5,040 |  | 5,040 | - |  | - |
| 410400 | DEF SIT-REG ASSET/LIAB | - | $(31,513)$ | 31,513 | - | 8,894 | $(8,894)$ | 200,557 | $(35,331)$ | 235,888 |
| 410600 | DEF SIT-OTHER | $(10,480)$ | - | $(10,480)$ | $(10,480)$ | - | $(10,480)$ | 32,444 | - | 32,444 |
| 410700 | DEF FIT-REG ASSET/LIAB | - | 37,984 | $(37,984)$ | - | 131,146 | $(131,146)$ | 232,212 | 17,602 | 214,610 |
| 410900 | DEF FIT-OTHER | 25,032 | - | 25,032 | 35,531 | - | 35,531 | $(231,628)$ | - | $(231,628)$ |
| 412210 | ITC RESTORED-3\% | (638) | - | (638) | (638) |  | (638) | (638) | - | (638) |
| 412220 | ITC RESTORED-4\% | (525) | - | (525) | (525) | - | (525) | (525) | - | (525) |
| 412230 | ITC RESTORED-10\% | $(5,903)$ | $(10,785)$ | 4,882 | $(5,903)$ | $(4,012)$ | $(1,891)$ | $(5,943)$ | $(10,271)$ | 4,328 |
| 415100 | M\&J REVENUES-OUTSIDE | $(27,300)$ |  | $(27,300)$ | $(18,141)$ |  | $(18,141)$ | $(14,785)$ |  | $(14,785)$ |
| 415100 | M\&J REVENUES-OUTSIDE | $(31,477)$ | - | $(31,477)$ | $(19,049)$ | - | $(19,049)$ | $(14,785)$ | - | $(14,785)$ |
| 416100 | M\&J EXPENSES-OUTSIDE | 15,447 | - | 15,447 | 882 |  | 882 | 6,999 |  | 6,999 |
| 416110 | M\&J EXPENSES-OUTSIDE | 4,299 | - | 4,299 | 2,377 |  | 2,377 | 7,133 |  | 7,133 |
| 419510 | INT INCOME INSIDE | - | - | - | - | - |  | - | - | - |
| 420100 | AFUDC - EQUITY | $(86,186)$ | $(63,899)$ | $(22,287)$ | $(82,066)$ | $(65,591)$ | $(16,475)$ | $(107,776)$ | $(56,815)$ | $(50,961)$ |
| 420210 | AFUDC - DEBT | $(39,134)$ | $(29,019)$ | $(10,115)$ | $(37,297)$ | $(29,787)$ | $(7,510)$ | $(50,643)$ | $(25,802)$ | $(24,841)$ |
| 425100 | AFUDC UT PLT ACQ ADJUST | (35) | 64 | (99) | (35) | 64 | (99) | (35) | 64 | (99) |
| 425300 | AMORT PREFERRED STOCK EXP | 64 | - | 64 | 64 | - | 64 | 64 | - | 64 |
| 426100 | DONATIONS | 6,280 | 1,300 | 4,980 | 4,341 | 3,180 | 1,161 | 12,385 | 1,300 | 11,085 |
| 426160 | OTHER LOBBYING EXPENSES | 4,981 | (787) | 5,768 | 3,915 | $(1,445)$ | 5,360 | $(15,931)$ | (686) | $(15,245)$ |
| 426200 | OTHER INCOME DEDUCTIONS | 3,050 | 650 | 2,400 | 2,581 | 400 | 2,181 | 30,100 | 400 | 29,700 |
| 427100 | INTEREST LTD-OUT-REG | 137,713 | - | 137,713 | 126,978 | - | 126,978 | 126,978 | - | 126,978 |
| 427120 | INTEREST LTD-OUT-REG | 180,385 | 515,828 | $(335,443)$ | 329,320 | 515,828 | $(186,508)$ | 329,216 | 515,828 | $(186,612)$ |
| 428000 | AMORT DEBT DISCOUNT \& EXP | 5,953 | 12,217 | $(6,264)$ | 7,197 | 12,217 | $(5,020)$ | 7,255 | 12,217 | $(4,962)$ |
| 431100 | INTEREST ON BANK DEBT | 152,370 | 24,989 | 127,381 | 45,724 | 1,387 | 44,337 | 63,304 | 6,697 | 56,607 |
| 437100 | DIV DEC PREF STK-OUTSIDE | 38,323 | 38,325 | (2) | 38,323 | 38,325 | (2) | 1,950,540 | 38,325 | 1,912,215 |
| 461000 | DOMESTIC SEWER SERV BILLED | - | $(11,699)$ | 11,699 | - | $(11,898)$ | 11,898 |  | $(13,054)$ | 13,054 |
| 461020 | COMMERCIAL SEWER SERV BILLED | - | $(7,163)$ | 7,163 | - | $(6,294)$ | 6,294 | - | $(5,648)$ | 5,648 |
| 461100 | RES SALES BILLED METERED | $(2,297,712)$ | $(2,507,020)$ | 209,308 | $(2,268,364)$ | $(2,289,667)$ | 21,303 | $(2,139,806)$ | $(2,436,833)$ | 297,027 |
| 461110 | RES SALES UNBILL METERED | $(294,534)$ | - | $(294,534)$ | 259,586 |  | 259,586 | $(145,876)$ | - | $(145,876)$ |
| 461200 | COM SALES BILLED METERED | $(1,091,016)$ | $(1,175,527)$ | 84,511 | $(1,060,103)$ | $(1,060,060)$ | (43) | $(896,670)$ | $(1,089,471)$ | 192,801 |
| 461210 | COM SALES UNBILL METERED | $(84,623)$ | - | $(84,623)$ | 199,164 | - | 199,164 | $(14,780)$ | - | $(14,780)$ |
| 461300 | IND SALES BILLED METERED | $(131,473)$ | $(149,531)$ | 18,058 | $(115,767)$ | $(129,767)$ | 14,000 | $(114,366)$ | $(144,289)$ | 29,923 |
| 461310 | IND SALES UNBILL METERED | $(8,242)$ | - | $(8,242)$ | 18,040 | - | 18,040 | $(13,556)$ | - | $(13,556)$ |
| 461400 | MISC SALES BILLED METERED | (741) | - | (741) | $(1,274)$ | - | $(1,274)$ | (611) | - | (611) |
| 462000 | PRIV FIR PROT SER BILLED | $(92,145)$ | $(87,269)$ | $(4,876)$ | $(96,831)$ | $(87,687)$ | $(9,144)$ | $(106,429)$ | $(100,152)$ | $(6,277)$ |
| 462100 | PRIV FIR PROT SER UNBILL | 7,655 | - | 7,655 | 413 | - | 413 | 490 | - | 490 |
| 462210 | INDUSTRIAL WASTE SERVICE | - | $(1,547)$ | 1,547 | - | $(1,547)$ | 1,547 | - | $(1,461)$ | 1,461 |
| 463000 | PUB FIRE PROT SER BILLED | $(171,999)$ | $(182,308)$ | 10,309 | $(184,706)$ | $(182,620)$ | $(2,086)$ | $(192,287)$ | $(209,187)$ | 16,900 |
| 464200 | PUB AUTH SLS BILLED METRD | $(377,448)$ | $(402,731)$ | 25,283 | $(348,337)$ | $(335,833)$ | $(12,504)$ | $(274,602)$ | $(379,253)$ | 104,651 |
| 464210 | PUB AUTH SLS UNBILL METRD | $(28,138)$ | - | $(28,138)$ | 94,251 | - | 94,251 | $(110,217)$ | - | $(110,217)$ |
| 464230 | PUB AUTH SLS BILLED METRD SEWER | - | - | - | - | - | - | - | - | - |
| 466000 | SALES FOR RESALE BILLED | $(115,153)$ | $(118,209)$ | 3,056 | $(102,181)$ | $(94,292)$ | $(7,889)$ | $(109,565)$ | $(102,631)$ | $(6,934)$ |
| 466100 | SALES FOR RESALE UNBILL | $(17,265)$ | - | $(17,265)$ | $(3,393)$ | - | $(3,393)$ | $(3,857)$ | - | $(3,857)$ |
| 471100 | RECONNECTION CHARGES | $(68,439)$ | $(17,500)$ | $(50,939)$ | $(54,762)$ | $(17,500)$ | $(37,262)$ | $(51,051)$ | $(17,500)$ | $(33,551)$ |
| 471200 | OTHER MISC SERV REVENUES | $(46,278)$ | $(57,623)$ | 11,345 | $(47,557)$ | $(57,623)$ | 10,066 | $(41,594)$ | $(57,623)$ | 16,029 |
| 472000 | RENTS FROM WATER PROPERTY | $(9,835)$ | $(7,197)$ | $(2,638)$ | $(7,835)$ | $(7,197)$ | (638) | $(7,835)$ | $(7,187)$ | (648) |
| 474100 | BILL \& COLL SERV FOR OTH | $(80,403)$ | $(75,294)$ | $(5,109)$ | $(88,040)$ | $(75,294)$ | $(12,746)$ | $(84,611)$ | $(75,294)$ | $(9,317)$ |
| 474300 | MISCELLANEOUS | (855) | - | (855) | $(2,667)$ | - | $(2,667)$ | (701) | - | (701) |
| 602000 | PURCHASED WATER | 22,536 | 39,550 | $(17,014)$ | 56,990 | 37,300 | 19,690 | $(3,085)$ | 40,500 | $(43,585)$ |
| 603100 | MISCELLANEOUS SS EXPENSES | 3,298 | 2,600 | 698 | 2,791 | 2,750 | 41 | 1,791 | 2,600 | (809) |
| 617100 | OR MN MISC WAT SS PLT MAT | 6,191 | 8,300 | $(2,109)$ | 20,214 | 8,800 | 11,414 | 22,174 | 8,300 | 13,874 |
| 623110 | POWER PURCH FOR PUMP ELEC | 323,026 | 287,615 | 35,411 | 188,180 | 256,587 | $(68,407)$ | 209,197 | 226,564 | $(17,367)$ |
| 626500 | MISC PUMPING EXP ELECTRIC | 531 | 200 | 331 | (555) | 200 | (755) | 185 | 1,500 | $(1,315)$ |
| 630200 | MISC PUMPING EXP OTHER | 4,978 | - | 4,978 | 4,742 | - | 4,742 | 7,949 | - | 7,949 |
| 641100 | GENERAL CHEMICALS | 222,267 | 132,784 | 89,483 | 106,852 | 123,624 | $(16,772)$ | 137,584 | 123,626 | 13,958 |
| 642100 | GENERAL WT LABOR | 114,392 | - | 114,392 | 110,989 | - | 110,989 | 201,906 | - | 201,906 |
| 642300 | GENERAL WT EXPENSES | 9,299 | 9,250 | 49 | 8,369 | 10,650 | $(2,281)$ | 16,753 | 14,350 | 2,403 |
| 643100 | MISC WT EXPENSES-CURRENT | 4,841 | 4,428 | 413 | 3,575 | 4,994 | $(1,419)$ | 4,297 | 4,961 | (664) |
| 643300 | WASTE DISPOSAL EXP (CUR) | (736) | 5,725 | $(6,461)$ | 8,079 | 5,725 | 2,354 | 7,536 | 11,800 | $(4,264)$ |
| 643310 | AMORT WASTE DISPOSAL EXP | 8,438 | 8,000 | 438 | 8,438 | 8,000 | 438 | 8,438 | 8,000 | 438 |
| 650000 | OR MN WT SUPR \& ENG | 8,112 | - | 8,112 | 6,771 | - | 6,771 | 7,965 | - | 7,965 |
| 651100 | OR MN WT STRUCT \& IMP MAT | 28,146 | 23,300 | 4,846 | 30,441 | 19,900 | 10,541 | 21,519 | 25,400 | $(3,881)$ |
| 662100 | T\&D LINES EXPENSE | 2,004 | 1,885 | 119 | 1,601 | 1,885 | (284) | 1,785 | 1,885 | (100) |
| 662200 | T\&D LINES LABOR | 139,813 | - | 139,813 | 136,288 | - | 136,288 | 206,332 | - | 206,332 |
| 665300 | MISC T\&D EXPENSES-CURRENT | 20,733 | 24,265 | $(3,532)$ | 22,168 | 26,715 | $(4,547)$ | 7,328 | 26,415 | $(19,087)$ |
| 666000 | T\&D RENTS | 2,470 | 3,000 | (530) | 1,995 | 2,500 | (505) | 3,146 | 2,500 | 646 |
| 670000 | OR MN T\&D SUPR \& ENG | 1,125 | - | 1,125 | 1,029 | - | 1,029 | 2,190 | - | 2,190 |
| 671200 | OR MN T\&D STRUCT \& IMP-LAB | 1,115 | - | 1,115 | 922 | - | 922 | 1,428 | - | 1,428 |
| 672120 | AMORT DEF EXP RES \& STAND | 8,773 | 13,924 | $(5,151)$ | 8,773 | 13,924 | $(5,151)$ | 8,773 | 13,924 | $(5,151)$ |
| 672200 | AMORT DEF EXP RES \& STAND | 1,018 | - | 1,018 | 1,949 | - | 1,949 | 1,268 | - | 1,268 |
| 673200 | OR MN T\&D MAINS LAB | 38,948 | - | 38,948 | 31,563 | - | 31,563 | 41,977 | - | 41,977 |
| 675200 | OR MN SERVICES LAB | 15,938 |  | 15,938 | 11,658 |  | 11,658 | 18,986 |  | 18,986 |
| 676200 | OR MN METERS LAB | 11,111 | - | 11,111 | 7,379 | - | 7,379 | $(19,259)$ | - | $(19,259)$ |


| $\begin{array}{r} \text { YEAR-20 } \\ \text { AWW } \end{array}$ | Description | 2007 January Actual | 2007 January <br> Budget | Variance | $\begin{gathered} 2007 \\ \text { February } \\ \text { Actual } \\ \hline \end{gathered}$ | 2007 <br> February <br> Budget | Variance | $2007$ <br> March <br> Actual | 2007 <br> March <br> Budget | Variance |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 676400 | OR MN METER INSTALL LAB | 6,073 | - | 6,161 | 3,957 | - | 3,957 | 3,766 | - | 3,766 |
| 678100 | OR MN OTHER T\&D PLANT MAT | 20,407 | 44,750 | $(24,343)$ | 17,613 | 44,750 | $(27,137)$ | 24,965 | 44,750 | $(19,785)$ |
| 903100 | CONTRACT \& ORDERS EXPENS | 1,430 | - | 1,430 | 2,268 | - | 2,268 | $(3,306)$ | - | $(3,306)$ |
| 903200 | CONTRACTS \& ORDERS LABOR | 68,724 | - | 68,724 | 85,823 | - | 85,823 | 52,252 | - | 52,252 |
| 903300 | COLLECTING EXPENSES | 15,695 | 17,433 | $(1,738)$ | 24,703 | 17,433 | 7,270 | 9,520 | 17,433 | $(7,913)$ |
| 903520 | BILLING \& ACCTNG OTH EXP | 58,749 | 49,000 | 9,749 | 45,736 | 49,000 | $(3,264)$ | 50,887 | 49,000 | 1,887 |
| 904000 | UNCOLLECTIBLE ACCOUNTS | 4,355 | 32,164 | $(27,809)$ | 51,147 | 30,325 | 20,822 | 34,539 | 31,439 | 3,100 |
| 905100 | MISC CUST ACCTNG EXPENSES | 667 | 320 | 347 | 484 | 320 | 164 | 1,568 | 320 | 1,248 |
| 920000 | ADM \& GENERAL SALARIES | 74,305 | 483,509 | $(409,204)$ | $(109,778)$ | 422,971 | $(532,749)$ | 86,839 | 460,981 | $(374,142)$ |
| 920500 | INCENTIVE PLAN EXPENSE | 17,468 | 20,844 | $(3,376)$ | 27,351 | 18,126 | 9,225 | $(19,379)$ | 19,936 | $(39,315)$ |
| 921100 | EXPENSES OF EMPLOYEES | 12,763 | 5,165 | 7,598 | (612) | 4,595 | $(5,207)$ | 3,935 | 10,930 | $(6,995)$ |
| 921130 | DUES FOR CLUBS-TAXABLE | 5,582 | 9,292 | $(3,710)$ | 989 | 3,977 | $(2,988)$ | 2,474 | 957 | 1,517 |
| 921200 | MISC OFFICE EXP SUP | 36,166 | 42,950 | $(6,784)$ | 50,022 | 69,257 | $(19,235)$ | 40,287 | 40,417 | (130) |
| 921220 | MISC OFFICE EXPENSES | 2,851 | 1,608 | 1,243 | 3,135 | 2,108 | 1,027 | 1,008 | 1,908 | (900) |
| 921220 | MISC OFFICE EXPENSES | 2,851 | 1,608 | 1,243 | 3,135 | 2,108 | 1,027 | 1,008 | 1,908 | (900) |
| 923100 | SERVICE COMPANY CHARGES | 597,095 | 613,174 | $(16,079)$ | 649,248 | 564,011 | 85,237 | 550,740 | 608,267 | $(57,527)$ |
| 923200 | AUDITING SERVICES | 4,537 | 6,000 | $(1,463)$ | 4,647 | 6,000 | $(1,353)$ | 5,050 | 6,000 | (950) |
| 923300 | LEGAL SERVICES | 20,035 | 6,250 | 13,785 | 13,252 | 6,250 | 7,002 | $(3,860)$ | 6,250 | $(10,110)$ |
| 923500 | OTHER SERVICES-CURRENT | 53,638 | 52,608 | 1,030 | 36,262 | 47,708 | $(11,446)$ | 46,659 | 42,958 | 3,701 |
| 924000 | PROPERTY INSURANCE | 8,568 | 3,000 | 5,568 | 12,104 | 3,000 | 9,104 | 10,880 | 3,000 | 7,880 |
| 925110 | WORKMENS COMP PREMIUM EXP | 13,244 | 9,822 | 3,422 | 11,414 | 9,822 | 1,592 | 11,376 | 9,822 | 1,554 |
| 925300 | INJURIES \& DAMAGES EXP | 280 | 1,500 | $(1,220)$ | 400 | 1,500 | $(1,100)$ | - | 1,500 | $(1,500)$ |
| 925400 | GENERAL LIABILITY | 30,148 | 52,250 | $(22,102)$ | 30,377 | 52,250 | $(21,873)$ | $(5,051)$ | 52,250 | $(57,301)$ |
| 926100 | ACCRUED OPEB EXPENSE | 42,365 | 40,463 | 1,902 | 59,124 | 40,463 | 18,661 | 43,762 | 40,463 | 3,299 |
| 926110 | GROUP INSURANCE PREM EXP | 98,272 | 97,358 | 914 | 73,488 | 97,358 | $(23,870)$ | 134,475 | 97,358 | 37,117 |
| 926200 | OTHER WELFARE EXPENSES | 10,358 | 10,600 | (242) | 14,873 | 10,500 | 4,373 | 2,950 | 8,100 | $(5,150)$ |
| 926250 | 401-K CONTRIBUTIONS EXPENSE | 7,041 | 4,257 | 2,784 | 6,036 | 3,907 | 2,129 | 7,546 | 4,249 | 3,297 |
| 926400 | PENSION PLAN EXPENSE | 40,060 | 37,977 | 2,083 | 63,328 | 37,977 | 25,351 | 43,679 | 37,977 | 5,702 |
| 926600 | OTHER PENSION PLAN EXP | 4,430 | 3,541 | 889 | 8,193 | 3,470 | 4,723 | 4,672 | 3,518 | 1,154 |
| 928100 | PENSIONS CAP (C \& R) | 30,086 | 30,091 | (5) | 30,086 | 30,091 | (5) | 30,086 | 30,091 | (5) |
| 928300 | AMORT OTHER REGULATRY EXP | - | - | - | - | - | - | - | - | - |
| 930210 | MISC GENERAL EXP-CURRENT | 30,070 | 26,484 | 3,586 | 249,141 | 46,251 | 202,890 | 11,128 | 50,201 | $(39,073)$ |
| 930230 | MISC GENERAL EXP-CURRENT | 2,156 | 2,300 | (144) | 3,012 | 2,300 | 712 | 2,584 | 2,300 | 284 |
| 930260 | MEALS \& TRAVEL EXPENSES-TAXA | 1,555 | 1,490 | 65 | 1,305 | 3,590 | $(2,285)$ | 1,097 | 2,756 | $(1,659)$ |
| 930600 | TRANSPORTATION EXPENSES | 28,495 | 57,720 | $(29,225)$ | 39,619 | 69,720 | $(30,101)$ | 19,039 | 57,720 | $(38,681)$ |
| 930880 | MISC GEN EXP-COMPANY DUES | 497 | 265 | 232 | 2,539 | 15 | 2,524 | 25,448 | 32,315 | $(6,867)$ |
| 930890 | MISC GEN EXP-OTHER | 3,108 | 5,700 | $(2,592)$ | - | 500 | (500) | 70 | 2,500 | $(2,430)$ |
| 931000 | ADM \& GENERAL RENTS | 4,925 | 2,700 | 2,225 | 557 | 2,200 | $(1,643)$ | 1,239 | 2,200 | (961) |
| 932100 | OR MN A\&G STRUC \& IMP MAT | 1,586 | 3,333 | $(1,747)$ | 1,586 | 3,333 | $(1,747)$ | 1,586 | 3,333 | $(1,747)$ |
| 932700 | OR MN A\&G MISC PROPTY MAT | 3,843 | 19,370 | $(15,527)$ | 18,138 | 7,170 | 10,968 | (85) | 5,370 | $(5,455)$ |


| $\begin{array}{r} \text { YEAR-20 } \\ \text { AWW } \end{array}$ | Description | $\begin{gathered} 2007 \\ \text { April } \\ \text { Actual } \end{gathered}$ |  | Variance | $\begin{gathered} 2007 \\ \text { May } \\ \text { Actual } \end{gathered}$ |  | Variance | $\begin{gathered} \hline 2007 \\ \text { June } \\ \text { Actual } \end{gathered}$ | $\begin{gathered} \hline 2007 \\ \text { June } \\ \text { Budget } \end{gathered}$ | Variance |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 676400 | OR MN METER INSTALL LAB | 2,177 | - | 2,177 | 9,348 | - | 9,348 | 8,418 | - | 8,418 |
| 678100 | OR MN OTHER T\&D PLANT MAT | 46,286 | 44,750 | 1,536 | 63,128 | 44,750 | 18,378 | $(7,417)$ | 59,750 | $(67,167)$ |
| 903100 | CONTRACT \& ORDERS EXPENS | 1,944 | - | 1,944 | 833 | - | 833 | $(2,126)$ | - | $(2,126)$ |
| 903200 | CONTRACTS \& ORDERS LABOR | 55,985 | - | 55,985 | 57,254 | - | 57,254 | 55,081 | - | 55,081 |
| 903300 | COLLECTING EXPENSES | 16,561 | 17,433 | (872) | 17,826 | 17,433 | 393 | 26,319 | 17,433 | 8,886 |
| 903520 | BILLING \& ACCTNG OTH EXP | 44,527 | 49,000 | $(4,473)$ | 60,802 | 49,000 | 11,802 | 44,332 | 49,000 | $(4,668)$ |
| 904000 | UNCOLLECTIBLE ACCOUNTS | 16,642 | 31,901 | $(15,259)$ | 59,905 | 33,821 | 26,084 | 156,981 | 42,445 | 114,536 |
| 905100 | MISC CUST ACCTNG EXPENSES | (75) | 320 | (395) | $(1,444)$ | 320 | $(1,764)$ | 2,179 | 320 | 1,859 |
| 920000 | ADM \& GENERAL SALARIES | 76,369 | 451,874 | $(375,505)$ | 112,777 | 491,146 | $(378,369)$ | 75,418 | 471,210 | $(395,792)$ |
| 920500 | INCENTIVE PLAN EXPENSE | 27,084 | 19,769 | 7,315 | 21,092 | 21,647 | (555) | 28,324 | 20,711 | 7,613 |
| 921100 | EXPENSES OF EMPLOYEES | 2,110 | 11,905 | $(9,795)$ | 12,969 | 9,985 | 2,984 | 7,033 | 7,235 | (202) |
| 921130 | DUES FOR CLUBS-TAXABLE | 825 | 2,217 | $(1,392)$ | 45 | 2,652 | $(2,607)$ | 410 | 1,277 | (867) |
| 921200 | MISC OFFICE EXP SUP | 47,767 | 41,347 | 6,420 | 28,113 | 38,812 | $(10,699)$ | 25,437 | 35,681 | $(10,244)$ |
| 921220 | MISC OFFICE EXPENSES | 1,580 | 1,608 | (28) | 2,932 | 1,608 | 1,324 | 1,453 | 1,608 | (155) |
| 921220 | MISC OFFICE EXPENSES | 1,580 | 1,608 | (28) | 2,932 | 1,608 | 1,324 | 1,453 | 1,608 | (155) |
| 923100 | SERVICE COMPANY CHARGES | 615,737 | 595,259 | 20,478 | 705,137 | 594,030 | 111,107 | 618,602 | 581,106 | 37,496 |
| 923200 | AUDITING SERVICES | 4,647 | 6,000 | $(1,353)$ | 7,424 | 6,000 | 1,424 | 18,391 | 6,000 | 12,391 |
| 923300 | LEGAL SERVICES | 18,191 | 6,250 | 11,941 | $(7,676)$ | 6,250 | $(13,926)$ | 8,250 | 6,250 | 2,000 |
| 923500 | OTHER SERVICES-CURRENT | 39,074 | 60,016 | $(20,942)$ | 36,077 | 68,151 | $(32,074)$ | 45,042 | 57,451 | $(12,409)$ |
| 924000 | PROPERTY INSURANCE | 7,209 | 3,000 | 4,209 | 9,653 | 3,000 | 6,653 | 9,843 | 3,000 | 6,843 |
| 925110 | WORKMENS COMP PREMIUM EXP | 12,300 | 9,822 | 2,478 | 12,532 | 9,822 | 2,710 | 12,626 | 9,822 | 2,804 |
| 925300 | INJURIES \& DAMAGES EXP | - | 1,500 | $(1,500)$ | (794) | 1,500 | $(2,294)$ | - | 1,500 | $(1,500)$ |
| 925400 | GENERAL LIABILITY | 29,033 | 52,250 | $(23,217)$ | 25,321 | 52,250 | $(26,929)$ | 13,782 | 52,250 | $(38,468)$ |
| 926100 | ACCRUED OPEB EXPENSE | 51,807 | 40,463 | 11,344 | 51,761 | 40,463 | 11,298 | 51,987 | 40,463 | 11,524 |
| 926110 | GROUP INSURANCE PREM EXP | 120,052 | 97,358 | 22,694 | 23,276 | 97,358 | $(74,082)$ | 98,940 | 97,358 | 1,582 |
| 926200 | OTHER WELFARE EXPENSES | 2,975 | 4,950 | $(1,975)$ | 821 | 4,900 | $(4,079)$ | 4,529 | 6,400 | $(1,871)$ |
| 926250 | 401-K CONTRIBUTIONS EXPENSE | 7,120 | 4,222 | 2,898 | 8,000 | 4,575 | 3,425 | 7,484 | 4,396 | 3,088 |
| 926400 | PENSION PLAN EXPENSE | 53,945 | 37,977 | 15,968 | 52,648 | 37,977 | 14,671 | 52,860 | 37,977 | 14,883 |
| 926600 | OTHER PENSION PLAN EXP | 4,563 | 3,515 | 1,048 | 8,152 | 3,564 | 4,588 | 7,215 | 3,539 | 3,676 |
| 928100 | PENSIONS CAP ( $C$ \& R) | 30,086 | 30,091 | (5) | 30,086 | 30,091 | (5) | 30,086 | 30,091 | (5) |
| 928300 | AMORT OTHER REGULATRY EXP | - | - | - | - | - | - | - | - | - |
| 930210 | MISC GENERAL EXP-CURRENT | 45,011 | 31,451 | 13,560 | $(196,496)$ | 64,501 | $(260,997)$ | 68,284 | 41,401 | 26,883 |
| 930230 | MISC GENERAL EXP-CURRENT | 2,584 | 2,300 | 284 | 6,247 | 8,300 | $(2,053)$ | 3,446 | 2,300 | 1,146 |
| 930260 | MEALS \& TRAVEL EXPENSES-TAXA | 704 | 1,540 | (836) | 1,997 | 2,040 | (43) | 1,147 | 1,956 | (809) |
| 930600 | TRANSPORTATION EXPENSES | 29,773 | 68,220 | $(38,447)$ | 64,176 | 57,720 | 6,456 | 37,747 | 57,720 | $(19,973)$ |
| 930880 | MISC GEN EXP-COMPANY DUES | 1,982 | 265 | 1,717 | 2,089 | 15 | 2,074 | 2,109 | 265 | 1,844 |
| 930890 | MISC GEN EXP-OTHER | 5,154 | 10,000 | $(4,846)$ | 6,344 | 4,750 | 1,594 | 4,263 | 5,100 | (837) |
| 931000 | ADM \& GENERAL RENTS | 5,439 | 2,700 | 2,739 | 553 | 2,200 | $(1,647)$ | 1,193 | 2,700 | $(1,507)$ |
| 932100 | OR MN A\&G STRUC \& IMP MAT | 1,586 | 3,333 | $(1,747)$ | 1,586 | 3,333 | $(1,747)$ | 1,264 | 3,333 | $(2,069)$ |
| 932700 | OR MN A\&G MISC PROPTY MAT | 9,777 | 16,370 | $(6,593)$ | 12,521 | 4,870 | 7,651 | 5,458 | 18,370 | $(12,912)$ |


| YEAR-2007 | Description | $\begin{gathered} 2007 \\ \text { July } \\ \text { Actual } \end{gathered}$ | $\begin{gathered} 2007 \\ \text { July } \\ \text { Budget } \end{gathered}$ | Variance | 2007 August Actual |  | Variance | 2007 September Actual | 2007 September Budget | Variance |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 676400 | OR MN METER INSTALL LAB | 22,441 | - | 22,441 | 9,657 | - | 9,657 | 7,559 | - | 7,559 |
| 678100 | OR MN OTHER T\&D PLANT MAT | 32,527 | 59,750 | $(27,223)$ | 15,068 | 44,750 | $(29,682)$ | 38,820 | 59,750 | $(20,930)$ |
| 903100 | CONTRACT \& ORDERS EXPENS | 468 | - | 468 | 1,126 | - | 1,126 | $(1,797)$ | - | $(1,797)$ |
| 903200 | CONTRACTS \& ORDERS LABOR | 87,092 | - | 87,092 | 63,884 | - | 63,884 | 62,008 | - | 62,008 |
| 903300 | COLLECTING EXPENSES | 10,886 | 17,433 | $(6,547)$ | 17,516 | 17,433 | 83 | 31,353 | 17,433 | 13,920 |
| 903520 | BILLING \& ACCTNG OTH EXP | 50,112 | 49,000 | 1,112 | 57,770 | 49,000 | 8,770 | 46,259 | 49,000 | $(2,741)$ |
| 904000 | UNCOLLECTIBLE ACCOUNTS | 21,515 | 42,445 | $(20,930)$ | $(28,418)$ | 42,378 | $(70,796)$ | 14,739 | 42,422 | $(27,683)$ |
| 905100 | MISC CUST ACCTNG EXPENSES | 4,135 | 1,100 | 3,035 | 5,355 | 1,100 | 4,255 | 1,659 | 1,100 | 559 |
| 920000 | ADM \& GENERAL SALARIES | $(64,328)$ | 471,210 | $(535,538)$ | 113,343 | 487,897 | $(374,554)$ | 50,288 | 433,766 | $(383,478)$ |
| 920500 | INCENTIVE PLAN EXPENSE | 25,383 | 20,711 | 4,672 | 20,862 | 21,647 | (785) | 24,879 | 18,908 | 5,971 |
| 921100 | EXPENSES OF EMPLOYEES | 24,867 | 7,235 | 17,632 | 17,137 | 8,505 | 8,632 | 15,000 | 6,180 | 8,820 |
| 921130 | DUES FOR CLUBS-TAXABLE | 700 | 1,277 | (577) | 265 | 977 | (712) | 715 | 2,522 | $(1,807)$ |
| 921200 | MISC OFFICE EXP SUP | 45,679 | 35,681 | 9,998 | 35,311 | 39,032 | $(3,721)$ | 20,678 | 34,885 | $(14,207)$ |
| 921220 | MISC OFFICE EXPENSES | $(1,692)$ | 320 | $(2,012)$ | 187 | 320 | (133) | 1,087 | 320 | 767 |
| 921220 | MISC OFFICE EXPENSES | $(1,456)$ | 1,928 | $(3,384)$ | 1,653 | 1,828 | (175) | 2,944 | 2,128 | 816 |
| 923100 | SERVICE COMPANY CHARGES | 654,085 | 581,106 | 72,979 | 626,996 | 577,459 | 49,537 | 590,507 | 555,644 | 34,863 |
| 923200 | AUDITING SERVICES | 15,448 | 6,000 | 9,448 | 13,542 | 6,000 | 7,542 | 5,620 | 6,000 | (380) |
| 923300 | LEGAL SERVICES | 1,419 | 6,250 | $(4,831)$ | 5,436 | 6,250 | (814) | (254) | 6,250 | $(6,504)$ |
| 923500 | OTHER SERVICES-CURRENT | 78,740 | 57,451 | 21,289 | 32,984 | 49,751 | $(16,767)$ | 33,802 | 52,911 | $(19,109)$ |
| 924000 | PROPERTY INSURANCE | 9,843 | 3,000 | 6,843 | 9,843 | 3,000 | 6,843 | 10,051 | 3,000 | 7,051 |
| 925110 | WORKMENS COMP PREMIUM EXP | 11,767 | 9,822 | 1,945 | 12,321 | 9,822 | 2,499 | 12,485 | 9,822 | 2,663 |
| 925300 | INJURIES \& DAMAGES EXP | - | 1,500 | $(1,500)$ | (400) | 1,500 | $(1,900)$ | - | 1,500 | $(1,500)$ |
| 925400 | GENERAL LIABILITY | 29,345 | 52,250 | $(22,905)$ | 29,345 | 52,250 | $(22,905)$ | 31,564 | 52,250 | $(20,686)$ |
| 926100 | ACCRUED OPEB EXPENSE | 49,336 | 40,463 | 8,873 | 51,787 | 40,463 | 11,324 | 52,156 | 40,463 | 11,693 |
| 926110 | GROUP INSURANCE PREM EXP | 87,036 | 97,358 | $(10,322)$ | 100,785 | 97,358 | 3,427 | 101,842 | 97,358 | 4,484 |
| 926200 | OTHER WELFARE EXPENSES | 1,087 | 6,400 | $(5,313)$ | 5,865 | 14,900 | $(9,035)$ | 3,318 | 7,700 | $(4,382)$ |
| 926250 | 401-K CONTRIBUTIONS EXPENSE | 7,678 | 4,396 | 3,282 | 7,672 | 4,575 | 3,097 | 5,960 | 4,112 | 1,848 |
| 926400 | PENSION PLAN EXPENSE | 49,118 | 37,977 | 11,141 | 52,672 | 37,977 | 14,695 | 53,019 | 37,977 | 15,042 |
| 926600 | OTHER PENSION PLAN EXP | 6,262 | 3,539 | 2,723 | 5,653 | 3,564 | 2,089 | 6,494 | 3,490 | 3,004 |
| 928100 | PENSIONS CAP ( $C$ \& R) | 30,086 | 30,091 | (5) | 30,086 | 30,091 | (5) | 30,086 | 30,091 | (5) |
| 928300 | AMORT OTHER REGULATRY EXP | - | - | - | - | - | - | - | - | - |
| 930210 | MISC GENERAL EXP-CURRENT | 34,549 | 41,401 | $(6,852)$ | 40,344 | 40,401 | (57) | 20,829 | 46,051 | $(25,222)$ |
| 930230 | MISC GENERAL EXP-CURRENT | 3,446 | 2,300 | 1,146 | 3,446 | 2,300 | 1,146 | 3,369 | 2,300 | 1,069 |
| 930260 | MEALS \& TRAVEL EXPENSES-TAXA | 1,156 | 1,956 | (800) | 1,902 | 1,540 | 362 | 1,407 | 1,590 | (183) |
| 930600 | TRANSPORTATION EXPENSES | 52,758 | 57,720 | $(4,962)$ | 36,171 | 57,720 | $(21,549)$ | 42,146 | 57,720 | $(15,574)$ |
| 930880 | MISC GEN EXP-COMPANY DUES | 2,023 | 265 | 1,758 | 2,603 | 15 | 2,588 | 2,489 | 4,315 | $(1,826)$ |
| 930890 | MISC GEN EXP-OTHER | 7,100 | 5,100 | 2,000 | 375 | 700 | (325) | 1,895 | 2,500 | (605) |
| 931000 | ADM \& GENERAL RENTS | - | - | - | - | - | - | - | - | - |
| 932100 | OR MN A\&G STRUC \& IMP MAT | 1,264 | 3,333 | $(2,069)$ | 1,264 | 3,333 | $(2,069)$ | 1,264 | 3,333 | $(2,069)$ |
| 932700 | OR MN A\&G MISC PROPTY MAT | 2,532 | 18,370 | $(15,838)$ | 13,746 | 4,870 | 8,876 | 11,206 | 5,370 | 5,836 |


| YEAR-2007 | Description | $\begin{gathered} 2007 \\ \text { October } \\ \text { Actual } \end{gathered}$ |  | Variance | 2007 November Actual | 2007 November Budget | Variance | 2007 December Actual | 2007 December Budget | Variance |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 676400 | OR MN METER INSTALL LAB | 6,366 | - | 6,366 | 6,392 | - | 6,392 | 9,364 | - | 9,364 |
| 678100 | OR MN OTHER T\&D PLANT MAT | 30,805 | 44,750 | $(13,945)$ | 26,128 | 39,750 | $(13,622)$ | 29,408 | 34,750 | $(5,342)$ |
| 903100 | CONTRACT \& ORDERS EXPENS | (419) | - | (419) | 964 | - | 964 | 718 | - | 718 |
| 903200 | CONTRACTS \& ORDERS LABOR | 57,893 | - | 57,893 | 59,052 | - | 59,052 | 99,028 | - | 99,028 |
| 903300 | COLLECTING EXPENSES | 21,320 | 17,433 | 3,887 | 16,847 | 17,433 | (586) | 32,946 | 17,433 | 15,513 |
| 903520 | BILLING \& ACCTNG OTH EXP | 58,987 | 49,000 | 9,987 | 46,743 | 49,000 | $(2,257)$ | 53,113 | 49,000 | 4,113 |
| 904000 | UNCOLLECTIBLE ACCOUNTS | 37,763 | 40,656 | $(2,893)$ | 19,680 | 36,287 | $(16,607)$ | $(4,966)$ | 39,696 | $(44,662)$ |
| 905100 | MISC CUST ACCTNG EXPENSES | 3,727 | 1,100 | 2,627 | (795) | 1,100 | $(1,895)$ | 2,851 | 1,100 | 1,751 |
| 920000 | ADM \& GENERAL SALARIES | 106,722 | 487,897 | $(381,175)$ | 87,491 | 485,969 | $(398,478)$ | $(77,629)$ | 466,736 | $(544,365)$ |
| 920500 | INCENTIVE PLAN EXPENSE | 20,303 | 21,647 | $(1,344)$ | 20,462 | 20,711 | (249) | 24,896 | 19,826 | 5,070 |
| 921100 | EXPENSES OF EMPLOYEES | 27,342 | 4,415 | 22,927 | 20,691 | 11,255 | 9,436 | 19,865 | 6,385 | 13,480 |
| 921130 | DUES FOR CLUBS-TAXABLE | 585 | 177 | 408 | 526 | 497 | 29 | 1,835 | 177 | 1,658 |
| 921200 | MISC OFFICE EXP SUP | 42,064 | 36,484 | 5,580 | 35,675 | 36,107 | (432) | 39,927 | 37,757 | 2,170 |
| 921220 | MISC OFFICE EXPENSES | 696 | 320 | 376 | 11 | 320 | (309) | 503 | 320 | 183 |
| 921220 | MISC OFFICE EXPENSES | 2,309 | 1,828 | 481 | 1,751 | 1,828 | (77) | 2,725 | 2,198 | 527 |
| 923100 | SERVICE COMPANY CHARGES | 640,911 | 572,205 | 68,706 | 630,418 | 552,893 | 77,525 | 636,749 | 569,351 | 67,398 |
| 923200 | AUDITING SERVICES | 9,759 | 6,000 | 3,759 | 5,925 | 6,000 | (75) | 6,052 | 6,000 | 52 |
| 923300 | LEGAL SERVICES | 3,789 | 6,250 | $(2,461)$ | 2,619 | 6,250 | $(3,631)$ | 4,388 | 6,250 | $(1,862)$ |
| 923500 | OTHER SERVICES-CURRENT | 53,309 | 53,416 | (107) | 39,936 | 44,046 | $(4,110)$ | 56,184 | 40,758 | 15,426 |
| 924000 | PROPERTY INSURANCE | 9,869 | 3,000 | 6,869 | 9,869 | 3,000 | 6,869 | 9,869 | 3,000 | 6,869 |
| 925110 | WORKMENS COMP PREMIUM EXP | 14,850 | 9,822 | 5,028 | 14,832 | 9,822 | 5,010 | 13,463 | 9,822 | 3,641 |
| 925300 | INJURIES \& DAMAGES EXP | (682) | 1,500 | $(2,182)$ | - | 1,500 | $(1,500)$ | 682 | 1,500 | (818) |
| 925400 | GENERAL LIABILITY | 29,390 | 52,250 | $(22,860)$ | 29,345 | 52,250 | $(22,905)$ | 31,883 | 52,250 | $(20,367)$ |
| 926100 | ACCRUED OPEB EXPENSE | 45,288 | 40,463 | 4,825 | 44,828 | 40,463 | 4,365 | 34,377 | 40,463 | $(6,086)$ |
| 926110 | GROUP INSURANCE PREM EXP | 97,212 | 97,358 | (146) | 90,658 | 97,358 | $(6,700)$ | 59,930 | 97,358 | $(37,428)$ |
| 926200 | OTHER WELFARE EXPENSES | 3,819 | 6,400 | $(2,581)$ | 2,125 | 7,200 | $(5,075)$ | 7,068 | 8,650 | $(1,582)$ |
| 926250 | 401-K CONTRIBUTIONS EXPENSE | 7,107 | 4,575 | 2,532 | 6,911 | 4,396 | 2,515 | 7,641 | 4,267 | 3,374 |
| 926400 | PENSION PLAN EXPENSE | 40,950 | 37,977 | 2,973 | 40,338 | 37,977 | 2,361 | 28,096 | 37,977 | $(9,881)$ |
| 926600 | OTHER PENSION PLAN EXP | 6,906 | 3,564 | 3,342 | 6,364 | 3,539 | 2,825 | 6,061 | 3,515 | 2,546 |
| 928100 | PENSIONS CAP ( C \& R) | 30,086 | 30,091 | (5) | 30,086 | 30,091 | (5) | 42,250 | 74,530 | $(32,280)$ |
| 928300 | AMORT OTHER REGULATRY EXP | - | - | - | - | - | - | 837 | - | 837 |
| 930210 | MISC GENERAL EXP-CURRENT | $(130,482)$ | 26,401 | $(156,883)$ | 29,737 | 26,401 | 3,336 | 24,521 | 37,618 | $(13,097)$ |
| 930230 | MISC GENERAL EXP-CURRENT | 3,369 | 2,300 | 1,069 | 3,715 | 2,300 | 1,415 | 3,369 | 2,300 | 1,069 |
| 930260 | MEALS \& TRAVEL EXPENSES-TAXA | 1,889 | 1,490 | 399 | 1,700 | 2,140 | (440) | 3,351 | 1,490 | 1,861 |
| 930600 | TRANSPORTATION EXPENSES | 63,661 | 57,720 | 5,941 | 72,023 | 57,720 | 14,303 | 48,918 | 57,720 | $(8,802)$ |
| 930880 | MISC GEN EXP-COMPANY DUES | 2,699 | 265 | 2,434 | 2,089 | 1,560 | 529 | 2,271 | 4,315 | $(2,044)$ |
| 930890 | MISC GEN EXP-OTHER | 3,000 | 5,000 | $(2,000)$ | 1,750 | 3,200 | $(1,450)$ | 5,550 | 700 | 4,850 |
| 931000 | ADM \& GENERAL RENTS | - | - | - | - | - | - | - | - | - |
| 932100 | OR MN A\&G STRUC \& IMP MAT | 1,606 | 3,333 | $(1,727)$ | 1,264 | 3,333 | $(2,069)$ | 1,828 | 3,333 | $(1,505)$ |
| 932700 | OR MN A\&G MISC PROPTY MAT | 8,062 | 40,870 | $(32,808)$ | 7,261 | 4,870 | 2,391 | 8,639 | 4,870 | 3,769 |


| $\begin{gathered} \text { YEAR-2008 } \\ \text { AWW } \end{gathered}$ | 1 Description | 2008 January Actual | 2008 January Budget | Variance | 2008 February Actual | 2008 February Budget | Variance | 2008 <br> March <br> Actual | $2008$ <br> March <br> Budget | Variance |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 403000 | DEPRECIATION EXPENSE | 663,820 | 659,154 | 4,666 | 668,407 | 659,774 | 8,633 | 668,502 | 660,948 | 7,554 |
| 403100 | DEPRECIATION EXPENSE-CONTR PROP | $(143,906)$ | - | $(143,906)$ | $(144,499)$ | - | $(144,499)$ | 277,210 | - | 277,210 |
| 404100 | AMORT LIM TERM UT PLT | 575 | - | 575 | 575 | - | 575 | 575 | - | 575 |
| 404430 | AMORT REG ASSET - AFUDC | 5,282 | - | 5,282 | 5,282 | - | 5,282 | 7,272 | - | 7,272 |
| 406000 | AMORT UT PLT ACQ ADJUST | 1,801 | - | 1,801 | 1,801 |  | 1,801 | 1,801 |  | 1,801 |
| 407000 | AMORT PROPERTY LOSSES | 34,349 | 34,215 | 134 | 34,349 | 34,215 | 134 | 34,349 | 34,215 | 134 |
| 408030 | OTHER GENERAL TAXES | 6,968 | 7,638 | (670) | $(13,775)$ | 7,638 | $(21,413)$ | 23,284 | 7,638 | 15,646 |
| 408100 | REAL \& PERSON PROP TAXES | 232,589 | 236,771 | $(4,182)$ | 232,588 | 236,771 | $(4,183)$ | 232,588 | 236,771 | $(4,183)$ |
| 408140 | FEDERAL UNEMPLYMNT TXS | 3,952 | - | 3,952 | 504 | - | 504 | (195) | - | (195) |
| 408160 | FICA | 39,032 | 45,150 | $(6,118)$ | 31,779 | 41,500 | $(9,721)$ | 56,463 | 42,056 | 14,407 |
| 408180 | STATE UNEMPLYMNT TXS | 3,622 | - | 3,622 | 989 | - | 989 | 1,351 | - | 1,351 |
| 409100 | SIT-CURRENT | 32,825 | 33,799 | (974) | 39,260 | 3,537 | 35,723 | $(8,115)$ | 38,295 | $(46,410)$ |
| 409110 | SIT-ADJUST PRIOR YEARS | - | - | (974) | - | - | - | ) | - |  |
| 409150 | FIT-CURRENT | 245,487 | 115,931 | 129,556 | 293,606 | 9,916 | 283,690 | $(155,588)$ | 134,188 | $(289,776)$ |
| 409160 | FIT-ADJUST PRIOR YEARS | - | - | - | - | - | - |  | - |  |
| 409210 | SIT-OTH INC \& DED-REG | $(2,781)$ | $(8,250)$ | 5,469 | (259) | $(1,034)$ | 775 | 655 | $(3,084)$ | 3,739 |
| 409220 | FIT-OTH INC \& DED-REG | $(20,797)$ | $(32,113)$ | 11,316 | $(1,940)$ | $(4,027)$ | 2,087 | 8,439 | $(12,004)$ | 20,443 |
| 410400 | DEF SIT-REG ASSET/LIAB | (81) | - | (81) | (81) | - | (81) | $(25,917)$ | - | $(25,917)$ |
| 410600 | DEF SIT-OTHER | 15,363 | 15,363 | 15,363 | 15,363 | 15,363 | 15,363 | 15,363 | 15,363 | 15,363 |
| 410700 | DEF FIT-REG ASSET/LIAB | 16,038 |  | 16,038 | 16,038 | - | 16,038 | 16,038 | - | 16,038 |
| 410900 | DEF FIT-OTHER | 24,293 | 55,855 | $(31,562)$ | 31,534 | 164,430 | $(132,896)$ | 308,849 | 60,104 | 248,745 |
| 412220 | ITC RESTORED-4\% | (525) | - | (525) | (525) | - | (525) | (525) | - | (525) |
| 412230 | ITC RESTORED-10\% | $(5,903)$ | (628) | $(5,275)$ | $(5,903)$ | $(7,797)$ | 1,894 | $(5,903)$ | 4,789 | $(10,692)$ |
| 415100 | M\&J REVENUES-OUTSIDE | $(7,344)$ | ( | $(7,344)$ | $(10,368)$ | (7) | $(10,368)$ | $(2,938)$ |  | $(2,938)$ |
| 416100 | M\&J EXPENSES-OUTSIDE | 10,816 | - | 10,816 | 4,550 | - | 4,550 | 3,919 | - | 3,919 |
| 419300 | INT OTHER SECURITIES-OUT | - | - | - | - | - | - | - | - | - |
| 420100 | AFUDC - EQUITY | $(82,001)$ | $(65,146)$ | $(16,855)$ | $(88,356)$ | $(67,530)$ | $(20,826)$ | $(99,924)$ | $(65,854)$ | $(34,070)$ |
| 420210 | AFUDC- DEBT | $(38,527)$ | $(29,585)$ | $(8,942)$ | $(41,649)$ | $(30,668)$ | $(10,981)$ | $(46,736)$ | $(29,906)$ | $(16,830)$ |
| 425100 | AFUDC UT PLT ACQ ADJUST | (35) |  | (35) | (35) | - | (35) | (35) |  | (35) |
| 425300 | AMORT PREFERRED STOCK EXP | 64 | 64 | - | 64 | 64 | - | 64 | 64 |  |
| 426100 | DONATIONS | 23,525 | 32,315 | $(8,790)$ | 16,375 | 6,489 | 9,886 | 6,880 | 25,782 | $(18,902)$ |
| 426160 | OTHER LOBBYING EXPENSES | $(5,000)$ | - | $(5,000)$ | - | - | - | 5,393 | 6,500 | $(1,107)$ |
| 426200 | OTHER INCOME DEDUCTIONS | 52,476 | 67,686 | $(15,210)$ | 4,500 | 6,050 | $(1,550)$ | 850 | 5,100 | $(4,250)$ |
| 426410 | NON-OPER EMPLOYEE EXP | - | - | - | - | - | ( | - |  | - |
| 427100 | INTEREST LTD-OUT-REG | 126,978 | - | 126,978 | 126,978 | - | 126,978 | 126,978 | - | 126,978 |
| 427120 | INTEREST LTD-OUT-REG | 329,216 | 505,000 | $(175,784)$ | 329,216 | 505,000 | $(175,784)$ | 328,624 | 505,000 | $(176,376)$ |
| 428000 | AMORT DEBT DISCOUNT \& EXP | 7,225 | 5,954 | 1,271 | 7,225 | 5,954 | 1,271 | 7,225 | 5,954 | 1,271 |
| 431100 | INTEREST ON BANK DEBT | 86,598 | 77,938 | 8,660 | 67,065 | 75,584 | $(8,519)$ | 63,275 | 44,094 | 19,181 |
| 431200 | OTHER INTEREST EXPENSE | - | - | - | - | - | - |  | - |  |
| 437100 | DIV DEC PREF STK-OUTSIDE | 38,323 | 38,325 | (2) | 38,323 | 38,325 | (2) | 38,323 | 38,325 | (2) |
| 438200 | DIVIDENDS DECLARED COMMON - IN | - | - | - | - | - | - | 1,097,174 | 965,340 | 131,834 |
| 461000 | DOMESTIC SEWER SERV BILLED | - | - | - | - | - | - |  | - | - |
| 461110 | RES SALES UNBILL METERED | $(2,503,488)$ | $(2,372,304)$ | $(131,184)$ | $(2,230,040)$ | (2,243,760) | 13,720 | (2,283,002) | (2,285,071) | 2,069 |
| 461200 | COM SALES BILLED METERED | $(1,068,578)$ | $(1,100,960)$ | 32,382 | $(1,100,930)$ | $(1,098,665)$ | $(2,265)$ | $(994,127)$ | $(1,165,496)$ | 171,369 |
| 461210 | COM SALES UNBILL METERED | $(45,732)$ | (1,10, | $(45,732)$ | 33,878 |  | 33,878 | $(122,774)$ |  | $(122,774)$ |
| 461300 | IND SALES BILLED METERED | $(102,471)$ | $(143,773)$ | 41,302 | $(120,170)$ | $(142,751)$ | 22,581 | $(114,376)$ | $(134,058)$ | 19,682 |
| 461310 | IND SALES UNBILL METERED | 11,901 | (143,773) | 11,901 | 2,795 | (122,751) | 2,795 | 587 | (134,058) | 587 |
| 461400 | MISC SALES BILLED METERED | (269) | - | (269) | (412) | - | (412) | (91) | - | (91) |
| 462000 | PRIV FIR PROT SER BILLED | $(108,015)$ | $(194,365)$ | 86,350 | $(104,651)$ | $(194,365)$ | 89,714 | $(107,755)$ | $(194,365)$ | 86,610 |
| 462210 | INDUSTRIAL WASTER SER | - | - | - | - | (1) | - | (1) | - | - |
| 463000 | PUB FIRE PROT SER BILLED | $(192,287)$ | $(102,086)$ | $(90,201)$ | $(193,020)$ | $(102,086)$ | $(90,934)$ | $(193,020)$ | $(102,086)$ | $(90,934)$ |
| 464200 | PUB AUTH SLS BILLED METRD | $(269,905)$ | $(288,725)$ | 18,820 | $(339,731)$ | $(306,229)$ | $(33,502)$ | $(327,714)$ | $(271,970)$ | $(55,744)$ |
| 464210 | PUB AUTH SLS UNBILL METRD | 115,403 | - | 115,403 | $(3,066)$ | (30,22) | $(3,066)$ | 14,872 | (271,970) | 14,872 |
| 466000 | SALES FOR RESALE BILLED | $(87,006)$ | $(114,703)$ | 27,697 | $(98,609)$ | $(99,447)$ | 838 | $(94,408)$ | $(99,359)$ | 4,951 |
| 466100 | SALES FOR RESALE UNBILL | $(8,348)$ |  | $(8,348)$ | 13,618 |  | 13,618 | 16,052 |  | 16,052 |
| 471100 | RECONNECTION CHARGES | $(52,128)$ | $(20,128)$ | $(32,000)$ | $(58,941)$ | $(20,129)$ | $(38,812)$ | $(68,432)$ | $(20,128)$ | $(48,304)$ |
| 471200 | OTHER MISC SERV REVENUES | $(37,632)$ | $(62,084)$ | 24,452 | $(45,418)$ | $(62,084)$ | 16,666 | $(45,760)$ | $(62,084)$ | 16,324 |
| 471400 | BILLING \& COLLECTIONS FOR OTHERS | $(83,963)$ | $(75,294)$ | $(8,669)$ | $(87,479)$ | $(75,294)$ | $(12,185)$ | $(84,229)$ | $(75,294)$ | $(8,935)$ |
| 472000 | RENTS FROM WATER PROPERTY | $(7,835)$ | $(7,197)$ | (638) | $(7,835)$ | $(7,197)$ | (638) | $(8,335)$ | $(7,196)$ | $(1,139)$ |
| 474300 | miscellaneous | (645) |  | (645) | (711) |  | (711) | ) | ) | ) |
| 601100 | SS OPERATION EXPENSE | ( | - | ( | (711) | - | - | 3,233 | - | 3,233 |
| 602000 | PURCHASED WATER | 5,326 | 40,700 | $(35,374)$ | $(8,963)$ | 39,450 | $(48,413)$ | 4,557 | 40,800 | $(36,243)$ |
| 603100 | MISCELLANEOUS SS EXPENSES | 3,182 | 3,645 | (463) | 2,780 | 3,645 | (865) | 2,384 | 3,645 | $(1,261)$ |
| 610000 | SS ORDNY MAINT SUPR \& ENG | - | - | ( | - | - | (85) | - | - | ) |
| 617100 | OR MN MISC WAT SS PLT MAT | $(10,811)$ | 9,680 | $(20,491)$ | 20,993 | 9,130 | 11,863 | 3,299 | 9,680 | $(6,381)$ |
| 623110 | POWER PURCH FOR PUMP ELEC | 31,422 | - | 31,422 | 21,857 | - | 21,857 | 30,011 | - | 30,011 |
| 623210 | FUEL PURCH FOR PUMP OTHER | 240,876 | 162,684 | 78,192 | 141,665 | 160,373 | $(18,708)$ | 197,789 | 159,317 | 38,472 |
| 626500 | MISC PUMPING EXP ELECTRIC | $(7,586)$ | 220 | $(7,806)$ | $(8,595)$ | 220 | $(8,815)$ | $(8,896)$ | 220 | $(9,116)$ |
| 630200 | MISC PUMPING EXP OTHER | 5,248 | - | 5,248 | 5,424 | - | 5,424 | 3,848 | - | 3,848 |
| 641100 | GENERAL CHEMICALS | 118,149 | 120,531 | $(2,382)$ | 135,691 | 108,408 | 27,283 | 123,821 | 123,935 | (114) |
| 642100 | GENERAL WT LABOR | 119,704 |  | 119,704 | 109,142 |  | 109,142 | 118,512 | - | 118,512 |
| 642300 | GENERAL WT EXPENSES | 8,946 | 10,789 | $(1,843)$ | 13,356 | 22,480 | $(9,124)$ | 13,738 | 13,685 | 53 |
| 643100 | MISC WT EXPENSES-CURRENT | 12,012 | 9,316 | 2,696 | 7,613 | 10,317 | $(2,704)$ | 10,335 | 9,301 | 1,034 |
| 643300 | WASTE DISPOSAL EXP (CUR) | 12,194 | 10,221 | 1,973 | 14,015 | 16,660 | $(2,645)$ | 13,320 | 16,221 | $(2,901)$ |
| 643310 | AMORT WASTE DISPOSAL EXP | 8,438 | 8,000 | 438 | 8,438 | 8,000 | 438 | 8,438 | 8,000 | 438 |
| 650000 | OR MN WT SUPR \& ENG | 4,968 | - | 4,968 | 5,714 | - | 5,714 | 5,590 | - | 5,590 |
| 651100 | OR MN WT STRUCT \& IMP MAT | 13,333 | 13,786 | (453) | 8,603 | 16,565 | $(7,962)$ | 18,364 | 12,590 | 5,774 |
| 651120 | AMORT DEF EXP WT STRUCT | 19,132 | 12,700 | 6,432 | 15,165 | 11,800 | 3,365 | 15,726 | 11,800 | 3,926 |
| 660000 | T\&D RENTS |  |  | - | - |  | - | - | - | - |
| 662100 | T\&D LINES EXPENSE | 1,286 | 1,825 | (539) | 1,475 | 1,825 | (350) | 669 | 1,825 | $(1,156)$ |
| 662200 | T\&D LINES LABOR | 146,054 | - | 146,054 | 125,843 | - | 125,843 | 134,075 | - | 134,075 |
| 665300 | MISC T\&D EXPENSES-CURRENT | 30,724 | 26,372 | 4,352 | 27,322 | 34,772 | $(7,450)$ | 24,928 | 27,422 | $(2,494)$ |
| 666000 | T\&D RENTS | 500 | 315 | 185 | 796 | 315 | 481 | 543 | 315 | 228 |
| 670000 | OR MN T\&D SUPR \& ENG | 947 | - | 947 | 1,248 | - | 1,248 | 282 | - | 282 |
| 671200 | OR MN T\&D STRUCT \& IMP-LAB | 1,314 | - | 1,314 | 684 | - | 684 | 1,546 | - | 1,546 |
| 672120 | AMORT DEF EXP RES \& STAND | 8,773 | 13,924 | $(5,151)$ | 8,773 | 13,924 | $(5,151)$ | 8,773 | 13,924 | $(5,151)$ |
| 672200 | AMORT DEF EXP RES \& STAND | 921 |  | 921 | 2,555 | , | 2,555 | 1,286 | 位 | 1,286 |
| 673200 | OR MN T\&D MAINS LAB | 26,393 | - | 26,393 | 18,303 | - | 18,303 | 23,139 | - | 23,139 |
| 675200 | OR MN SERVICES LAB | 21,265 | - | 21,265 | 11,416 | - | 11,416 | 11,411 | - | 11,411 |


| YEAR-200 | 8 Description | 2008 April Actual | $\begin{gathered} 2008 \\ \text { April } \\ \text { Budget } \end{gathered}$ | Variance | $\begin{gathered} \hline 2008 \\ \text { May } \\ \text { Actual } \\ \hline \end{gathered}$ | $\begin{gathered} \hline 2008 \\ \text { May } \\ \text { Budget } \end{gathered}$ | Variance | $\begin{gathered} 2008 \\ \text { June } \\ \text { Actual } \end{gathered}$ | $\begin{gathered} 2008 \\ \text { June } \\ \text { Budget } \end{gathered}$ | Variance |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 403000 | DEPRECIATION EXPENSE | 672,428 | 661,978 | 10,450 | 677,101 | 662,551 | 14,550 | 688,677 | 663,949 | 24,728 |
| 403100 | DEPRECIATION EXPENSE-CONTR PROP | $(105,015)$ | - | $(105,015)$ | $(107,194)$ | - | $(107,194)$ | $(108,084)$ | - | $(108,084)$ |
| 404100 | AMORT LIM TERM UT PLT | 575 | - | 575 | 575 | - | 575 | 575 | - | 575 |
| 404430 | AMORT REG ASSET - AFUDC | 4,969 | - | 4,969 | 5,946 | - | 5,946 | 5,946 | - | 5,946 |
| 406000 | AMORT UT PLT ACQ ADJUST | 1,801 | - | 1,801 | 1,801 |  | 1,801 | 1,801 |  | 1,801 |
| 407000 | AMORT PROPERTY LOSSES | 34,349 | 34,215 | 134 | 34,349 | 34,215 | 134 | 34,349 | 34,215 | 134 |
| 408030 | Other general taxes | 6,968 | 7,638 | (670) | 14,917 | 7,638 | 7,279 | 6,968 | 7,638 | (670) |
| 408100 | REAL \& PERSON PROP TAXES | 232,588 | 236,771 | $(4,183)$ | 232,588 | 236,771 | $(4,183)$ | 55,136 | 236,771 | $(181,635)$ |
| 408140 | FEDERAL UNEMPLYMNT TXS | 104 | - | 104 | 40 | - | 40 | 44 | - | 44 |
| 408160 | FICA | 36,989 | 45,150 | $(8,161)$ | 35,261 | 44,833 | $(9,572)$ | 58,806 | 42,928 | 15,878 |
| 408180 | STATE UNEMPLYMNT TXS | 123 | - | 123 | 77 | - | 77 | 41 | - | 41 |
| 409100 | SIT-CURRENT | 28,432 | 21,133 | 7,299 | 28,001 | 25,874 | 2,127 | 126,839 | 43,621 | 83,218 |
| 409110 | SIT-ADJUST PRIOR YEARS | - | - | - | 21,261 | - | 21,261 | - | - | - |
| 409150 | FIT-CURRENT | 170,455 | 64,042 | 106,413 | 167,869 | 75,022 | 92,847 | 717,424 | 145,429 | 571,995 |
| 409160 | FIT-ADJUST PRIOR YEARS | - | - | - | $(1,734,426)$ | - | $(1,734,426)$ | - | - | - |
| 409210 | SIT-OTH INC \& DED-REG | (531) | $(2,088)$ | 1,557 | $(1,070)$ | $(3,461)$ | 2,391 | $(1,382)$ | $(3,529)$ | 2,147 |
| 409220 | FIT-OTH INC \& DED-REG | $(3,182)$ | $(8,129)$ | 4,947 | $(6,414)$ | $(13,473)$ | 7,059 | $(7,322)$ | $(13,735)$ | 6,413 |
| 410400 | DEF SIT-REG ASSET/LIAB | 281 | (1) | 281 | (81) | ( | (81) | (81) | ( | (81) |
| 410600 | DEF SIT-OTHER | 15,363 | 15,363 | 15,363 | 15,363 | 15,363 | 15,363 | 15,363 | 15,363 | 15,363 |
| 410700 | DEF FIT-REG ASSET/LIAB | 16,038 | - | 16,038 | 16,038 | - | 16,038 | 16,038 | - | 16,038 |
| 410900 | DEF FIT-OTHER | 166,516 | 142,189 | 24,327 | 2,162,544 | 188,319 | 1,974,225 | $(400,609)$ | 149,667 | $(550,276)$ |
| 412220 | ITC RESTORED-4\% | (525) | - | (525) | (525) | - | (525) | (525) | - | (525) |
| 412230 | ITC RESTORED-10\% | $(5,903)$ | $(9,565)$ | 3,662 | $(5,903)$ | $(8,953)$ | 3,050 | $(5,903)$ | $(4,891)$ | $(1,012)$ |
| 415100 | M\&J REVENUES-OUTSIDE | $(6,805)$ |  | $(6,805)$ | $(1,060)$ |  | $(1,060)$ | $(29,886)$ |  | $(29,886)$ |
| 416100 | M\&J EXPENSES-OUTSIDE | 4,329 | - | 4,329 | 4,997 | - | 4,997 | 4,726 | - | 4,726 |
| 419300 | INT OTHER SECURITIES-OUT | - | - | - | $(2,066)$ | - | $(2,066)$ | $(3,777)$ | - | $(3,777)$ |
| 420100 | AFUDC - EQUITY | $(108,907)$ | $(64,382)$ | $(44,525)$ | $(174,382)$ | $(72,332)$ | $(102,050)$ | $(97,155)$ | $(75,574)$ | $(21,581)$ |
| 420210 | AFUDC - DEBT | $(51,131)$ | $(29,238)$ | $(21,893)$ | $(47,004)$ | $(32,848)$ | $(14,156)$ | $(45,629)$ | $(34,321)$ | $(11,308)$ |
| 425100 | AFUDC UT PLT ACQ ADJUST | (35) | - | (35) | (35) | - | (35) | (35) | - | (35) |
| 425300 | AMORT PREFERRED STOCK EXP | 64 | 64 | - | 64 | 64 |  | 64 | 64 |  |
| 426100 | DONATIONS | 19,277 | 18,025 | 1,252 | 24,528 | 28,955 | $(4,427)$ | 22,448 | 16,156 | 6,292 |
| 426160 | Other lobbying expenses | - | - | - |  | - | ( |  | - | - |
| 426200 | OTHER INCOME DEDUCTIONS | 2,215 | 7,290 | $(5,075)$ | 2,000 | 13,000 | $(11,000)$ | 1,550 | 26,616 | $(25,066)$ |
| 426410 | NON-OPER EMPLOYEE EXP | - | - | ( | - | - | (11,000) | , | , | $(25,06)$ |
| 427100 | INTEREST LTD-OUT-REG | 126,978 | - | 126,978 | 126,978 | - | 126,978 | 126,978 | - | 126,978 |
| 427120 | INTEREST LTD-OUT-REG | 311,468 | 487,253 | $(175,785)$ | 311,468 | 487,253 | $(175,785)$ | 311,468 | 487,253 | $(175,785)$ |
| 428000 | AMORT DEBT DISCOUNT \& EXP | 7,224 | 5,954 | 1,270 | 7,784 | 5,954 | 1,830 | 7,313 | 5,954 | 1,359 |
| 431100 | INTEREST ON BANK DEBT | 52,720 | 17,328 | 35,392 | 58,912 | 22,992 | 35,920 | 51,743 | 32,913 | 18,830 |
| 431200 | OTHER INTEREST EXPENSE | - | - | - | - | - | - | - | - |  |
| 437100 | DIV DEC PREF STK-OUTSIDE | 38,322 | 38,325 | (3) | 38,310 | 38,325 | (15) | 38,263 | 38,325 | (62) |
| 438200 | DIVIDENDS DECLARED COMMON - IN | - | - | - | - | - | - | 956,109 | 634,969 | 321,140 |
| 461000 | DOMESTIC SEWER SERV BILLED | (13) | - | (13) | - | - | - | 13 | - | 13 |
| 461110 | RES SALES UNBILL METERED | $(2,266,862)$ | $(2,268,798)$ | 1,936 | $(2,447,040)$ | (2,413,136) | $(33,904)$ | $(2,737,249)$ | $(2,568,202)$ | $(169,047)$ |
| 461200 | COM SALES BILLED METERED | (1,029,664) | $(1,129,925)$ | 100,261 | $(1,160,554)$ | $(1,210,575)$ | 50,021 | $(1,228,236)$ | $(1,275,035)$ | 46,799 |
| 461210 | COM SALES UNBILL METERED | 6,037 |  | 6,037 | $(29,596)$ |  | $(29,596)$ | $(44,723)$ |  | $(44,723)$ |
| 461300 | IND SALES BILLED METERED | $(116,980)$ | $(147,717)$ | 30,737 | $(141,567)$ | $(139,149)$ | $(2,418)$ | $(97,832)$ | $(157,376)$ | 59,544 |
| 461310 | IND SALES UNBILL METERED | $(15,868)$ | - | $(15,868)$ | 8,818 | - | 8,818 | $(9,564)$ | - | $(9,564)$ |
| 461400 | MISC SALES BILLED METERED | (346) | - | (346) | 748 | - | 748 | $(3,367)$ | - | $(3,367)$ |
| 462000 | PRIV FIR PROT SER BILLED | $(99,728)$ | $(194,365)$ | 94,637 | $(111,085)$ | $(194,365)$ | 83,280 | $(156,593)$ | $(194,365)$ | 37,772 |
| 462210 | INDUSTRIAL WASTER SER |  | - | - | - | (1) | - | - | - | - |
| 463000 | PUB FIRE PROT SER BILLED | $(192,401)$ | $(102,086)$ | $(90,315)$ | $(193,020)$ | $(102,086)$ | $(90,934)$ | $(194,001)$ | $(102,086)$ | $(91,915)$ |
| 464200 | PUB AUTH SLS BILLED METRD | $(399,733)$ | $(347,158)$ | $(52,575)$ | $(362,740)$ | $(347,520)$ | $(15,220)$ | $(402,249)$ | $(300,591)$ | $(101,658)$ |
| 464210 | PUB AUTH SLS UNBILL METRD | $(66,020)$ | - | $(66,020)$ | 7,116 | - | 7,116 | 34,613 | -- | 34,613 |
| 466000 | SALES FOR RESALE BILLED | $(89,369)$ | $(103,244)$ | 13,875 | $(92,333)$ | $(98,387)$ | 6,054 | $(106,771)$ | $(122,923)$ | 16,152 |
| 466100 | SALES FOR RESALE UNBILL | $(12,078)$ |  | $(12,078)$ | 5,770 |  | 5,770 | $(21,295)$ |  | $(21,295)$ |
| 471100 | RECONNECTION CHARGES | $(62,764)$ | $(20,129)$ | $(42,635)$ | $(61,961)$ | $(20,128)$ | $(41,833)$ | $(55,497)$ | $(20,129)$ | $(35,368)$ |
| 471200 | OTHER MISC SERV REVENUES | $(44,946)$ | $(62,084)$ | 17,138 | $(53,024)$ | $(62,084)$ | 9,060 | $(61,468)$ | $(62,084)$ | 616 |
| 471400 | BILLING \& COLLECTIONS FOR OTHERS | $(84,027)$ | $(75,294)$ | $(8,733)$ | $(90,172)$ | $(75,294)$ | $(14,878)$ | $(90,863)$ | $(75,294)$ | $(15,569)$ |
| 472000 | RENTS FROM WATER PROPERTY | $(7,835)$ | $(7,196)$ | (639) | $(7,835)$ | $(7,196)$ | (639) | $(8,595)$ | $(7,196)$ | $(1,399)$ |
| 474300 | miscellaneous | 2 | (7) | 2 | (7835 | ) | ) | ) | ( | - |
| 601100 | SS OPERATION EXPENSE | (3) | - | (3) | - | - | - | - | - | - |
| 602000 | PURCHASED WATER | 5,181 | 41,900 | $(36,719)$ | 3,238 | 42,350 | $(39,112)$ | 2,579 | 43,600 | $(41,021)$ |
| 603100 | MISCELLANEOUS SS EXPENSES | 2,066 | 3,645 | $(1,579)$ | 3,743 | 3,645 | 98 | 4,616 | 4,845 | (229) |
| 610000 | SS ORDNY MAINT SUPR \& ENG | 23 | - | 23 | - | - | - | 83 | - | 83 |
| 617100 | OR MN MISC WAT SS PLT MAT | 10,791 | 28,930 | $(18,139)$ | 12,594 | 23,430 | $(10,836)$ | 2,665 | 14,630 | $(11,965)$ |
| 623110 | POWER PURCH FOR PUMP ELEC | 19,870 | - | 19,870 | 41,373 | - | 41,373 | 15,812 | - | 15,812 |
| 623210 | FUEL PURCH FOR PUMP OTHER | 168,752 | 193,632 | $(24,880)$ | 210,105 | 214,999 | $(4,894)$ | 259,454 | 244,077 | 15,377 |
| 626500 | MISC PUMPING EXP ELECTRIC | $(8,111)$ | 220 | $(8,331)$ | $(9,929)$ | 1,650 | $(11,579)$ | $(8,343)$ | 220 | $(8,563)$ |
| 630200 | MISC PUMPING EXP OTHER | 5,756 | - | 5,756 | 5,976 | - | 5,976 | 4,939 | - | 4,939 |
| 641100 | GENERAL CHEMICALS | 121,486 | 110,568 | 10,918 | 112,450 | 139,146 | $(26,696)$ | 126,562 | 151,139 | $(24,577)$ |
| 642100 | GENERAL WT LABOR | 113,677 |  | 113,677 | 116,381 | - | 116,381 | 123,958 | - | 123,958 |
| 642300 | GENERAL WT EXPENSES | 11,989 | 14,184 | $(2,195)$ | 6,200 | 13,806 | $(7,606)$ | 10,470 | 15,439 | $(4,969)$ |
| 643100 | MISC WT EXPENSES-CURRENT | 5,699 | 10,466 | $(4,767)$ | 5,076 | 8,638 | $(3,562)$ | 9,315 | 9,651 | (336) |
| 643300 | WASTE DISPOSAL EXP (CUR) | 13,595 | 10,221 | 3,374 | 11,364 | 16,660 | $(5,296)$ | 12,286 | 10,221 | 2,065 |
| 643310 | AMORT WASTE DISPOSAL EXP | 8,438 | 8,000 | 438 | 8,438 | 8,000 | 438 | 8,438 | 8,000 | 438 |
| 650000 | OR MN WT SUPR \& ENG | 7,505 | - | 7,505 | 7,761 | - | 7,761 | 7,350 | - | 7,350 |
| 651100 | OR MN WT STRUCT \& IMP MAT | 7,455 | 16,330 | $(8,875)$ | 13,053 | 12,590 | 463 | 36,922 | 78,590 | $(41,668)$ |
| 651120 | AMORT DEF EXP WT STRUCT | 15,726 | 11,800 | 3,926 | 15,726 | 11,800 | 3,926 | 15,776 | 11,800 | 3,976 |
| 660000 | T\&D RENTS | - |  | - |  |  | - | - | - | - |
| 662100 | T\&D LINES EXPENSE | 1,999 | 1,825 | 174 | 1,534 | 1,825 | (291) | 1,066 | 1,825 | (759) |
| 662200 | T\&D LINES LABOR | 131,351 | - | 131,351 | 134,405 | - | 134,405 | 143,459 | - | 143,459 |
| 665300 | MISC T\&D EXPENSES-CURRENT | 26,753 | 29,454 | $(2,701)$ | 20,339 | 26,372 | $(6,033)$ | 30,869 | 26,372 | 4,497 |
| 666000 | T\&D RENTS | 490 | 315 | 175 | 1,113 | 315 | 798 | 802 | 315 | 487 |
| 670000 | OR MN T\&D SUPR \& ENG | 639 | - | 639 | 1,158 | - | 1,158 | 865 | - | 865 |
| 671200 | OR MN T\&D STRUCT \& IMP-LAB | 1,261 | - | 1,261 | 967 | - | 967 | 1,050 | - | 1,050 |
| 672120 | AMORT DEF EXP RES \& STAND | 8,773 | 13,924 | $(5,151)$ | 8,773 | 13,924 | $(5,151)$ | 8,773 | 13,924 | $(5,151)$ |
| 672200 | AMORT DEF EXP RES \& STAND | 2,040 |  | 2,040 | 1,202 | 迷 | 1,202 | 1,191 | - | 1,191 |
| 673200 | OR MN T\&D MAINS LAB | 22,275 | - | 22,275 | 22,699 | - | 22,699 | 15,705 | - | 15,705 |
| 675200 | OR MN SERVICES LAB | 19,589 | - | 19,589 | 14,876 | - | 14,876 | 11,515 | - | 11,515 |


| $\begin{gathered} \text { YEAR-200 } \\ \text { AWW } \\ \hline \end{gathered}$ | 1 Description | $\begin{gathered} 2008 \\ \text { July } \\ \text { Actual } \end{gathered}$ | $\begin{gathered} \hline 2008 \\ \text { July } \\ \text { Budget } \end{gathered}$ | Variance | 2008 August <br> Actual | $\begin{gathered} \hline 2008 \\ \text { August } \\ \text { Budget } \end{gathered}$ | Variance | 2008 September Actual | 2008 September Budget | Variance |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 403000 | DEPRECIATION EXPENSE | 693,276 | 668,364 | 24,912 | 693,407 | 670,006 | 23,401 | 692,554 | 671,566 | 20,988 |
| 403100 | DEPRECIATION EXPENSE-CONTR PROP | $(108,924)$ | - | $(108,924)$ | $(109,293)$ | - | $(109,293)$ | $(109,853)$ | - | $(109,853)$ |
| 404100 | AMORT LIM TERM UT PLT | 575 | - | 575 | 575 | - | 575 | 575 | - | 575 |
| 404430 | AMORT REG ASSET - AFUDC | 5,946 | - | 5,946 | 5,946 | - | 5,946 | 5,946 |  | 5,946 |
| 406000 | AMORT UT PLT ACQ ADJUST | 1,801 | - | 1,801 | 1,934 | - | 1,934 | 2,699 | - | 2,699 |
| 407000 | AMORT PROPERTY LOSSES | 34,349 | 34,215 | 134 | 34,349 | 34,215 | 134 | 34,349 | 34,215 | 134 |
| 408030 | OTHER GENERAL TAXES | 6,968 | 7,638 | (670) | $(3,039)$ | 7,638 | $(10,677)$ | 10,928 | 10,438 | 490 |
| 408100 | REAL \& PERSON PROP TAXES | 221,045 | 236,771 | $(15,726)$ | 221,045 | 236,771 | $(15,726)$ | 221,045 | 236,771 | $(15,726)$ |
| 408140 | FEDERAL UNEMPLYMNT TXS | 32 |  | 32 | 15 | - | 15 | 76 |  | 76 |
| 408160 | FICA | 40,713 | 46,975 | $(6,262)$ | 33,076 | 42,611 | $(9,535)$ | 42,267 | 45,388 | $(3,121)$ |
| 408180 | STATE UNEMPLYMNT TXS | 54 | - | 54 | 17 | - | 17 | 86 | - | 86 |
| 409100 | SIT-CURRENT | 83,129 | 113,778 | $(30,649)$ | 103,108 | 98,285 | 4,823 | $(20,602)$ | 101,010 | $(121,612)$ |
| 409110 | SIT-ADJUST PRIOR YEARS | - |  |  |  |  |  |  |  |  |
| 409150 | FIT-CURRENT | 313,390 | 418,902 | $(105,512)$ | 599,566 | 363,636 | 235,930 | $(246,362)$ | 383,835 | $(630,197)$ |
| 409160 | FIT-ADJUST PRIOR YEARS | - | - | - | - | - | - | - | - | - |
| 409210 | SIT-OTH INC \& DED-REG | $(1,875)$ | (920) | (955) | (349) | $(1,543)$ | 1,194 | (685) | $(1,084)$ | 399 |
| 409220 | FIT-OTH INC \& DED-REG | $(10,904)$ | $(3,582)$ | $(7,322)$ | $(2,030)$ | $(6,008)$ | 3,978 | 1,896 | $(4,218)$ | 6,114 |
| 410400 | DEF SIT-REG ASSET/LIAB | (81) |  | (81) | (81) | - | (81) | (81) | - | (81) |
| 410600 | DEF SIT-OTHER | 15,363 | 15,363 | 15,363 | 15,363 | 15,363 | 15,363 | 15,363 | 15,363 | 15,363 |
| 410700 | DEF FIT-REG ASSET/LIAB | 16,038 | - | 16,038 | 16,038 | - | 16,038 | 16,038 | - | 16,038 |
| 410900 | DEF FIT-OTHER | 142,534 | 106,361 | 36,173 | 182,630 | 239,300 | $(56,670)$ | 929,409 | 196,154 | 733,255 |
| 412220 | ITC RESTORED-4\% | (525) | - | (525) | (525) | - | (525) | (525) | - | (525) |
| 412230 | ITC RESTORED-10\% | $(5,903)$ | $(13,325)$ | 7,422 | $(5,903)$ | $(20,315)$ | 14,412 | $(5,903)$ | 956 | $(6,859)$ |
| 415100 | M\&J REVENUES-OUTSIDE | $(4,813)$ | - | $(4,813)$ | $(11,580)$ | - | $(11,580)$ | $(2,930)$ | - | $(2,930)$ |
| 416100 | M\&J EXPENSES-OUTSIDE | 16,104 | - | 16,104 | 6,114 | - | 6,114 | 39,606 | - | 39,606 |
| 419300 | INT OTHER SECURITIES-OUT | - | - | - | - | - | - | - | - | - |
| 420100 | AFUDC - EQUITY | $(97,840)$ | $(90,330)$ | $(7,510)$ | $(112,428)$ | $(133,045)$ | 20,617 | 22,787 | $(175,806)$ | 198,593 |
| 420210 | AFUDC - DEBT | $(45,889)$ | $(41,022)$ | $(4,867)$ | $(52,783)$ | $(60,420)$ | 7,637 | $(10,127)$ | $(79,840)$ | 69,713 |
| 425100 | AFUDC UT PLT ACQ ADJUST | (35) | - | (35) | (35) | - | (35) | (35) | - | (35) |
| 425300 | AMORT PREFERRED STOCK EXP | 64 | 64 | - | 64 | 64 | - | 64 | 64 | - |
| 426100 | DONATIONS | 9,560 | 5,953 | 3,607 | 13,220 | 12,959 | 261 | 13,232 | 6,334 | 6,898 |
| 426160 | OTHER LOBBYING EXPENSES | - | - | - | - | - | - | - | - | - |
| 426200 | OTHER INCOME DEDUCTIONS | 20,000 | 5,200 | 14,800 | 8,394 | 5,750 | 2,644 | 11,240 | 6,800 | 4,440 |
| 426410 | NON-OPER EMPLOYEE EXP | - | - | - | - | - | - | - | - | - |
| 427100 | INTEREST LTD-OUT-REG | 126,978 | - | 126,978 | 126,978 | - | 126,978 | 126,978 | - | 126,978 |
| 427120 | INTEREST LTD-OUT-REG | 311,468 | 487,253 | $(175,785)$ | 311,468 | 487,253 | $(175,785)$ | 311,468 | 487,253 | $(175,785)$ |
| 428000 | AMORT DEBT DISCOUNT \& EXP | 7,231 | 5,954 | 1,277 | 7,383 | 5,954 | 1,429 | 8,159 | 5,954 | 2,205 |
| 431100 | INTEREST ON BANK DEBT | 34,793 | 51,576 | $(16,783)$ | 35,656 | 76,176 | $(40,520)$ | 44,702 | 109,385 | $(64,683)$ |
| 431200 | OTHER INTEREST EXPENSE | - | - | - | 9 | - | 9 | (9) | - | (9) |
| 437100 | DIV DEC PREF STK-OUTSIDE | 38,242 | 38,325 | (83) | 38,277 | 38,325 | (48) | 38,260 | 38,325 | (65) |
| 438200 | DIVIDENDS DECLARED COMMON - IN | - | - | - | - | - | - | 1,394,978 | 992,033 | 402,945 |
| 461000 | DOMESTIC SEWER SERV BILLED | - | - | - | - | - | - | (23) | - | (23) |
| 461110 | RES SALES UNBILL METERED | $(2,945,243)$ | $(2,918,762)$ | $(26,481)$ | $(3,034,178)$ | $(2,940,599)$ | $(93,579)$ | $(2,795,365)$ | $(2,848,003)$ | 52,638 |
| 461200 | COM SALES BILLED METERED | $(1,318,797)$ | $(1,439,653)$ | 120,856 | (1,511,810) | $(1,478,634)$ | $(33,176)$ | $(1,444,539)$ | $(1,475,490)$ | 30,951 |
| 461210 | COM SALES UNBILL METERED | 115,586 |  | 115,586 | $(215,896)$ |  | $(215,896)$ | $(34,176)$ | - | $(34,176)$ |
| 461300 | IND SALES BILLED METERED | $(151,229)$ | $(156,345)$ | 5,116 | $(130,724)$ | $(171,119)$ | 40,395 | $(146,271)$ | $(196,314)$ | 50,043 |
| 461310 | IND SALES UNBILL METERED | 5,692 | - | 5,692 | $(8,004)$ | - | $(8,004)$ | (26) | - | (26) |
| 461400 | MISC SALES BILLED METERED | $(4,346)$ | - | $(4,346)$ | $(3,353)$ | - | $(3,353)$ | $(4,268)$ | - | $(4,268)$ |
| 462000 | PRIV FIR PROT SER BILLED | $(107,224)$ | $(194,365)$ | 87,141 | $(115,761)$ | $(194,365)$ | 78,604 | $(107,438)$ | $(194,365)$ | 86,927 |
| 462210 | INDUSTRIAL WASTER SER | - | - | - |  |  |  | (500) |  | (500) |
| 463000 | PUB FIRE PROT SER BILLED | $(197,285)$ | $(102,086)$ | $(95,199)$ | $(195,109)$ | $(102,086)$ | $(93,023)$ | $(195,198)$ | $(102,086)$ | $(93,112)$ |
| 464200 | PUB AUTH SLS BILLED METRD | $(434,491)$ | $(476,019)$ | 41,528 | $(526,843)$ | $(431,033)$ | $(95,810)$ | $(565,377)$ | $(482,793)$ | $(82,584)$ |
| 464210 | PUB AUTH SLS UNBILL METRD | $(117,411)$ | - | $(117,411)$ | 31,879 | - | 31,879 | $(33,903)$ | - | $(33,903)$ |
| 466000 | SALES FOR RESALE BILLED | $(128,323)$ | $(175,743)$ | 47,420 | $(152,534)$ | $(147,550)$ | $(4,984)$ | $(162,666)$ | $(170,233)$ | 7,567 |
| 466100 | SALES FOR RESALE UNBILL | $(44,198)$ | - | $(44,198)$ | 27,680 | - | 27,680 | $(22,160)$ | - | $(22,160)$ |
| 471100 | RECONNECTION CHARGES | $(58,344)$ | $(20,128)$ | $(38,216)$ | $(50,570)$ | $(20,129)$ | $(30,441)$ | $(61,340)$ | $(20,128)$ | $(41,212)$ |
| 471200 | OTHER MISC SERV REVENUES | $(65,618)$ | $(62,084)$ | $(3,534)$ | $(72,466)$ | $(62,084)$ | $(10,382)$ | $(73,973)$ | $(62,084)$ | $(11,889)$ |
| 471400 | BILLING \& COLLECTIONS FOR OTHERS | $(89,786)$ | $(75,294)$ | $(14,492)$ | $(89,350)$ | $(75,294)$ | $(14,056)$ | $(80,543)$ | $(75,294)$ | $(5,249)$ |
| 472000 | RENTS FROM WATER PROPERTY | $(7,835)$ | $(7,196)$ | (639) | $(7,835)$ | $(7,196)$ | (639) | $(7,835)$ | $(7,196)$ | (639) |
| 474300 | MISCELLANEOUS | $(2,457)$ | - | $(2,457)$ | (904) | - | (904) | $(1,009)$ | - | $(1,009)$ |
| 601100 | SS OPERATION EXPENSE | - | - | - | - | - | - |  | - |  |
| 602000 | PURCHASED WATER | 3,469 | 45,850 | $(42,381)$ | 4,693 | 47,850 | $(43,157)$ | 4,624 | 47,350 | $(42,726)$ |
| 603100 | MISCELLANEOUS SS EXPENSES | 587 | 3,645 | $(3,058)$ | 442 | 3,645 | $(3,203)$ | 4,038 | 3,645 | 393 |
| 610000 | SS ORDNY MAINT SUPR \& ENG | 428 | - | 428 | - | - | - | 84,593 | - | 84,593 |
| 617100 | OR MN MISC WAT SS PLT MAT | 3,816 | 26,180 | $(22,364)$ | 8,447 | 9,130 | (683) | 74,117 | 9,680 | 64,437 |
| 623110 | POWER PURCH FOR PUMP ELEC | 18,280 | - | 18,280 | 37,760 | - | 37,760 | 6,752 | - | 6,752 |
| 623210 | FUEL PURCH FOR PUMP OTHER | 269,172 | 301,383 | $(32,211)$ | 351,465 | 296,847 | 54,618 | 328,483 | 291,399 | 37,084 |
| 626500 | MISC PUMPING EXP ELECTRIC | $(19,235)$ | 220 | $(19,455)$ | $(14,453)$ | 220 | $(14,673)$ | $(10,483)$ | 220 | $(10,703)$ |
| 630200 | MISC PUMPING EXP OTHER | 6,532 | - | 6,532 | 4,653 | - | 4,653 | 5,535 | - | 5,535 |
| 641100 | GENERAL CHEMICALS | 130,967 | 169,450 | $(38,483)$ | 161,286 | 168,533 | $(7,247)$ | 233,963 | 168,985 | 64,978 |
| 642100 | GENERAL WT LABOR | 184,450 | - | 184,450 | 118,932 | - | 118,932 | 120,851 | - | 120,851 |
| 642300 | GENERAL WT EXPENSES | 16,223 | 10,419 | 5,804 | 8,921 | 16,617 | $(7,696)$ | 6,232 | 15,010 | $(8,778)$ |
| 643100 | MISC WT EXPENSES-CURRENT | 8,913 | 8,809 | 104 | 10,147 | 8,585 | 1,562 | 10,561 | 8,650 | 1,911 |
| 643300 | WASTE DISPOSAL EXP (CUR) | 16,267 | 22,660 | $(6,393)$ | 13,257 | 10,221 | 3,036 | 7,222 | 16,660 | $(9,438)$ |
| 643310 | AMORT WASTE DISPOSAL EXP | 8,438 | 8,000 | 438 | 8,438 | 9,000 | (562) | 8,438 | 9,000 | (562) |
| 650000 | OR MN WT SUPR \& ENG | 10,718 | - | 10,718 | 7,234 | - | 7,234 | 5,454 | - | 5,454 |
| 651100 | OR MN WT STRUCT \& IMP MAT | 18,568 | 45,590 | $(27,022)$ | 12,362 | 12,590 | (228) | 22,620 | 18,685 | 3,935 |
| 651120 | AMORT DEF EXP WT STRUCT | 15,733 | 11,800 | 3,933 | 15,913 | 11,800 | 4,113 | 13,174 | 9,210 | 3,964 |
| 660000 | T\&D RENTS | - | - | - | - | - | - | 3,936 | - | 3,936 |
| 662100 | T\&D LINES EXPENSE | 953 | 1,825 | (872) | 3,657 | 1,825 | 1,832 | 1,244 | 1,825 | (581) |
| 662200 | T\&D LINES LABOR | 359,474 | - | 359,474 | 133,147 | - | 133,147 | 132,130 | - | 132,130 |
| 665300 | MISC T\&D EXPENSES-CURRENT | 10,030 | 30,122 | $(20,092)$ | 9,882 | 30,122 | $(20,240)$ | 16,388 | 30,122 | $(13,734)$ |
| 666000 | T\&D RENTS | 25 | 315 | (290) | 198 | 315 | (117) | 150 | 315 | (165) |
| 670000 | OR MN T\&D SUPR \& ENG | 2,456 | - | 2,456 | 1,131 | - | 1,131 | 1,574 | - | 1,574 |
| 671200 | OR MN T\&D STRUCT \& IMP-LAB | 1,204 | - | 1,204 | 2,253 | - | 2,253 | 866 | - | 866 |
| 672120 | AMORT DEF EXP RES \& STAND | 8,773 | 13,924 | $(5,151)$ | 8,773 | 11,263 | $(2,490)$ | 6,113 | 11,263 | $(5,150)$ |
| 672200 | AMORT DEF EXP RES \& STAND | 2,054 | - | 2,054 | 1,628 | - | 1,628 | 1,334 | - | 1,334 |
| 673200 | OR MN T\&D MAINS LAB | 28,793 | - | 28,793 | 20,138 | - | 20,138 | 25,862 | - | 25,862 |
| 675200 | OR MN SERVICES LAB | 23,573 | - | 23,573 | 18,617 | - | 18,617 | 16,473 | - | 16,473 |


| $\begin{gathered} \text { YEAR-200 } \\ \text { AWW } \\ \hline \end{gathered}$ | 8 Description | 2008 October <br> Actual | 2008 October Budget | Variance | 2008 November Actual | 2008 November Budget | Variance | 2008 December Actual | 2008 December Budget | Variance |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 403000 | DEPRECIATION EXPENSE | 693,959 | 674,061 | 19,898 | 695,695 | 675,978 | 19,717 | 709,328 | 692,752 | 16,576 |
| 403100 | DEPRECIATION EXPENSE-CONTR PROP | $(110,400)$ | - | $(110,400)$ | $(111,479)$ | - | $(111,479)$ | $(111,722)$ | - | $(111,722)$ |
| 404100 | AMORT LIM TERM UT PLT | 575 | - | 575 | 575 | - | 575 | 575 | - | 575 |
| 404430 | AMORT REG ASSET - AFUDC | 5,946 | - | 5,946 | 5,946 | - | 5,946 | 5,946 |  | 5,946 |
| 406000 | AMORT UT PLT ACQ ADJUST | 1,801 | - | 1,801 | 1,814 | - | 1,814 | 1,814 | - | 1,814 |
| 407000 | AMORT PROPERTY LOSSES | 34,349 | 34,215 | 134 | 34,349 | 34,215 | 134 | 34,349 | 34,215 | 134 |
| 408030 | OTHER GENERAL TAXES | 10,254 | 7,638 | 2,616 | 7,050 | 7,638 | (588) | 7,050 | 7,638 | (588) |
| 408100 | REAL \& PERSON PROP TAXES | 221,045 | 236,771 | $(15,726)$ | 250,973 | 236,771 | 14,202 | 223,368 | 236,771 | $(13,403)$ |
| 408140 | FEDERAL UNEMPLYMNT TXS | 54 | , | 54 | 127 | , | 127 | 2,049 | 6,771 | 2,049 |
| 408160 | FICA | 38,760 | 46,499 | $(7,739)$ | 34,036 | 41,976 | $(7,940)$ | 47,361 | 49,356 | $(1,995)$ |
| 408180 | STATE UNEMPLYMNT TXS | 169 | - | 169 | 150 | - | 150 | 2,399 | - | 2,399 |
| 409100 | SIT-CURRENT | 55,407 | 102,482 | $(47,075)$ | 53,909 | 47,413 | 6,496 | 86,060 | 32,000 | 54,060 |
| 409110 | SIT-ADJUST PRIOR YEARS | - | - | - | - | - | - | $(64,104)$ | - | $(64,104)$ |
| 409150 | FIT-CURRENT | 282,838 | 397,094 | $(114,256)$ | 274,467 | 189,984 | 84,483 | 485,388 | 130,555 | 354,833 |
| 409160 | FIT-ADJUST PRIOR YEARS | - | - | , | - | - | - | $(154,148)$ | - | $(154,148)$ |
| 409210 | SIT-OTH INC \& DED-REG | 907 | (564) | 1,471 | (531) | $(1,330)$ | 799 | (798) | $(3,027)$ | 2,229 |
| 409220 | FIT-OTH INC \& DED-REG | 4,633 | $(2,196)$ | 6,829 | $(2,713)$ | $(5,178)$ | 2,465 | $(4,727)$ | $(11,782)$ | 7,055 |
| 410400 | DEF SIT-REG ASSET/LIAB | (81) | ) | (81) | (81) | ) | (81) | ${ }^{(81)}$ | $(11,782)$ | (81) |
| 410600 | DEF SIT-OTHER | 15,363 | 15,363 | 15,363 | 15,363 | 15,363 | 15,363 | 15,363 | 15,363 | 15,363 |
| 410700 | DEF FIT-REG ASSET/LIAB | 16,038 |  | 16,038 | 16,038 | - | 16,038 | 16,038 | - | 16,038 |
| 410900 | DEF FIT-OTHER | 230,593 | 151,877 | 78,716 | 237,596 | 256,848 | $(19,252)$ | $(127,281)$ | 209,295 | $(336,576)$ |
| 412220 | ITC RESTORED-4\% | (525) |  | (525) | (525) |  | (525) | (525) | - | (525) |
| 412230 | ITC RESTORED-10\% | $(5,903)$ | $(10,785)$ | 4,882 | $(5,903)$ | $(4,012)$ | $(1,891)$ | $(5,903)$ | $(10,271)$ | 4,368 |
| 415100 | M\&J REVENUES-OUTSIDE | $(36,690)$ | ( | $(36,690)$ | $(4,164)$ |  | $(4,164)$ | $(10,218)$ |  | $(10,218)$ |
| 416100 | M\&J EXPENSES-OUTSIDE | 6,942 | - | 6,942 | 7,717 | - | 7,717 | 13,102 | - | 13,102 |
| 419300 | INT OTHER SECURITIES-OUT | - | - | - | - | - | - | - | - |  |
| 420100 | AFUDC - EQUITY | $(74,175)$ | $(212,372)$ | 138,197 | $(188,049)$ | $(243,106)$ | 55,057 | $(228,978)$ | $(241,617)$ | 12,639 |
| 420210 | AFUDC- DEBT | $(16,022)$ | $(96,446)$ | 80,424 | $(86,302)$ | $(110,403)$ | 24,101 | $(107,541)$ | $(109,727)$ | 2,186 |
| 425100 | AFUDC UT PLT ACQ ADJUST | (35) | - | (35) | (35) | - | (35) | (35) | - | (35) |
| 425300 | AMORT PREFERRED STOCK EXP | 64 | 64 | - | 64 | 64 | - | 64 | 64 |  |
| 426100 | DONATIONS | 2,466 | 1,339 | 1,127 | 9,515 | 10,775 | $(1,260)$ | 4,109 | 31,339 | $(27,230)$ |
| 426160 | OTHER LOBBYING EXPENSES | - | - | - | - |  | (1, | . | - | ) |
| 426200 | OTHER INCOME DEDUCTIONS | 5,417 | 5,500 | (83) | 2,593 | 5,350 | $(2,757)$ | - | 5,350 | $(5,350)$ |
| 426410 | NON-OPER EMPLOYEE EXP | - | - | - | 1,953 | - | 1,953 | - |  |  |
| 427100 | INTEREST LTD-OUT-REG | 126,978 | - | 126,978 | 125,141 | - | 125,141 | 126,978 | - | 126,978 |
| 427120 | INTEREST LTD-OUT-REG | 311,468 | 487,253 | $(175,785)$ | 311,468 | 487,253 | $(175,785)$ | 311,468 | 487,253 | $(175,785)$ |
| 428000 | AMORT DEBT DISCOUNT \& EXP | 7,329 | 5,954 | 1,375 | 7,335 | 5,954 | 1,381 | 7,332 | 5,954 | 1,378 |
| 431100 | INTEREST ON BANK DEBT | 84,652 | 149,401 | $(64,749)$ | 83,792 | 180,259 | $(96,467)$ | 97,914 | 207,603 | $(109,689)$ |
| 431200 | OTHER INTEREST EXPENSE | 3 |  | 3 | - | - |  |  | - |  |
| 437100 | DIV DEC PREF STK-OUTSIDE | 38,274 | 38,325 | (51) | 38,274 | 38,325 | (51) | 38,274 | 38,325 | (51) |
| 438200 | DIVIDENDS DECLARED COMMON - IN | - | - | - | - | - |  | 2,554,847 | 2,289,981 | 264,866 |
| 461000 | DOMESTIC SEWER SERV BILLED | 36 | - | 36 | - | - | - | - | - | - |
| 461110 | RES SALES UNBILL METERED | $(2,988,302)$ | $(2,747,632)$ | $(240,670)$ | $(2,604,307)$ | $(2,542,218)$ | $(62,089)$ | $(2,214,180)$ | $(2,381,015)$ | 166,835 |
| 461200 | COM SALES BILLED METERED | $(1,412,031)$ | $(1,432,774)$ | 20,743 | $(1,215,550)$ | $(1,311,683)$ | 96,133 | (1,045,765) | $(1,193,285)$ | 147,520 |
| 461210 | COM SALES UNBILL METERED | 754 |  | 754 | 46,287 |  | 46,287 | 148,864 | - | 148,864 |
| 461300 | IND SALES BILLED METERED | $(135,950)$ | $(177,738)$ | 41,788 | $(121,080)$ | $(158,123)$ | 37,043 | $(101,715)$ | $(150,767)$ | 49,052 |
| 461310 | IND SALES UNBILL METERED | 1,011 |  | 1,011 | 210 | (158,123) | 210 | 16,616 | (150,767) | 16,616 |
| 461400 | MISC SALES BILLED METERED | (64) | - | (64) | $(9,182)$ | - | $(9,182)$ | $(1,627)$ | - | $(1,627)$ |
| 462000 | PRIV FIR PROT SER BILLED | $(111,487)$ | $(194,365)$ | 82,878 | $(113,894)$ | $(194,365)$ | 80,471 | $(111,084)$ | $(194,365)$ | 83,281 |
| 462210 | INDUSTRIAL WASTER SER | - | - | - | (500) | - | (500) | (500) | - | (500) |
| 463000 | PUB FIRE PROT SER BILLED | $(195,790)$ | $(102,086)$ | $(93,704)$ | $(196,032)$ | $(102,086)$ | $(93,946)$ | $(196,087)$ | $(102,086)$ | $(94,001)$ |
| 464200 | PUB AUTH SLS BILLED METRD | $(491,954)$ | $(468,186)$ | $(23,768)$ | $(433,596)$ | $(347,047)$ | $(86,549)$ | $(336,637)$ | $(449,624)$ | 112,987 |
| 464210 | PUB AUTH SLS UNBILL METRD | $(2,327)$ | - | $(2,327)$ | 69,771 | - | 69,771 | $(70,098)$ | - | $(70,098)$ |
| 466000 | SALES FOR RESALE BILLED | $(159,174)$ | $(138,074)$ | $(21,100)$ | $(173,905)$ | $(114,156)$ | $(59,749)$ | $(93,292)$ | $(110,633)$ | 17,341 |
| 466100 | SALES FOR RESALE UNBILL | 24,491 | (1) | 24,491 | 23,755 |  | 23,755 | (175) | - | (175) |
| 471100 | RECONNECTION CHARGES | $(56,069)$ | $(20,129)$ | $(35,940)$ | $(57,902)$ | $(20,128)$ | $(37,774)$ | $(50,704)$ | $(20,129)$ | $(30,575)$ |
| 471200 | OTHER MISC SERV REVENUES | $(54,382)$ | $(62,084)$ | 7,702 | $(49,897)$ | $(62,084)$ | 12,187 | $(41,579)$ | $(62,084)$ | 20,505 |
| 471400 | BILLING \& COLLECTIONS FOR OTHERS | $(89,953)$ | $(75,294)$ | $(14,659)$ | $(98,700)$ | $(75,294)$ | $(23,406)$ | $(102,175)$ | $(75,294)$ | $(26,881)$ |
| 472000 | RENTS FROM WATER PROPERTY | $(21,223)$ | $(7,196)$ | $(14,027)$ | $(5,740)$ | $(7,196)$ | 1,456 | $(6,406)$ | $(7,196)$ | 790 |
| 474300 | MISCELLANEOUS | (952) | - | (952) | (970) | - | (970) | (856) | - | (856) |
| 601100 | SS OPERATION EXPENSE | ( | - | ) | ) | - | ) | (86) | - | (1) |
| 602000 | PURCHASED WATER | 3,211 | 40,700 | $(37,489)$ | 4,191 | 38,150 | $(33,959)$ | 3,288 | 41,350 | $(38,062)$ |
| 603100 | MISCELLANEOUS SS EXPENSES | 4,230 | 3,645 | 585 | 1,064 | 3,645 | $(2,581)$ | 2,685 | 3,645 | (960) |
| 610000 | SS ORDNY MAINT SUPR \& ENG |  | - | - | - |  | $(2,581)$ | 149 | - | 149 |
| 617100 | OR MN MISC WAT SS PLT MAT | 109,987 | 9,130 | 100,857 | 11,350 | 9,680 | 1,670 | 7,887 | 9,130 | $(1,243)$ |
| 623110 | POWER PURCH FOR PUMP ELEC | 20,655 | - | 20,655 | 17,862 | - | 17,862 | 31,116 | - | 31,116 |
| 623210 | FUEL PURCH FOR PUMP OTHER | 293,751 | 268,869 | 24,882 | 251,172 | 244,565 | 6,607 | 189,349 | 218,304 | $(28,955)$ |
| 626500 | MISC PUMPING EXP ELECTRIC | $(14,233)$ | 220 | $(14,453)$ | $(24,722)$ | 220 | $(24,942)$ | $(30,954)$ | 1,650 | $(32,604)$ |
| 630200 | MISC PUMPING EXP OTHER | 5,413 | - | 5,413 | 6,482 | - | 6,482 | 7,846 | - | 7,846 |
| 641100 | GENERAL CHEMICALS | 213,248 | 132,860 | 80,388 | 133,364 | 128,118 | 5,246 | 138,297 | 115,409 | 22,888 |
| 642100 | GENERAL WT LABOR | 113,995 |  | 113,995 | 110,985 |  | 110,985 | 197,025 | - | 197,025 |
| 642300 | GENERAL WT EXPENSES | 12,381 | 9,334 | 3,047 | 7,753 | 11,019 | $(3,266)$ | 11,284 | 14,734 | $(3,450)$ |
| 643100 | MISC WT EXPENSES-CURRENT | 2,405 | 8,034 | $(5,629)$ | 7,706 | 9,202 | $(1,496)$ | 7,944 | 8,836 | (892) |
| 643300 | WASTE DISPOSAL EXP (CUR) | 13,245 | 10,221 | 3,024 | 13,213 | 10,221 | 2,992 | 14,274 | 16,660 | $(2,386)$ |
| 643310 | AMORT WASTE DISPOSAL EXP | 8,438 | 9,000 | (562) | 8,438 | 9,000 | (562) | - | 9,000 | $(9,000)$ |
| 650000 | OR MN WT SUPR \& ENG | 7,612 | - | 7,612 | 4,025 | - | 4,025 | 10,165 | - | 10,165 |
| 651100 | OR MN WT STRUCT \& IMP MAT | 16,125 | 16,330 | (205) | 13,503 | 12,590 | 913 | 19,434 | 18,838 | 596 |
| 651120 | AMORT DEF EXP WT STRUCT | 13,179 | 9,210 | 3,969 | 13,174 | 9,210 | 3,964 | 13,174 | 9,210 | 3,964 |
| 660000 | T\&D RENTS | 6,101 | - | 6,101 | 7,772 | - | 7,772 | 9,659 | - | 9,659 |
| 662100 | T\&D LINES EXPENSE | 1,265 | 1,825 | (560) | 2,390 | 1,825 | 565 | 2,616 | 1,825 | 791 |
| 662200 | T\&D LINES LABOR | 134,615 |  | 134,615 | 136,103 |  | 136,103 | 213,716 | - | 213,716 |
| 665300 | MISC T\&D EXPENSES-CURRENT | 18,474 | 25,622 | $(7,148)$ | 29,092 | 28,247 | 845 | 23,759 | 31,854 | $(8,095)$ |
| 666000 | T\&D RENTS | - | 315 | (315) | 1,243 | 315 | 928 | 1,000 | 315 | 685 |
| 670000 | OR MN T\&D SUPR \& ENG | 1,249 | - | 1,249 | 1,651 | - | 1,651 | 1,078 | - | 1,078 |
| 671200 | OR MN T\&D STRUCT \& IMP-LAB | 1,189 | - | 1,189 | 585 | - | 585 | 1,956 | - | 1,956 |
| 672120 | AMORT DEF EXP RES \& STAND | 6,113 | 14,263 | $(8,150)$ | 6,113 | 14,263 | $(8,150)$ | 6,113 | 14,263 | $(8,150)$ |
| 672200 | AMORT DEF EXP RES \& STAND | 1,510 | . | 1,510 | 1,390 | - | 1,390 | 1,153 | - | 1,153 |
| 673200 | OR MN T\&D MAINS LAB | 30,916 | - | 30,916 | 34,941 | - | 34,941 | 37,850 | - | 37,850 |
| 675200 | OR MN SERVICES LAB | 18,308 | - | 18,308 | 16,844 | - | 16,844 | 16,628 | - | 16,628 |


| $\begin{array}{r} \hline \text { YEAR-200 } \\ \text { AWW } \\ \hline \end{array}$ | Description | 2008 January Actual | 2008 January <br> Budget | Variance | $\begin{gathered} 2008 \\ \text { February } \\ \text { Actual } \end{gathered}$ | $\begin{gathered} 2008 \\ \text { February } \\ \text { Budget } \end{gathered}$ | Variance | 2008 <br> March <br> Actual | March <br> Budget | Variance |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 676200 | OR MN METERS LAB | 12,217 | - | 12,217 | 6,183 | - | 6,183 | 5,752 | - | 5,752 |
| 676400 | OR MN METER INSTALL LAB | 1,846 | - | 1,846 | 2,168 | - | 2,168 | 3,791 | - | 3,791 |
| 678100 | OR MN OTHER T\&D PLANT MAT | 26,236 | 46,600 | $(20,364)$ | 23,029 | 46,600 | $(23,571)$ | 42,671 | 46,600 | $(3,929)$ |
| 903100 | CONTRACT \& ORDERS EXPENS | (451) | - | (451) | 446 | - | 446 | 529 | - | 529 |
| 903200 | CONTRACTS \& ORDERS LABOR | 66,033 | - | 66,033 | 63,591 | - | 63,591 | 64,805 | - | 64,805 |
| 903300 | COLLECTING EXPENSES | 23,844 | 22,888 | 956 | 28,216 | 22,888 | 5,328 | 13,321 | 22,888 | $(9,567)$ |
| 903520 | BILLING \& ACCTNG OTH EXP | 72,917 | 66,570 | 6,347 | 60,733 | 66,570 | $(5,837)$ | 66,972 | 66,570 | 402 |
| 904000 | UNCOLLECTIBLE ACCOUNTS | $(37,107)$ | 37,989 | $(75,096)$ | $(8,009)$ | 36,848 | $(44,857)$ | $(15,933)$ | 37,421 | $(53,354)$ |
| 905100 | MISC CUST ACCTNG EXPENSES | (471) | 500 | (971) | 247 | 500 | (253) | 591 | 500 | 91 |
| 920000 | ADM \& GENERAL SALARIES | 109,941 | 541,580 | $(431,639)$ | 71,874 | 497,964 | $(426,090)$ | 78,168 | 501,712 | $(423,544)$ |
| 920500 | INCENTIVE PLAN EXPENSE | 22,293 | 27,420 | $(5,127)$ | 22,324 | 25,035 | $(2,711)$ | 37,662 | 28,287 | 9,375 |
| 921100 | EXPENSES OF EMPLOYEES | 7,872 | 6,201 | 1,671 | 8,346 | 5,607 | 2,739 | 3,891 | 10,088 | $(6,197)$ |
| 921130 | DUES FOR CLUBS-TAXABLE | 10,737 | 6,460 | 4,277 | $(4,570)$ | 4,061 | $(8,631)$ | 692 | 962 | (270) |
| 921200 | MISC OFFICE EXP SUP | 42,875 | 32,882 | 9,993 | 37,161 | 52,390 | $(15,229)$ | 22,911 | 31,134 | $(8,223)$ |
| 923100 | SERVICE COMPANY CHARGES | 667,808 | 642,386 | 25,422 | 629,399 | 620,759 | 8,640 | 709,697 | 638,706 | 70,991 |
| 923300 | LEGAL SERVICES | $(1,215)$ | 6,250 | $(7,465)$ | 6,828 | 6,250 | 578 | 11,968 | 6,250 | 5,718 |
| 923500 | OTHER SERVICES-CURRENT | 38,028 | 52,441 | $(14,413)$ | 37,777 | 53,971 | $(16,194)$ | 36,716 | 47,251 | $(10,535)$ |
| 924000 | PROPERTY INSURANCE | 11,868 | 3,000 | 8,868 | 4,550 | 3,000 | 1,550 | 30,903 | 3,000 | 27,903 |
| 925110 | WORKMENS COMP PREMIUM EXP | 12,104 | 13,142 | $(1,038)$ | 10,960 | 13,142 | $(2,182)$ | 11,454 | 13,142 | $(1,688)$ |
| 925300 | INJURIES \& DAMAGES EXP | - | 1,500 | $(1,500)$ | (900) | 1,500 | $(2,400)$ | 900 | 1,500 | (600) |
| 925400 | GENERAL LIABILITY | 30,861 | 44,333 | $(13,472)$ | 23,329 | 44,333 | $(21,004)$ | $(37,880)$ | 44,333 | $(82,213)$ |
| 926100 | ACCRUED OPEB EXPENSE | 44,663 | 57,028 | $(11,727)$ | 44,850 | 57,028 | $(12,178)$ | 44,294 | 57,028 | $(12,734)$ |
| 926110 | GROUP INSURANCE PREM EXP | 119,167 | 108,060 | 11,107 | 160,727 | 108,060 | 52,667 | 116,302 | 108,060 | 8,242 |
| 926160 | GROUP INS CAP (A \& B) | $(25,495)$ | - | $(25,495)$ | $(69,644)$ | - | $(69,644)$ | $(27,880)$ | - | $(27,880)$ |
| 926200 | OTHER WELFARE EXPENSES | 1,153 | 1,100 | 53 | 15,039 | 12,500 | 2,539 | 5,199 | 5,100 | 99 |
| 926250 | 401-K CONTRIBUTIONS EXPENSE | 8,655 | 8,349 | 306 | 7,235 | 7,664 | (429) | 8,514 | 7,594 | 920 |
| 926400 | PENSION PLAN EXPENSE | 67,034 | 43,190 | 23,844 | 67,034 | 43,190 | 23,844 | 67,034 | 43,190 | 23,844 |
| 926600 | OTHER PENSION PLAN EXP | 7,758 | 2,500 | 5,258 | 5,166 | 2,500 | 2,666 | 5,570 | 2,500 | 3,070 |
| 928100 | PENSIONS CAP ( $C$ \& R) | 42,250 | 74,530 | $(32,280)$ | 42,460 | 74,530 | $(32,070)$ | 12,415 | 45,833 | $(33,418)$ |
| 928300 | AMORT OTHER REGULATRY EXP | 837 | - | 837 | 853 | - | 853 | 853 | - | 853 |
| 928400 | OTH REGULATORY EXP-CURRENT | 6,200 | 6,301 | (101) | - | 11,451 | $(11,451)$ | 6,200 | 7,541 | $(1,341)$ |
| 930200 | AMORT MISC CHARGES | - | - | - | - | - | - | - | - | - |
| 930210 | MISC GENERAL EXP-CURRENT | 15,621 | 25,806 | $(10,185)$ | 25,293 | 35,807 | $(10,514)$ | 71,199 | 32,011 | 39,188 |
| 930230 | MISC GENERAL EXP-CURRENT | 3,369 | 2,300 | 1,069 | 3,369 | 2,300 | 1,069 | 3,369 | 2,300 | 1,069 |
| 930260 | MEALS \& TRAVEL EXPENSES-TAXA | 820 | 1,565 | (745) | 1,513 | 3,668 | $(2,155)$ | 1,219 | 2,696 | $(1,477)$ |
| 930300 | COLLECTING EXPENSES | - | - | - | - | - | - | - | - | - |
| 930600 | TRANSPORTATION EXPENSES | 52,016 | 39,000 | 13,016 | 61,873 | 51,000 | 10,873 | 64,326 | 39,000 | 25,326 |
| 930880 | MISC GEN EXP-COMPANY DUES | 2,043 | 250 | 1,793 | 2,285 | 100 | 2,185 | 28,571 | 33,900 | $(5,329)$ |
| 930890 | MISC GEN EXP-OTHER | - | 1,206 | $(1,206)$ | - | 506 | (506) | - | 2,566 | $(2,566)$ |
| 930890 | MISC GEN EXP-OTHER | 3,000 | 5,706 | $(2,706)$ | 1,000 | 506 | 494 | 3,000 | 2,566 | 434 |
| 931000 | ADM \& GENERAL RENTS | 6,152 | 2,700 | 3,452 | (650) | 2,200 | $(2,850)$ | 1,417 | 2,200 | (783) |
| 932100 | OR MN A\&G STRUC \& IMP MAT | 8,128 | 18,803 | $(10,675)$ | 18,179 | 6,803 | 11,376 | 8,418 | 6,803 | 1,615 |
| 932700 | OR MN A\&G MISC PROPTY MAT | 4,202 | 5,000 | (798) | 3,007 | 3,800 | (793) | 1,916 | 2,000 | (84) |


| $\begin{gathered} \text { YEAR-200 } \\ \text { AWW } \\ \hline \end{gathered}$ | Description | $\begin{gathered} \hline 2008 \\ \text { April } \\ \text { Actual } \\ \hline \end{gathered}$ | $\begin{gathered} 2008 \\ \text { April } \\ \text { Budget } \end{gathered}$ | Variance | $\begin{gathered} 2008 \\ \text { May } \\ \text { Actual } \end{gathered}$ | $\begin{gathered} 2008 \\ \text { May } \\ \text { Budget } \end{gathered}$ | Variance | $\begin{gathered} \hline 2008 \\ \text { June } \\ \text { Actual } \end{gathered}$ | $\begin{gathered} \hline 2008 \\ \text { June } \\ \text { Budget } \end{gathered}$ | Variance |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 676200 | OR MN METERS LAB | 8,237 | - | 8,237 | 6,930 | - | 6,930 | 6,902 | - | 6,902 |
| 676400 | OR MN METER INSTALL LAB | 2,459 | - | 2,459 | 21,112 | - | 21,112 | 10,184 | - | 10,184 |
| 678100 | OR MN OTHER T\&D PLANT MAT | 7,622 | 46,600 | $(38,978)$ | 46,211 | 46,600 | (389) | 20,458 | 46,600 | $(26,142)$ |
| 903100 | CONTRACT \& ORDERS EXPENS | $(1,409)$ | - | $(1,409)$ | 496 | - | 496 | 612 | - | 612 |
| 903200 | CONTRACTS \& ORDERS LABOR | 63,462 | - | 63,462 | 61,063 | - | 61,063 | 57,772 | - | 57,772 |
| 903300 | COLLECTING EXPENSES | $(10,174)$ | 22,888 | $(33,062)$ | 21,701 | 22,888 | $(1,187)$ | 21,498 | 22,888 | $(1,390)$ |
| 903520 | BILLING \& ACCTNG OTH EXP | 68,542 | 66,570 | 1,972 | 71,489 | 66,570 | 4,919 | 68,903 | 66,570 | 2,333 |
| 904000 | UNCOLLECTIBLE ACCOUNTS | 58,289 | 37,781 | 20,508 | 90,287 | 39,646 | 50,641 | 102,963 | 41,541 | 61,422 |
| 905100 | MISC CUST ACCTNG EXPENSES | 1,388 | 500 | 888 | (244) | 500 | (744) | (6) | 500 | (506) |
| 920000 | ADM \& GENERAL SALARIES | 85,034 | 538,459 | $(453,425)$ | 293,619 | 534,458 | $(240,839)$ | 58,767 | 511,847 | $(453,080)$ |
| 920500 | INCENTIVE PLAN EXPENSE | 26,082 | 30,542 | $(4,460)$ | 42,843 | 30,542 | 12,301 | 56,180 | 29,154 | 27,026 |
| 921100 | EXPENSES OF EMPLOYEES | 9,009 | 7,183 | 1,826 | 13,679 | 7,782 | 5,897 | 9,726 | 10,046 | (320) |
| 921130 | DUES FOR CLUBS-TAXABLE | 1,382 | 1,129 | 253 | 792 | 2,402 | $(1,610)$ | 966 | 1,010 | (44) |
| 921200 | MISC OFFICE EXP SUP | 33,135 | 32,666 | 469 | 28,522 | 29,903 | $(1,381)$ | 45,148 | 26,780 | 18,368 |
| 923100 | SERVICE COMPANY CHARGES | 672,753 | 624,200 | 48,553 | 647,544 | 620,564 | 26,980 | 762,748 | 626,769 | 135,979 |
| 923300 | LEGAL SERVICES | 36,540 | 6,250 | 30,290 | $(21,046)$ | 6,250 | $(27,296)$ | 4,509 | 6,250 | $(1,741)$ |
| 923500 | OTHER SERVICES-CURRENT | 51,067 | 65,264 | $(14,197)$ | 77,902 | 74,632 | 3,270 | 60,184 | 72,983 | $(12,799)$ |
| 924000 | PROPERTY INSURANCE | 28,303 | 3,000 | 25,303 | 29,453 | 3,000 | 26,453 | 29,313 | 3,000 | 26,313 |
| 925110 | WORKMENS COMP PREMIUM EXP | 11,411 | 13,142 | $(1,731)$ | 11,627 | 13,142 | $(1,515)$ | 11,643 | 13,142 | $(1,499)$ |
| 925300 | INJURIES \& DAMAGES EXP | - | 1,500 | $(1,500)$ | $(1,393)$ | 1,500 | $(2,893)$ | (100) | 1,500 | $(1,600)$ |
| 925400 | GENERAL LIABILITY | 7,537 | 44,333 | $(36,796)$ | 7,537 | 44,333 | $(36,796)$ | $(25,839)$ | 44,333 | $(70,172)$ |
| 926100 | ACCRUED OPEB EXPENSE | 43,310 | 57,028 | $(13,718)$ | 43,233 | 57,028 | $(13,795)$ | 42,994 | 57,028 | $(14,034)$ |
| 926110 | GROUP INSURANCE PREM EXP | 113,659 | 108,060 | 5,599 | 117,262 | 108,060 | 9,202 | 118,625 | 108,060 | 10,565 |
| 926160 | GROUP INS CAP (A \& B) | $(29,224)$ | - | $(29,224)$ | $(28,464)$ | - | $(28,464)$ | $(28,326)$ | - | $(28,326)$ |
| 926200 | OTHER WELFARE EXPENSES | 3,656 | 3,450 | 206 | 2,562 | 1,900 | 662 | 1,180 | 3,100 | $(1,920)$ |
| 926250 | 401-K CONTRIBUTIONS EXPENSE | 7,856 | 8,171 | (315) | 8,208 | 8,095 | 113 | 8,253 | 7,770 | 483 |
| 926400 | PENSION PLAN EXPENSE | 67,034 | 43,190 | 23,844 | 67,034 | 43,190 | 23,844 | 67,034 | 43,190 | 23,844 |
| 926600 | OTHER PENSION PLAN EXP | 7,212 | 2,500 | 4,712 | 7,192 | 2,500 | 4,692 | 6,927 | 2,500 | 4,427 |
| 928100 | PENSIONS CAP ( $C$ \& R) | 12,631 | 45,833 | $(33,202)$ | 12,566 | 45,833 | $(33,267)$ | 12,631 | 45,833 | $(33,202)$ |
| 928300 | AMORT OTHER REGULATRY EXP | 884 | - | 884 | 853 | - | 853 | 853 | - | 853 |
| 928400 | OTH REGULATORY EXP-CURRENT | 6,506 | 8,361 | $(1,855)$ | 16,200 | 8,451 | 7,749 | 7,190 | 35,081 | $(27,891)$ |
| 930200 | AMORT MISC CHARGES | - | - | - | - | - | - | - | 4,300 | $(4,300)$ |
| 930210 | MISC GENERAL EXP-CURRENT | 25,835 | 26,558 | (723) | $(15,326)$ | 43,875 | $(59,201)$ | 36,641 | 30,281 | 6,360 |
| 930230 | MISC GENERAL EXP-CURRENT | 3,216 | 2,300 | 916 | 591 | 2,300 | $(1,709)$ | 2,780 | 2,300 | 480 |
| 930260 | MEALS \& TRAVEL EXPENSES-TAXA | 976 | 1,668 | (692) | 2,396 | 2,118 | 278 | 1,004 | 2,315 | $(1,311)$ |
| 930300 | COLLECTING EXPENSES | - | - | - | - | - | - | - | - | - |
| 930600 | TRANSPORTATION EXPENSES | 67,063 | 51,000 | 16,063 | 85,926 | 39,000 | 46,926 | 65,400 | 39,000 | 26,400 |
| 930880 | MISC GEN EXP-COMPANY DUES | 2,101 | 250 | 1,851 | 2,004 | - | 2,004 | 2,053 | 4,900 | $(2,847)$ |
| 930890 | MISC GEN EXP-OTHER | 5,406 | 5,656 | (250) | 2,012 | 4,860 | $(2,848)$ | 874 | 1,433 | (559) |
| 930890 | MISC GEN EXP-OTHER | 6,906 | 10,156 | $(3,250)$ | 1,305 | 4,860 | $(3,555)$ | (3) | 1,433 | $(1,436)$ |
| 931000 | ADM \& GENERAL RENTS | 3,826 | 2,700 | 1,126 | 691 | 2,200 | $(1,509)$ | 2,135 | 2,200 | (65) |
| 932100 | OR MN A\&G STRUC \& IMP MAT | 11,795 | 18,803 | $(7,008)$ | 6,295 | 6,803 | (508) | 6,257 | 6,803 | (546) |
| 932700 | OR MN A\&G MISC PROPTY MAT | 984 | 2,000 | $(1,016)$ | 2,194 | 1,500 | 694 | 3,998 | 5,000 | $(1,002)$ |


| YEAR-20 <br> AWW | Description | $\begin{gathered} \hline 2008 \\ \text { July } \\ \text { Actual } \end{gathered}$ | $\begin{gathered} \hline 2008 \\ \text { July } \\ \text { Budget } \end{gathered}$ | Variance | 2008 August Actua | 2008 August | Variance | $\qquad$ | 2008 September <br> Budget | Variance |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 676200 | OR MN METERS LAB | $(14,064)$ | - | $(14,064)$ | 6,636 | - | 6,636 | 7,346 | - | 7,346 |
| 676400 | OR MN METER INSTALL LAB | 11,466 | - | 11,466 | 6,961 | - | 6,961 | 8,309 | - | 8,309 |
| 678100 | OR MN OTHER T\&D PLANT MAT | 9,742 | 46,600 | $(36,858)$ | 31,740 | 46,600 | $(14,860)$ | 23,296 | 46,600 | $(23,304)$ |
| 903100 | CONTRACT \& ORDERS EXPENS | 472 | - | 472 | 728 | - | 728 | 406 | - | 406 |
| 903200 | CONTRACTS \& ORDERS LABOR | 83,960 | - | 83,960 | 55,585 | - | 55,585 | 67,380 | - | 67,380 |
| 903300 | COLLECTING EXPENSES | 17,459 | 22,888 | $(5,429)$ | 15,884 | 22,888 | $(7,004)$ | 20,743 | 22,888 | $(2,145)$ |
| 903520 | BILLING \& ACCTNG OTH EXP | 72,182 | 66,570 | 5,612 | 71,534 | 66,570 | 4,964 | 74,750 | 66,570 | 8,180 |
| 904000 | UNCOLLECTIBLE ACCOUNTS | 12,995 | 48,074 | $(35,079)$ | 27,920 | 48,095 | $(20,175)$ | 56,448 | 48,130 | 8,318 |
| 905100 | MISC CUST ACCTNG EXPENSES | 93 | 500 | (407) | 407 | 500 | (93) | 1,872 | 500 | 1,372 |
| 920000 | ADM \& GENERAL SALARIES | $(189,106)$ | 560,072 | $(749,178)$ | 78,301 | 507,846 | $(429,545)$ | 103,353 | 541,457 | $(438,104)$ |
| 920500 | INCENTIVE PLAN EXPENSE | 40,184 | 31,932 | 8,252 | 30,778 | 29,154 | 1,624 | 26,629 | 30,542 | $(3,913)$ |
| 921100 | EXPENSES OF EMPLOYEES | 13,439 | 7,411 | 6,028 | 8,269 | 8,566 | (297) | 8,941 | 6,708 | 2,233 |
| 921130 | DUES FOR CLUBS-TAXABLE | 1,287 | 1,277 | 10 | 617 | 977 | (360) | 2,063 | 2,645 | (582) |
| 921200 | MISC OFFICE EXP SUP | 77,816 | 27,923 | 49,893 | 63,807 | 28,596 | 35,211 | 49,740 | 27,649 | 22,091 |
| 923100 | SERVICE COMPANY CHARGES | 634,226 | 615,487 | 18,739 | 638,708 | 587,800 | 50,908 | 636,836 | 599,863 | 36,973 |
| 923300 | LEGAL SERVICES | 30,500 | 6,250 | 24,250 | 24,843 | 6,250 | 18,593 | 24,328 | 6,250 | 18,078 |
| 923500 | OTHER SERVICES-CURRENT | 64,371 | 58,794 | 5,577 | 75,270 | 54,536 | 20,734 | 53,120 | 57,853 | $(4,733)$ |
| 924000 | PROPERTY INSURANCE | 29,467 | 3,000 | 26,467 | 29,203 | 3,000 | 26,203 | $(107,205)$ | 3,000 | $(110,205)$ |
| 925110 | WORKMENS COMP PREMIUM EXP | 10,048 | 13,142 | $(3,094)$ | 11,630 | 13,142 | $(1,512)$ | 11,805 | 13,142 | $(1,337)$ |
| 925300 | INJURIES \& DAMAGES EXP | (100) | 1,500 | $(1,600)$ | - | 1,500 | $(1,500)$ | (457) | 1,500 | $(1,957)$ |
| 925400 | GENERAL LIABILITY | 9,430 | 44,333 | $(34,903)$ | 8,195 | 44,333 | $(36,138)$ | 121,552 | 44,333 | 77,219 |
| 926100 | ACCRUED OPEB EXPENSE | 24,359 | 57,028 | $(32,669)$ | 34,022 | 57,028 | $(23,006)$ | 34,502 | 57,028 | $(22,526)$ |
| 926110 | GROUP INSURANCE PREM EXP | 110,436 | 108,060 | 2,376 | 117,356 | 108,060 | 9,296 | 117,361 | 108,060 | 9,301 |
| 926160 | GROUP INS CAP (A \& B) | $(32,345)$ | - | $(32,345)$ | $(17,996)$ | - | $(17,996)$ | $(17,035)$ | - | $(17,035)$ |
| 926200 | OTHER WELFARE EXPENSES | 9,047 | 3,400 | 5,647 | 1,295 | 11,900 | $(10,605)$ | 2,464 | 4,700 | $(2,236)$ |
| 926250 | 401-K CONTRIBUTIONS EXPENSE | 8,669 | 8,515 | 154 | 7,300 | 7,706 | (406) | 8,472 | 8,223 | 249 |
| 926400 | PENSION PLAN EXPENSE | 67,034 | 43,190 | 23,844 | 67,034 | 43,190 | 23,844 | 67,034 | 43,190 | 23,844 |
| 926600 | OTHER PENSION PLAN EXP | 7,492 | 2,500 | 4,992 | 5,490 | 2,500 | 2,990 | 8,122 | 2,500 | 5,622 |
| 928100 | PENSIONS CAP ( $C$ \& R) | 11,317 | 45,833 | $(34,516)$ | 12,307 | 45,833 | $(33,526)$ | 12,392 | 45,833 | $(33,441)$ |
| 928300 | AMORT OTHER REGULATRY EXP | 2,208 | - | 2,208 | 1,022 | - | 1,022 | 1,022 | - | 1,022 |
| 928400 | OTH REGULATORY EXP-CURRENT | 14,935 | 24,751 | $(9,816)$ | 15,369 | 23,661 | $(8,292)$ | 24,357 | 11,451 | 12,906 |
| 930200 | AMORT MISC CHARGES | - | - | - | - | - | - | - | - | - |
| 930210 | MISC GENERAL EXP-CURRENT | 27,701 | 19,366 | 8,335 | 16,834 | 23,950 | $(7,116)$ | 24,382 | 32,218 | $(7,836)$ |
| 930230 | MISC GENERAL EXP-CURRENT | 2,780 | 2,300 | 480 | 2,780 | 2,300 | 480 | 4,333 | 2,300 | 2,033 |
| 930260 | MEALS \& TRAVEL EXPENSES-TAXA | 1,702 | 1,940 | (238) | 1,918 | 1,615 | 303 | 2,361 | 2,198 | 163 |
| 930300 | COLLECTING EXPENSES | - | - | - | - | - | - | 54 | - | 54 |
| 930600 | TRANSPORTATION EXPENSES | 58,437 | 39,000 | 19,437 | 71,650 | 39,000 | 32,650 | 66,953 | 39,000 | 27,953 |
| 930880 | MISC GEN EXP-COMPANY DUES | 2,053 | 250 | 1,803 | 4,768 | - | 4,768 | 2,073 | 4,400 | $(2,327)$ |
| 930890 | MISC GEN EXP-OTHER | 1,088 | 603 | 485 | 2,340 | 706 | 1,634 | 2,425 | 2,566 | (141) |
| 930890 | MISC GEN EXP-OTHER | 5,672 | 5,103 | 569 | 5,505 | 706 | 4,799 | 2,260 | 2,566 | (306) |
| 931000 | ADM \& GENERAL RENTS | 5,976 | 2,700 | 3,276 | (34) | 2,200 | $(2,234)$ | $(1,077)$ | 2,200 | $(3,277)$ |
| 932100 | OR MN A\&G STRUC \& IMP MAT | 22,057 | 18,803 | 3,254 | 7,963 | 6,803 | 1,160 | 8,704 | 6,803 | 1,901 |
| 932700 | OR MN A\&G MISC PROPTY MAT | 5,183 | 4,000 | 1,183 | 608 | 1,500 | (892) | 2,044 | 2,000 | 44 |


| YEAR-20 <br> AWW | - Description | 2008 <br> October Actual | $\begin{gathered} \hline 2008 \\ \text { October } \\ \text { Budget } \\ \hline \end{gathered}$ | Variance | $\begin{gathered} 2008 \\ \text { November } \\ \text { Actual } \\ \hline \end{gathered}$ | $\begin{gathered} \hline 2008 \\ \text { November } \\ \text { Budget } \\ \hline \end{gathered}$ | Variance | $\begin{gathered} 2008 \\ \text { December } \\ \text { Actual } \\ \hline \end{gathered}$ | $\begin{gathered} 2008 \\ \text { December } \\ \text { Budget } \\ \hline \end{gathered}$ | Variance |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 676200 | OR MN METERS LAB | 12,069 |  | 12,069 | 2,917 |  | 2,917 | $(15,406)$ |  | $(15,406)$ |
| 676400 | OR MN METER INSTALL LAB | 8,700 | - | 8,700 | 18,709 | - | 18,709 | 28,085 | - | 28,085 |
| 678100 | OR MN OTHER T\&D PLANT MAT | 46,576 | 46,600 | (24) | 21,543 | 41,350 | $(19,807)$ | 63,140 | 36,100 | 27,040 |
| 903100 | CONTRACT \& ORDERS EXPENS | 720 |  | 720 | $(1,371)$ |  | $(1,371)$ | (502) |  | (502) |
| 903200 | CONTRACTS \& ORDERS LABOR | 60,584 |  | 60,584 | 63,167 |  | 63,167 | 103,918 |  | 103,918 |
| 903300 | COLLECTING EXPENSES | 24,493 | 22,888 | 1,605 | 19,474 | 22,888 | $(3,414)$ | 21,228 | 22,888 | $(1,660)$ |
| 903520 | BILLING \& ACCTNG OTH EXP | 71,367 | 66,570 | 4,797 | 71,960 | 66,570 | 5,390 | 73,876 | 66,570 | 7,306 |
| 904000 | UNCOLLECTIBLE ACCOUNTS | 116,356 | 46,296 | 70,060 | 46,333 | 41,973 | 4,360 | 16,672 | 40,320 | $(23,648)$ |
| 905100 | MISC CUST ACCTNG EXPENSES | (519) | 500 | $(1,019)$ | 663 | 500 | 163 | 1,102 | 500 | 602 |
| 920000 | ADM \& GENERAL SALARIES | 131,612 | 554,070 | $(422,458)$ | 68,405 | 501,235 | $(432,830)$ | $(42,628)$ | 590,070 | $(632,698)$ |
| 920500 | INCENTIVE PLAN EXPENSE | 31,411 | 31,932 | (521) | 31,895 | 27,766 | 4,129 | 29,004 | 31,932 | $(2,928)$ |
| 921100 | EXPENSES OF EMPLOYEES | 15,841 | 4,421 | 11,420 | 6,049 | 11,277 | $(5,228)$ | (243) | 7,061 | $(7,304)$ |
| 921130 | DUES FOR CLUBS-TAXABLE | 1,657 | 177 | 1,480 | 1,421 | 550 | 871 | 2,523 | 4,583 | $(2,060)$ |
| 921200 | MISC OFFICE EXP SUP | 39,200 | 15,141 | 24,059 | 25,167 | 14,313 | 10,854 | 49,789 | 15,163 | 34,626 |
| 923100 | SERVICE COMPANY CHARGES | 648,109 | 614,675 | 33,434 | 610,103 | 576,917 | 33,186 | 672,990 | 605,772 | 67,218 |
| 923300 | LEGAL SERVICES | 16,118 | 6,250 | 9,868 | 3,347 | 6,250 | $(2,903)$ | 7,723 | 6,250 | 1,473 |
| 923500 | OTHER SERVICES-CURRENT | 63,843 | 58,189 | 5,654 | 27,186 | 48,292 | $(21,106)$ | 69,398 | 44,921 | 24,477 |
| 924000 | PROPERTY INSURANCE | 10,025 | 3,000 | 7,025 | 10,025 | 3,000 | 7,025 | 10,026 | 3,000 | 7,026 |
| 925110 | WORKMENS COMP PREMIUM EXP | 11,987 | 13,142 | $(1,155)$ | 10,160 | 13,142 | $(2,982)$ | 11,890 | 13,142 | $(1,252)$ |
| 925300 | INJURIES \& DAMAGES EXP | $(2,400)$ | 1,500 | $(3,900)$ | 354 | 1,500 | $(1,146)$ | 547 | 1,500 | (953) |
| 925400 | GENERAL LIABILITY | 25,861 | 44,333 | $(18,472)$ | 26,519 | 44,333 | $(17,814)$ | 40,399 | 44,333 | $(3,934)$ |
| 926100 | ACCRUED OPEB EXPENSE | 35,220 | 57,028 | $(21,808)$ | 19,048 | 57,028 | $(37,980)$ | $(15,161)$ | 57,028 | $(72,189)$ |
| 926110 | GROUP INSURANCE PREM EXP | 118,523 | 108,060 | 10,463 | 120,185 | 108,060 | 12,125 | 112,826 | 111,400 | 1,426 |
| 926160 | GROUP INS CAP (A \& B) | $(16,033)$ |  | $(16,033)$ | $(22,130)$ |  | $(22,130)$ | $(23,134)$ |  | $(23,134)$ |
| 926200 | OTHER WELFARE EXPENSES | 4,731 | 3,400 | 1,331 | 2,904 | 4,200 | $(1,296)$ | 4,139 | 5,650 | $(1,511)$ |
| 926250 | 401-K CONTRIBUTIONS EXPENSE | 9,116 | 8,452 | 664 | 8,381 | 7,591 | 790 | 8,677 | 8,907 | (230) |
| 926400 | PENSION PLAN EXPENSE | 67,034 | 43,190 | 23,844 | 67,034 | 43,190 | 23,844 | 67,034 | 43,190 | 23,844 |
| 926600 | OTHER PENSION PLAN EXP | 8,294 | 2,500 | 5,794 | 7,850 | 2,500 | 5,350 | 12,091 | 3,000 | 9,091 |
| 928100 | PENSIONS CAP ( $C$ \& R) | 12,443 | 45,833 | $(33,390)$ | 12,443 | 45,833 | $(33,390)$ | 12,443 | 45,833 | $(33,390)$ |
| 928300 | AMORT OTHER REGULATRY EXP | 1,022 | - | 1,022 | 1,022 | - | 1,022 | 1,022 | - | 1,022 |
| 928400 | OTH REGULATORY EXP-CURRENT | 13,058 | 6,301 | 6,757 | 13,955 | 6,301 | 7,654 | 9,957 | 6,301 | 3,656 |
| 930200 | AMORT MISC CHARGES | - | - | - | - | - | - | - | - | - |
| 930210 | MISC GENERAL EXP-CURRENT | 50,219 | 23,426 | 26,793 | 22,355 | 21,920 | 435 | 2,242 | 26,131 | $(23,889)$ |
| 930230 | MISC GENERAL EXP-CURRENT | 2,720 | 2,300 | 420 | 5,338 | 2,300 | 3,038 | 2,864 | 2,300 | 564 |
| 930260 | MEALS \& TRAVEL EXPENSES-TAXA | 2,105 | 1,565 | 540 | 1,820 | 2,218 | (398) | 2,053 | 1,565 | 488 |
| 930300 | COLLECTING EXPENSES | - | - | - | - | - | - | - | - | - |
| 930600 | TRANSPORTATION EXPENSES | 60,749 | 39,000 | 21,749 | 53,919 | 39,000 | 14,919 | 47,591 | 39,000 | 8,591 |
| 930880 | MISC GEN EXP-COMPANY DUES | 2,053 | 250 | 1,803 | 2,078 | 1,545 | 533 | 2,053 | 4,400 | $(2,347)$ |
| 930890 | MISC GEN EXP-OTHER | 3,584 | 506 | 3,078 | 1,448 | 3,206 | $(1,758)$ | 10,212 | 706 | 9,506 |
| 930890 | MISC GEN EXP-OTHER | 5,584 | 5,006 | 578 | 2,948 | 3,206 | (258) | 11,712 | 706 | 11,006 |
| 931000 | ADM \& GENERAL RENTS | 4,050 | 2,700 | 1,350 | 2,133 | 2,200 | (67) | 3,426 | 2,200 | 1,226 |
| 932100 | OR MN A\&G STRUC \& IMP MAT | 8,654 | 43,803 | $(35,149)$ | $(5,371)$ | 6,803 | $(12,174)$ | 10,248 | 6,803 | 3,445 |
| 932700 | OR MN A\&G MISC PROPTY MAT | 13,358 | 1,500 | 11,858 | 4,507 | 1,500 | 3,007 | 2,310 | 1,500 | 810 |


| $\begin{gathered} \text { YEAR-20 } \\ \text { AWW } \\ \hline \end{gathered}$ | 1 Description | 2009 January <br> Actual |  | Variance | $\begin{gathered} 2009 \\ \text { February } \\ \text { Actual } \\ \hline \end{gathered}$ | $\begin{gathered} 2009 \\ \text { February } \\ \text { Budget } \end{gathered}$ | Variance |  |  | Variance |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 403000 | DEPRECIATION EXPENSE | 708,132 | 695,061 | 13,071 | 710,634 | 697,530 | 13,104 | 712,367 | 698,939 | 13,428 |
| 403100 | DEPRECIATION EXPENSE-CONTR PROP | $(111,787)$ | - | $(111,787)$ | $(112,925)$ | - | $(112,925)$ | $(113,039)$ | - | $(113,039)$ |
| 404100 | AMORT LIM TERM UT PLT | 575 | 575 | - | 575 | 575 | - | 575 | 575 | - |
| 404430 | AMORT REG ASSET - AFUDC | 5,946 | 6,000 | (54) | 6,837 | 6,000 | 837 | 6,391 | 6,000 | 391 |
| 406000 | AMORT UT PLT ACQ ADJUST | 1,814 | 1,801 | 13 | 838 | 1,801 | (963) | 1,814 | 1,801 | 13 |
| 407000 | AMORT PROPERTY LOSSES | 34,349 | 36,016 | $(1,667)$ | 34,349 | 36,016 | $(1,667)$ | 34,349 | 36,016 | $(1,667)$ |
| 408030 | OTHER GENERAL TAXES | 7,050 | 9,039 | $(1,989)$ | 7,050 | 9,039 | $(1,989)$ | 7,050 | 9,039 | $(1,989)$ |
| 408100 | REAL \& PERSON PROP TAXES | 228,844 | 246,946 | $(18,102)$ | 228,844 | 246,946 | $(18,102)$ | 162,718 | 246,946 | $(84,228)$ |
| 408110 | GROSS INC \& RECPTS TAXES | - | - | - | - | - | - | - | - | - |
| 408140 | FEDERAL UNEMPLYMNT TXS | 4,294 | - | 4,294 | 33 | - | 33 | (154) | - | (154) |
| 408160 | FICA | 39,888 | 43,384 | $(3,496)$ | 34,037 | 39,503 | $(5,466)$ | 32,384 | 43,028 | $(10,644)$ |
| 408180 | STATE UNEMPLYMNT TXS | 5,166 | - | 5,166 | 700 | - | 700 | 3,868 | - | 3,868 |
| 409100 | SIT-CURRENT | 17,373 | 6,086 | 11,287 | 51,344 | $(26,627)$ | 77,971 | $(126,144)$ | $(7,981)$ | $(118,163)$ |
| 409110 | SIT-ADJUST PRIOR YEARS | - | - | - | - | - | - | - | - | - |
| 409150 | FIT-CURRENT | 89,987 | 34,638 | 55,349 | 265,950 | $(92,696)$ | 358,646 | $(651,794)$ | $(20,118)$ | $(631,676)$ |
| 409160 | FIT-ADJUST PRIOR YEARS | - | - | - | - | - |  | - |  | - |
| 409210 | SIT-OTH INC \& DED-REG | $(1,709)$ | $(10,270)$ | 8,561 | $(1,931)$ | $(1,088)$ | (843) | 4,005 | $(2,620)$ | 6,625 |
| 409220 | FIT-OTH INC \& DED-REG | $(8,851)$ | $(39,974)$ | 31,123 | $(10,002)$ | $(4,233)$ | $(5,769)$ | 20,221 | $(10,197)$ | 30,418 |
| 410400 | DEF SIT-REG ASSET/LIAB | 380 | - | 380 | 380 | - | 380 | 380 | - | 380 |
| 410600 | DEF SIT-OTHER | 7,972 | 28,861 | $(20,889)$ | 23,871 | 55,555 | $(31,684)$ | 150,034 | 45,122 | 104,912 |
| 410700 | DEF FIT-REG ASSET/LIAB | 18,564 | - | 18,564 | 18,564 | - | 18,564 | 18,564 | - | 18,564 |
| 410900 | DEF FIT-OTHER | 48,467 | 186,940 | $(138,473)$ | 137,407 | 308,896 | $(171,489)$ | 783,182 | 278,687 | 504,495 |
| 412210 | ITC RESTORED-3\% | (638) | - | (638) | (638) | - | (638) | (638) | - | (638) |
| 412220 | ITC RESTORED-4\% | (525) | - | (525) | (525) | - | (525) | (525) | - | (525) |
| 412230 | ITC RESTORED-10\% | $(5,903)$ | (628) | $(5,275)$ | $(5,903)$ | $(7,797)$ | 1,894 | $(5,903)$ | 4,789 | $(10,692)$ |
| 415100 | M\&J REVENUES-OUTSIDE | 905 | - | 905 | $(17,110)$ | - | $(17,110)$ | $(34,434)$ | - | $(34,434)$ |
| 416100 | M\&J EXPENSES-OUTSIDE | 9,861 | - | 9,861 | 8,676 | - | 8,676 | 25,555 | - | 25,555 |
| 416110 | M\&J EXPENSES-OUTSIDE | 271 | - | 271 | 851 | - | 851 | 922 | - | 922 |
| 420100 | AFUDC - EQUITY | $(231,425)$ | $(283,069)$ | 51,644 | $(460,693)$ | $(313,643)$ | $(147,050)$ | $(371,137)$ | $(356,363)$ | $(14,774)$ |
| 420210 | AFUDC - DEBT | $(123,332)$ | $(128,552)$ | 5,220 | $(198,939)$ | $(142,437)$ | $(56,502)$ | $(174,349)$ | $(161,837)$ | $(12,512)$ |
| 425100 | AFUDC UT PLT ACQ ADJUST | (35) | - | (35) | (35) | - | (35) | (35) | - | (35) |
| 425300 | AMORT PREFERRED STOCK EXP | 64 | 64 | - | 64 | 64 | - | 64 | 64 | - |
| 426100 | DONATIONS | 13,337 | 64,184 | $(50,847)$ | 18,882 | 6,684 | 12,198 | 18,830 | 18,830 | - |
| 426160 | OTHER LOBBYING EXPENSES | - | - | - | - | - |  | 10,377 | 7,500 | 2,877 |
| 426200 | OTHER INCOME DEDUCTIONS | 23,184 | 60,297 | $(37,113)$ | 50,020 | 6,499 | 43,521 | $(2,150)$ | 5,424 | $(7,574)$ |
| 426410 | NON-OPER EMPLOYEE EXP | - | - | - | - | - | - | 150 | - | 150 |
| 426420 | NON-OPER EMPLOYEE EXP - TAXABLE | - | - | - | - | - | - | - | - | - |
| 427100 | INTEREST LTD-OUT-REG | 126,837 | - | 126,837 | 126,695 | - | 126,695 | 126,837 | - | 126,837 |
| 427120 | INTEREST LTD-OUT-REG | 311,468 | 480,826 | $(169,358)$ | 311,468 | 480,826 | $(169,358)$ | 310,877 | 463,078 | $(152,201)$ |
| 428000 | AMORT DEBT DISCOUNT \& EXP | 7,332 | 5,876 | 1,456 | 7,332 | 5,876 | 1,456 | 7,332 | 5,876 | 1,456 |
| 431100 | INTEREST ON BANK DEBT | 40,879 | 135,953 | $(95,074)$ | 42,088 | 152,560 | $(110,472)$ | 57,614 | 150,547 | $(92,933)$ |
| 431200 | OTHER INTEREST EXPENSE | - | - | - | - | - | - | - | - | - |
| 431200 | OTHER INTEREST EXPENSE | - | - | - | - | - | - | - | - | - |
| 437100 | DIV DEC PREF STK-OUTSIDE | 39,549 | 6,511 | 33,038 | 38,274 | 6,511 | 31,763 | 38,274 | 6,511 | 31,763 |
| 438200 | DIVIDENDS DECLARED COMMON - IN | - | - | - | - | - | - | 1,708,456 | - | 1,708,456 |
| 461000 | DOMESTIC SEWER SERV BILLED | - | $(14,464)$ | 14,464 | - | $(14,001)$ | 14,001 | - | $(13,945)$ | 13,945 |
| 461020 | COMMERCIAL SEWER SERV BILLED | - | $(9,233)$ | 9,233 | - | $(8,400)$ | 8,400 | - | $(8,883)$ | 8,883 |
| 461100 | RES SALES BILLED METERED | (2,524,896) | $(2,371,569)$ | $(153,327)$ | $(2,304,618)$ | $(2,229,228)$ | $(75,390)$ | (2,195,421) | $(2,345,277)$ | 149,856 |
| 461110 | RES SALES UNBILL METERED | 203,318 | - | 203,318 | 40,084 | - | 40,084 | $(136,851)$ | - | $(136,851)$ |
| 461200 | COM SALES BILLED METERED | $(1,080,176)$ | $(1,085,825)$ | 5,649 | $(1,061,851)$ | $(1,024,634)$ | $(37,217)$ | $(982,274)$ | (1,130,331) | 148,057 |
| 461210 | COM SALES UNBILL METERED | 179,139 | (1) | 179,139 | $(52,525)$ | - | $(52,525)$ | $(28,446)$ | (1,130, - | $(28,446)$ |
| 461300 | IND SALES BILLED METERED | $(83,317)$ | $(110,146)$ | 26,829 | $(82,913)$ | $(120,254)$ | 37,341 | $(90,115)$ | $(131,028)$ | 40,913 |
| 461310 | IND SALES UNBILL METERED | 27,386 | - | 27,386 | $(16,552)$ | - | $(16,552)$ | 6,042 | - | 6,042 |
| 461400 | MISC SALES BILLED METERED | (167) | - | (167) | (662) | - | (662) | (440) | - | (440) |
| 462000 | PRIV FIR PROT SER BILLED | $(117,924)$ | $(197,199)$ | 79,275 | $(113,650)$ | $(197,742)$ | 84,092 | $(111,178)$ | $(198,258)$ | 87,080 |
| 462110 | INDUSTRIAL WASTE SER UNBILL | - | (1) | - | , | ) |  |  | (1) | - |
| 462210 | INDUSTRIAL WASTER SER | - | $(2,065)$ | 2,065 | (500) | $(3,250)$ | 2,750 | $(1,000)$ | $(1,861)$ | 861 |
| 463000 | PUB FIRE PROT SER BILLED | $(197,064)$ | $(102,739)$ | $(94,325)$ | $(197,064)$ | $(102,849)$ | $(94,215)$ | $(197,064)$ | $(102,960)$ | $(94,104)$ |
| 463300 | PUB AUTH SEWER SERV BILLED | - |  | - | $(197,06)$ | - | - | - | - | - |
| 464200 | PUB AUTH SLS BILLED METRD | $(336,839)$ | $(288,735)$ | $(48,104)$ | $(326,257)$ | $(226,125)$ | $(100,132)$ | $(289,323)$ | $(346,928)$ | 57,605 |
| 464210 | PUB AUTH SLS UNBILL METRD | 136,292 | (1) | 136,292 | 34,951 |  | 34,951 | $(86,153)$ | - | $(86,153)$ |
| 466000 | SALES FOR RESALE BILLED | $(107,774)$ | $(59,138)$ | $(48,636)$ | $(98,171)$ | $(67,519)$ | $(30,652)$ | $(97,750)$ | $(52,333)$ | $(45,417)$ |
| 466100 | SALES FOR RESALE UNBILL | 33,110 | - | 33,110 | $(10,408)$ | - | $(10,408)$ | 11,900 | - | 11,900 |
| 470000 | FORFEITED DISCOUNTS | - | - | - | - | - | - | - | - | - |
| 471100 | RECONNECTION CHARGES | $(45,968)$ | $(41,600)$ | $(4,368)$ | $(55,484)$ | $(41,600)$ | $(13,884)$ | $(59,540)$ | $(41,600)$ | $(17,940)$ |
| 471200 | OTHER MISC SERV REVENUES | $(40,145)$ | $(51,849)$ | 11,704 | $(35,509)$ | $(51,849)$ | 16,340 | $(43,009)$ | $(51,849)$ | 8,840 |
| 471400 | BILLING \& COLLECTIONS FOR OTHERS | $(78,223)$ | $(84,201)$ | 5,978 | $(98,378)$ | $(84,201)$ | $(14,177)$ | $(93,572)$ | $(84,201)$ | $(9,371)$ |
| 472000 | RENTS FROM WATER PROPERTY | $(8,406)$ | $(7,835)$ | (571) | $(11,071)$ | $(7,835)$ | $(3,236)$ | $(8,906)$ | $(7,835)$ | $(1,071)$ |
| 474300 | MISCELLANEOUS | (840) | - | (840) | (837) | - | (837) | (950) | - | (950) |
| 601100 | SS OPERATION EXPENSE | 5,270 | - | 5,270 | 2,903 | - | 2,903 | 454 | - | 454 |
| 602000 | PURCHASED WATER | 4,150 | 11,639 | $(7,489)$ | 10,036 | 8,204 | 1,832 | 12,247 | 13,753 | $(1,506)$ |
| 603100 | MISCELLANEOUS SS EXPENSES | 571 | 3,660 | $(3,089)$ | 2,275 | 3,305 | $(1,030)$ | 3,171 | 3,305 | (134) |
| 610000 | SS ORDNY MAINT SUPR \& ENG | - | - | - | 1,494 | - | 1,494 | - | - | - |
| 617100 | OR MN MISC WAT SS PLT MAT | 794 | 7,700 | $(6,906)$ | 1,833 | 7,700 | $(5,867)$ | 1,493 | 7,700 | $(6,207)$ |
| 623110 | POWER PURCH FOR PUMP ELEC | 30,681 | - | 30,681 | 34,588 | - | 34,588 | 34,798 | - | 34,798 |
| 623210 | FUEL PURCH FOR PUMP OTHER | 180,476 | 241,268 | $(60,792)$ | 192,531 | 223,697 | $(31,166)$ | 212,239 | 252,463 | $(40,224)$ |
| 626500 | MISC PUMPING EXP ELECTRIC | $(18,367)$ | 250 | $(18,617)$ | $(19,682)$ | 250 | $(19,932)$ | $(22,814)$ | 250 | $(23,064)$ |
| 630200 | MISC PUMPING EXP OTHER | 5,167 | 1,066 | 4,101 | 6,856 | 1,066 | 5,790 | 6,086 | 1,066 | 5,020 |
| 633300 | OR MN PUMP EQPT MAT OTHER | - | - | - | - | - | - | - | - | - |
| 641100 | GENERAL CHEMICALS | 163,763 | 189,512 | $(25,749)$ | 169,112 | 132,457 | 36,655 | 169,923 | 168,847 | 1,076 |
| 642100 | GENERAL WT LABOR | 124,666 | 12,933 | 111,733 | 123,151 | 9,433 | 113,718 | 108,342 | 9,433 | 98,909 |
| 642300 | GENERAL WT EXPENSES | 15,203 | 9,262 | 5,941 | 20,952 | 11,528 | 9,424 | 6,240 | 10,632 | $(4,392)$ |
| 643100 | MISC WT EXPENSES-CURRENT | 12,229 | 10,638 | 1,591 | (372) | 9,648 | $(10,020)$ | 11,334 | 10,153 | 1,181 |
| 643300 | WASTE DISPOSAL EXP (CUR) | 12,853 | 14,065 | $(1,212)$ | 15,238 | 14,995 | 243 | 15,564 | 17,703 | $(2,139)$ |
| 643310 | AMORT WASTE DISPOSAL EXP | - | - | - | - | - | - | - | 10,000 | $(10,000)$ |
| 650000 | OR MN WT SUPR \& ENG | 8,974 | 1,066 | 7,908 | 7,732 | 1,066 | 6,666 | 13,776 | 1,066 | 12,710 |


| $\begin{gathered} \text { YEAR-20 } \\ \text { AWW } \\ \hline \end{gathered}$ | 9 Description | 2009 April Actual | $\begin{gathered} 2009 \\ \text { April } \\ \text { Budget } \\ \hline \end{gathered}$ | Variance | $\begin{gathered} 2009 \\ \text { May } \\ \text { Actual } \end{gathered}$ |  | Variance | $\begin{gathered} \hline 2009 \\ \text { June } \\ \text { Actual } \end{gathered}$ | $\begin{gathered} \hline 2009 \\ \text { June } \\ \text { Budget } \\ \hline \end{gathered}$ | Variance |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 403000 | DEPRECIATION EXPENSE | 715,177 | 700,297 | 14,880 | 718,397 | 701,396 | 17,001 | 727,432 | 703,400 | 24,032 |
| 403100 | DEPRECIATION EXPENSE-CONTR PROP | $(113,563)$ | - | $(113,563)$ | $(113,670)$ | - | $(113,670)$ | $(113,804)$ | - | $(113,804)$ |
| 404100 | AMORT LIM TERM UT PLT | 575 | 575 | - | 575 | 575 | - | 575 | 575 | - |
| 404430 | AMORT REG ASSET - AFUDC | 6,155 | 6,000 | 155 | 6,332 | 6,000 | 332 | 6,332 | 6,000 | 332 |
| 406000 | AMORT UT PLT ACQ ADJUST | 1,787 | 1,801 | (14) | 1,801 | 1,801 | - | 1,801 | 1,801 | - |
| 407000 | AMORT PROPERTY LOSSES | 34,349 | 36,016 | $(1,667)$ | 34,349 | 36,016 | $(1,667)$ | 34,349 | 36,016 | $(1,667)$ |
| 408030 | OTHER GENERAL TAXES | 7,050 | 9,039 | $(1,989)$ | 7,050 | 9,039 | $(1,989)$ | 7,050 | 9,039 | $(1,989)$ |
| 408100 | REAL \& PERSON PROP TAXES | 229,073 | 246,946 | $(17,873)$ | 229,073 | 246,946 | $(17,873)$ | 338,658 | 246,946 | 91,712 |
| 408110 | GROSS INC \& RECPTS TAXES | - | - | - | - | - |  | - | - | - |
| 408140 | FEDERAL UNEMPLYMNT TXS | (11) | - | (11) | - | - | - | 83 | - | 83 |
| 408160 | FICA | 47,020 | 44,180 | 2,840 | 38,975 | 42,462 | $(3,487)$ | 42,681 | 43,808 | $(1,127)$ |
| 408180 | STATE UNEMPLYMNT TXS | 59 | - | 59 | - | - |  | 148 |  | 148 |
| 409100 | SIT-CURRENT | 87,779 | $(30,562)$ | 118,341 | 31,131 | $(16,133)$ | 47,264 | 69,235 | 118,482 | $(49,247)$ |
| 409110 | SIT-ADJUST PRIOR YEARS | - | - | - | $(72,200)$ | - | $(72,200)$ | 40,334 | - | 40,334 |
| 409150 | FIT-CURRENT | $(54,202)$ | $(108,013)$ | 53,811 | $(38,685)$ | $(51,848)$ | 13,163 | 263,819 | 472,130 | $(208,311)$ |
| 409160 | FIT-ADJUST PRIOR YEARS | - | - | - | $(121,971)$ | - | $(121,971)$ | 40,678 | - | 40,678 |
| 409210 | SIT-OTH INC \& DED-REG | $(2,681)$ | $(2,179)$ | (502) | (101) | $(2,958)$ | 2,857 | $(1,469)$ | $(3,672)$ | 2,203 |
| 409220 | FIT-OTH INC \& DED-REG | 1,510 | $(8,483)$ | 9,993 | 125 | $(11,513)$ | 11,638 | $(5,848)$ | $(14,294)$ | 8,446 |
| 410400 | DEF SIT-REG ASSET/LIAB | 380 | - | 380 | 380 | - | 380 | 380 | - | 380 |
| 410600 | DEF SIT-OTHER | $(20,333)$ | 66,091 | $(86,424)$ | 163,311 | 59,677 | 103,634 | 50,989 | $(19,536)$ | 70,525 |
| 410700 | DEF FIT-REG ASSET/LIAB | 18,564 | - | 18,564 | 18,564 | - | 18,564 | 18,564 | - | 18,564 |
| 410900 | DEF FIT-OTHER | 401,616 | 370,632 | 30,984 | 702,659 | 369,958 | 332,701 | 394,621 | 245,755 | 148,866 |
| 412210 | ITC RESTORED- $3 \%$ | (638) | - | (638) | (638) | - | (638) | (638) |  | (638) |
| 412220 | ITC RESTORED-4\% | (525) | - | (525) | (525) | - | (525) | (525) | - | (525) |
| 412230 | ITC RESTORED-10\% | $(5,903)$ | $(9,565)$ | 3,662 | $(5,903)$ | $(8,953)$ | 3,050 | $(5,903)$ | $(4,891)$ | $(1,012)$ |
| 415100 | M\&J REVENUES-OUTSIDE | $(5,588)$ | - | $(5,588)$ | $(10,679)$ | - | $(10,679)$ | $(4,747)$ |  | $(4,747)$ |
| 416100 | M\&J EXPENSES-OUTSIDE | 3,640 | - | 3,640 | 6,159 | - | 6,159 | 3,171 | - | 3,171 |
| 416110 | M\&J EXPENSES-OUTSIDE | 315 | - | 315 | 397 | - | 397 | - | - | - |
| 420100 | AFUDC - EQUITY | $(419,532)$ | $(403,062)$ | $(16,470)$ | $(458,630)$ | $(442,673)$ | $(15,957)$ | $(352,260)$ | $(254,060)$ | $(98,200)$ |
| 420210 | AFUDC - DEBT | $(197,047)$ | $(183,045)$ | $(14,002)$ | $(215,403)$ | $(201,034)$ | $(14,369)$ | $(175,989)$ | $(115,378)$ | $(60,611)$ |
| 425100 | AFUDC UT PLT ACQ ADJUST | (35) | - | (35) | (35) | - | (35) | (35) | - | (35) |
| 425300 | AMORT PREFERRED STOCK EXP | 64 | 64 | - | 64 | 64 | - | 64 | 64 | - |
| 426100 | DONATIONS | 10,420 | 18,566 | $(8,146)$ | 8,328 | 22,099 | $(13,771)$ | 11,550 | 16,640 | $(5,090)$ |
| 426160 | OTHER LOBBYING EXPENSES | (239) | - | (239) | 4,103 | - | 4,103 | 4,006 | - | 4,006 |
| 426200 | OTHER INCOME DEDUCTIONS | 17,879 | 7,850 | 10,029 | 1,505 | 13,753 | $(12,248)$ | 30,390 | 27,873 | 2,517 |
| 426410 | NON-OPER EMPLOYEE EXP | - | - | - | - | - | - | - | - | - |
| 426420 | NON-OPER EMPLOYEE EXP - TAXABLE | - | - | - | - | - | - | - |  | - |
| 427100 | INTEREST LTD-OUT-REG | 126,837 | - | 126,837 | 126,837 | - | 126,837 | 126,837 | - | 126,837 |
| 427120 | INTEREST LTD-OUT-REG | 293,721 | 463,078 | $(169,357)$ | 293,721 | 678,021 | $(384,300)$ | 348,882 | 678,021 | $(329,139)$ |
| 428000 | AMORT DEBT DISCOUNT \& EXP | 7,332 | 5,876 | 1,456 | 7,332 | 10,501 | $(3,169)$ | 7,332 | 10,501 | $(3,169)$ |
| 431100 | INTEREST ON BANK DEBT | 44,137 | 153,237 | $(109,100)$ | 47,105 | 118,179 | $(71,074)$ | 40,565 | 78,702 | $(38,137)$ |
| 431200 | OTHER INTEREST EXPENSE | - | - | - | - | - | - | - |  | - |
| 431200 | OTHER INTEREST EXPENSE | - | - | - | - | - | - | - | - | - |
| 437100 | DIV DEC PREF STK-OUTSIDE | 38,274 | 6,511 | 31,763 | 38,274 | 6,511 | 31,763 | 38,274 | 6,511 | 31,763 |
| 438200 | DIVIDENDS DECLARED COMMON - IN | - | - | - | - | - | - | 1,489,021 | - | 1,489,021 |
| 461000 | DOMESTIC SEWER SERV BILLED | - | $(15,366)$ | 15,366 | - | $(13,663)$ | 13,663 | - | $(16,018)$ | 16,018 |
| 461020 | COMMERCIAL SEWER SERV BILLED | - | $(8,829)$ | 8,829 | - | $(8,141)$ | 8,141 | - | $(8,661)$ | 8,661 |
| 461100 | RES SALES BILLED METERED | $(2,327,010)$ | $(2,275,094)$ | $(51,916)$ | $(2,320,332)$ | $(2,504,305)$ | 183,973 | $(2,709,556)$ | $(3,300,598)$ | 591,042 |
| 461110 | RES SALES UNBILL METERED | 112,412 | - | 112,412 | $(259,677)$ | - | $(259,677)$ | $(227,699)$ | - | $(227,699)$ |
| 461200 | COM SALES BILLED METERED | $(1,059,941)$ | $(1,111,086)$ | 51,145 | $(1,074,768)$ | $(1,212,475)$ | 137,707 | $(1,238,179)$ | $(1,655,242)$ | 417,063 |
| 461210 | COM SALES UNBILL METERED | 25,958 | - | 25,958 | $(171,127)$ | - | $(171,127)$ | $(159,612)$ | - | $(159,612)$ |
| 461300 | IND SALES BILLED METERED | $(87,432)$ | $(137,095)$ | 49,663 | $(90,197)$ | $(134,815)$ | 44,618 | $(92,949)$ | $(185,301)$ | 92,352 |
| 461310 | IND SALES UNBILL METERED | 6,218 | (137,05) | 6,218 | $(23,484)$ | (1) | $(23,484)$ | $(40,809)$ | - | $(40,809)$ |
| 461400 | MISC SALES BILLED METERED | (951) | - | (951) | $(2,111)$ | - | $(2,111)$ | $(2,123)$ | - | $(2,123)$ |
| 462000 | PRIV FIR PROT SER BILLED | $(118,931)$ | $(198,773)$ | 79,842 | $(124,069)$ | $(199,289)$ | 75,220 | $(269,412)$ | $(249,405)$ | $(20,007)$ |
| 462110 | INDUSTRIAL WASTE SER UNBILL | - | - | - | - | - | - | - | - | - |
| 462210 | INDUSTRIAL WASTER SER | (500) | $(2,624)$ | 2,124 | (500) | $(2,922)$ | 2,422 | (500) | $(3,098)$ | 2,598 |
| 463000 | PUB FIRE PROT SER BILLED | $(197,064)$ | $(103,070)$ | $(93,994)$ | $(197,471)$ | $(103,181)$ | $(94,290)$ | $(225,483)$ | $(129,198)$ | $(96,285)$ |
| 463300 | PUB AUTH SEWER SERV BILLED | - | - | - | (172) | - | (172) | (566) | - | (566) |
| 464200 | PUB AUTH SLS BILLED METRD | $(309,480)$ | $(342,026)$ | 32,546 | $(336,328)$ | $(340,805)$ | 4,477 | $(368,672)$ | $(496,098)$ | 127,426 |
| 464210 | PUB AUTH SLS UNBILL METRD | 12,401 | - | 12,401 | $(13,726)$ | (1) | $(13,726)$ | $(117,770)$ | - | $(117,770)$ |
| 466000 | SALES FOR RESALE BILLED | $(80,108)$ | $(63,575)$ | $(16,533)$ | $(96,351)$ | $(94,784)$ | $(1,567)$ | $(115,655)$ | $(165,667)$ | 50,012 |
| 466100 | SALES FOR RESALE UNBILL | $(11,935)$ | - | $(11,935)$ | $(25,130)$ | - | $(25,130)$ | $(67,622)$ | - | $(67,622)$ |
| 470000 | FORFEITED DISCOUNTS | - | - | - | - | - | - | - | - | - |
| 471100 | RECONNECTION CHARGES | $(63,830)$ | $(41,600)$ | $(22,230)$ | $(63,336)$ | $(41,600)$ | $(21,736)$ | $(74,802)$ | $(41,600)$ | $(33,202)$ |
| 471200 | OTHER MISC SERV REVENUES | $(47,218)$ | $(51,849)$ | 4,631 | $(47,450)$ | $(51,849)$ | 4,399 | $(60,882)$ | $(51,849)$ | $(9,033)$ |
| 471400 | BILLING \& COLLECTIONS FOR OTHERS | $(93,080)$ | $(84,201)$ | $(8,879)$ | $(93,272)$ | $(84,201)$ | $(9,071)$ | $(93,301)$ | $(84,201)$ | $(9,100)$ |
| 472000 | RENTS FROM WATER PROPERTY | $(8,406)$ | $(7,835)$ | (571) | $(5,740)$ | $(7,835)$ | 2,095 | $(7,355)$ | $(7,835)$ | 480 |
| 474300 | miscellaneous | (714) | - | (714) | (760) | - | (760) | (738) | - | (738) |
| 601100 | SS OPERATION EXPENSE | ( | - | - | - | - | - | - | - | - |
| 602000 | PURCHASED WATER | 10,186 | 15,495 | $(5,309)$ | 9,124 | 12,442 | $(3,318)$ | 9,281 | 10,091 | (810) |
| 603100 | miscellaneous ss expenses | 2,086 | 3,305 | $(1,219)$ | 2,600 | 3,660 | $(1,060)$ | 1,984 | 3,305 | $(1,321)$ |
| 610000 | SS ORDNY MAINT SUPR \& ENG | - | - | - | - | - | - | - | - | - |
| 617100 | OR MN MISC WAT SS PLT MAT | 17,823 | 58,700 | $(40,877)$ | 3,452 | 17,700 | $(14,248)$ | 61,215 | 7,700 | 53,515 |
| 623110 | POWER PURCH FOR PUMP ELEC | 37,567 | - | 37,567 | 23,820 | - | 23,820 | 27,346 | - | 27,346 |
| 623210 | FUEL PURCH FOR PUMP OTHER | 168,777 | 236,462 | $(67,685)$ | 252,019 | 345,223 | $(93,204)$ | 212,520 | 381,479 | $(168,959)$ |
| 626500 | MISC PUMPING EXP ELECTRIC | $(13,742)$ | 250 | $(13,992)$ | $(8,939)$ | 250 | $(9,189)$ | $(12,535)$ | 250 | $(12,785)$ |
| 630200 | MISC PUMPING EXP OTHER | 5,950 | 1,066 | 4,884 | 4,565 | 1,066 | 3,499 | 7,199 | 1,066 | 6,133 |
| 633300 | OR MN PUMP EQPT MAT OTHER | - | - | - | - | - | - | - | - | - |
| 641100 | GENERAL CHEMICALS | 143,485 | 185,106 | $(41,621)$ | 231,648 | 198,953 | 32,695 | 246,395 | 206,384 | 40,011 |
| 642100 | GENERAL WT LABOR | 117,138 | 12,985 | 104,153 | 118,418 | 12,985 | 105,433 | 169,527 | 9,485 | 160,042 |
| 642300 | GENERAL WT EXPENSES | 16,367 | 13,948 | 2,419 | 11,981 | 14,250 | $(2,269)$ | 10,156 | 13,473 | $(3,317)$ |
| 643100 | MISC WT EXPENSES-CURRENT | 3,109 | 8,606 | $(5,497)$ | 3,928 | 6,092 | $(2,164)$ | 10,036 | 10,611 | (575) |
| 643300 | WASTE DISPOSAL EXP (CUR) | 16,563 | 16,820 | (257) | 19,178 | 13,952 | 5,226 | 12,860 | 15,813 | $(2,953)$ |
| 643310 | AMORT WASTE DISPOSAL EXP | - | 10,000 | $(10,000)$ | - | 10,000 | $(10,000)$ | - | 10,000 | $(10,000)$ |
| 650000 | OR MN WT SUPR \& ENG | 21,524 | 1,066 | 20,458 | 17,127 | 1,066 | 16,061 | 35,093 | 1,066 | 34,027 |


| YEAR-2 <br> AWW | 9 Description | $\begin{gathered} 2009 \\ \text { July } \\ \text { Actual } \end{gathered}$ | $\begin{gathered} 2009 \\ \text { July } \\ \text { Budget } \end{gathered}$ | Variance |  |  | Variance | 2009 September Actual | 2009 September Budget | Variance |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 403000 | DEPRECIATION EXPENSE | 728,131 | 712,205 | 15,926 | 729,917 | 718,431 | 11,486 | 731,166 | 720,439 | 10,727 |
| 403100 | DEPRECIATION EXPENSE-CONTR PROP | $(114,137)$ | - | $(114,137)$ | $(114,822)$ | - | $(114,822)$ | $(115,335)$ | - | $(115,335)$ |
| 404100 | AMORT LIM TERM UT PLT | 575 | 575 | - | 575 | 575 | - | 575 | 575 | - |
| 404430 | AMORT REG ASSET - AFUDC | 6,332 | 6,000 | 332 | 6,332 | 6,000 | 332 | 6,332 | 6,000 | 332 |
| 406000 | AMORT UT PLT ACQ ADJUST | 1,801 | 1,801 | - | 1,801 | 1,801 | - | 1,801 | 1,801 | - |
| 407000 | AMORT PROPERTY LOSSES | 39,611 | 36,016 | 3,595 | 29,087 | 36,016 | $(6,929)$ | 34,349 | 36,016 | $(1,667)$ |
| 408030 | OTHER GENERAL TAXES | 7,701 | 9,039 | $(1,338)$ | 7,701 | 9,039 | $(1,338)$ | 7,701 | 9,039 | $(1,338)$ |
| 408100 | REAL \& PERSON PROP TAXES | 229,073 | 246,946 | $(17,873)$ | 231,695 | 246,946 | $(15,251)$ | 224,621 | 246,946 | $(22,325)$ |
| 408110 | GROSS INC \& RECPTS TAXES | - | - | - | - | - | - | - | - | - |
| 408140 | FEDERAL UNEMPLYMNT TXS | 123 | - | 123 | 121 |  | 121 | 112 |  | 112 |
| 408160 | FICA | 46,041 | 46,095 | (54) | 40,944 | 42,111 | $(1,167)$ | 42,160 | 44,284 | $(2,124)$ |
| 408180 | STATE UNEMPLYMNT TXS | 236 | - | 236 | 229 | - | 229 | 228 | - | 228 |
| 409100 | SIT-CURRENT | 49,121 | 164,990 | $(115,869)$ | 45,701 | 161,139 | $(115,438)$ | 200,880 | 135,156 | 65,724 |
| 409110 | SIT-ADJUST PRIOR YEARS | - | - | - | - | - |  | $(984,658)$ |  | $(984,658)$ |
| 409150 | FIT-CURRENT | $(42,571)$ | 653,161 | $(695,732)$ | 22,241 | 638,170 | $(615,929)$ | 1,109,907 | 537,031 | 572,876 |
| 409160 | FIT-ADJUST PRIOR YEARS | - | - | - | - | - | - | $(3,046,369)$ | - | $(3,046,369)$ |
| 409210 | SIT-OTH INC \& DED-REG | (240) | (962) | 722 | (121) | (995) | 874 | $(2,509)$ | $(1,143)$ | $(1,366)$ |
| 409220 | FIT-OTH INC \& DED-REG | (176) | $(3,745)$ | 3,569 | (89) | $(3,871)$ | 3,782 | $(15,653)$ | $(4,451)$ | $(11,202)$ |
| 410400 | DEF SIT-REG ASSET/LIAB | 380 | - | 380 | 380 | - | 380 | 380 |  | 380 |
| 410600 | DEF SIT-OTHER | 86,280 | $(67,870)$ | 154,150 | 74,901 | $(49,410)$ | 124,311 | 904,497 | $(32,542)$ | 937,039 |
| 410700 | DEF FIT-REG ASSET/LIAB | 18,564 | - | 18,564 | 18,564 | - | 18,564 | 18,564 | - | 18,564 |
| 410900 | DEF FIT-OTHER | 786,793 | 69,092 | 717,701 | 640,062 | 198,094 | 441,968 | 2,432,711 | 210,607 | 2,222,104 |
| 412210 | ITC RESTORED-3\% | (638) | - | (638) | (638) | - | (638) | (638) | - | (638) |
| 412220 | ITC RESTORED- 4\% | (525) | - | (525) | (525) |  | (525) | (525) | - | (525) |
| 412230 | ITC RESTORED-10\% | $(5,903)$ | $(13,325)$ | 7,422 | $(5,903)$ | $(20,315)$ | 14,412 | $(5,903)$ | 956 | $(6,859)$ |
| 415100 | M\&J REVENUES-OUTSIDE | $(4,621)$ | - | $(4,621)$ | 8,536 | - | 8,536 | $(13,858)$ | - | $(13,858)$ |
| 416100 | M\&J EXPENSES-OUTSIDE | 13,941 | - | 13,941 | $(12,118)$ | - | $(12,118)$ | 11,171 | - | 11,171 |
| 416110 | M\&J EXPENSES-OUTSIDE | 113 | - | 113 | - | - |  | 456 | - | 456 |
| 420100 | AFUDC - EQUITY | $(123,729)$ | $(41,633)$ | $(82,096)$ | $(171,770)$ | $(82,103)$ | $(89,667)$ | $(173,271)$ | $(118,240)$ | $(55,031)$ |
| 420210 | AFUDC - DEBT | $(61,812)$ | $(18,907)$ | $(42,905)$ | $(85,813)$ | $(37,286)$ | $(48,527)$ | $(86,064)$ | $(53,697)$ | $(32,367)$ |
| 425100 | AFUDC UT PLT ACQ ADJUST | (35) | - | (35) | (35) | - | (35) | (35) | - | (35) |
| 425300 | AMORT PREFERRED STOCK EXP | 64 | 64 | - | 64 | 64 |  | 64 | 64 | - |
| 426100 | DONATIONS | 1,583 | 6,132 | $(4,549)$ | 2,848 | 5,623 | $(2,775)$ | 11,312 | 6,524 | 4,788 |
| 426160 | OTHER LOBBYING EXPENSES | 4,720 |  | 4,720 | 4,682 | - | 4,682 | 4,918 | - | 4,918 |
| 426200 | OTHER INCOME DEDUCTIONS | 390 | 5,530 | $(5,140)$ | 660 | 6,432 | $(5,772)$ | 4,463 | 7,336 | $(2,873)$ |
| 426410 | NON-OPER EMPLOYEE EXP | - | - | - | - | - | - | 790 | - | 790 |
| 426420 | NON-OPER EMPLOYEE EXP - TAXABLE | - | - | - | - |  | - | 89 | - | 89 |
| 427100 | INTEREST LTD-OUT-REG | 126,837 | - | 126,837 | 126,837 | - | 126,837 | 126,837 | - | 126,837 |
| 427120 | INTEREST LTD-OUT-REG | 238,559 | 678,021 | $(439,462)$ | 293,721 | 678,021 | $(384,300)$ | 293,721 | 678,021 | $(384,300)$ |
| 428000 | AMORT DEBT DISCOUNT \& EXP | 7,332 | 10,501 | $(3,169)$ | 8,952 | 10,501 | $(1,549)$ | 8,879 | 10,501 | $(1,622)$ |
| 431100 | INTEREST ON BANK DEBT | 22,937 | 91,498 | $(68,561)$ | 16,459 | 100,837 | $(84,378)$ | 13,935 | 116,986 | $(103,051)$ |
| 431200 | OTHER INTEREST EXPENSE | 8,152 | - | 8,152 | - | - | - | 3 | - | 3 |
| 431200 | OTHER INTEREST EXPENSE | 8,152 | - | 8,152 | - | - | - | 3 | - | 3 |
| 437100 | DIV DEC PREF STK-OUTSIDE | 38,274 | 6,511 | 31,763 | 38,274 | 6,511 | 31,763 | 38,274 | 6,511 | 31,763 |
| 438200 | DIVIDENDS DECLARED COMMON - IN | - | - | - | - | - | - | 2,006,260 | - | 2,006,260 |
| 461000 | DOMESTIC SEWER SERV BILLED | - | $(15,166)$ | 15,166 |  | $(14,916)$ | 14,916 | - | $(16,000)$ | 16,000 |
| 461020 | COMMERCIAL SEWER SERV BILLED | - | $(8,536)$ | 8,536 | - | $(8,508)$ | 8,508 | - | $(8,303)$ | 8,303 |
| 461100 | RES SALES BILLED METERED | $(3,213,004)$ | $(3,573,980)$ | 360,976 | $(3,106,357)$ | $(3,639,427)$ | 533,070 | $(3,033,825)$ | $(3,501,143)$ | 467,318 |
| 461110 | RES SALES UNBILL METERED | $(163,312)$ | - | $(163,312)$ | 53,035 | - | 53,035 | 23,650 | - | 23,650 |
| 461200 | COM SALES BILLED METERED | $(1,545,734)$ | $(1,764,467)$ | 218,733 | $(1,547,093)$ | $(1,856,755)$ | 309,662 | $(1,471,477)$ | $(1,770,295)$ | 298,818 |
| 461210 | COM SALES UNBILL METERED | $(67,752)$ | (1,764, | $(67,752)$ | $(13,711)$ |  | $(13,711)$ | 34,678 |  | 34,678 |
| 461300 | IND SALES BILLED METERED | $(158,227)$ | $(207,320)$ | 49,093 | $(149,829)$ | $(201,789)$ | 51,960 | $(155,839)$ | $(217,045)$ | 61,206 |
| 461310 | IND SALES UNBILL METERED | 10,629 | - | 10,629 | $(10,987)$ | - | $(10,987)$ | $(11,382)$ | - | $(11,382)$ |
| 461400 | MISC SALES BILLED METERED | $(2,403)$ | - | $(2,403)$ | $(2,228)$ | - | $(2,228)$ | (329) | - | (329) |
| 462000 | PRIV FIR PROT SER BILLED | $(12,359)$ | $(249,921)$ | 237,562 | $(118,950)$ | $(250,437)$ | 131,487 | $(138,673)$ | $(250,952)$ | 112,279 |
| 462110 | Industrial waste ser unbill |  | , | - | - |  |  |  | - | - |
| 462210 | INDUSTRIAL WASTER SER | (500) | $(2,659)$ | 2,159 | (500) | $(2,028)$ | 1,528 | (500) | $(4,601)$ | 4,101 |
| 463000 | PUB FIRE PROT SER BILLED | $(226,072)$ | $(129,309)$ | $(96,763)$ | $(226,072)$ | $(129,419)$ | $(96,653)$ | $(226,072)$ | $(129,529)$ | $(96,543)$ |
| 463300 | PUB AUTH SEWER SERV BILLED | (362) | - | (362) | (548) | - | (548) | (650) | - | (650) |
| 464200 | PUB AUTH SLS BILLED METRD | $(498,395)$ | $(562,246)$ | 63,851 | $(547,683)$ | $(546,183)$ | $(1,500)$ | $(519,977)$ | $(597,452)$ | 77,475 |
| 464210 | PUB AUTH SLS UNBILL METRD | $(10,450)$ |  | $(10,450)$ | 17,124 |  | 17,124 | $(38,303)$ | (1) | $(38,303)$ |
| 466000 | SALES FOR RESALE BILLED | $(185,351)$ | $(140,194)$ | $(45,157)$ | $(159,596)$ | $(151,330)$ | $(8,266)$ | $(138,069)$ | $(172,491)$ | 34,422 |
| 466100 | SALES FOR RESALE UNBILL | 31,500 | - | 31,500 | $(6,090)$ | - | $(6,090)$ | $(33,617)$ | - | $(33,617)$ |
| 470000 | FORFEITED DISCOUNTS | - | - | - | - | - | - | - | - | - |
| 471100 | RECONNECTION CHARGES | $(56,446)$ | $(41,600)$ | $(14,846)$ | $(52,884)$ | $(41,600)$ | $(11,284)$ | $(69,576)$ | $(41,600)$ | $(27,976)$ |
| 471200 | OTHER MISC SERV REVENUES | $(70,486)$ | $(51,849)$ | $(18,637)$ | $(75,586)$ | $(51,849)$ | $(23,737)$ | $(72,632)$ | $(51,849)$ | $(20,783)$ |
| 471400 | BILLING \& COLLECTIONS FOR OTHERS | $(93,469)$ | $(84,201)$ | $(9,268)$ | $(93,476)$ | $(84,201)$ | $(9,275)$ | $(93,799)$ | $(84,201)$ | $(9,598)$ |
| 472000 | RENTS FROM WATER PROPERTY | $(13,737)$ | $(7,835)$ | $(5,902)$ | $(6,501)$ | $(7,835)$ | 1,334 | $(38,539)$ | $(7,835)$ | $(30,704)$ |
| 474300 | MISCELLANEOUS | (839) | - | (839) | - | - | - | $(2,108)$ | - | $(2,108)$ |
| 601100 | SS OPERATION EXPENSE | - | - | - | - | - | - | - | - | - |
| 602000 | PURCHASED WATER | 8,419 | 7,753 | 666 | 13,498 | 12,023 | 1,475 | 10,759 | 16,453 | $(5,694)$ |
| 603100 | MISCELLANEOUS SS EXPENSES | 5,145 | 3,305 | 1,840 | 3,820 | 3,305 | 515 | 7,069 | 3,660 | 3,409 |
| 610000 | SS ORDNY MAINT SUPR \& ENG | 432 | - | 432 | - | - | - | - | - | - |
| 617100 | OR MN MISC WAT SS PLT MAT | $(13,655)$ | 17,200 | $(30,855)$ | 8,794 | 7,700 | 1,094 | 6,728 | 7,700 | (972) |
| 623110 | POWER PURCH FOR PUMP ELEC | 28,058 | - | 28,058 | 19,294 | - | 19,294 | 30,612 | - | 30,612 |
| 623210 | FUEL PURCH FOR PUMP OTHER | 275,709 | 424,549 | $(148,840)$ | 222,956 | 430,141 | $(207,185)$ | 340,618 | 416,669 | $(76,051)$ |
| 626500 | MISC PUMPING EXP ELECTRIC | $(7,208)$ | 250 | $(7,458)$ | $(6,724)$ | 250 | $(6,974)$ | $(6,913)$ | 250 | $(7,163)$ |
| 630200 | MISC PUMPING EXP OTHER | 7,880 | 1,066 | 6,814 | 5,121 | 1,066 | 4,055 | 6,052 | 1,066 | 4,986 |
| 633300 | OR MN PUMP EQPT MAT OTHER | - | - | - | - | - | - | - | - | - |
| 641100 | GENERAL CHEMICALS | 209,349 | 264,997 | $(55,648)$ | 233,557 | 285,348 | $(51,791)$ | 177,190 | 324,315 | $(147,125)$ |
| 642100 | GENERAL WT LABOR | 122,925 | 12,985 | 109,940 | 121,497 | 9,485 | 112,012 | 109,091 | 12,985 | 96,106 |
| 642300 | GENERAL WT EXPENSES | 16,412 | 9,213 | 7,199 | 9,605 | 16,190 | $(6,585)$ | 10,478 | 15,228 | $(4,750)$ |
| 643100 | MISC WT EXPENSES-CURRENT | 10,037 | 7,298 | 2,739 | 9,046 | 8,605 | 441 | 428 | 8,105 | $(7,677)$ |
| 643300 | WASTE DISPOSAL EXP (CUR) | 13,841 | 19,349 | $(5,508)$ | 18,467 | 14,791 | 3,676 | 17,018 | 14,755 | 2,263 |
| 643310 | AMORT WASTE DISPOSAL EXP | 15,386 | 10,000 | 5,386 | 7,693 | 10,000 | $(2,307)$ | 7,693 | 10,000 | $(2,307)$ |
| 650000 | OR MN WT SUPR \& ENG | 21,957 | 1,066 | 20,891 | 16,598 | 1,066 | 15,532 | 14,065 | 1,066 | 12,999 |


| YEAR-20 <br> AWW | 9 Description | $\begin{gathered} 2009 \\ \text { October } \\ \text { Actual } \\ \hline \end{gathered}$ |  | Variance | 2009 November Actual | 2009 <br> November Budget | Variance | 2009 December Actual | 2009 December Budget | Variance |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 403000 | DEPRECIATION EXPENSE | 744,992 | 723,173 | 21,819 | 746,900 | 725,638 | 21,262 | 745,075 | 746,447 | $(1,372)$ |
| 403100 | DEPRECIATION EXPENSE-CONTR PROP | $(115,901)$ | - | $(115,901)$ | $(116,099)$ | - | $(116,099)$ | $(116,238)$ | - | $(116,238)$ |
| 404100 | AMORT LIM TERM UT PLT | 575 | 575 | - | 575 | 575 | - | 575 | 575 | - |
| 404430 | AMORT REG ASSET - AFUDC | 6,332 | 6,000 | 332 | 6,332 | 6,000 | 332 | 6,332 | 6,000 | 332 |
| 406000 | AMORT UT PLT ACQ ADJUST | 1,801 | 1,801 | - | 1,801 | 1,801 | - | 1,801 | 1,801 | - |
| 407000 | AMORT PROPERTY LOSSES | 34,349 | 36,016 | $(1,667)$ | 34,349 | 36,016 | $(1,667)$ | 34,349 | 36,016 | $(1,667)$ |
| 408030 | OTHER GENERAL TAXES | 7,701 | 9,039 | $(1,338)$ | 7,701 | 9,039 | $(1,338)$ | 7,701 | 9,039 | $(1,338)$ |
| 408100 | REAL \& PERSON PROP TAXES | 229,073 | 246,946 | $(17,873)$ | 229,073 | 246,946 | $(17,873)$ | 229,073 | 246,946 | $(17,873)$ |
| 408110 | GROSS INC \& RECPTS TAXES | - | - | - | - | - |  | 57,549 | - | 57,549 |
| 408140 | FEDERAL UNEMPLYMNT TXS | 16 | - | 16 | - | - | - | 28 | - | 28 |
| 408160 | FICA | 41,156 | 43,899 | $(2,743)$ | 38,520 | 43,552 | $(5,032)$ | 44,433 | 47,192 | $(2,759)$ |
| 408180 | STATE UNEMPLYMNT TXS | 65 | - | 65 | - | - | - | 48 | - | 48 |
| 409100 | SIT-CURRENT | 68,261 | 132,427 | $(64,166)$ | 50,325 | 82,648 | $(32,323)$ | 114,185 | 66,242 | 47,943 |
| 409110 | SIT-ADJUST PRIOR YEARS | - | - | - | 378,393 |  | 378,393 | 546,269 |  | 546,269 |
| 409150 | FIT-CURRENT | 179,136 | 526,410 | $(347,274)$ | $(9,519)$ | 332,649 | $(342,168)$ | 564,670 | 268,789 | 295,881 |
| 409160 | FIT-ADJUST PRIOR YEARS | - | - | - | $(132,437)$ | - | $(132,437)$ | $(1,299,387)$ | - | $(1,299,387)$ |
| 409210 | SIT-OTH INC \& DED-REG | 476 | (583) | 1,059 | $(8,094)$ | (726) | $(7,368)$ | $(15,354)$ | (561) | $(14,793)$ |
| 409220 | FIT-OTH INC \& DED-REG | 1,322 | $(2,270)$ | 3,592 | $(61,373)$ | $(2,825)$ | $(58,548)$ | $(84,192)$ | $(2,185)$ | $(82,007)$ |
| 410400 | DEF SIT-REG ASSET/LIAB | 380 | (270) | 380 | 380 | - | 380 | 380 | - | 380 |
| 410600 | DEF SIT-OTHER | 53,149 | $(37,499)$ | 90,648 | $(344,899)$ | $(8,038)$ | $(336,861)$ | $(511,717)$ | $(6,747)$ | $(504,970)$ |
| 410700 | DEF FIT-REG ASSET/LIAB | 18,564 |  | 18,564 | 18,564 | - | 18,564 | 18,564 | - | 18,564 |
| 410900 | DEF FIT-OTHER | 489,944 | 178,532 | 311,412 | 623,272 | 216,025 | 407,247 | 1,172,185 | 175,860 | 996,325 |
| 412210 | ITC RESTORED-3\% | (638) | - | (638) | (638) | - | (638) | (638) | - | (638) |
| 412220 | ITC RESTORED-4\% | (525) | - | (525) | (525) | - | (525) | (525) | - | (525) |
| 412230 | ITC RESTORED-10\% | $(5,903)$ | $(10,785)$ | 4,882 | $(5,903)$ | $(4,012)$ | $(1,891)$ | $(5,903)$ | $(10,271)$ | 4,368 |
| 415100 | M\&J REVENUES-OUTSIDE | $(19,339)$ | - | $(19,339)$ | $(4,674)$ | - | $(4,674)$ | $(8,425)$ |  | $(8,425)$ |
| 416100 | M\&J EXPENSES-OUTSIDE | 1,000 | - | 1,000 | 20,550 | - | 20,550 | 30,589 | - | 30,589 |
| 416110 | M\&J EXPENSES-OUTSIDE | - | - | - | - | - | - | - | - | - |
| 420100 | AFUDC - EQUITY | $(163,520)$ | $(152,409)$ | $(11,111)$ | $(181,414)$ | $(185,789)$ | 4,375 | $(198,971)$ | $(204,553)$ | 5,582 |
| 420210 | AFUDC - DEBT | $(81,691)$ | $(69,215)$ | $(12,476)$ | $(91,386)$ | $(84,373)$ | $(7,013)$ | $(99,402)$ | $(92,895)$ | $(6,507)$ |
| 425100 | AFUDC UT PLT ACQ ADJUST | (35) | - | (35) | (35) | - | (35) | (35) | - | (35) |
| 425300 | AMORT PREFERRED STOCK EXP | 64 | 64 | - | 64 | 64 | - | 64 | 64 | - |
| 426100 | DONATIONS | 1,300 | 1,379 | (79) | 1,359 | 3,373 | $(2,014)$ | 44,725 | 1,379 | 43,346 |
| 426160 | OTHER LOBBYING EXPENSES | 4,533 | - | 4,533 | 4,560 | - | 4,560 | 4,872 | - | 4,872 |
| 426200 | OTHER INCOME DEDUCTIONS | 2,750 | 5,690 | $(2,940)$ | 37,279 | 5,424 | 31,855 | 189,817 | 5,424 | 184,393 |
| 426410 | NON-OPER EMPLOYEE EXP | - | - | - | - | - | - | - | - | - |
| 426420 | NON-OPER EMPLOYEE EXP - TAXABLE | (89) | - | (89) | - | - | - | - | - | - |
| 427100 | INTEREST LTD-OUT-REG | 126,837 | - | 126,837 | 126,837 | - | 126,837 | 126,837 | - | 126,837 |
| 427120 | INTEREST LTD-OUT-REG | 293,721 | 829,061 | $(535,340)$ | 293,721 | 829,061 | $(535,340)$ | 293,721 | 829,061 | $(535,340)$ |
| 428000 | AMORT DEBT DISCOUNT \& EXP | 14,904 | 13,751 | 1,153 | 9,953 | 13,751 | $(3,798)$ | 10,444 | 13,751 | $(3,307)$ |
| 431100 | INTEREST ON BANK DEBT | 11,276 | 85,774 | $(74,498)$ | 9,735 | 49,047 | $(39,312)$ | 8,406 | 74,830 | $(66,424)$ |
| 431200 | OTHER INTEREST EXPENSE | - | - | - | 765 | - | 765 | - | - | - |
| 431200 | OTHER INTEREST EXPENSE | - | - | - | 765 | - | 765 | - | - | - |
| 437100 | DIV DEC PREF STK-OUTSIDE | 38,274 | 6,511 | 31,763 | 38,274 | 6,511 | 31,763 | 38,274 | 6,511 | 31,763 |
| 438200 | DIVIDENDS DECLARED COMMON - IN | - | - | - | - | - | - | 2,899,673 | - | 2,899,673 |
| 461000 | DOMESTIC SEWER SERV BILLED | - | $(13,244)$ | 13,244 | - | $(14,015)$ | 14,015 | - | $(14,495)$ | 14,495 |
| 461020 | COMMERCIAL SEWER SERV BILLED | - | $(8,138)$ | 8,138 | - | $(8,484)$ | 8,484 | - | $(11,509)$ | 11,509 |
| 461100 | RES SALES BILLED METERED | $(2,866,905)$ | $(3,407,392)$ | 540,487 | (2,641,359) | $(3,090,607)$ | 449,248 | $(2,712,837)$ | $(2,985,671)$ | 272,834 |
| 461110 | RES SALES UNBILL METERED | $(61,734)$ |  | $(61,734)$ | 155,000 | ( | 155,000 | 170,101 | - | 170,101 |
| 461200 | COM SALES BILLED METERED | $(1,429,022)$ | $(1,710,830)$ | 281,808 | $(1,242,648)$ | $(1,513,802)$ | 271,154 | $(1,216,787)$ | $(1,413,019)$ | 196,232 |
| 461210 | COM SALES UNBILL METERED | $(15,283)$ | - | $(15,283)$ | $(46,209)$ | - | $(46,209)$ | 114,497 | - | 114,497 |
| 461300 | IND SALES BILLED METERED | $(161,376)$ | $(207,756)$ | 46,380 | $(123,682)$ | $(173,339)$ | 49,657 | $(127,785)$ | $(172,927)$ | 45,142 |
| 461310 | IND SALES UNBILL METERED | 6,910 | ( | 6,910 | 10,381 | (173,30) | 10,381 | 2,926 | $(172,927)$ | 2,926 |
| 461400 | MISC SALES BILLED METERED | (552) | - | (552) | 53 | - | 53 | $(1,827)$ | - | $(1,827)$ |
| 462000 | PRIV FIR PROT SER BILLED | $(138,866)$ | $(251,468)$ | 112,602 | $(137,791)$ | $(251,984)$ | 114,193 | $(136,691)$ | $(252,499)$ | 115,808 |
| 462110 | INDUSTRIAL WASTE SER UNBILL | - | - | - | - | - | - | - | - | - |
| 462210 | INDUSTRIAL WASTER SER | (500) | $(4,345)$ | 3,845 | (500) | $(2,540)$ | 2,040 | (500) | $(1,000)$ | 500 |
| 463000 | PUB FIRE PROT SER BILLED | $(226,072)$ | $(129,640)$ | $(96,432)$ | $(226,063)$ | $(129,750)$ | $(96,313)$ | $(226,134)$ | $(129,861)$ | $(96,273)$ |
| 463300 | PUB AUTH SEWER SERV BILLED | (602) | - | (602) | (594) | - | (594) | (625) | - | (625) |
| 464200 | PUB AUTH SLS BILLED METRD | $(500,476)$ | $(570,475)$ | 69,999 | $(403,334)$ | $(423,458)$ | 20,124 | $(371,871)$ | $(432,614)$ | 60,743 |
| 464210 | PUB AUTH SLS UNBILL METRD | 10,906 | (1) | 10,906 | 67,867 | - | 67,867 | 2,880 | - | 2,880 |
| 466000 | SALES FOR RESALE BILLED | $(139,852)$ | $(148,463)$ | 8,611 | $(117,129)$ | $(177,106)$ | 59,977 | $(120,610)$ | $(116,561)$ | $(4,049)$ |
| 466100 | SALES FOR RESALE UNBILL | 24,101 | - | 24,101 | $(31,166)$ | - | $(31,166)$ | 52,213 | - | 52,213 |
| 470000 | FORFEITED DISCOUNTS | 35 | - | 35 | - | - | - | - | - | - |
| 471100 | RECONNECTION CHARGES | $(61,776)$ | $(41,600)$ | $(20,176)$ | $(56,602)$ | $(41,600)$ | $(15,002)$ | $(47,216)$ | $(41,600)$ | $(5,616)$ |
| 471200 | OTHER MISC SERV REVENUES | $(54,277)$ | $(51,849)$ | $(2,428)$ | $(48,916)$ | $(51,849)$ | 2,933 | $(48,155)$ | $(51,849)$ | 3,694 |
| 471400 | BILLING \& COLLECTIONS FOR OTHERS | $(93,446)$ | $(84,201)$ | $(9,245)$ | $(94,009)$ | $(84,201)$ | $(9,808)$ | $(93,375)$ | $(84,201)$ | $(9,174)$ |
| 472000 | RENTS FROM WATER PROPERTY | $(25,297)$ | $(7,835)$ | $(17,462)$ | $(27,795)$ | $(7,835)$ | $(19,960)$ | $(28,296)$ | $(7,835)$ | $(20,461)$ |
| 474300 | MISCELLANEOUS | (987) | - | (987) | (987) | - | (987) | (857) | - | (857) |
| 601100 | SS OPERATION EXPENSE | ( | - | - | ( | - | - | (1) | - | (8) |
| 602000 | PURCHASED WATER | 4,945 | 9,693 | $(4,748)$ | 8,311 | 6,603 | 1,708 | 22,918 | 16,512 | 6,406 |
| 603100 | MISCELLANEOUS SS EXPENSES | 4,153 | 3,305 | 848 | 5,735 | 3,305 | 2,430 | 4,560 | 3,305 | 1,255 |
| 610000 | SS ORDNY MAINT SUPR \& ENG | - | - | - | - | - | - | - | - | - |
| 617100 | OR MN MISC WAT SS PLT MAT | 31,542 | 7,700 | 23,842 | 35,498 | 7,700 | 27,798 | 50,481 | 13,700 | 36,781 |
| 623110 | POWER PURCH FOR PUMP ELEC | 24,950 | - | 24,950 | 35,999 | - | 35,999 | 29,057 | - | 29,057 |
| 623210 | FUEL PURCH FOR PUMP OTHER | 166,236 | 403,922 | $(237,686)$ | 213,304 | 351,430 | $(138,126)$ | 170,805 | 250,295 | $(79,490)$ |
| 626500 | MISC PUMPING EXP ELECTRIC | $(5,838)$ | 250 | $(6,088)$ | 34,179 | 250 | 33,929 | $(3,941)$ | 250 | $(4,191)$ |
| 630200 | MISC PUMPING EXP OTHER | 5,746 | 1,066 | 4,680 | 9,323 | 1,100 | 8,223 | 3,988 | 1,100 | 2,888 |
| 633300 | OR MN PUMP EQPT MAT OTHER | - | - | - | - | - | - | - | - | - |
| 641100 | GENERAL CHEMICALS | 160,828 | 253,952 | $(93,124)$ | 163,738 | 206,898 | $(43,160)$ | 147,670 | 189,929 | $(42,259)$ |
| 642100 | GENERAL WT LABOR | 104,608 | 9,485 | 95,123 | 157,128 | 16,934 | 140,194 | 110,914 | 16,934 | 93,980 |
| 642300 | GENERAL WT EXPENSES | 15,268 | 8,030 | 7,238 | 10,575 | 16,375 | $(5,800)$ | 10,762 | 13,227 | $(2,465)$ |
| 643100 | MISC WT EXPENSES-CURRENT | 8,254 | 7,598 | 656 | 816 | 6,117 | $(5,301)$ | 8,354 | 7,279 | 1,075 |
| 643300 | WASTE DISPOSAL EXP (CUR) | 11,447 | 14,523 | $(3,076)$ | 12,646 | 13,420 | (774) | 14,459 | 13,168 | 1,291 |
| 643310 | AMORT WASTE DISPOSAL EXP | 7,693 | 10,000 | $(2,307)$ | 7,693 | 10,000 | $(2,307)$ | 7,693 | 10,000 | $(2,307)$ |
| 650000 | OR MN WT SUPR \& ENG | 15,285 | 1,066 | 14,219 | 28,679 | 1,100 | 27,579 | 27,879 | 1,100 | 26,779 |


| YEAR-2 <br> AWW | ${ }^{9}$ Description | 2009 January Actual | 2009 January Budget | Variance | $2009$ <br> February Actual | $2009$ <br> February Budget | Variance | $\begin{gathered} 2009 \\ \text { March } \\ \text { Actual } \\ \hline \end{gathered}$ | $2009$ <br> March <br> Budget | Variance |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 651100 | OR MN WT STRUCT \& IMP MAT | 9,823 | 12,100 | $(2,277)$ | 8,230 | 12,100 | $(3,870)$ | 5,615 | 12,100 | $(6,485)$ |
| 651120 | AMORT DEF EXP WT STRUCT | 12,284 | 14,582 | $(2,298)$ | 12,284 | 14,582 | $(2,298)$ | 13,640 | 14,582 | (942) |
| 660000 | T\&D RENTS | 7,143 | - | 7,143 | 10,719 | - | 10,719 | 8,233 | - | 8,233 |
| 662100 | T\&D LINES EXPENSE | 1,072 | 1,475 | (403) | 2,219 | 1,475 | 744 | 1,213 | 1,475 | (262) |
| 662200 | T\&D LINES LABOR | 135,893 | - | 135,893 | 135,335 | - | 135,335 | 125,225 | - | 125,225 |
| 663400 | MISC METER LABOR | - | - | - | - | - | - | 3,507 | - | 3,507 |
| 665300 | MISC T\&D EXPENSES-CURRENT | 27,340 | 32,012 | $(4,672)$ | 38,102 | 32,512 | 5,590 | 27,904 | 32,512 | $(4,608)$ |
| 666000 | T\&D RENTS | 50 | 315 | (265) | 1,223 | 315 | 908 | 1,891 | 315 | 1,576 |
| 670000 | OR MN T\&D SUPR \& ENG | 130 | - | 130 | 878 | - | 878 | 619 | - | 619 |
| 671200 | OR MN T\&D STRUCT \& IMP-LAB | 1,575 | - | 1,575 | 1,360 | - | 1,360 | 1,498 | - | 1,498 |
| 672120 | AMORT DEF EXP RES \& STAND | 6,113 | 721 | 5,392 | 6,113 | 721 | 5,392 | 6,113 | 721 | 5,392 |
| 672200 | AMORT DEF EXP RES \& STAND | 1,982 | - | 1,982 | 3,163 | - | 3,163 | 1,453 | - | 1,453 |
| 673200 | OR MN T\&D MAINS LAB | 30,423 | - | 30,423 | 21,517 | - | 21,517 | 21,669 | - | 21,669 |
| 675200 | OR MN SERVICES LAB | 18,955 | - | 18,955 | 21,348 | - | 21,348 | 12,946 | - | 12,946 |
| 676200 | OR MN METERS LAB | 9,656 | - | 9,656 | $(12,099)$ | - | $(12,099)$ | 1,801 | - | 1,801 |
| 676400 | OR MN METER INSTALL LAB | 12,975 | - | 12,975 | 2,702 | - | 2,702 | 3,866 | - | 3,866 |
| 678100 | OR MN OTHER T\&D PLANT MAT | 27,416 | 34,775 | $(7,359)$ | 11,504 | 34,775 | $(23,271)$ | 47,835 | 40,275 | 7,560 |
| 902200 | METER READING LABOR | 10,024 | - | 10,024 | 8,060 | - | 8,060 | 18,461 | - | 18,461 |
| 903100 | CONTRACT \& ORDERS EXPENS | 1,726 | - | 1,726 | $(1,319)$ | - | $(1,319)$ | 1,505 | - | 1,505 |
| 903200 | CONTRACTS \& ORDERS LABOR | 58,565 | - | 58,565 | 55,508 | - | 55,508 | 52,320 | - | 52,320 |
| 903300 | COLLECTING EXPENSES | 15,840 | 20,900 | $(5,060)$ | 14,420 | 20,900 | $(6,480)$ | 24,704 | 20,900 | 3,804 |
| 903520 | BILLING \& ACCTNG OTH EXP | 72,074 | 77,590 | $(5,516)$ | 73,074 | 72,356 | 718 | 71,032 | 75,044 | $(4,012)$ |
| 904000 | UNCOLLECTIBLE ACCOUNTS | 37,092 | 36,674 | 418 | 52,751 | 34,525 | 18,226 | 22,740 | 37,472 | $(14,732)$ |
| 905100 | MISC CUST ACCTNG EXPENSES | (573) | 525 | $(1,098)$ | 164 | 525 | (361) | 151 | 525 | (374) |
| 920000 | ADM \& GENERAL SALARIES | 103,879 | 530,935 | $(427,056)$ | 67,092 | 485,630 | $(418,538)$ | 97,764 | 529,723 | $(431,959)$ |
| 920500 | INCENTIVE PLAN EXPENSE | 27,696 | 29,381 | $(1,685)$ | 22,912 | 26,717 | $(3,805)$ | $(15,849)$ | 29,381 | $(45,230)$ |
| 921100 | EXPENSES OF EMPLOYEES | 2,168 | 5,168 | $(3,000)$ | 3,500 | 5,600 | $(2,100)$ | 4,378 | 14,014 | $(9,636)$ |
| 921130 | DUES FOR CLUBS-TAXABLE | 5,965 | 9,809 | $(3,844)$ | 7,875 | 4,121 | 3,754 | 1,241 | 1,241 | - |
| 921200 | MISC OFFICE EXP SUP | 36,173 | 37,716 | $(1,543)$ | 20,869 | 35,355 | $(14,486)$ | 39,122 | 40,956 | $(1,834)$ |
| 923100 | SERVICE COMPANY CHARGES | 727,866 | 629,076 | 98,790 | 571,232 | 582,083 | $(10,851)$ | 522,967 | 631,004 | $(108,037)$ |
| 923300 | LEGAL SERVICES | 7,379 | 6,550 | 829 | 41,350 | 6,550 | 34,800 | 4,419 | 6,550 | $(2,131)$ |
| 923500 | OTHER SERVICES-CURRENT | 43,457 | 58,040 | $(14,583)$ | 75,765 | 59,190 | 16,575 | 78,994 | 72,590 | 6,404 |
| 924000 | PROPERTY INSURANCE | 13,221 | 3,368 | 9,853 | 13,353 | 3,368 | 9,985 | 13,353 | 3,368 | 9,985 |
| 925110 | WORKMENS COMP PREMIUM EXP | 11,773 | 12,680 | (907) | 11,612 | 12,680 | $(1,068)$ | 11,285 | 12,680 | $(1,395)$ |
| 925300 | INJURIES \& DAMAGES EXP | $(2,164)$ | 1,000 | $(3,164)$ | $(2,757)$ | 1,000 | $(3,757)$ | $(5,954)$ | 1,000 | $(6,954)$ |
| 925400 | GENERAL LIABILITY | 29,388 | 43,870 | $(14,482)$ | 29,388 | 43,870 | $(14,482)$ | 17,927 | 43,870 | $(25,943)$ |
| 926100 | ACCRUED OPEB EXPENSE | 88,315 | 47,000 | 41,315 | 84,450 | 47,000 | 37,450 | 81,143 | 47,000 | 34,143 |
| 926110 | GROUP INSURANCE PREM EXP | 119,343 | 110,083 | 9,260 | 120,408 | 110,083 | 10,325 | 121,504 | 110,083 | 11,421 |
| 926160 | GROUP INS CAP (A \& B) | $(26,474)$ | - | $(26,474)$ | $(28,632)$ | - | $(28,632)$ | $(32,311)$ | - | $(32,311)$ |
| 926200 | OTHER WELFARE EXPENSES | 1,205 | 7,100 | $(5,895)$ | 550 | 11,900 | $(11,350)$ | 4,768 | 6,000 | $(1,232)$ |
| 926250 | 401-K CONTRIBUTIONS EXPENSE | 9,367 | 9,049 | 318 | 8,009 | 8,240 | (231) | 10,773 | 8,987 | 1,786 |
| 926400 | PENSION PLAN EXPENSE | 123,308 | 50,479 | 72,829 | 116,546 | 50,479 | 66,067 | 121,577 | 50,479 | 71,098 |
| 926600 | OTHER PENSION PLAN EXP | 8,331 | 9,500 | $(1,169)$ | 7,200 | 9,500 | $(2,300)$ | 7,915 | 9,500 | $(1,585)$ |
| 928100 | PENSIONS CAP (C \& R) | 12,443 | 12,700 | (257) | 12,443 | 12,700 | (257) | 12,443 | 12,700 | (257) |
| 928300 | AMORT OTHER REGULATRY EXP | 1,022 | 853 | 169 | 1,022 | 853 | 169 | 1,022 | 853 | 169 |
| 928400 | OTH REGULATORY EXP-CURRENT | 17,396 | 6,490 | 10,906 | 12,710 | 11,795 | 915 | 6,510 | 14,977 | $(8,467)$ |
| 930210 | MISC GENERAL EXP-CURRENT | 28,843 | 25,373 | 3,470 | 47,563 | 32,401 | 15,162 | 38,091 | 37,243 | 848 |
| 930230 | MISC GENERAL EXP-CURRENT | 2,367 | 4,600 | $(2,233)$ | 2,871 | 4,600 | $(1,729)$ | 1,218 | 4,600 | $(3,382)$ |
| 930260 | MEALS \& TRAVEL EXPENSES-TAXA | 548 | 2,051 | $(1,503)$ | 990 | 1,778 | (788) | 1,376 | 2,601 | $(1,225)$ |
| 930270 | DONATIONS-ILL | - | - | - | - | - | - | - | - | - |
| 930510 | LOBBYING EXPENSES | 4,000 | - | 4,000 | 4,040 | - | 4,040 | - | - | - |
| 930600 | TRANSPORTATION EXPENSES | 48,772 | 83,162 | $(34,390)$ | 42,540 | 83,858 | $(41,318)$ | 59,635 | 83,162 | $(23,527)$ |
| 930880 | MISC GEN EXP-COMPANY DUES | 2,168 | 2,537 | (369) | 2,133 | 2,642 | (509) | 33,401 | 30,037 | 3,364 |
| 930890 | MISC GEN EXP-OTHER | 8,643 | 4,212 | 4,431 | 9,145 | 1,712 | 7,433 | 12,225 | 2,334 | 9,891 |
| 931000 | ADM \& GENERAL RENTS | 5,128 | 4,414 | 714 | (796) | 4,414 | $(5,210)$ | 2,397 | 4,414 | $(2,017)$ |
| 932100 | OR MN A\&G STRUC \& IMP MAT | 8,543 | 9,808 | $(1,265)$ | 8,924 | 9,808 | (884) | 7,965 | 9,808 | $(1,843)$ |
| 932700 | OR MN A\&G MISC PROPTY MAT | 2,220 | 4,300 | $(2,080)$ | 2,172 | 2,567 | (395) | 2,910 | 5,804 | $(2,894)$ |


| $\begin{array}{r} \hline \text { YEAR-20 } \\ \text { AWW } \\ \hline \end{array}$ | 19 Description | $\begin{gathered} 2009 \\ \text { April } \\ \text { Actual } \\ \hline \end{gathered}$ |  | Variance | $\begin{gathered} 2009 \\ \text { May } \\ \text { Actual } \\ \hline \end{gathered}$ |  | Variance | $\begin{gathered} \hline 2009 \\ \text { June } \\ \text { Actual } \end{gathered}$ | $\begin{gathered} 2009 \\ \text { June } \\ \text { Budget } \end{gathered}$ | Variance |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 651100 | OR MN WT STRUCT \& IMP MAT | 10,367 | 20,100 | $(9,733)$ | 7,905 | 12,100 | $(4,195)$ | 6,513 | 42,100 | $(35,587)$ |
| 651120 | AMORT DEF EXP WT STRUCT | 12,367 | 14,582 | $(2,215)$ | 12,700 | 14,582 | $(1,882)$ | 12,367 | 14,582 | $(2,215)$ |
| 660000 | T\&D RENTS | 7,657 | - | 7,657 | 7,466 | - | 7,466 | 1,432 | - | 1,432 |
| 662100 | T\&D LINES EXPENSE | 2,076 | 1,475 | 601 | 1,217 | 1,475 | (258) | 1,638 | 1,475 | 163 |
| 662200 | T\&D LINES LABOR | 146,214 | - | 146,214 | 134,386 | - | 134,386 | 211,097 | - | 211,097 |
| 663400 | MISC METER LABOR | 1,457 | - | 1,457 | 4,235 | - | 4,235 | 2,751 | - | 2,751 |
| 665300 | MISC T\&D EXPENSES-CURRENT | 7,327 | 30,446 | $(23,119)$ | 20,212 | 27,312 | $(7,100)$ | 18,069 | 26,312 | $(8,243)$ |
| 666000 | T\&D RENTS | 1,161 | 315 | 846 | 437 | 315 | 122 | 150 | 315 | (165) |
| 670000 | OR MN T\&D SUPR \& ENG | 1,056 | - | 1,056 | 1,856 | - | 1,856 | 2,746 | - | 2,746 |
| 671200 | OR MN T\&D STRUCT \& IMP-LAB | 1,073 | - | 1,073 | 1,171 | - | 1,171 | 1,966 | - | 1,966 |
| 672120 | AMORT DEF EXP RES \& STAND | 6,113 | 721 | 5,392 | 6,113 | 721 | 5,392 | 13,286 | 721 | 12,565 |
| 672200 | AMORT DEF EXP RES \& STAND | 1,158 | - | 1,158 | 159 | - | 159 | 942 | - | 942 |
| 673200 | OR MN T\&D MAINS LAB | 31,151 | - | 31,151 | 32,906 | - | 32,906 | 33,305 | - | 33,305 |
| 675200 | OR MN SERVICES LAB | 14,969 | - | 14,969 | 16,107 | - | 16,107 | 27,782 | - | 27,782 |
| 676200 | OR MN METERS LAB | 3,745 | - | 3,745 | 3,698 | - | 3,698 | 6,729 | - | 6,729 |
| 676400 | OR MN METER INSTALL LAB | 10,484 | - | 10,484 | 11,417 | - | 11,417 | 18,143 | - | 18,143 |
| 678100 | OR MN OTHER T\&D PLANT MAT | 27,461 | 40,775 | $(13,314)$ | 29,427 | 40,775 | $(11,348)$ | 73,929 | 44,275 | 29,654 |
| 902200 | METER READING LABOR | 18,819 | - | 18,819 | 24,640 | - | 24,640 | 30,806 | - | 30,806 |
| 903100 | CONTRACT \& ORDERS EXPENS | $(1,244)$ | - | $(1,244)$ | (260) | - | (260) | 1,109 | - | 1,109 |
| 903200 | CONTRACTS \& ORDERS LABOR | 48,065 | - | 48,065 | 45,859 | - | 45,859 | 75,818 | - | 75,818 |
| 903300 | COLLECTING EXPENSES | 25,795 | 20,900 | 4,895 | 20,362 | 20,900 | (538) | 23,137 | 20,900 | 2,237 |
| 903520 | BILLING \& ACCTNG OTH EXP | 67,369 | 75,044 | $(7,675)$ | 72,333 | 75,044 | $(2,711)$ | 78,132 | 75,044 | 3,088 |
| 904000 | UNCOLLECTIBLE ACCOUNTS | $(16,916)$ | 36,807 | $(53,723)$ | 40,109 | 39,930 | 179 | 69,313 | 53,779 | 15,534 |
| 905100 | MISC CUST ACCTNG EXPENSES | 638 | 525 | 113 | 468 | 525 | (57) | 438 | 525 | (87) |
| 920000 | ADM \& GENERAL SALARIES | 102,771 | 540,264 | $(437,493)$ | 76,514 | 518,863 | $(442,349)$ | $(69,350)$ | 538,838 | $(608,188)$ |
| 920500 | INCENTIVE PLAN EXPENSE | 23,306 | 30,557 | $(7,251)$ | 26,041 | 29,170 | $(3,129)$ | 22,721 | 30,557 | $(7,836)$ |
| 921100 | EXPENSES OF EMPLOYEES | 3,995 | 8,244 | $(4,249)$ | 10,466 | 7,213 | 3,253 | 6,495 | 20,919 | $(14,424)$ |
| 921130 | DUES FOR CLUBS-TAXABLE | 1,930 | 2,080 | (150) | 1,025 | 1,777 | (752) | 2,600 | 1,500 | 1,100 |
| 921200 | MISC OFFICE EXP SUP | 35,625 | 37,943 | $(2,318)$ | 34,372 | 31,405 | 2,967 | 26,221 | 35,556 | $(9,335)$ |
| 923100 | SERVICE COMPANY CHARGES | 649,473 | 637,992 | 11,481 | 645,113 | 619,566 | 25,547 | 719,246 | 650,353 | 68,893 |
| 923300 | LEGAL SERVICES | 13,369 | 6,550 | 6,819 | 24,352 | 6,550 | 17,802 | 8,879 | 6,550 | 2,329 |
| 923500 | OTHER SERVICES-CURRENT | 89,892 | 62,590 | 27,302 | 84,301 | 82,390 | 1,911 | 96,117 | 76,590 | 19,527 |
| 924000 | PROPERTY INSURANCE | 13,353 | 3,368 | 9,985 | 13,261 | 3,368 | 9,893 | 13,353 | 3,368 | 9,985 |
| 925110 | WORKMENS COMP PREMIUM EXP | 12,103 | 12,680 | (577) | 12,343 | 12,680 | (337) | 11,290 | 12,680 | $(1,390)$ |
| 925300 | INJURIES \& DAMAGES EXP | (635) | 1,000 | $(1,635)$ | 171 | 1,000 | (829) | 175 | 1,000 | (825) |
| 925400 | GENERAL LIABILITY | 29,384 | 43,870 | $(14,486)$ | 29,375 | 43,870 | $(14,495)$ | 34,979 | 43,870 | $(8,891)$ |
| 926100 | ACCRUED OPEB EXPENSE | 86,896 | 47,000 | 39,896 | 86,959 | 47,000 | 39,959 | 80,700 | 47,000 | 33,700 |
| 926110 | GROUP INSURANCE PREM EXP | 121,737 | 110,083 | 11,654 | 120,623 | 110,083 | 10,540 | 110,480 | 110,083 | 397 |
| 926160 | GROUP INS CAP (A \& B) | $(24,656)$ | - | $(24,656)$ | $(22,379)$ | - | $(22,379)$ | $(32,387)$ | - | $(32,387)$ |
| 926200 | OTHER WELFARE EXPENSES | 310 | 12,400 | $(12,090)$ | 1,389 | 11,300 | $(9,911)$ | 2,326 | 1,400 | 926 |
| 926250 | 401-K CONTRIBUTIONS EXPENSE | 8,943 | 9,238 | (295) | 8,780 | 8,867 | (87) | 8,588 | 9,173 | (585) |
| 926400 | PENSION PLAN EXPENSE | 117,440 | 50,479 | 66,961 | 120,894 | 50,479 | 70,415 | 112,391 | 50,479 | 61,912 |
| 926600 | OTHER PENSION PLAN EXP | 8,642 | 9,600 | (958) | 7,941 | 9,600 | $(1,659)$ | 8,755 | 9,600 | (845) |
| 928100 | PENSIONS CAP ( $C$ \& R) | 12,443 | 12,700 | (257) | 12,443 | 12,700 | (257) | 23,605 | 29,367 | $(5,762)$ |
| 928300 | AMORT OTHER REGULATRY EXP | 1,022 | 853 | 169 | 1,022 | 853 | 169 | 1,299 | 853 | 446 |
| 928400 | OTH REGULATORY EXP-CURRENT | 8,410 | 8,612 | (202) | 14,614 | 11,795 | 2,819 | 16,593 | 34,073 | $(17,480)$ |
| 930210 | MISC GENERAL EXP-CURRENT | 12,908 | 18,410 | $(5,502)$ | 3,639 | 43,468 | $(39,829)$ | 16,074 | 31,976 | $(15,902)$ |
| 930230 | MISC GENERAL EXP-CURRENT | 848 | 4,600 | $(3,752)$ | 392 | 4,600 | $(4,208)$ | 9,308 | 4,600 | 4,708 |
| 930260 | MEALS \& TRAVEL EXPENSES-TAXA | 851 | 1,771 | (920) | 915 | 2,228 | $(1,313)$ | 1,357 | 1,721 | (364) |
| 930270 | DONATIONS-ILL | - | - | - | - | - | - | - | - | - |
| 930510 | LOBBYING EXPENSES | - | - | - | - | - | - | - | - | - |
| 930600 | TRANSPORTATION EXPENSES | 36,047 | 83,162 | $(47,115)$ | 31,342 | 83,162 | $(51,820)$ | 52,331 | 83,162 | $(30,831)$ |
| 930880 | MISC GEN EXP-COMPANY DUES | $(18,404)$ | 2,537 | $(20,941)$ | 5,275 | 2,537 | 2,738 | 5,952 | 2,537 | 3,415 |
| 930890 | MISC GEN EXP-OTHER | 3,204 | 9,517 | $(6,313)$ | 1,813 | 5,373 | $(3,560)$ | $(10,456)$ | 2,167 | $(12,623)$ |
| 931000 | ADM \& GENERAL RENTS | 2,444 | 4,414 | $(1,970)$ | 1,717 | 4,414 | $(2,697)$ | 1,671 | 4,414 | $(2,743)$ |
| 932100 | OR MN A\&G STRUC \& IMP MAT | 5,792 | 9,808 | $(4,016)$ | 10,529 | 9,808 | 721 | 8,408 | 9,808 | $(1,400)$ |
| 932700 | OR MN A\&G MISC PROPTY MAT | 827 | 310 | 517 | 2,390 | 3,662 | $(1,272)$ | 5,293 | 765 | 4,528 |


| $\begin{aligned} & \text { YEAR-2 } \\ & \text { AWW } \end{aligned}$ | $1{ }^{9}$ Description | $\begin{gathered} \hline 2009 \\ \text { July } \\ \text { Actual } \end{gathered}$ | $\begin{gathered} 2009 \\ \text { July } \\ \text { Budget } \end{gathered}$ | Variance | $\begin{gathered} \hline 2009 \\ \text { August } \\ \text { Actual } \\ \hline \end{gathered}$ | $\begin{gathered} 2009 \\ \text { August } \\ \text { Budget } \\ \hline \end{gathered}$ | Variance | 2009 September Actual | 2009 September Budget | Variance |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 651100 | OR MN WT STRUCT \& IMP MAT | 33,463 | 47,100 | $(13,637)$ | 22,630 | 12,100 | 10,530 | 14,374 | 12,100 | 2,274 |
| 651120 | AMORT DEF EXP WT STRUCT | 12,367 | 14,582 | $(2,215)$ | 11,952 | 14,167 | $(2,215)$ | 11,952 | 14,167 | $(2,215)$ |
| 660000 | T\&D RENTS | 7,792 | - | 7,792 | 5,673 | - | 5,673 | 6,196 | - | 6,196 |
| 662100 | T\&D LINES EXPENSE | 1,523 | 1,475 | 48 | 2,060 | 1,475 | 585 | 1,725 | 1,475 | 250 |
| 662200 | T\&D LINES LABOR | 144,321 | - | 144,321 | 146,997 | - | 146,997 | 224,990 | - | 224,990 |
| 663400 | MISC METER LABOR | 5,156 | - | 5,156 | 5,594 | - | 5,594 | 1,573 | - | 1,573 |
| 665300 | MISC T\&D EXPENSES-CURRENT | 36,004 | 31,812 | 4,192 | 37,583 | 30,312 | 7,271 | 26,083 | 31,812 | $(5,729)$ |
| 666000 | T\&D RENTS | - | 315 | (315) | 100 | 315 | (215) | 4,502 | 315 | 4,187 |
| 670000 | OR MN T\&D SUPR \& ENG | 4,407 | - | 4,407 | 2,512 | - | 2,512 | 862 | - | 862 |
| 671200 | OR MN T\&D STRUCT \& IMP-LAB | 1,463 | - | 1,463 | 1,456 | - | 1,456 | 1,811 | - | 1,811 |
| 672120 | AMORT DEF EXP RES \& STAND | 13,286 | 721 | 12,565 | 13,286 | 721 | 12,565 | 13,286 | 721 | 12,565 |
| 672200 | AMORT DEF EXP RES \& STAND | 818 | - | 818 | 801 | - | 801 | 1,136 | - | 1,136 |
| 673200 | OR MN T\&D MAINS LAB | 20,752 | - | 20,752 | 19,111 | - | 19,111 | 17,219 | - | 17,219 |
| 675200 | OR MN SERVICES LAB | 19,593 | - | 19,593 | 18,569 | - | 18,569 | 20,413 | - | 20,413 |
| 676200 | OR MN METERS LAB | 4,567 | - | 4,567 | 3,429 | - | 3,429 | 5,757 | - | 5,757 |
| 676400 | OR MN METER INSTALL LAB | 14,375 | - | 14,375 | 18,744 | - | 18,744 | 13,585 | - | 13,585 |
| 678100 | OR MN OTHER T\&D PLANT MAT | 44,433 | 49,775 | $(5,342)$ | 46,087 | 40,775 | 5,312 | 57,328 | 44,775 | 12,553 |
| 902200 | METER READING LABOR | 23,198 | - | 23,198 | 21,351 | - | 21,351 | 24,579 | - | 24,579 |
| 903100 | CONTRACT \& ORDERS EXPENS | (326) | - | (326) | (539) | - | (539) | 54 | - | 54 |
| 903200 | CONTRACTS \& ORDERS LABOR | 54,790 | - | 54,790 | 49,784 | - | 49,784 | 39,536 | - | 39,536 |
| 903300 | COLLECTING EXPENSES | 26,265 | 20,900 | 5,365 | 24,169 | 20,900 | 3,269 | 26,796 | 20,900 | 5,896 |
| 903520 | BILLING \& ACCTNG OTH EXP | 82,448 | 75,044 | 7,404 | 87,548 | 75,044 | 12,504 | 85,241 | 75,044 | 10,197 |
| 904000 | UNCOLLECTIBLE ACCOUNTS | 71,363 | 57,659 | 13,704 | 40,525 | 58,945 | $(18,420)$ | 20,928 | 57,758 | $(36,830)$ |
| 905100 | MISC CUST ACCTNG EXPENSES | 1,017 | 525 | 492 | (608) | 525 | $(1,133)$ | (152) | 525 | (677) |
| 920000 | ADM \& GENERAL SALARIES | 140,059 | 563,018 | $(422,959)$ | 87,367 | 516,553 | $(429,186)$ | 113,917 | 540,442 | $(426,525)$ |
| 920500 | INCENTIVE PLAN EXPENSE | 22,202 | 33,207 | $(11,005)$ | 22,199 | 30,323 | $(8,124)$ | 29,640 | 31,766 | $(2,126)$ |
| 921100 | EXPENSES OF EMPLOYEES | 9,978 | 9,968 | 10 | 2,844 | 19,468 | $(16,624)$ | 8,758 | 8,543 | 215 |
| 921130 | DUES FOR CLUBS-TAXABLE | 2,339 | 1,100 | 1,239 | 3,048 | 700 | 2,348 | 1,036 | 2,487 | $(1,451)$ |
| 921200 | MISC OFFICE EXP SUP | 44,979 | 33,429 | 11,550 | 41,077 | 33,745 | 7,332 | 51,007 | 32,241 | 18,766 |
| 923100 | SERVICE COMPANY CHARGES | 723,085 | 667,327 | 55,758 | 691,063 | 610,408 | 80,655 | 710,093 | 648,022 | 62,071 |
| 923300 | LEGAL SERVICES | (277) | 6,550 | $(6,827)$ | 18,245 | 6,550 | 11,695 | 18,849 | 6,550 | 12,299 |
| 923500 | OTHER SERVICES-CURRENT | 45,555 | 62,390 | $(16,835)$ | 65,978 | 61,790 | 4,188 | 100,652 | 72,490 | 28,162 |
| 924000 | PROPERTY INSURANCE | 13,384 | 3,368 | 10,016 | 13,348 | 3,368 | 9,980 | 13,348 | 3,368 | 9,980 |
| 925110 | WORKMENS COMP PREMIUM EXP | 12,663 | 12,680 | (17) | 12,555 | 12,680 | (125) | 12,464 | 12,680 | (216) |
| 925300 | INJURIES \& DAMAGES EXP | (175) | 1,000 | $(1,175)$ | $(1,984)$ | 1,000 | $(2,984)$ | - | 1,000 | $(1,000)$ |
| 925400 | GENERAL LIABILITY | 29,384 | 43,870 | $(14,486)$ | 29,022 | 43,870 | $(14,848)$ | $(15,131)$ | 43,870 | $(59,001)$ |
| 926100 | ACCRUED OPEB EXPENSE | 89,058 | 47,000 | 42,058 | 85,254 | 47,000 | 38,254 | 83,939 | 47,000 | 36,939 |
| 926110 | GROUP INSURANCE PREM EXP | 120,459 | 110,083 | 10,376 | 117,726 | 110,083 | 7,643 | 120,192 | 110,083 | 10,109 |
| 926160 | GROUP INS CAP (A \& B) | $(19,341)$ | - | $(19,341)$ | $(12,560)$ | - | $(12,560)$ | $(13,089)$ | - | $(13,089)$ |
| 926200 | OTHER WELFARE EXPENSES | 1,504 | 2,800 | $(1,296)$ | 5,168 | 8,800 | $(3,632)$ | 5,902 | 3,100 | 2,802 |
| 926250 | 401-K CONTRIBUTIONS EXPENSE | 10,508 | 9,786 | 722 | 8,747 | 8,946 | (199) | 9,324 | 9,399 | (75) |
| 926400 | PENSION PLAN EXPENSE | 123,747 | 50,479 | 73,268 | 117,137 | 50,479 | 66,658 | 115,229 | 50,479 | 64,750 |
| 926600 | OTHER PENSION PLAN EXP | 9,293 | 9,800 | (507) | 9,080 | 9,800 | (720) | 10,442 | 9,800 | 642 |
| 928100 | PENSIONS CAP (C \& R) | 23,803 | 29,367 | $(5,564)$ | 24,621 | 29,367 | $(4,746)$ | 24,010 | 29,367 | $(5,357)$ |
| 928300 | AMORT OTHER REGULATRY EXP | 1,299 | 853 | 446 | 1,299 | 853 | 446 | 1,299 | 853 | 446 |
| 928400 | OTH REGULATORY EXP-CURRENT | 9,745 | 22,404 | $(12,659)$ | 9,695 | 19,221 | $(9,526)$ | 22,938 | 11,795 | 11,143 |
| 930210 | MISC GENERAL EXP-CURRENT | 11,912 | 15,928 | $(4,016)$ | 181,654 | 17,837 | 163,817 | 30,729 | 26,139 | 4,590 |
| 930230 | MISC GENERAL EXP-CURRENT | 1,331 | 4,600 | $(3,269)$ | 1,331 | 4,600 | $(3,269)$ | 1,314 | 4,600 | $(3,286)$ |
| 930260 | MEALS \& TRAVEL EXPENSES-TAXA | 1,213 | 2,251 | $(1,038)$ | 897 | 1,721 | (824) | 1,307 | 1,828 | (521) |
| 930270 | DONATIONS-ILL | 20 | - | 20 | - | - | - | - | - | - |
| 930510 | LOBBYING EXPENSES | - | - | - | - | - | - | - | - | - |
| 930600 | TRANSPORTATION EXPENSES | 51,454 | 83,162 | $(31,708)$ | 55,643 | 83,162 | $(27,519)$ | 60,812 | 83,162 | $(22,350)$ |
| 930880 | MISC GEN EXP-COMPANY DUES | 5,399 | 3,337 | 2,062 | 5,569 | 2,537 | 3,032 | 5,361 | 2,537 | 2,824 |
| 930890 | MISC GEN EXP-OTHER | 3,000 | 4,106 | $(1,106)$ | 4,000 | 1,712 | 2,288 | 1,500 | 3,334 | $(1,834)$ |
| 931000 | ADM \& GENERAL RENTS | 1,167 | 4,414 | $(3,247)$ | 577 | 4,414 | $(3,837)$ | 1,084 | 4,414 | $(3,330)$ |
| 932100 | OR MN A\&G STRUC \& IMP MAT | 7,751 | 9,808 | $(2,057)$ | 19,827 | 9,808 | 10,019 | 8,506 | 9,808 | $(1,302)$ |
| 932700 | OR MN A\&G MISC PROPTY MAT | 578 | 390 | 188 | 6,616 | 1,624 | 4,992 | 2,235 | 372 | 1,863 |


| $\begin{array}{r}\text { YEAR-200 } \\ \text { AWW } \\ \hline\end{array}$ | $1{ }^{1}$ Description | 2009 October Actual | 2009 October Budget | Variance | 2009 November Actual | 2009 November Budget | Variance | 2009 December Actual | 2009 December Budget | Variance |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 651100 | OR MN WT STRUCT \& IMP MAT | 11,134 | 16,100 | $(4,966)$ | 304 | 12,100 | $(11,796)$ | 25,930 | 12,100 | 13,830 |
| 651120 | AMORT DEF EXP WT STRUCT | 11,952 | 14,167 | $(2,215)$ | 11,952 | 14,167 | $(2,215)$ | 11,952 | 14,167 | $(2,215)$ |
| 660000 | T\&D RENTS | 7,489 | - | 7,489 | 1,598 | - | 1,598 | 5,946 | - | 5,946 |
| 662100 | T\&D LINES EXPENSE | 1,092 | 1,475 | (383) | 1,313 | 1,475 | (162) | 3,823 | 1,475 | 2,348 |
| 662200 | T\&D LINES LABOR | 164,564 | - | 164,564 | 210,132 | - | 210,132 | 179,082 | - | 179,082 |
| 663400 | MISC METER LABOR | 2,352 | - | 2,352 | 945 | - | 945 | 349 | - | 349 |
| 665300 | MISC T\&D EXPENSES-CURRENT | 19,263 | 28,812 | $(9,549)$ | 25,585 | 31,312 | $(5,727)$ | 24,181 | 33,446 | $(9,265)$ |
| 666000 | T\&D RENTS | (350) | 315 | (665) | - | 315 | (315) | 956 | 315 | 641 |
| 670000 | OR MN T\&D SUPR \& ENG | 692 | - | 692 | 786 | - | 786 | 930 | - | 930 |
| 671200 | OR MN T\&D STRUCT \& IMP-LAB | 1,529 | - | 1,529 | 1,810 | - | 1,810 | 1,015 | - | 1,015 |
| 672120 | AMORT DEF EXP RES \& STAND | 13,286 | 721 | 12,565 | 13,286 | 721 | 12,565 | 13,286 | 721 | 12,565 |
| 672200 | AMORT DEF EXP RES \& STAND | 1,113 | - | 1,113 | 2,165 | - | 2,165 | 491 | - | 491 |
| 673200 | OR MN T\&D MAINS LAB | 17,537 | - | 17,537 | 24,979 | - | 24,979 | 26,973 | - | 26,973 |
| 675200 | OR MN SERVICES LAB | 19,842 | - | 19,842 | 29,477 | - | 29,477 | 11,134 | - | 11,134 |
| 676200 | OR MN METERS LAB | 6,790 | - | 6,790 | 7,898 | - | 7,898 | 5,117 | - | 5,117 |
| 676400 | OR MN METER INSTALL LAB | 16,681 | - | 16,681 | 22,598 | - | 22,598 | 7,969 | - | 7,969 |
| 678100 | OR MN OTHER T\&D PLANT MAT | 21,788 | 41,275 | $(19,487)$ | 30,435 | 40,775 | $(10,340)$ | 36,975 | 30,775 | 6,200 |
| 902200 | METER READING LABOR | 24,490 | - | 24,490 | 34,116 | - | 34,116 | 20,118 | - | 20,118 |
| 903100 | CONTRACT \& ORDERS EXPENS | 2,086 | - | 2,086 | 316 | - | 316 | $(2,291)$ | - | $(2,291)$ |
| 903200 | CONTRACTS \& ORDERS LABOR | 44,188 | - | 44,188 | 65,455 | - | 65,455 | 48,878 | - | 48,878 |
| 903300 | COLLECTING EXPENSES | 21,649 | 20,900 | 749 | 28,578 | 20,900 | 7,678 | 25,044 | 20,900 | 4,144 |
| 903520 | BILLING \& ACCTNG OTH EXP | 88,723 | 75,044 | 13,679 | 85,393 | 75,044 | 10,349 | 81,591 | 75,044 | 6,547 |
| 904000 | UNCOLLECTIBLE ACCOUNTS | 77,566 | 55,906 | 21,660 | 28,594 | 50,112 | $(21,518)$ | 1,839 | 47,877 | $(46,038)$ |
| 905100 | MISC CUST ACCTNG EXPENSES | 290 | 525 | (235) | (150) | 525 | (675) | 1,115 | 525 | 590 |
| 920000 | ADM \& GENERAL SALARIES | 110,948 | 538,838 | $(427,890)$ | $(106,144)$ | 528,159 | $(634,303)$ | 144,058 | 573,544 | $(429,486)$ |
| 920500 | INCENTIVE PLAN EXPENSE | 22,313 | 31,766 | $(9,453)$ | 33,588 | 30,323 | 3,265 | 123,578 | 33,207 | 90,371 |
| 921100 | EXPENSES OF EMPLOYEES | (246) | 9,568 | $(9,814)$ | 4,982 | 10,925 | $(5,943)$ | 8,571 | 8,745 | (174) |
| 921130 | DUES FOR CLUBS-TAXABLE | 608 | 85 | 523 | 1,734 | 315 | 1,419 | 4,615 | 170 | 4,445 |
| 921200 | MISC OFFICE EXP SUP | 21,536 | 34,693 | $(13,157)$ | 44,918 | 33,980 | 10,938 | 33,228 | 33,678 | (450) |
| 923100 | SERVICE COMPANY CHARGES | 673,982 | 638,092 | 35,890 | 701,732 | 622,371 | 79,361 | 811,674 | 661,908 | 149,766 |
| 923300 | LEGAL SERVICES | 14,610 | 6,550 | 8,060 | 14,218 | 6,550 | 7,668 | 975 | 6,550 | $(5,575)$ |
| 923500 | OTHER SERVICES-CURRENT | 53,865 | 63,090 | $(9,225)$ | 20,406 | 58,590 | $(38,184)$ | 48,664 | 58,690 | $(10,026)$ |
| 924000 | PROPERTY INSURANCE | 13,348 | 3,368 | 9,980 | 13,348 | 3,368 | 9,980 | 13,348 | 3,368 | 9,980 |
| 925110 | WORKMENS COMP PREMIUM EXP | 12,621 | 12,680 | (59) | 10,284 | 12,680 | $(2,396)$ | 12,532 | 12,680 | (148) |
| 925300 | INJURIES \& DAMAGES EXP | - | 1,000 | $(1,000)$ | - | 1,000 | $(1,000)$ | - | 1,000 | $(1,000)$ |
| 925400 | GENERAL LIABILITY | 29,384 | 43,870 | $(14,486)$ | 29,384 | 43,870 | $(14,486)$ | 34,351 | 43,870 | $(9,519)$ |
| 926100 | ACCRUED OPEB EXPENSE | 86,210 | 47,000 | 39,210 | 59,843 | 47,000 | 12,843 | 87,446 | 47,000 | 40,446 |
| 926110 | GROUP INSURANCE PREM EXP | 119,948 | 110,083 | 9,865 | 109,218 | 110,083 | (865) | 126,384 | 110,083 | 16,301 |
| 926160 | GROUP INS CAP (A \& B) | $(12,171)$ | - | $(12,171)$ | $(14,103)$ | - | $(14,103)$ | $(16,732)$ | - | $(16,732)$ |
| 926200 | OTHER WELFARE EXPENSES | 1,093 | 18,500 | $(17,407)$ | 5,144 | 5,300 | (156) | (435) | 4,750 | $(5,185)$ |
| 926250 | 401-K CONTRIBUTIONS EXPENSE | 9,088 | 9,333 | (245) | 7,651 | 9,247 | $(1,596)$ | 7,196 | 10,036 | $(2,840)$ |
| 926400 | PENSION PLAN EXPENSE | 118,527 | 50,479 | 68,048 | 78,338 | 50,479 | 27,859 | 121,195 | 50,479 | 70,716 |
| 926600 | OTHER PENSION PLAN EXP | 9,688 | 9,900 | (212) | 8,982 | 9,900 | (918) | 9,218 | 9,900 | (682) |
| 928100 | PENSIONS CAP (C \& R) | 24,010 | 29,367 | $(5,357)$ | 24,010 | 29,367 | $(5,357)$ | 24,146 | 29,367 | $(5,221)$ |
| 928300 | AMORT OTHER REGULATRY EXP | 1,299 | 853 | 446 | 1,299 | 853 | 446 | 1,299 | 853 | 446 |
| 928400 | OTH REGULATORY EXP-CURRENT | 7,275 | 6,490 | 785 | 8,710 | 6,490 | 2,220 | 9,098 | 6,490 | 2,608 |
| 930210 | MISC GENERAL EXP-CURRENT | 26,177 | 15,897 | 10,280 | 13,994 | 21,831 | $(7,837)$ | 20,736 | 99,772 | $(79,036)$ |
| 930230 | MISC GENERAL EXP-CURRENT | 1,320 | 4,600 | $(3,280)$ | 2,054 | 4,600 | $(2,546)$ | 1,326 | 4,600 | $(3,274)$ |
| 930260 | MEALS \& TRAVEL EXPENSES-TAXA | 589 | 2,051 | $(1,462)$ | 1,337 | 2,028 | (691) | 2,762 | 3,537 | (775) |
| 930270 | DONATIONS-ILL | - | - | - | - | - | - | - | - | - |
| 930510 | LOBBYING EXPENSES | - | - | - | - | - | - | - | - | - |
| 930600 | TRANSPORTATION EXPENSES | 43,615 | 83,162 | $(39,547)$ | 51,641 | 83,162 | $(31,521)$ | 34,573 | 83,162 | $(48,589)$ |
| 930880 | MISC GEN EXP-COMPANY DUES | 5,275 | 2,537 | 2,738 | 5,295 | 2,537 | 2,758 | 5,275 | 2,537 | 2,738 |
| 930890 | MISC GEN EXP-OTHER | 8,218 | 4,212 | 4,006 | 1,193 | 1,712 | (519) | 3,498 | 212 | 3,286 |
| 931000 | ADM \& GENERAL RENTS | 1,992 | 4,414 | $(2,422)$ | 2,085 | 4,414 | $(2,329)$ | 2,104 | 4,414 | $(2,310)$ |
| 932100 | OR MN A\&G STRUC \& IMP MAT | 8,563 | 9,808 | $(1,245)$ | 706 | 9,808 | $(9,102)$ | 12,759 | 9,808 | 2,951 |
| 932700 | OR MN A\&G MISC PROPTY MAT | 849 | 933 | (84) | 2,970 | 425 | 2,545 | 1,591 | 1,314 | 277 |

## KENTUCKY-AMERICAN WATER COMPANY <br> CASE NO. 2010-00036 <br> COMMISSION STAFF'S FIRST REQUEST FOR INFORMATION

Witness: Michael Miller
5. Provide a reconciliation and a detailed explanation of each difference, if any, in the capitalization and the net investment rate base of Kentucky-American for the base period.

## Response:

Rate base for Base Period
Capitalization for Base Period
Difference
Difference as a Percentage of Capital

Reconciling Items:
Bluegrass Water Project - not in rate base
Accounts Payable impact on working cash
9,322,451
Accrued Dividends
2,180,000
Other Working Cash Timing 102,020

For electronic version, refer to KAW_R_PSCDR1\#5_031610.pdf.

# KENTUCKY-AMERICAN WATER COMPANY <br> CASE NO. 2010-00036 <br> COMMISSION STAFF'S FIRST REQUEST FOR INFORMATION 

Witness: Michael Miller
6. Provide a rate base, capital structure, and statement of income for Kentucky-American for the most recent actual 12-month period at the time of the company's application for rate adjustment and for the base period used in the company's application. Provide detailed explanations necessary to reconcile this information with the filed base period revenue requirement information.

## Response:

See attached schedules.
For the electronic version, refer to KAW_R_PSCDR1\#6_031610.pdf.


Kentucky-American Water Company Kentucky-American Water Compan 1
Commission Data Request No. 1
Case No. 2010-00036

Rate Base Components
Property Held for Future Use
Utility Plant Acquisition Adjustments
Net Utility Plant in Service
Deferred Investment Tax Credits Deferred Maintenance

Deferred Debits
Total Rate Base
Kentucky-American Water Company
Commission Data Request No. 1
Case No. 2010-00036

## Capital Structure

## Class of Capital

Short Term Debt

| Amount |  |  | Base Period |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Outstanding | Percent | JDITC | Total | Adjusted |  |
| $2 / 28 / 2010$ | To Total | $2 / 28 / 2010$ | $2 / 28 / 2010$ | Capital | Difference |


| Short Term Debt | 36,084,623 | 11.37\% | 107,867 | 36,192,490 | 46,493,434 | 10,300,944 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Long Term Debt | 144,990,000 | 45.68\% | 433,417 | 145,423,417 | 140,682,835 | $(4,740,582)$ |
| Preferred Stock | 5,945,600 | 1.87\% | 17,773 | 5,963,373 | 5,951,739 | $(11,634)$ |
| Common Equity | 130,392,626 | 41.08\% | 389,781 | 130,782,407 | 140,772,902 | 9,990,495 |
| Total Capital | 317,412,849 | 100.00\% | 948,838 | 318,361,687 | 333,900,910 | 15,539,223 |
|  |  | Difference as a Percent of Base Period |  |  |  | 4.65\% |

[^0]Kentucky-American Water Company Commission Data Request No. 1
Case No. 2010-00036
Case No. 2010-00036
Income Statement
Operating Revenues Operating Expenses:
Operation \& Maintenance
Depreciation
Amortization
Taxes Other
State Income Taxes
Federal Income Taxes
Total Operating Expenses Utility Operating Income
Other Income/Net
Income Before Deductions Interest on LTD Interest on Bank Debt Other Interest
Total Income Deductions
Net Income

# KENTUCKY-AMERICAN WATER COMPANY <br> CASE NO. 2010-00036 <br> COMMISSION STAFF'S FIRST REQUEST FOR INFORMATION 

## Witness: Lance Williams

7. Describe the process that Kentucky-American uses to plan and approve construction projects.

## Response:

The long-term construction planning begins with the Least Cost/Comprehensive Planning Study, which evaluates the distribution system, storage facilities and production capacities. The study identifies projects for construction over a fifteen-year planning horizon, with immediate needs identified for construction within five years. KAW's most recent formal study was completed in 1992, although a draft update to the plan for distribution, storage and production systems was developed in 1999. This draft was not finalized due to the continued concerns and impact of the system from the source of supply solution. The storage analysis was finalized and updated and filed with the PSC in December 2005 as part of KAW’s initial application in Case No. 2005-00546.

The Engineering group, through both the Director - Engineering and the Planning Engineer, works with the Vice President Operations, Operations Superintendents and Operations Supervisors to prioritize projects and identify any projects that may not have been included in the five-year plan. This is reviewed by the President and submitted to the Capital Investment Management Committee ("CIMC"). The five-year plan is utilized to develop immediate year budgets based on urgency of the projects. Project authorization is submitted with the annual budget to the CIMC and then approved by the

CIMC. Projects over $\$ 10$ million are individually approved by the Board of Directors; otherwise, the projects are authorized by the Board of Directors as part of the entire annual strategic capital expenditures plan. The CIMC also authorizes changes to project scope or cost within the Strategic Capital Expenditure Plan. Projects for compliance with local, state, and federal regulations, improvement of service and fire flows, and reductions of maintenance problems are given priorities.

The 1992 LC/CPS was filed originally with the PSC in July 1992 and filed electronically in the Case Number 2004-00103 as KAW_R_PSCDR1\#8_052004.pdf.

For the electronic version of the document, refer to KAW_R_PSCDR1\#7_031610.pdf.

# KENTUCKY-AMERICAN WATER COMPANY <br> CASE NO. 2010-00036 <br> COMMISSION STAFF'S FIRST REQUEST FOR INFORMATION 

Witness: Lance Williams
8. Provide Kentucky-American's long-term construction planning program in effect as of the date of the filing of Kentucky-American’s application.

## Response:

Please see attached.
For the electronic version, refer to KAW_R_PSCDR1\#8_031610.pdf.


## KENTUCKY-AMERICAN WATER COMPANY <br> CASE NO. 2010-00036 <br> COMMISSION STAFF'S FIRST REQUEST FOR INFORMATION

## Witness: Lance Williams

9. a. For each construction project that Kentucky-American has commenced from January 1, 2000 through December 31, 2009, provide the information listed below in the format contained in Schedule 1:
(1) Project number;
(2) Project title and description;
(3) Annual actual cost;
(4) Annual original budgeted cost;
(5) Variance between annual actual cost and annual original budgeted cost in dollars;
(6) Variance between annual actual cost and annual original budgeted cost as a percentage;
(7) Percentage of total construction budget that proposed project comprises for the budgeted year;
(8) Total actual project cost;
(9) Total budgeted project cost;
(10) Variance between total actual project cost and total budgeted project cost;
(11) Date the original budget projected the project to start;
(12) Date the original budget projected the project to be completed;
(13) Date construction of project actually commenced; and
(14) Date construction of the project was actually completed.
b. For each project in which a variance between actual and budgeted cost occurred or in which a delay in its start or completion occurred, describe the variance or delay and the reasons for such variance or delay.
c. Provide a copy of the construction budget variance information requested in Item 9(a) on a computer disk in Microsoft Office Excel format.

## Response:

a. Please see attached.
b. Please see attached.
c. Please refer to the excel file that was filed electronically as KAW_R_PSCDR1\#9_031610.xls.

For the electronic version of this document, refer to KAW_R_PSCDR1\#9_031610.pdf.
Kentucky American Water

| Case No. 2010-00036 |
| :--- |
| Construction Projects |
| As of 2009 |


Kentucky American Water
Case No. 2010-00036
Construction Projects

Kentucky American Water

| Case No. 2010-00036 |
| :--- |
| Construction Projects |
| As of 2008 |


Kentucky American Water
Case No. 2010-00036
Construction Projects

Kentucky American Water
Case No. 2010-0003
Construction Projects
As of 2007

| Item | Description |  | Annual Actual |  | Annual Original Budget |  | Variance <br> Dollars | Variance Percent | $\begin{gathered} \text { Percent } \\ \text { of } \\ \text { Budget } \end{gathered}$ | Total <br> Actual <br> Project <br> Cost | Total <br> Budget <br> Project <br> Cost | Variance | Date <br> Original <br> Budget <br> Start | Date Original Budget End | Date <br> Actual Start | Date Actual End |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| DV | DEVELOPER/GOVERNMENTAL CONTRIBUTIONS | \$ | 3,137,371 | \$ | 6,000,000 | \$ | $(2,862,629)$ | 52.29\% | 21.88\% |  |  |  |  |  |  |  |
| A | MAINS - NEW | \$ | 489,878 | \$ | 750,000 | \$ | $(260,122)$ | 65.32\% | 2.74\% |  |  |  |  |  |  |  |
| B | MAINS - REPLACED/RESTORED | \$ | 2,473,473 | \$ | 2,250,000 | \$ | 223,473 | 109.93\% | 8.21\% |  |  |  |  |  |  |  |
| C | MAINS - UNSCHEDULED | \$ | 101,183 | \$ |  | \$ | 101,183 |  | 0.00\% |  |  |  |  |  |  |  |
| D | MAINS - RELOCATED | \$ | 16,024 | \$ | - | \$ | 16,024 |  | 0.00\% |  |  |  |  |  |  |  |
| E | HYDRANTS, VALVES, AND MANHOLES - NEW | \$ | 244,947 | \$ | 520,000 | \$ | $(275,053)$ | 47.11\% | 1.90\% |  |  |  |  |  |  |  |
| F | HYDRANTS, VALVES, AND MANHOLES - REPLACED | \$ | 19,096 | \$ | 100,000 | \$ | $(80,904)$ | 19.10\% | 0.36\% |  |  |  |  |  |  |  |
| G | SERVICES AND LATERALS - NEW | \$ | 1,087,103 | \$ | 1,303,700 | \$ | $(216,597)$ | 83.39\% | 4.76\% |  |  |  |  |  |  |  |
| H | SERVICES AND LATERALS - REPLACED | \$ | 1,242,660 | \$ | 1,200,000 | \$ | 42,660 | 103.56\% | 4.38\% |  |  |  |  |  |  |  |
| I | METERS - NEW | \$ | 1,701,718 | \$ | 1,150,400 | \$ | 551,318 | 147.92\% | 4.20\% |  |  |  |  |  |  |  |
| J | METERS - REPLACED | \$ | 1,330,358 | \$ | 1,150,000 | \$ | 180,358 | 115.68\% | 4.19\% |  |  |  |  |  |  |  |
| K | ITS EQUIPMENT AND SYSTEMS | \$ | 253,947 | \$ | 100,000 | \$ | 153,947 | 253.95\% | 0.36\% |  |  |  |  |  |  |  |
| L | SCADA EQUIPMENT AND SYSTEMS | \$ | 59,013 | \$ |  | \$ | 59,013 |  | 0.00\% |  |  |  |  |  |  |  |
| M | SECURITY EQUIPMENT AND SYSTEMS | \$ |  | \$ | - | \$ |  |  | 0.00\% |  |  |  |  |  |  |  |
| N | OFFICES AND OPERATIONS CENTERS | \$ | 140,932 | \$ | 80,000 | \$ | 60,932 | 176.17\% | 0.29\% |  |  |  |  |  |  |  |
| O | VEHICLES | \$ | 576,684 | \$ |  | \$ | 576,684 |  | 0.00\% |  |  |  |  |  |  |  |
| P | TOOLS AND EQUIPMENT | \$ | 339,773 | \$ | 155,000 | \$ | 184,774 | 219.21\% | 0.57\% |  |  |  |  |  |  |  |
| Q | PROCESS PLANT FACILITIES AND EQUIPMENT | \$ | 1,127,337 | \$ | 650,000 | \$ | 477,337 | 173.44\% | 2.37\% |  |  |  |  |  |  |  |
| R | CAPITALIZED TANK REHABILIATION/PAINTING | \$ | 4,601 | \$ | - | \$ | 4,601 |  | 0.00\% |  |  |  |  |  |  |  |
| S | ENGINEERING STUDIES | \$ | 61,018 | \$ | 100,000 | \$ | $(38,982)$ | 61.02\% | 0.36\% |  |  |  |  |  |  |  |
|  | TOTAL |  | 14,407,116 |  | 15,509,099 |  | $(1,101,983)$ | 92.89\% |  |  |  |  |  |  |  |  |
|  | ENTER ITEM DV AND SUBTRACT |  | 3,137,371 |  | 6,000,000 |  | $(2,862,629)$ |  |  |  |  |  |  |  |  |  |
|  | TOTAL ITEM A - S |  | 11,269,745 |  | 9,509,099 |  | 1,760,646 | 118.52\% |  |  |  |  |  |  |  |  |

Kentucky American Water
Case No. 2010-00036
Construction Projects

Kentucky American Water
Case No. 2010-00036
Construction Projects
As of 2006



| Item | Description | Annual Actual |  | Annual <br> Original <br> Budget |  | Variance <br> Dollars | Variance Percent | Percent of Budget | Total <br> Actual <br> Project <br> Cost | Total <br> Budget <br> Project <br> Cost | Variance | Date Original Budget Start | Date Original Budget End | Date <br> Actual <br> Start | Date <br> Actual End |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 80 | DEVELOPER/GOVERNMENTAL CONTRIBUTION | \$ 6,000,465 | \$ | 4,080,000 | \$ | 1,920,465 | 147.07\% | 23.71\% |  |  |  |  |  |  |  |
| 81 | NETWORK - REPLACEMENT/RENEWAL | \$ 489,069 | \$ | 600,000 | \$ | $(110,931)$ | 81.51\% | 3.49\% |  |  |  |  |  |  |  |
| 82 | NETWORK - EXTENSION | \$ 676,942 | \$ | 255,000 | \$ | 421,942 | 265.47\% | 1.48\% |  |  |  |  |  |  |  |
| 83 | HYDRANTS - REPLACEMENTS | \$ 23,370 | \$ | 25,500 | \$ | $(2,130)$ | 91.65\% | 0.15\% |  |  |  |  |  |  |  |
| 84 | HYDRANTS - NEW | \$ 547,823 | \$ | 300,000 | \$ | 247,823 | 182.61\% | 1.74\% |  |  |  |  |  |  |  |
| 85 | SERVICES - REPLACEMENT | \$ 738,960 | \$ | 500,000 | \$ | 238,960 | 147.79\% | 2.91\% |  |  |  |  |  |  |  |
| 86 | SERVICES - NEW | \$ 1,281,490 | \$ | 1,157,000 | \$ | 124,490 | 110.76\% | 6.72\% |  |  |  |  |  |  |  |
| 87 | METERS - REPLACEMENT | \$ 485,925 | \$ | 416,800 | \$ | 69,125 | 116.58\% | 2.42\% |  |  |  |  |  |  |  |
| 88 | METERS - NEW | \$ 1,064,681 | \$ | 1,121,500 | \$ | $(56,819)$ | 94.93\% | 6.52\% |  |  |  |  |  |  |  |
| 89 | ITS EQUIPMENT \& SYSTEMS | \$ 81,511 | \$ | 75,500 | \$ | 6,011 | 107.96\% | 0.44\% |  |  |  |  |  |  |  |
| 90 | OFFICES AND OPERATIONS CENTERS | \$ 93,531 | , | 55,000 | \$ | 38,531 | 170.06\% | 0.32\% |  |  |  |  |  |  |  |
| 91 | VEHICLES | \$ 6,533 | \$ | - | \$ | 6,533 |  | 0.00\% |  |  |  |  |  |  |  |
| 92 | TOOLS AND EQUIPMENT | \$ 202,116 |  | 160,000 | \$ | 42,116 | 126.32\% | 0.93\% |  |  |  |  |  |  |  |
| 93 | PROCESS PLANT - REPLACEMENTS | \$ 441,263 | \$ | 350,000 | \$ | 91,263 | 126.08\% | 2.03\% |  |  |  |  |  |  |  |
| 94 | PROCESS PLANT - ADDITIONS | \$ 10,170 | \$ | 50,000 | \$ | $(39,830)$ | 20.34\% | 0.29\% |  |  |  |  |  |  |  |
| 95 | TREATMENT MEDIA REPLACEMENT \& PROCESS REHAB (if capitalized) | \$ 167,212 | \$ | - | \$ | 167,212 |  | 0.00\% |  |  |  |  |  |  |  |
| 96 | TANK REHABILITATION/PAINTING (if capitalized) |  | \$ |  | \$ | - |  | 0.00\% |  |  |  |  |  |  |  |
| 97 | COMPREHENSIVE PLANNING STUDIES (if capitalized) | \$ | \$ | - | \$ |  |  | 0.00\% |  |  |  |  |  |  |  |
|  | TOTAL | 12,311,062 |  | 9,146,300 |  | 3,164,762 | 134.60\% |  |  |  |  |  |  |  |  |
|  | ENTER ITEM 80 AND SUBTRACT | 6,000,465 |  | 4,080,000 |  | 1,920,465 |  |  |  |  |  |  |  |  |  |
|  | TOTAL ITEM 81-97 | 6,310,596 |  | 5,066,300 |  | 1,244,296 | 124.56\% |  |  |  |  |  |  |  |  |

Type of Filing:_X__Original ____ Updated ____ Revised
Workpaper Reference No(s).:

| Item | Description | Annual Actual | Annual <br> Original Budget | Variance Dollars | Variance Percent | Percent <br> of Budget | Total <br> Actual <br> Project <br> Cost | Total <br> Budget <br> Project <br> Cost | Variance | Date <br> Original <br> Budget <br> Start | Date Original Budget End | Date <br> Actual <br> Start | Date <br> Actual <br> End |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| BUDGET PROJECTS |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 01-02 | GROUND STORAGE TANK - 3.0 MG | 11,298 | \$ | \$ 11,298 |  | 0.00\% |  |  | 0 | Mar-01 | Dec-03 | Feb-01 | Aug-04 |
| 01-03 | SCADA IMPROVEMENTS | 7,866 | \$ - | \$ 7,866 |  | 0.00\% | 675,097 | 650,000 | 25,097 | Jan-01 | May-03 | Sep-02 | Dec-05 |
| 01-05 | RUSSELL CAVE ROAD TANK - 1.0 MG | 928,000 | \$ 766,600 | \$ 161,400 | 121.05\% | 4.45\% | 1,755,786 | 1,300,000 | 455,786 | 01 | -04 | Feb-01 | Dec-05 |
| 01-11 | NEW COLUMBUS PROJECT | 22,613 |  | \$ 22,613 |  | \% |  |  | 0 | Oct-01 | May-03 | Feb-02 |  |
| 02-01 | LEESTOWN ROAD MAIN IMPROVEMENTS | 9,467 |  | \$ 9,467 |  | 0.00\% |  |  | 0 | Apr-02 | Dec-03 | Mar-02 |  |
| 02-02 | 2002 MAJOR HIGHWAY RELOCATIONS | \$ 446 |  | \$ 446 |  | 0.00\% |  |  | 0 | Jan-02 | Dec-02 | Jan-02 | Nov-02 |
| 02-03 | REPLACE TRAVELLING SCREEN \& HOUSING | \$ 11,980 |  | \$ 11,980 |  | 0.00\% |  |  | 0 | Aug-02 | Apr-03 | Dec-03 |  |
| 02-04 | SOURCE OF SUPPLY DEVELOPMENT | \$ 136,001 | \$ 1,500,000 | \$ $(1,363,999)$ | 9.07\% | 8.72\% |  |  | 0 | Apr-02 | Dec-03 | Jun-01 |  |
| 03-01 | ELEVATED STORAGE TANK - 2.0 MG | \$ 3,032,909 | \$ 2,180,000 | \$ 852,909 | 139.12\% | 12.67\% | 3,744,744 | 3,000,000 | 744,744 | May-03 | Dec-05 | Jul-03 | Dec-05 |
| 03-02 | MAJOR HIGHWAY RELOCATIONS | \$ 17,817 |  | \$ 17,817 |  | 0.00\% |  |  | 0 | Jan-03 | Dec-03 | Jan-03 | Oct-03 |
| 03-03 | ELECTRICAL \& RELIABILITY IMPROVEMENTS | \$ 257,106 | \$ 219,800 | \$ 37,306 | 116.97\% | 1.28\% | 999,181 | 1,320,000 | $(320,819)$ | Jan-03 | -04 | Jun-03 | Dec-05 |
| 04-02 | MAJOR HIGHWAY RELOCATIONS | \$ 1,271,760 | \$ 910,000 | \$ 361,760 | 139.75\% | 5.29\% |  |  | - |  |  |  |  |
| 04-03 | OWEN COUNTY MAIN EXTENSIONS (343) | 214,797 | \$ 240,000 | \$ $(25,203)$ | 89.50\% | 1.39\% |  |  | 0 | Oct-04 | Dec-07 | Oct-04 |  |
| 04-04 | BUSINESS PROCESS EFFCIENCY PROJECT \& ORCOM BUDG |  | \$ 1,322,035 | \$ (1,322,035) | 0.00\% | 7.68\% |  |  | 0 | Jan-04 | Dec-04 | Jan-04 | Jan-06 |
| 04-06 | REPLACE FILTER MEDIA 3 \& 4 | \$ 1,294 |  | \$ 1,294 |  | 0.00\% |  |  | 0 | Mar-05 | Jul-05 | Sep-04 | Dec-04 |
| 05-01 | GROUND STORAGE TANK - 3.0 MG (342) |  | \$ 75,000 | \$ $(7,000)$ | 0.00\% | 0.44\% |  |  | 0 | Jul-05 | Dec-07 |  |  |
| 05-02 | RUSSELL CAVE ROAD MAIN | \$ 392,914 | \$ 500,000 | \$ (107,086) | 78.58\% | 2.91\% |  |  | 0 | Apr-05 | Dec-07 | Aug-05 | Dec-06 |
| 05-04 | KRS VALVE MECHANICAL IMPROVEMENT | \$ 199,892 | \$ 350,000 | \$ (150,108) | 57.11\% | 2.03\% |  |  | 0 | Feb-05 | Oct-05 | Aug-05 | Jan-06 |
| 05-05 | REPLACE TRAC-VAC SYSTEM | \$ 341 |  | \$ 341 |  | 0.00\% |  |  | 0 | Apr-05 | Dec-06 | Apr-05 |  |
| 05-06 | SLUDGE HANDLING IMPROVEMENT | \$ 12,041 | \$ - | \$ 12,041 |  | 0.00\% |  |  | 0 | Apr-05 | Dec-08 | Apr-05 |  |
| 92-12 | BLUEGRASS WATER PROJECT | \$ 6,754 | \$ - | \$ 6,754 |  | 0.00\% |  |  | 0 | Jul-92 | Dec-96 | Sep-92 |  |
| 96-19 | CUSTOMER SERVICE SOFTWARE | \$ $\quad 56$ | \$ - | \$ 56 |  | 0.00\% |  |  | 0 | Dec-96 | Jun-99 | Nov-96 | Dec-03 |
| 98-01 | INTEGRATED RESOURCE PLAN | 31,184 | \$ - | \$ 31,184 |  | 0.00\% |  |  | 0 | Feb-98 | Sep-99 | Feb-99 | Dec-06 |
| 98-08 | SURGE PROTECTION KRS | \$ 1,754 | \$ - | \$ 1,754 |  | 0.00\% |  |  | 0 | Apr-98 | Nov-99 | Aug-98 |  |
|  |  | 6,568,291 | 8.063,435 | (1,495, 144) | 81.46 |  |  |  |  |  |  |  |  |



Kentucky American Water

| Case No. 2010-00036 |
| :--- |
| Construction Projects |
| As of 2003 |


Kentucky American Water
Case No. 2010-00036
Construction Projects

As of | 2003 |
| :--- |

| Item | Description | Annual Actual | Annual Original Budget | Variance Dollars | Variance Percent | Percent of Budget | Total <br> Actual <br> Project <br> Cost | Total <br> Budget <br> Project <br> Cost | Variance | Date Original Budget Start | Date <br> Original <br> Budget <br> End | Date Actual Start | Date Actual End |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| BUDGET PROJECTS |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 92-12 | BLUEGRASS WATER PROJECT | 61,504 | 0 | 61,504 | 154.96\% | $0.00 \%$ | 3,403,518 | 352,200 | 3,051,318 | Jul-92 | Dec-96 | Sep-92 | Dec-03 |
| 96-19 | CUSTOMER SERVICE SOFTWARE | 720,918 | 0 | 720,918 |  | 0.00\% |  |  |  | Dec-96 | Jun-99 | Nov-96 |  |
| 98-01 | INTEGRATED RESOURCE PLAN | 56,613 | , | 56,613 |  | 0.00\% |  |  |  | Feb-98 | Sep-99 | Feb-99 |  |
| 98-08 | SURGE PROTECTION KRS | 1,693 | 0 | 1,693 |  | 0.00\% |  |  |  | Apr-98 | Nov-99 | Aug-98 |  |
| 98-09 | UPGRADE CART WINCH KRS | 140 | 0 | 140 |  | 0.00\% |  |  |  | Feb-98 | Nov-98 | Aug-98 |  |
| 01-02 | GROUND STORAGE TANK - 3.0 MG | 774,799 | 500,000 | 274,799 |  | 3.81\% |  |  |  | Mar-01 | Dec-03 | Feb-01 |  |
| 01-03 | SCADA IMPROVEMENTS | 352,624 | 500,000 | $(147,376)$ | 70.52\% | 3.81\% |  |  |  | Jan-01 | May-03 | Sep-02 |  |
| 01-04 | SCOTT COUNTY MAINS | 487,100 | 600,000 | $(112,900)$ | 81.18\% | 4.57\% |  |  | 856,593 | Jan-01 | Dec-02 | Jan-01 | Oct-03 |
| 01-05 | RUSSELL CAVE ROAD TANK - 1.0 MG | 37,380 | 150,000 | $(112,620)$ | 24.92\% | 1.14\% |  |  |  | Jan-01 | Dec-04 | Feb-01 |  |
| 01-07 | MAJOR HIGHWAY RELOCATIONS | $(5,551)$ | 0 | $(5,551)$ |  | 0.00\% |  |  |  | Jan-01 | Dec-01 | Jan-01 | Mar-02 |
| 01-10 | RRS HYDRAULIC IMPROVEMENTS | 504,665 | 450,000 | 54,665 | 112.15\% | 3.43\% | 1,651,323 | 1,600,000 | 51,323 | Mar-01 | Sep-02 | Aug-01 | Jun-03 |
| 01-11 | NEW COLUMBUS PROJECT | 1,387,929 | 770,000 | 617,929 | 180.25\% | 5.87\% |  |  |  | Oct-01 | May-03 | Feb-02 |  |
| 02-01 | LEESTOWN ROAD MAIN IMPROVEMENTS | 31,644 | 0 | 31,644 |  | 0.00\% |  |  |  | Apr-02 | Dec-03 | Mar-02 |  |
| 02-02 | 2002 MAJOR HIGHWAY RELOCATIONS | 182,535 | 0 | 182,535 |  | 0.00\% |  |  |  | Jan-02 | Dec-02 | Jan-02 | Nov-02 |
| 02-03 | REPLACE TRAVELLING SCREEN \& HOUSING | 207 | 0 | 207 |  | 0.00\% |  |  |  | Aug-02 | Apr-03 | Dec-03 |  |
| 02-04 | SOURCE OF SUPPLY DEVELOPMENT | 0 | 207,300 | $(207,300)$ | 0.00\% | 1.58\% |  |  |  | Apr-02 | Dec-03 | Jun-01 |  |
| 03-01 | ELEVATED STORAGE TANK - 2.0 MG | 0 | 150,000 | $(150,000)$ | 0.00\% | 1.14\% |  |  |  | May-03 | Dec-05 | Jul-03 |  |
| 03-02 | MAJOR HIGHWAY RELOCATIONS | 503,390 | 700,000 | $(196,610)$ | 71.91\% | 5.33\% | 503,390 | 700,000 | $(196,610)$ | Jan-03 | Dec-03 | Jan-03 | Oct-03 |
| 03-03 | ELECTRICAL \& RELIABILITY IMPROVEMENTS | 7,229 | $\begin{array}{r} 400,000 \\ 0 \\ \hline \end{array}$ | $(392,771)$ 0 | 1.81\% | $3.05 \%$ $0.00 \%$ |  |  |  | Jan-03 | Jul-04 | Jun-03 |  |
|  |  | 5,104,819 | 4,427,300 | 677,519 | 115.30\% |  |  |  |  |  |  |  |  |

Kentucky American Water

| Case No. 2010-00036 |
| :--- |
| Construction Projects |
| As of 2002 |


| Item | Description | Annual Actual | Annual <br> Original <br> Budget | Variance Dollars | Variance Percent | Percent of <br> Budget | Total Actual Project Cost | Total <br> Budget <br> Project <br> Cost | Variance | Date Original Budget Start | Date Original Budget End | Date Actual Start | Date Actual End |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| A | MAINS \& HYDRANTS, DEPOSIT AGREEMENTS | \$2,758,068 | \$4,250,000 | (\$1,491,932) | 64.90\% | 25.55\% |  |  |  |  |  |  |  |
| B | MAINS \& HYDRANTS, NEW \& REPLACEMENT | 793,184 | 1,152,600 | $(359,416)$ | 68.82\% | 6.93\% |  |  |  |  |  |  |  |
| C | SERVICES | 1,634,330 | 1,123,200 | 511,130 | 145.51\% | 6.75\% |  |  |  |  |  |  |  |
| D | METERS \& INSTALLATIONS | 1,351,800 | 1,281,700 | 70,100 | 105.47\% | 7.71\% |  |  |  |  |  |  |  |
| E | OFFICE FURNITURE \& EQUIPMENT | 114,535 | 305,900 | $(191,365)$ | 37.44\% | 1.84\% |  |  |  |  |  |  |  |
| F | TRANSPORTATION EQUIPMENT | 143,962 | 145,000 | $(1,038)$ | 99.28\% | 0.87\% |  |  |  |  |  |  |  |
| G | GENERAL EQUIPMENT | 96,772 | 256,700 | $(159,928)$ | 37.70\% | 1.54\% |  |  |  |  |  |  |  |
| H | MISCELLANEOUS | 276,445 | 370,700 | $(94,255)$ | 74.57\% | 2.23\% |  |  |  |  |  |  |  |
|  | TOTAL | 7,169,096 | 8,885,800 | $(1,716,704)$ | 80.68\% |  |  |  |  |  |  |  |  |
|  | ENTER ITEM A AND SUBTRACT | 2,758,068 | 4,250,000 | $(1,491,932)$ |  |  |  |  |  |  |  |  |  |
|  | TOTAL ITEM B - H | 4,411,028 | 4,635,800 | $(224,772)$ | 95.15\% |  |  |  |  |  |  |  |  |

Kentucky American Water
Case No. 2010-00036
Construction Projects
As of $\begin{aligned} & 2002\end{aligned}$

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Kentucky American Water

| Case No. 2010-00036 |
| :--- |
| Construction Projects |
| As of 2001 |



Kentucky American Water | Case No. 2010-00036 |
| :--- |
| Construction Projects |
| As of 2001 |

|  | Description | Annual Actual | Annual Original Budget | Variance Dollars | Variance Percent | Percent of Budget | Total <br> Actual <br> Project <br> Cost | Total <br> Budget <br> Project <br> Cost | Variance | Date <br> Original <br> Budget <br> Start | Date <br> Original <br> Budget <br> End | Date <br> Actual <br> Start | Date Actual End |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| INVESTMENT PROJECTS |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 92-12 | BLUEGRASS WATER PROJECT | 225,705 | 212,100 | 13,605 | 106.41\% | 1.30\% |  |  |  | Jul-92 | Dec-96 | Sep-92 |  |
| 96-19 | CUSTOMER SERVICE SOFTWARE | 870,876 | 479,820 | 391,056 | 181.50\% | 2.95\% |  |  |  | Dec-96 | Jun-99 | Nov-96 | Dec-03 |
| 97-08 | CHEMICAL SYSTEMS IMPROVEMENTS | 136,110 | 0 | 136,110 |  | 0.00\% | 1,546,550 | 600,000 | $(946,550)$ | Mar-97 | Oct-99 | May-97 | Jul-01 |
| 98-01 | INTEGRATED RESOUCE PLAN | 100,998 | 0 | 100,998 |  | 0.00\% |  |  |  | Feb-98 | Sep-99 | Feb-99 |  |
| 98-05 | 4,000' OF 12" LEESTOWN ROAD | 94,489 | 0 | 94,489 |  | 0.00\% | 280,500 | 320,000 | 39,500 | Feb-98 | Oct-98 | Jan-99 | Jul-01 |
| 98-08 | SURGE PROTECTION/KRS | 17,087 | 0 | 17,087 |  | 0.00\% |  |  |  | Apr-98 | Nov-99 | Aug-98 |  |
| 98-09 | UPGRADE CART WINCH AT INTAKE - KRS | 1,254 | 0 | 1,254 |  | 0.00\% |  |  |  | Feb-98 | Nov-98 | Aug-98 |  |
| 98-12 | CLARK COUNTY MAINS IMPROVEMENTS | 61,650 | 700,000 | $(638,350)$ | 8.81\% | 4.30\% | 1,159,682 | 2,000,000 | $(840,318)$ | Jun-97 | Nov-97 | Aug-98 | Dec-01 |
| 99-07 | BOURBON COUNTY MAIN EXTENSIONS | 27,079 | 0 | 27,079 |  | 0.00\% | 935,228 | 916,000 | 19,228 | Aug-99 | Aug-00 | Aug-99 | Oct-01 |
| 99-08 | US 62 RELOCATION | 11,126 | 0 | 11,126 |  | 0.00\% | 1,792,597 | 1,800,000 | $(7,403)$ | Aug-99 | Dec-00 | Aug-99 | Dec-01 |
| 00-02 | PARIS PIKE RELOCATION | 377,404 | 0 | 377,404 |  | 0.00\% |  |  |  | Mar-00 | Dec-00 | Mar-00 | Oct-02 |
| 00-03 | HARRODSBURG ROAD RELOCATION | 13,273 | 0 | 13,273 |  | 0.00\% |  |  |  | Feb-00 | Sep-00 | Nov-00 | Dec-02 |
| 00-04 | RICHMOND ROAD RELOCATION | 18,737 | 0 | 18,737 |  | 0.00\% |  |  |  | Mar-00 | Nov-00 | Mar-00 | Nov-02 |
| 00-05 | HARRISON COUNTY MAIN EXTENSION | 87,139 | 0 | 87,139 |  | 0.00\% | 157,970 | 120,000 | 37,970 | Nov-00 | Dec-00 | Nov-00 | Sep-01 |
| 01-01 | SECURITY SYSTEM IMPROVEMENTS | 656,430 | 350,000 | 306,430 | 187.55\% | 2.15\% | 659,244 | 350,000 | 309,244 | Jan-01 | Dec-01 | Apr-01 | Dec-01 |
| 01-02 | GROUND STORAGE TANK - 3.0 MG | 51,844 | 100,000 | $(48,156)$ | 51.84\% | 0.61\% |  |  |  | Mar-01 | Dec-03 | Feb-01 |  |
| 01-03 | SCADA IMPROVEMENTS | 58,572 | 94,000 | $(35,428)$ | 62.31\% | 0.58\% |  |  |  | Jan-01 | May-03 | Sep-02 |  |
| 01-04 | SCOTT COUNTY MAINS | 1,036,651 | 750,000 | 286,651 | 138.22\% | 4.60\% |  |  |  | Jan-01 | Dec-02 | Jan-01 | Oct-03 |
| 01-05 | RUSSELL CAVE ROAD TANK - 1.0 MG | 8,222 | 150,000 | $(141,778)$ | 5.48\% | 0.92\% |  |  |  | Jan-01 | Dec-04 | Feb-01 |  |
| 01-06 | KRS SLUICE GATE | 237,105 | 150,000 | 87,105 | 158.07\% | 0.92\% |  |  |  | Aug-01 | May-02 | Aug-01 | May-02 |
| 01-07 | MAJOR HIGHWAY RELOCATIONS | 992,648 | 1,050,000 | $(57,352)$ | 94.54\% | 6.44\% |  |  |  | Jan-01 | Dec-01 | Jan-01 | Mar-02 |
| 01-08 | ACQUISITION OF TRI VILLAGE \& ELK LAKE WATER | 1,830,291 | 1,911,300 | $(81,009)$ | 95.76\% | 11.73\% |  |  |  | Aug-00 | Aug-00 | Jul-01 | Dec-02 |
| 01-09 | ACQUISITION OF SOUTH SHORE |  | 1,550,000 | $(1,550,000)$ | 0.00\% | 9.51\% |  |  |  | Jan-01 | Jul-01 |  |  |
| 01-10 | RRS HYDRAULIC IMPROVEMENTS | 112,695 | 0 | 112,695 |  | 0.00\% |  |  |  | Mar-01 | Sep-02 | Aug-01 | Jun-03 |
| 01-11 | TRI VILLAGE NEW COLUMBUS PROJECT | 0 | 0 | 0 |  | 0.00\% |  |  |  | Oct-01 | May-03 | Feb-02 |  |
|  | GRAND TOTAL ITEM B-H TO IP'S | 7,027,385 | 7,497,220 | $(469,835)$ | 93.73\% |  |  |  |  |  |  |  |  |

Kentucky American Water
Case No. 2010-00036

| Case No. 2010-00036 |
| :--- |
| Construction Projects |
| As of 2000 |


| Item | Description | Annual Actual | Annual <br> Original <br> Budget | Variance Dollars | Variance Percent | Percent of <br> Budget | Total Actual Project Cost | Total <br> Budget <br> Project <br> Cost | Variance | Date Original Budget Start | Date Original Budget End | Date Actual Start | Date Actual End |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| A | MAINS \& HYDRANTS, DEPOSIT AGREEMENTS | \$3,113,100 | \$4,250,000 | (\$1,136,900) | 73.25\% | 32.08\% |  |  |  |  |  |  |  |
| B | MAINS \& HYDRANTS, NEW \& REPLACEMENT | 855,311 | 1,139,500 | $(284,189)$ | 75.06\% | 8.60\% |  |  |  |  |  |  |  |
| C | SERVICES | 1,638,319 | 1,095,000 | 543,319 | 149.62\% | 8.26\% |  |  |  |  |  |  |  |
| D | METERS \& INSTALLATIONS | 1,001,174 | 1,035,000 | $(33,826)$ | 96.73\% | 7.81\% |  |  |  |  |  |  |  |
| E | OFFICE FURNITURE \& EQUIPMENT | 181,122 | 206,200 | $(25,078)$ | 87.84\% | 1.56\% |  |  |  |  |  |  |  |
| F | TRANSPORTATION EQUIPMENT | 170,806 | 180,600 | $(9,794)$ | 94.58\% | 1.36\% |  |  |  |  |  |  |  |
| G | GENERAL EQUIPMENT | 315,842 | 310,200 | 5,642 | 101.82\% | 2.34\% |  |  |  |  |  |  |  |
| H | MISCELLANEOUS | 316,859 | 285,000 | 31,859 | 111.18\% | 2.15\% |  |  |  |  |  |  |  |
|  | TOTAL | 7,592,533 | 8,501,500 | $(908,967)$ | 89.31\% |  |  |  |  |  |  |  |  |
|  | ENTER ITEM A AND SUBTRACT | 3,113,100 | 4,250,000 | $(1,136,900)$ |  |  |  |  |  |  |  |  |  |
|  | TOTAL ITEM B - H | 4,479,433 | 4,251,500 | 227,933 | 105.36\% |  |  |  |  |  |  |  |  |

Type of Filing:_X__Original ____Updated ____Revised
Type of Filing:_X_Oren $\mathrm{No}(\mathrm{s}) .:-$
Workpaper Reference

|  | Description | Annual Actual | Annual Original Budget | Variance Dollars | Variance Percent | Percent of Budget | Total <br> Actual <br> Project <br> Cost | Total <br> Budget <br> Project <br> Cost | Variance | Date <br> Original <br> Budget <br> Start | Date <br> Original <br> Budget <br> End | Date <br> Actual <br> Start | Date Actual End |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| INVESTMENT PROJECTS |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 92-12 | \|BLUEGRASS WATER PROJECT | 360,035 | 270,000 | 90,035 | 133.35\% | 2.04\% |  |  |  | Jul-92 | Dec-96 | Sep-92 |  |
| 96-12 | KRS -ADDITIONAL RESIDUALS HANDLING FACILITY | 0 | 0 | 0 |  | 0.00\% | 624,258 | 4,800,000 | $(4,175,742)$ | Jan-96 | May-98 | Feb-96 | Jan-00 |
| 96-18 | AVON TANK AND BOOSTER PUMP | (18,679) | 0 | $(18,679)$ |  | 0.00\% |  |  |  | Oct-96 | Jun-98 | Oct-96 | Dec-99 |
| 96-19 | CUSTOMER SERVICE SOFTWARE | 158,669 | 347,000 | $(188,331)$ | 45.73\% | 2.62\% |  |  |  | Dec-96 | Jun-99 | Nov-96 | Dec-03 |
| 97-03 | BACKWASH WASTE SYSTEM - KRS | 20,396 | 0 | 20,396 |  | 0.00\% | 286,636 | 250,000 | 36,636 | Sep-97 | Apr-98 | Nov-97 | Mar-00 |
| 97-08 | CHEMICAL SYSTEMS IMPROVEMENTS | 500,507 | 562,000 | $(61,493)$ | 89.06\% | 4.24\% |  |  |  | Mar-97 | Oct-99 | May-97 | Jul-01 |
| 98-01 | INTEGRATED RESOUCE PLAN | 258,836 | 230,000 | 28,836 | 112.54\% | 1.74\% |  |  |  | Feb-98 | Sep-99 | Feb-99 |  |
| 98-05 | LEESTOWN ROAD (PHASE II) | 107,393 | 213,500 | $(106,107)$ | 50.30\% | 1.61\% |  |  |  | Feb-98 | Oct-98 | Jan-99 | Jul-01 |
| 98-08 | SURGE PROTECTION/KRS | 25,046 | 0 | 25,046 |  | 0.00\% |  |  |  | Apr-98 | Nov-99 | Aug-98 |  |
| 98-09 | UPGRADE CART WINCH AT INTAKE - KRS | 6,048 | 0 | 6,048 |  | 0.00\% |  |  |  | Feb-98 | Nov-98 | Aug-98 |  |
| 98-12 | CLARK COUNTY MAINS IMPROVEMENTS | 58,361 | 300,000 | $(241,639)$ | 19.45\% | 2.26\% |  |  |  | Jun-97 | Nov-97 | Aug-98 | Dec-01 |
| 99-02 | REPLACE FILTER VALVES @ KRS | 26,587 | 0 | 26,587 |  | 0.00\% | 131,023 | 140,000 | $(8,977)$ | Sep-99 | Nov-99 | Sep-99 | Mar-00 |
| 99-03 | SCOTT COUNTY MAINS | 811,003 | 850,000 | $(38,997)$ |  | 6.42\% | 1,491,202 | 1,500,000 | $(8,798)$ | Feb-99 | Dec-00 | Mar-99 | Aug-00 |
| 99-04 | REPLACE TANK TELEMETRY - KRS | 84,148 | 0 | 84,148 |  | 0.00\% | 576,558 | 530,000 | 46,558 | Jan-99 | Dec-99 | Feb-99 | Feb-00 |
| 99-05 | ELECTRIC RENOVATIONS @ KRS, JACOBSON | 17,922 | 0 | 17,922 |  | 0.00\% | 171,611 | 230,000 | $(58,389)$ | Aug-99 | Dec-99 | May-99 | Jan-00 |
| 99-07 | BOURBON COUNTY MAIN EXTENSIONS | 388,322 | 400,000 | $(11,678)$ | 97.08\% | 3.02\% |  |  |  | Aug-99 | Aug-00 | Aug-99 | Oct-01 |
| 99-08 | US 62 RELOCATION | 1,056,386 | 1,150,000 | (93,614) | 91.86\% | 8.68\% |  |  |  | Aug-99 | Dec-00 | Aug-99 | Dec-01 |
| 00-01 | REBUILD UNDERDRAIN OF KRS FILTERS 5 \& 6 | 227,152 | 212,000 | 15,152 | 107.15\% | 1.60\% | 227,152 | 212,000 | 15,152 | Mar-00 | May-00 | Jan-00 | Apr-00 |
| 00-02 | PARIS PIKE RELCOATION - DESIGN | 8,053 | 50,000 | $(41,947)$ | 16.11\% | 0.38\% |  |  |  | Mar-00 | Dec-00 | Mar-00 | Dec-01 |
| 00-03 | HARRODSBURG ROAD RELOCATION - DESIGN | 30,716 | 70,000 | $(39,284)$ | 43.88\% | 0.53\% |  |  |  | Feb-00 | Sep-00 | Nov-00 | Dec-01 |
| 00-04 | RICHMOND ROAD RELOCATION - DESIGN | 102,724 | 94,000 | 8,724 | 109.28\% | 0.71\% |  |  |  | Mar-00 | Nov-00 | Mar-00 | Dec-01 |
| 00-05 | HARRISON COUNTY MAIN EXTENSION | 70,000 | 0 | 70,000 |  | 0.00\% |  |  |  | Nov-00 | Dec-00 | Jan-00 | Sep-01 |
|  | GRAND TOTAL INVESTMENT PROJECTS | 4,299,625 | 4,748,500 | $(448,875)$ | 90.55\% |  |  |  |  |  |  |  |  |

Attachment A

COMPARISON OF ACTUAL VS. BUDGETED CONSTRUCTION EXPENDITURES

|  | INVESTMENT PROJECTS |  | $\begin{gathered} \text { ACTUAL } \\ \text { PROJECT } \\ \text { COST } \\ \hline \end{gathered}$ | ORIGINALINVESTMENTPROJECTCOST | FOR THE YEAR 2008 |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  | ORIGINALBUDGET |  |  |  |
|  |  | EXPLANATION |  |  | START | END | START | END |
| 04-03 | OWEN COUNTY MAIN EXTENSIONS (343) | Weather delays and tough laying conditions delayed project. | 2,285,900 | 2,150,001 | Oct-04 | Dec-07 | Oct-04 | Sep-08 |
| 05-05 | REPLACE TRAC-VAC SYSTEM AT RRS (332) | Construction was shutdown during peak demand which delayed schedule and increased contractor costs. | 1,236,264 | 994,000 | Apr-05 | Dec-06 | Apr-05 | Nov-08 |
| 05-06 | SLUDGE HANDLING IMPROVEMENT | Construction was shutdown during peak demand which delayed schedule and increased contractor costs. | 2,199,181 | 1,910,000 | Apr-05 | Dec-08 | Apr-05 | Oct-08 |
| 12020701 | INCLINE CAR REPLACEMENT AT KRS | Project was put on hold to conduct a study. Phase one was completed for safety. | 194,940 | 1,150,000 | Jan-07 | Oct-09 | Feb-07 | Dec-08 |
|  | GRAND TOTAL COMPLETED BP'S |  | \$5,916,286 | \$6,204,001 |  |  |  |  |



KENTUCKY AMERICAN WATER

KENTUCKY AMERICAN WATER

| ENT |  |  |  |  | FOR THE YEAR 2006 |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  | ACTUAL PROJECT COST | ORIGINAL <br> INVESTMENT <br> PROJECT <br> COST | ORIGINAL BUDGET |  |  |  |
|  | INVESTMENT PROJECTS | EXPLANATION |  |  | START | END | START | END |
| 98-01 | INTEGRATED RESOURCE PLAN | Completion delayed on source of supply. | 657,269 | 350,000 | 2/98 | 9/99 | 2/99 | 12/06 |
| 05-02 | RUSSELL CAVE ROAD MAIN - 34,000' OF 12" (343) | Construction bids favorable. | 1,309,064 | 1,800,000 | 4/05 | 12/07 | 8/05 | 12/06 |
| 05-04 | KRS IMPROVEMENTS | Bids favorable. | 191,379 | 350,000 | 2/05 | 10/05 | 8/05 | 1/06 |
| 06-01 | VALVE HOUSE UPGRADES AT KRS | Bids higher than anticipated. | 462,866 | 350,000 | 1/06 | 12/06 | 1/06 | 12/06 |
|  | GRAND TOTAL COMPLETED BP'S |  | \$2,620,578 | \$2,850,000 |  |  |  |  |



|  |  |  |  |  | FOR THE YEAR 2004 |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  | ACTUAL PROJECT COST | ORIGINAL <br> INVESTMENT <br> PROJECT <br> COST | ORIGINAL BUDGET |  | START | END |
|  | INVESTMENT PROJECTS | EXPLANATION |  |  | START | END |  |  |
| 01-02 | GROUND STORAGE TANK - 3.0 MG | Engineer's estimate was increased after design. Construction was delayed by change in project manager. | 1,601,091 | 1,500,000 | 3/01 | 12/03 | 2/01 | 8/04 |
| 01-11 | NEW COLUMBUS PROJECT | Project scope was expanded. | 2,132,257 | 1,800,000 | 10/01 | 5/03 | 2/02 | 12/04 |
| 02-03 | REPLACE TRAVELLING SCREEN \& HOUSING | Bid exceeded estimate cost by $\$ 220,000$. Project scope was expanded by $\$ 100,000$ to include replacing trash rake which was scheduled for following year. | 773,246 | 450,000 | 8/02 | 4/03 | 12/03 | 12/04 |
| 04-06 | REPLACE FILTER MEDIA 3 \& 4 | Project was moved forward due to filter media deterioration. Project scope was expanded to include repair to filter bottom. | 275,760 | 250,000 | 3/05 | $7 / 05$ | 9/04 | 12/04 |
|  | GRAND TOTAL COMPLETED BP'S |  | \$4,782,354 | \$4,000,000 |  |  |  |  |


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KENTUCKY AMERICAN WATER
COMPARISON OF ACTUAL VS. BUDGETED CONSTRUCTION EXPENDITURES


|  |  |  | $\begin{gathered} \text { ACTUAL } \\ \text { PROJECT } \\ \text { COST } \\ \hline \end{gathered}$ | FOR THE YEAR 2001 |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  | ORIGINAL <br> INVESTMENT <br> PROJECT <br> COST | $\begin{gathered} \text { ORIGINAL } \\ \text { BUDGET } \end{gathered}$ |  |  |  |
|  | INVESTMENT PROJECTS | EXPLANATION |  |  | START | END | START | END |
| 97-08 | CHEMICAL SYSTEMS IMPROVEMENTS | Project scope was revised to include design \& construction of chlorine scrubber | 1,546,550 | 600,000 | 3/97 | 10/99 | 5/97 | 7/01 |
| 98-05 | 4,000' OF 12" LEESTOWN ROAD | Project scope reduced by KYDOT | 280,500 | 320,000 | 2/98 | 10/98 | 1/99 | 7/01 |
| 98-12 | CLARK COUNTY MAINS IMPROVEMENTS | Project scope was reduced to eliminate feed to Ford-Hampton area, bids were below estimate | 1,159,682 | 2,000,000 | 6/97 | 11/97 | 8/98 | 12/01 |
| 99-07 | BOURBON COUNTY MAIN EXTENSIONS | Project costs exceeded estimates due to rock, project delayed waiting on property owners | 935,228 | 916,000 | 8/99 | 8/00 | 8/99 | 10/01 |
| 99-08 | US 62 RELOCATION | Project completed as proposed | 1,792,597 | 1,800,000 | 8/99 | 12/00 | 8/99 | 12/01 |
| 00-05 | HARRISON COUNTY MAIN EXTENSION | Project exceeded cost \& delayed over easement negotiation, master meter vault sizing | 157,970 | 120,000 | 11/00 | 12/00 | 11/00 | 9/01 |
| 01-01 | SECURITY SYSTEM IMPROVEMENTS | Project scope expanded after 9/11 | 659,244 | 350,000 | 1/01 | 12/01 | 4/01 | 12/01 |
| 01-09 | ACQUISITION OF SOUTH SHORE | Acquisition never completed | 0 | 1,550,000 | 1/01 | 7/01 |  |  |
|  | GRAND TOTAL COMPLETED IP'S |  | \$6,531,771 | \$7,656,000 |  |  |  |  |

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KENTUCKY AMERICAN WATER - COMPARISON OF ACTUAL VS. BUDGETED CONSTRUCTION EXPENDITURES

|  |  |  | ACTUAL <br> PROJECT COST | ORIGINALINVESTMENTPROJECTCOST | ORIGINAL BUDGET |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | INVESTMENT PROJECTS | EXPLANATION |  |  | START | END | START | END |
| 96-12 | KRS-ADDITIONAL RESIDUALS FACILITIES | Project cancelled - permit revised | 624,258 | 4,800,000 | 1/96 | 5/98 | 2/96 | 1/00 |
| 97-03 | FILTER TO WASTE SYSTEM - KRS | Project completed as proposed - project delayed by programming \&materials delivery | 286,636 | 250,000 | 9/97 | 4/98 | 2/99 | 3/00 |
| 99-02 | REPLACE FILTER VALVES @ KRS | Project completed as proposed | 131,023 | 140,000 | 9/99 | 11/99 | 9/99 | 3/00 |
| 99-03 | SCOTT COUNTY MAINS | Project completed as proposed | 1,491,202 | 1,500,000 | 2/99 | 12/00 | 3/99 | 8/00 |
| 99-04 | REPLACE TANK TELEMETRY - KRS | Project completed as proposed - scope changed during const to improve oper. | 576,558 | 530,000 | 1/99 | 12/99 | 2/99 | 2/00 |
| 99-05 | ELECTRIC RENOVATIONS @ KRS, JACOBSON | Project completed as proposed | 171,611 | 230,000 | 8/99 | 12/99 | 5/99 | 1/00 |
| 00-01 | REBUILD UNDERDRAIN OF KRS FILTERS 5 \& 6 | Project completed as proposed - scope changed during const due to filter coating | 227,152 | 212,000 | 3/00 | 5/00 | 1/00 | 4/00 |
|  | GRAND TOTAL COMPLETED IP'S |  | \$3,508,440 | \$7,662,000 |  |  |  |  |

# KENTUCKY-AMERICAN WATER COMPANY <br> CASE NO. 2010-00036 <br> COMMISSION STAFF'S FIRST REQUEST FOR INFORMATION 

Witness: Lance Williams
10. Provide, in the format provided as Schedule 2, an analysis of the Construction Work in Progress as defined in the Uniform System of Accounts for the 12 month period preceding the base period, the base period, and the forecasted test period.

## Response:

See attached for the 12 months preceding the base period. Also attached is Exhibit B-4, page 1 of 2, detailing the base period and Exhibit B-4, page 2 of 2, detailing the forecasted test period.

For electronic version, refer to KAW_R_PSCDR1\#10_031610.pdf.

# KENTUCKY AMERICAN WATER <br> CASE NO: 2010-00036 CONSTRUCTION WORK IN PROGRESS AS OF JUNE 2008 

DATA: _X_PRE-BASE PERIOD ___FORECASTED PERIOD
PSCDR1\#10
TYPE OF FILING: _X_ORIGINAL __ UPDATED __ REVISED
PAGE 1 OF 12
WORKPAPER REFERENCE NO(S): $\qquad$
PAGE 1 OF 12

| Project Number | Description of Project |  | Accumulated | Costs |  | Jurisdictional Percent | Total Jurisdictional Cost | Estimated <br> Percent Complete |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | Construction Amount | AFUDC Capitalized | Indirect Costs | Total Costs |  |  |  |
| 100000012 | Conversion Funding Project | 3,492 | 0 |  | 3,492 | 100\% | 3,492 | NA |
| 2 1202000A | LEX-Invest Item A | $(5,696)$ | 0 |  | $(5,696)$ |  | $(5,696)$ | NA |
| 3 1202000R | LEX-Retirements | 3,151 | 0 |  | 3,151 |  | 3,151 | NA |
| 412020080 | Developer/Govt. Contributions | $(1,650)$ | 0 |  | $(1,650)$ |  | $(1,650)$ | NA |
| 512020081 | Network - Replace/Renew | 228 | $(43,212)$ |  | $(42,985)$ |  | $(42,985)$ | NA |
| 612020083 | Hydrants - Replacement | 0 | 28 |  | 28 |  | 28 | NA |
| 712020084 | Hydrants New | 0 | 112 |  | 112 |  | 112 | NA |
| 812020086 | Services New | $(16,988)$ | 0 |  | $(16,988)$ |  | $(16,988)$ | NA |
| 912020087 | Meters - Replacement | 12,238 | 0 |  | 12,238 |  | 12,238 | NA |
| 1012020088 | Meters New | $(45,238)$ | 0 |  | $(45,238)$ |  | $(45,238)$ | NA |
| 1112020093 | Process Plant - Replacement | 1,677 | 0 |  | 1,677 |  | 1,677 | NA |
| 1212020105 | LEX-Russell Cave Road Tank-1.0 | 350 | 0 |  | 350 |  | 350 | 100.00\% |
| 1312020201 | LEX-Leestown Rd Main Improvmts | 108,182 | 42,772 |  | 150,955 |  | 150,955 | 90.69\% |
| 1412020202 | LEX-Major Highway Relocations | 1 | 0 |  | 1 |  | 1 | 100.00\% |
| 1512020204 | Source of Supply Project Dev | 1,856,489 | 0 |  | 1,856,489 |  | 1,856,489 | 84.28\% |
| 1612020301 | Elevated Storage Tank - 2 MG | 397 | 0 |  | 397 |  | 397 | 100.00\% |
| 1712020402 | Major Highway Relocations | 355,726 | 27,110 |  | 382,836 |  | 382,836 | 11.73\% |
| 1812020506 | Sludge Handling Improvement | 0 | 0 |  | 0 |  | 0 | 100.00\% |
| 1912020508 | Kentucky Reliability Improvemt | 7,007,255 | 365,145 |  | 7,372,400 |  | 7,372,400 | 97.95\% |
| 2012020602 | Yanallton Road Main Extension | 29,688 | 1,216 |  | 30,904 |  | 30,904 | 6.99\% |
| 2112020607 | New WTP On Pool 3 of Kentucky | 7,341,805 | 367,566 |  | 7,709,371 |  | 7,709,371 | 4.75\% |
| 2212020701 | KENTUCKY INCLINE CAR | 84,355 | 32 |  | 84,387 |  | 84,387 | 43.29\% |
| 2312020702 | KY MAJOR HIGHWAY | 221,544 | 9,795 |  | 231,339 |  | 231,339 | 13.84\% |
| 2412300081 | Network - Replace/Renew | 0 | (0) |  | (0) |  | (0) | NA |
| 2512300604 | Owen County SCADA System | 0 | 0 |  | 0 |  | 0 | 100.00\% |
| 2612320087 | Meters - Replacement | 4,605 | 0 |  | 4,605 |  | 4,605 | NA |
| 27 DV-1202-1 | Projects Funded by Others | 179,034 | 0 |  | 179,034 |  | 179,034 | NA |
| 28 DV-1230-1 | Projects Funded by Others | 195 | 6 |  | 201 |  | 201 | NA |
| 29 IP-1202-5 | Nth. Broadway Main Replacement | 17,878 | 93 |  | 17,972 |  | 17,972 | NA |
| 30 IP-1202-6 | Carrick Rd Main Extension | 40,963 | 2 |  | 40,965 |  | 40,965 | NA |
| 31 IP-1232-1 | Owenton-Post Acquisition Phase 2 | 31,656 | 140 |  | 31,796 |  | 31,796 | NA |
| 32 RP-1201-R1 | Capitalized Tank Rehabilitation / Paint | 20,965 | 234 |  | 21,200 |  | 21,200 | NA |
| 33 RP-1202-B1 | Mains - Replaced / Restored | 60,407 | 10,654 |  | 71,061 |  | 71,061 | NA |
| 34 RP-1202-C1 | Mains - Unscheduled | 34,151 | 0 |  | 34,151 |  | 34,151 | NA |
| 35 RP-1202-D1 | Mains - Relocated | 107,960 | 1,896 |  | 109,856 |  | 109,856 | NA |
| 36 RP-1202-E1 | Hydrants, Valves, and Manholes-New | 841 | 0 |  | 841 |  | 841 | NA |
| 37 RP-1202-F1 | Hydrants, Valves, and Manholes-Rep | 5,233 | 0 |  | 5,233 |  | 5,233 | NA |
| 38 RP-1202-G1 | Services and Laterals - New | 7,072 | 0 |  | 7,072 |  | 7,072 | NA |
| 39 RP-1202-H1 | Services and Laterals - Replaced | 70 | 0 |  | 70 |  | 70 | NA |
| 40 RP-1202-11 | Meters - New | 999,670 | 26,059 |  | 1,025,729 |  | 1,025,729 | NA |
| 41 RP-1202-J1 | Meters - Replaced | 2,278,612 | 53,638 |  | 2,332,250 |  | 2,332,250 | NA |
| 42 RP-1202-K1 | ITS Equipment and Systems | 41,174 | 2 |  | 41,176 |  | 41,176 | NA |
| 43 RP-1202-L1 | SCADA Equipment and Systems | 1,074 | 0 |  | 1,074 |  | 1,074 | NA |
| 44 RP-1202-M1 | Security Equipment and Systems | 4,000 | 0 |  | 4,000 |  | 4,000 | NA |
| 45 RP-1202-N1 | Offices and Operations Centers | 70,833 | 267 |  | 71,100 |  | 71,100 | NA |
| 46 RP-1202-Q1 | Process Plant - Facilities and Equi | 217,135 | 1,259 |  | 218,393 |  | 218,393 | NA |
| 47 RP-1202-S1 | Engineering Studies | 54,005 | 1,389 |  | 55,394 |  | 55,394 | NA |
| $48 \mathrm{RP}-1230-\mathrm{G} 1$ | Services and Laterals - New | 10 | 0 |  | 10 |  | 10 | NA |
| 49 RP-1230-H1 | Services and Laterals - Replaced | 9,797 | 0 |  | 9,797 |  | 9,797 | NA |
| 50 RP-1230-11 | Meters - New | 5 | 0 |  | 5 |  | 5 | NA |
| 51 RP-1230-J1 | Meters - Replaced | 1,353 | 0 |  | 1,353 |  | 1,353 | NA |
| 52 RP-1232-F1 | Hydrants, Valves, and Manholes-Rep | 16,280 | 0 |  | 16,280 |  | 16,280 | NA |
| 53 RP-1232-G1 | Services and Laterals - New | 1,368 | 0 |  | 1,368 |  | 1,368 | NA |
| 54 RP-1232-H1 | Services and Laterals - Replaced | 17,916 | 0 |  | 17,916 |  | 17,916 | NA |
| 55 RP-1232-I1 | Meters - New | $(3,510)$ | 0 |  | $(3,510)$ |  | $(3,510)$ | NA |
| 56 RP-1232-J1 | Meters - Replaced | 425 | 0 |  | 425 |  | 425 | NA |
| 57 RP-1232-K1 | ITS Equipment and Systems | 606 | 2 |  | 608 |  | 608 | NA |
| 58 RP-1232-Q1 | Process Plant - Facilities and Equi | 5,833 | 10 |  | 5,843 |  | 5,843 | NA |
| 59 RP-1232-S1 | Engineering Studies | 3,994 | 6 |  | 4,000 |  | 4,000 | NA |
|  |  | 21,188,615 | 866,221 | 0 | 22,054,836 |  | 22,054,836 |  |

## KENTUCKY AMERICAN WATER <br> CASE NO: 2010-00036 CONSTRUCTION WORK IN PROGRESS AS OF JULY 2008

DATA: _X_PRE-BASE PERIOD ___FORECASTED PERIOD TYPE OF FILING: _ $\quad$ _ORIGINAL __ UPDATED ___ REVISED

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# KENTUCKY AMERICAN WATER <br> CASE NO: 2010-00036 CONSTRUCTION WORK IN PROGRESS AS OF AUGUST 2008 

DATA: _X_PRE-BASE PERIOD __FORECASTED PERIOD
PSCDR1\#10
TYPE OF FILING: _ X_ORIGINAL __ UPDATED ___ REVISED
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WORKPAPER REFERENCE NO(S):
PAGE 3 OF 12
Lance Williams


KENTUCKY AMERICAN WATER
CASE NO: 2010-00036

## CONSTRUCTION WORK IN PROGRESS

 AS OF SEPTEMBER 2008DATA: _X_PRE-BASE PERIOD ___FORECASTED PERIOD
PSCDR1\#10 PAGE 4 OF 12
TYPE OF FILING: _X_ORIGINAL ___UPDATED ___REVISED
WORKPAPER REFERENCE NO(S):

Witness Responsible: Lance Williams

| Project Number | Description of Project | Accumulated Costs |  |  |  | Jurisdictional Percent | Total Jurisdictional Cost | Estimated Percent Complete |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | Construction Amount | AFUDC Capitalized | Indirect Costs | Total Costs |  |  |  |
| 100000012 | Conversion Funding Project | 1,497 | - |  | 1,497 | 100\% | 1,497 | NA |
| 2 1202000R | LEX-Retirements | 519 | - |  | 519 |  | 519 | NA |
| 312020080 | Developer/Govt. Contributions | 2,241 | - |  | 2,241 |  | 2,241 | NA |
| 412020084 | Hydrants New | 0 | 112 |  | 112 |  | 112 | NA |
| 512020087 | Meters - Replacement | 12,238 | - |  | 12,238 |  | 12,238 | NA |
| 612020088 | Meters New | $(45,767)$ | - |  | $(45,767)$ |  | $(45,767)$ | NA |
| 712020201 | LEX-Leestown Rd Main Improvmts | 108,182 | 42,772 |  | 150,955 |  | 150,955 | 90.69\% |
| 812020204 | Source of Supply Project Dev | 1,907,332 | - |  | 1,907,332 |  | 1,907,332 | 86.59\% |
| 912020402 | Major Highway Relocations | 20,475 | - |  | 20,475 |  | 20,475 | 0.63\% |
| 1012020508 | Kentucky Reliability Improvemt | 6,907,733 | 501,246 |  | 7,408,979 |  | 7,408,979 | 98.43\% |
| 1112020602 | Yanallton Road Main Extension | 404,737 | 3,156 |  | 407,894 |  | 407,894 | 92.22\% |
| 1212020607 | New WTP On Pool 3 of Kentucky | 25,002,852 | 540,977 |  | 25,543,829 |  | 25,543,829 | 15.72\% |
| 1312020702 | KY MAJOR HIGHWAY | 221,544 | 12,122 |  | 233,666 |  | 233,666 | 13.98\% |
| 14 DV-1202-1 | Projects Funded by Others | 306,427 | 5 |  | 306,432 |  | 306,432 | NA |
| 15 DV-1230-1 | Projects Funded by Others | 195 | 6 |  | 201 |  | 201 | NA |
| 16 IP-1202-5 | Nth. Broadway Main Replacement | 104,518 | 403 |  | 104,921 |  | 104,921 | NA |
| 17 IP-1202-6 | Carrick Rd Main Extension | 42,057 | 287 |  | 42,344 |  | 42,344 | NA |
| 18 IP-1232-1 | Owenton-Post Acquisition Phase 2 | 76,472 | 906 |  | 77,377 |  | 77,377 | NA |
| 19 RP-1201-R1 | Capitalized Tank Rehabilitation / Paint | 74,368 | 562 |  | 74,930 |  | 74,930 | NA |
| 20 RP-1202-B1 | Mains - Replaced / Restored | 62,392 | 10,432 |  | 72,824 |  | 72,824 | NA |
| 21 RP-1202-C1 | Mains - Unscheduled | 46,714 | - |  | 46,714 |  | 46,714 | NA |
| 22 RP-1202-D1 | Mains - Relocated | 56,597 | 2,229 |  | 58,825 |  | 58,825 | NA |
| 23 RP-1202-E1 | Hydrants, Valves, and Manholes-New | 10,472 | 42 |  | 10,514 |  | 10,514 | NA |
| 24 RP-1202-F1 | Hydrants, Valves, and Manholes-Rep | 1,083 | - |  | 1,083 |  | 1,083 | NA |
| 25 RP-1202-G1 | Services and Laterals - New | 3,382 | - |  | 3,382 |  | 3,382 | NA |
| 26 RP-1202-H1 | Services and Laterals - Replaced | 70 | - |  | 70 |  | 70 | NA |
| 27 RP-1202-I1 | Meters - New | 5,266 | - |  | 5,266 |  | 5,266 | NA |
| 28 RP-1202-J1 | Meters - Replaced | 13,507 | - |  | 13,507 |  | 13,507 | NA |
| 29 RP-1202-K1 | ITS Equipment and Systems | 239,096 | 3,329 |  | 242,425 |  | 242,425 | NA |
| 30 RP -1202-L1 | SCADA Equipment and Systems | 12,787 | 57 |  | 12,844 |  | 12,844 | NA |
| 31 RP-1202-M1 | Security Equipment and Systems | 1,473 | 7 |  | 1,480 |  | 1,480 | NA |
| 32 RP-1202-N1 | Offices and Operations Centers | 821,519 | 1,659 |  | 823,178 |  | 823,178 | NA |
| 33 RP-1202-O1 | Vehicles | 52,656 | - |  | 52,656 |  | 52,656 | NA |
| 34 RP-1202-P1 | Tools and Equipment | 6,591 | - |  | 6,591 |  | 6,591 | NA |
| 35 RP-1202-Q1 | Process Plant - Facilities and Equi | 150,497 | 894 |  | 151,391 |  | 151,391 | NA |
| 36 RP-1202-S1 | Engineering Studies | 70,707 | 2,555 |  | 73,263 |  | 73,263 | NA |
| 37 RP-1230-A1 | Mains - New | 1,387 | 5 |  | 1,392 |  | 1,392 | NA |
| 38 RP-1230-H1 | Services and Laterals - Replaced | 16,217 | - |  | 16,217 |  | 16,217 | NA |
| 39 RP-1230-I1 | Meters - New | 4,442 | - |  | 4,442 |  | 4,442 | NA |
| 40 RP-1230-J1 | Meters - Replaced | 2,423 | - |  | 2,423 |  | 2,423 | NA |
| 41 RP-1232-G1 | Services and Laterals - New | 7,992 | - |  | 7,992 |  | 7,992 | NA |
| 42 RP -1232-S1 | Engineering Studies | 28,880 | 163 |  | 29,043 |  | 29,043 | NA |
|  |  | 36,763,770 | 1,123,927 | 0 | 37,887,697 |  | 37,887,697 |  |

## KENTUCKY AMERICAN WATER <br> CASE NO: 2010-00036 CONSTRUCTION WORK IN PROGRESS AS OF OCTOBER 2008

DATA: _X_PRE-BASE PERIOD ___FORECASTED PERIOD
PSCDR1\#10
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TYPE OF FILING: _X_ORIGINAL
WORKPAPER REFERENCE NO(S): UPDATED $\qquad$ REVISED

| Line Project <br> No. Number |  | Description of Project | Accumulated Costs |  |  |  | Jurisdictional Percent | Total Jurisdictional Cost | Estimated Percent Complete |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | Construction Amount | AFUDC Capitalized | Indirect Costs | Total Costs |  |  |  |
|  | 00000012 |  | Conversion Funding Project | (47) | - |  | (47) | 100\% | (47) | NA |
|  | 1202000R | LEX-Retirements | 519 | - |  | 519 |  | 519 | NA |
|  | 12020080 | Developer/Govt. Contributions | (32) | - |  | (32) |  | (32) | NA |
|  | 12020084 | Hydrants New | 0 | 112 |  | 112 |  | 112 | NA |
|  | 12020087 | Meters - Replacement | 12,238 | - |  | 12,238 |  | 12,238 | NA |
|  | 12020088 | Meters New | $(45,767)$ | - |  | $(45,767)$ |  | $(45,767)$ | NA |
|  | 12020201 | LEX-Leestown Rd Main Improvmts | 108,182 | 42,772 |  | 150,955 |  | 150,955 | 90.69\% |
|  | 12020204 | Source of Supply Project Dev | 1,963,168 | - |  | 1,963,168 |  | 1,963,168 | 89.12\% |
|  | 12020402 | Major Highway Relocations | 31,991 | - |  | 31,991 |  | 31,991 | 0.98\% |
|  | 12020508 | Kentucky Reliability Improvemt | 6,498,259 | 394,125 |  | 6,892,384 |  | 6,892,384 | 91.57\% |
|  | 12020607 | New WTP On Pool 3 of Kentucky | 32,829,300 | 673,888 |  | 33,503,187 |  | 33,503,187 | 20.62\% |
|  | 12020702 | KY MAJOR HIGHWAY | 220,387 | 13,279 |  | 233,666 |  | 233,666 | 13.98\% |
|  | DV-1202-1 | Projects Funded by Others | 511,874 | 10 |  | 511,884 |  | 511,884 | NA |
|  | V-1230-1 | Projects Funded by Others | 298 | 6 |  | 304 |  | 304 | NA |
|  | P-1202-5 | Nth. Broadway Main Replacement | 185,934 | 986 |  | 186,921 |  | 186,921 | NA |
|  | P-1202-6 | Carrick Rd Main Extension | 48,611 | 545 |  | 49,156 |  | 49,156 | NA |
|  | P-1232-1 | Owenton-Post Acquisition Phase 2 | 80,216 | 1,411 |  | 81,627 |  | 81,627 | NA |
|  | RP-1201-R1 | Capitalized Tank Rehabilitation / Paint | 122,239 | 841 |  | 123,080 |  | 123,080 | NA |
|  | RP-1202-B1 | Mains - Replaced / Restored | 164,052 | 10,908 |  | 174,960 |  | 174,960 | NA |
|  | RP-1202-C1 | Mains - Unscheduled | 50,344 | - |  | 50,344 |  | 50,344 | NA |
|  | RP-1202-D1 | Mains - Relocated | 52,818 | 2,590 |  | 55,408 |  | 55,408 | NA |
|  | RP-1202-E1 | Hydrants, Valves, and Manholes-New | 28,404 | 167 |  | 28,571 |  | 28,571 | NA |
|  | RP-1202-F1 | Hydrants, Valves, and Manholes-Rep | 1,044 | - |  | 1,044 |  | 1,044 | NA |
|  | RP-1202-G1 | Services and Laterals - New | 3,382 | - |  | 3,382 |  | 3,382 | NA |
|  | RP-1202-H1 | Services and Laterals - Replaced | 70 | - |  | 70 |  | 70 | NA |
|  | RP-1202-I1 | Meters - New | 15,933 | - |  | 15,933 |  | 15,933 | NA |
|  | RP-1202-J1 | Meters - Replaced | 21,853 | - |  | 21,853 |  | 21,853 | NA |
|  | RP-1202-K1 | ITS Equipment and Systems | 255,508 | 4,997 |  | 260,505 |  | 260,505 | NA |
|  | RP-1202-M1 | Security Equipment and Systems | 1,930 | 16 |  | 1,946 |  | 1,946 | NA |
|  | RP-1202-N1 | Offices and Operations Centers | 1,035,057 | 4,759 |  | 1,039,816 |  | 1,039,816 | NA |
|  | RP-1202-O1 | Vehicles | 31,459 | - |  | 31,459 |  | 31,459 | NA |
|  | RP-1202-P1 | Tools and Equipment | 6,999 | - |  | 6,999 |  | 6,999 | NA |
|  | RP-1202-Q1 | Process Plant - Facilities and Equi | 102,062 | 487 |  | 102,549 |  | 102,549 | NA |
|  | RP-1202-S1 | Engineering Studies | 76,009 | 3,053 |  | 79,063 |  | 79,063 | NA |
|  | RP-1230-A1 | Mains - New | 5,352 | 27 |  | 5,379 |  | 5,379 | NA |
|  | RP-1230-J1 | Meters - Replaced | 2,423 | - |  | 2,423 |  | 2,423 | NA |
| 37 RP-1232-S1 |  | Engineering Studies | 31,007 | 365 |  | 31,371 |  | 31,371 | NA |
|  |  |  | 44,453,076 | 1,155,345 | 0 | 45,608,422 |  | 45,608,422 |  |

## KENTUCKY AMERICAN WATER <br> CASE NO: 2010-00036 CONSTRUCTION WORK IN PROGRESS AS OF NOVEMBER 2008

DATA: _X_PRE-BASE PERIOD ___FORECASTED PERIOD
PSCDR1\#10
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TYPE OF FILING: X_ORIGINAL__UPDATED___REVISED WORKPAPER REFERENCE NO(S): JPDATED

| Project Number | Description of Project | Accumulated Costs |  |  |  | Jurisdictional Percent | Total Jurisdictional Cost | Estimated Percent Complete |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | Construction Amount | AFUDC Capitalized | Indirect <br> Costs | Total Costs |  |  |  |
| 100000012 | Conversion Funding Project | (47) | - |  | (47) | 100\% | (47) | NA |
| 2 1202000R | LEX-Retirements | 440 | - |  | 440 |  | 440 | NA |
| 312020080 | Developer/Govt. Contributions | (10) | - |  | (10) |  | (10) | NA |
| 412020084 | Hydrants New | 0 | 112 |  | 112 |  | 112 | NA |
| 512020087 | Meters - Replacement | 1,505 | - |  | 1,505 |  | 1,505 | NA |
| 612020201 | LEX-Leestown Rd Main Improvmts | 108,182 | 42,772 |  | 150,955 |  | 150,955 | 90.69\% |
| 712020204 | Source of Supply Project Dev | 1,977,995 | - |  | 1,977,995 |  | 1,977,995 | 89.79\% |
| 812020402 | Major Highway Relocations | 31,998 | - |  | 31,998 |  | 31,998 | 0.98\% |
| 912020508 | Kentucky Reliability Improvemt | 6,475,927 | 416,457 |  | 6,892,384 |  | 6,892,384 | 91.57\% |
| 1012020607 | New WTP On Pool 3 of Kentucky | 38,897,331 | 840,827 |  | 39,738,157 |  | 39,738,157 | 24.46\% |
| 1112020702 | KY MAJOR HIGHWAY | 99,989 | 14,037 |  | 114,026 |  | 114,026 | 6.82\% |
| 1212300403 | Owen County Main Extensions | 64 | - |  | 64 |  | 64 | 0.00\% |
| 13 DV-1202-1 | Projects Funded by Others | 514,653 | 21 |  | 514,674 |  | 514,674 | NA |
| 14 DV-1230-1 | Projects Funded by Others | 195 | 6 |  | 201 |  | 201 | NA |
| 15 IP-1202-5 | Nth. Broadway Main Replacement | 200,834 | 2,087 |  | 202,921 |  | 202,921 | NA |
| 16 IP-1202-6 | Carrick Rd Main Extension | 56,865 | 878 |  | 57,743 |  | 57,743 | NA |
| 17 IP-1232-1 | Owenton-Post Acquisition Phase 2 | 78,804 | 1,936 |  | 80,740 |  | 80,740 | NA |
| 18 RP-1201-R1 | Capitalized Tank Rehabilitation / Paint | 52,058 | 329 |  | 52,386 |  | 52,386 | NA |
| 19 RP-1202-B1 | Mains - Replaced / Restored | 222,440 | 11,056 |  | 233,496 |  | 233,496 | NA |
| 20 RP-1202-C1 | Mains - Unscheduled | 56,053 | - |  | 56,053 |  | 56,053 | NA |
| 21 RP-1202-D1 | Mains - Relocated | 115,244 | 2,958 |  | 118,202 |  | 118,202 | NA |
| 22 RP-1202-E1 | Hydrants, Valves, and Manholes-New | 29,633 | 357 |  | 29,990 |  | 29,990 | NA |
| 23 RP-1202-F1 | Hydrants, Valves, and Manholes-Rep | 3,588 | - |  | 3,588 |  | 3,588 | NA |
| 24 RP-1202-G1 | Services and Laterals - New | 3,382 | - |  | 3,382 |  | 3,382 | NA |
| 25 RP-1202-H1 | Services and Laterals - Replaced | 14,942 | - |  | 14,942 |  | 14,942 | NA |
| 26 RP-1202-II | Meters - New | 6,588 | - |  | 6,588 |  | 6,588 | NA |
| 27 RP-1202-J1 | Meters - Replaced | 14,134 | - |  | 14,134 |  | 14,134 | NA |
| 28 RP-1202-K1 | ITS Equipment and Systems | 18,288 | 156 |  | 18,444 |  | 18,444 | NA |
| 29 RP-1202-M1 | Security Equipment and Systems | 31,913 | 34 |  | 31,946 |  | 31,946 | NA |
| 30 RP-1202-N1 | Offices and Operations Centers | 1,383,478 | 8,844 |  | 1,392,322 |  | 1,392,322 | NA |
| $31 \mathrm{RP}-1202-\mathrm{O} 1$ | Vehicles | 153,516 | - |  | 153,516 |  | 153,516 | NA |
| 32 RP-1202-P1 | Tools and Equipment | 42,339 | - |  | 42,339 |  | 42,339 | NA |
| 33 RP-1202-Q1 | Process Plant - Facilities and Equi | 65,271 | 506 |  | 65,777 |  | 65,777 | NA |
| 34 RP-1202-S1 | Engineering Studies | 79,606 | 3,576 |  | 83,182 |  | 83,182 | NA |
| 35 RP-1230-A1 | Mains - New | 7,838 | 72 |  | 7,910 |  | 7,910 | NA |
| 36 RP-1230-J1 | Meters - Replaced | 2,423 | - |  | 2,423 |  | 2,423 | NA |
| 37 RP-1232-C1 | Mains - Unscheduled | 165 | - |  | 165 |  | 165 | NA |
| $38 \mathrm{RP}-1232-\mathrm{G} 1$ | Services and Laterals - New | 128 | - |  | 128 |  | 128 | NA |
| 39 RP-1232-H1 | Services and Laterals - Replaced | 333 | - |  | 333 |  | 333 | NA |
| $40 \mathrm{RP}-1232-\mathrm{S} 1$ | Engineering Studies | 31,788 | 577 |  | 32,365 |  | 32,365 | NA |
|  |  | 50,779,873 | 1,347,595 | 0 | 52,127,468 |  | 52,127,468 |  |

## KENTUCKY AMERICAN WATER <br> CASE NO: 2010-00036 CONSTRUCTION WORK IN PROGRESS AS OF DECEMBER 2008

DATA: _X_PRE-BASE PERIOD ___FORECASTED PERIOD
PSCDR1\#10 PAGE 7 OF 12 TYPE OF FILING: _X_ORIGINAL UPDATED $\qquad$ REVISED WORKPAPER REFERENCE NO(S):
$\qquad$

| $\begin{array}{lr}\text { Line } & \text { Project } \\ \text { No. } & \text { Number }\end{array}$ |  | Description of Project | Accumulated Costs |  |  |  | Jurisdictional Percent | Total Jurisdictional Cost | Estimated Percent Complete |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | Construction Amount | AFUDC Capitalized | Indirect Costs | Total Costs |  |  |  |
|  | 0000012 |  | Conversion Funding Project | (47) | - |  | (47) | 100\% | (47) | NA |
|  | 2020081 | Network - Replace/Renew | (120) | - |  | (120) |  | (120) | NA |
|  | 2020201 | LEX-Leestown Rd Main Improvmts | 108,182 | 42,772 |  | 150,955 |  | 150,955 | 90.69\% |
|  | 2020204 | Source of Supply Project Dev | 2,007,500 | - |  | 2,007,500 |  | 2,007,500 | 91.13\% |
|  | 12020402 | Major Highway Relocations | 37,008 | - |  | 37,008 |  | 37,008 | 1.13\% |
|  | 2020508 | Kentucky Reliability Improvemt | 3,661,148 | 242,328 |  | 3,903,476 |  | 3,903,476 | 51.86\% |
|  | 2020607 | New WTP On Pool 3 of Kentucky | 45,434,955 | 1,056,428 |  | 46,491,383 |  | 46,491,383 | 28.62\% |
|  | 2020701 | KENTUCKY INCLINE CAR | $(1,188)$ | - |  | $(1,188)$ |  | $(1,188)$ | -0.61\% |
|  | 2020702 | KY MAJOR HIGHWAY | 100,458 | 14,800 |  | 115,257 |  | 115,257 | 6.90\% |
|  | DV-1202-1 | Projects Funded by Others | 303,488 | 39 |  | 303,527 |  | 303,527 | NA |
|  | V-1230-1 | Projects Funded by Others | 195 | 6 |  | 201 |  | 201 | NA |
|  | P-1202-5 | Nth. Broadway Main Replacement | 296,064 | 3,312 |  | 299,377 |  | 299,377 | NA |
|  | P-1202-6 | Carrick Rd Main Extension | 61,266 | 1,239 |  | 62,506 |  | 62,506 | NA |
|  | P-1232-1 | Owenton-Post Acquisition Phase 2 | 79,043 | 2,477 |  | 81,520 |  | 81,520 | NA |
|  | RP-1201-R1 | Capitalized Tank Rehabilitation / P | 60,097 | 628 |  | 60,726 |  | 60,726 | NA |
|  | RP-1202-B1 | Mains - Replaced / Restored | 90,097 | 11,564 |  | 101,661 |  | 101,661 | NA |
|  | RP-1202-C1 | Mains - Unscheduled | 57,293 | - |  | 57,293 |  | 57,293 | NA |
|  | RP-1202-D1 | Mains - Relocated | 62,579 | 3,336 |  | 65,914 |  | 65,914 | NA |
|  | RP-1202-E1 | Hydrants, Valves, and Manholes-New | 102,435 | 557 |  | 102,992 |  | 102,992 | NA |
|  | RP-1202-F1 | Hydrants, Valves, and Manholes-Rep | 3,244 | - |  | 3,244 |  | 3,244 | NA |
|  | RP-1202-G1 | Services and Laterals - New | 3,382 | - |  | 3,382 |  | 3,382 | NA |
|  | RP-1202-H1 | Services and Laterals - Replaced | 70 | - |  | 70 |  | 70 | NA |
|  | RP-1202-I1 | Meters - New | 6,582 | - |  | 6,582 |  | 6,582 | NA |
|  | RP-1202-J1 | Meters - Replaced | 24,238 | - |  | 24,238 |  | 24,238 | NA |
|  | RP-1202-M1 | Security Equipment and Systems | 3,562 | 56 |  | 3,618 |  | 3,618 | NA |
|  | RP-1202-N1 | Offices and Operations Centers | 350,014 | 1,229 |  | 351,243 |  | 351,243 | NA |
|  | RP-1202-P1 | Tools and Equipment | 95,796 | - |  | 95,796 |  | 95,796 | NA |
|  | RP-1202-Q1 | Process Plant - Facilities and Equi | 32,950 | 245 |  | 33,195 |  | 33,195 | NA |
|  | RP-1202-S1 | Engineering Studies | 89,216 | 4,140 |  | 93,356 |  | 93,356 | NA |
|  | RP-1230-A1 | Mains - New | 8,434 | 126 |  | 8,560 |  | 8,560 | NA |
|  | RP-1230-J1 | Meters - Replaced | 2,423 | - |  | 2,423 |  | 2,423 | NA |
|  | RP-1232-F1 | Hydrants, Valves, and Manholes-Rep | 1 | - |  | 1 |  | 1 | NA |
|  | RP-1232-S1 | Engineering Studies | 34,474 | 803 |  | 35,277 |  | 35,277 | NA |
|  |  |  | 53,114,843 | 1,386,086 | 0 | 54,500,928 |  | 54,500,928 |  |

## KENTUCKY AMERICAN WATER <br> CASE NO: 2010-00036 CONSTRUCTION WORK IN PROGRESS AS OF JANUARY 2009

DATA: _X_PRE-BASE PERIOD ___FORECASTED PERIOD
PSCDR1\#10
PAGE 8 OF 12
TYPE OF FILING: _X_ORIGINAL___UPDATED ___ REVISED
PAGE 8 OF 12
Lance Williams


## KENTUCKY AMERICAN WATER <br> CASE NO: 2010-00036 CONSTRUCTION WORK IN PROGRESS AS OF FEBRUARY 2009

DATA: _X_PRE-BASE PERIOD ___FORECASTED PERIOD
PSCDR1\#10
TYPE OF FILING: _ X_ORIGINAL___UPDATED ___ REVISED
PAGE 9 OF 12
WORKPAPER REFERENCE NO(S):

| Line Project <br> No. Number |  | Description of Project | Accumulated Costs |  |  |  | Jurisdictional Percent | Total Jurisdictional Cost | Estimated Percent Complete |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | Construction Amount | AFUDC Capitalized | Indirect Costs | Total Costs |  |  |  |
|  | 100000012 |  | Conversion Funding Project | (47) |  |  | (47) | 100\% | (47) | NA |
|  | 212020080 | Developer/Govt. Contributions | (2) | - |  | (2) |  | (2) | NA |
|  | 312020201 | LEX-Leestown Rd Main Improvmts | 108,182 | 42,772 |  | 150,955 |  | 150,955 | 90.69\% |
|  | 412020204 | Source of Supply Project Dev | 1,994,380 | - |  | 1,994,380 |  | 1,994,380 | 90.54\% |
|  | 512020402 | Major Highway Relocations | 37,010 | - |  | 37,010 |  | 37,010 | 1.13\% |
|  | 612020508 | Kentucky Reliability Improvemt | 3,179,979 | 288,071 |  | 3,468,049 |  | 3,468,049 | 46.07\% |
|  | 712020607 | New WTP On Pool 3 of Kentucky | 58,379,114 | 1,741,244 |  | 60,120,358 |  | 60,120,358 | 37.01\% |
|  | 812020702 | KY MAJOR HIGHWAY | 100,458 | 15,185 |  | 115,643 |  | 115,643 | 6.92\% |
|  | 9 DV-1202-1 | Projects Funded by Others | 156,829 | - |  | 156,829 |  | 156,829 | NA |
|  | 0 DV-1230-1 | Projects Funded by Others | 195 | 6 |  | 201 |  | 201 | NA |
|  | 1 IP-1202-5 | Nth. Broadway Main Replacement | 306,061 | 6,182 |  | 312,243 |  | 312,243 | NA |
|  | 2 IP-1202-6 | Carrick Rd Main Extension | 71,881 | 2,048 |  | 73,928 |  | 73,928 | NA |
|  | 3 IP-1232-1 | Owenton-Post Acquisition Phase 2 | 79,854 | 3,572 |  | 83,426 |  | 83,426 | NA |
|  | 4 RP-1201-R1 | Capitalized Tank Rehabilitation / P | 59,910 | 1,120 |  | 61,030 |  | 61,030 | NA |
|  | 5 RP-1202-B1 | Mains - Replaced / Restored | 51,775 | 12,412 |  | 64,187 |  | 64,187 | NA |
|  | 6 RP-1202-C1 | Mains - Unscheduled | 108,369 | - |  | 108,369 |  | 108,369 | NA |
|  | 7 RP-1202-D1 | Mains - Relocated | 195,323 | 4,731 |  | 200,054 |  | 200,054 | NA |
|  | 8 RP-1202-E1 | Hydrants, Valves, and Manholes-New | 107,841 | 1,151 |  | 108,992 |  | 108,992 | NA |
|  | 9 RP-1202-F1 | Hydrants, Valves, and Manholes-Rep | 9,857 | - |  | 9,857 |  | 9,857 | NA |
|  | 0 RP-1202-G1 | Services and Laterals - New | 158,804 | - |  | 158,804 |  | 158,804 | NA |
|  | 1 RP-1202-H1 | Services and Laterals - Replaced | 16,537 | - |  | 16,537 |  | 16,537 | NA |
|  | 2 RP-1202-I1 | Meters - New | 55,781 | - |  | 55,781 |  | 55,781 | NA |
|  | 3 RP-1202-J1 | Meters - Replaced | 81,815 | - |  | 81,815 |  | 81,815 | NA |
|  | 4 RP-1202-K1 | ITS Equipment and Systems | 5,873 | 14 |  | 5,887 |  | 5,887 | NA |
|  | 5 RP-1202-M1 | Security Equipment and Systems | 3,516 | 103 |  | 3,618 |  | 3,618 | NA |
|  | 6 RP-1202-N1 | Offices and Operations Centers | 63,057 | 1,664 |  | 64,721 |  | 64,721 | NA |
|  | 7 RP-1202-P1 | Tools and Equipment | 74,691 | - |  | 74,691 |  | 74,691 | NA |
|  | 8 RP-1202-Q1 | Process Plant - Facilities and Equi | 71,607 | 709 |  | 72,316 |  | 72,316 | NA |
|  | 9 RP-1202-S1 | Engineering Studies | 52,847 | 3,592 |  | 56,440 |  | 56,440 | NA |
|  | 0 RP-1230-A1 | Mains - New | 8,558 | 32 |  | 8,590 |  | 8,590 | NA |
|  | 1 RP-1230-J1 | Meters - Replaced | 2,423 | - |  | 2,423 |  | 2,423 | NA |
|  | 2 RP-1232-A1 | Mains - New | 6,173 | 209 |  | 6,382 |  | 6,382 | NA |
|  | 3 RP-1232-C1 | Mains - Unscheduled | 4,507 | - |  | 4,507 |  | 4,507 | NA |
|  | 4 RP-1232-E1 | Hydrants, Valves \& Manholes NEW | 979 | - |  | 979 |  | 979 | NA |
|  | 5 RP-1232-F1 | Hydrants, Valves, and Manholes-Rep | 14,936 | - |  | 14,936 |  | 14,936 | NA |
|  | 6 RP-1232-G1 | Services and Laterals - New | 759 | - |  | 759 |  | 759 | NA |
|  | 7 RP-1232-H1 | Services and Laterals - Replaced | 4,528 | - |  | 4,528 |  | 4,528 | NA |
| 38 RP-1232-I1 Meters - New |  |  | 998 | - |  | 998 |  | 998 | NA |
|  |  |  | 65,575,356 | 2,124,820 | 0 | 67,700,176 |  | $\underline{67,700,176}$ |  |

## KENTUCKY AMERICAN WATER <br> CASE NO: 2010-00036 CONSTRUCTION WORK IN PROGRESS AS OF MARCH 2009

DATA: _X_PRE-BASE PERIOD____ORECASTED PERIOD
TYPE OF FILING: X_ORIGINAL__UPDATED___REVISED
WORKPAPER REFERENCE NO(S):

PSCDR1\#10 PAGE 10 OF 12
Witness Responsible: Lance Williams

| $\begin{array}{lr}\text { Line } & \text { Project } \\ \text { No. } & \text { Number }\end{array}$ |  | Description of Project | Accumulated Costs |  |  |  | Jurisdictional Percent | Total Jurisdictional Cost | Estimated Percent Complete |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | Construction Amount | AFUDC Capitalized | Indirect Costs | Total Costs |  |  |  |
|  | 100000012 |  | Conversion Funding Project | (47) | - |  | (47) | 100\% | (47) | NA |
|  | 212020080 | Developer/Govt. Contributions | (75) | - |  | (75) |  | (75) | NA |
|  | 312020201 | LEX-Leestown Rd Main Improvmts | 108,182 | 42,772 |  | 150,955 |  | 150,955 | 90.69\% |
|  | 412020204 | Source of Supply Project Dev | 1,995,880 | - |  | 1,995,880 |  | 1,995,880 | 90.61\% |
|  | 512020402 | Major Highway Relocations | 62,034 | - |  | 62,034 |  | 62,034 | 1.90\% |
|  | 612020508 | Kentucky Reliability Improvemt | 3,215,469 | 310,845 |  | 3,526,313 |  | 3,526,313 | 46.85\% |
|  | 712020607 | New WTP On Pool 3 of Kentucky | 66,978,836 | 2,113,922 |  | 69,092,758 |  | 69,092,758 | 42.53\% |
|  | 812020702 | KY MAJOR HIGHWAY | 100,458 | 15,185 |  | 115,643 |  | 115,643 | 6.92\% |
|  | 9 DV-1202-1 | Projects Funded by Others | 205,915 | - |  | 205,915 |  | 205,915 | NA |
|  | 0 DV-1230-1 | Projects Funded by Others | 195 | 6 |  | 201 |  | 201 | NA |
|  | 1 IP-1202-5 | Nth. Broadway Main Replacement | 306,151 | 8,122 |  | 314,273 |  | 314,273 | NA |
|  | 2 IP-1202-6 | Carrick Rd Main Extension | 73,521 | 2,468 |  | 75,989 |  | 75,989 | NA |
|  | 3 IP-1232-1 | Owenton-Post Acquisition Phase 2 | 79,854 | 3,851 |  | 83,705 |  | 83,705 | NA |
|  | 4 RP-1201-R1 | Capitalized Tank Rehabilitation / P | 93,184 | 1,459 |  | 94,643 |  | 94,643 | NA |
|  | 5 RP-1202-B1 | Mains - Replaced / Restored | 49,260 | 12,209 |  | 61,469 |  | 61,469 | NA |
|  | 6 RP-1202-C1 | Mains - Unscheduled | 123,657 | - |  | 123,657 |  | 123,657 | NA |
|  | 7 RP-1202-D1 | Mains - Relocated | 270,810 | 6,244 |  | 277,054 |  | 277,054 | NA |
|  | 8 RP-1202-E1 | Hydrants, Valves, and Manholes-New | 95,327 | 1,695 |  | 97,022 |  | 97,022 | NA |
|  | 9 RP-1202-F1 | Hydrants, Valves, and Manholes-Rep | 16,027 | - |  | 16,027 |  | 16,027 | NA |
|  | 0 RP-1202-G1 | Services and Laterals - New | 51,805 | - |  | 51,805 |  | 51,805 | NA |
|  | 1 RP-1202-H1 | Services and Laterals - Replaced | 156,715 | - |  | 156,715 |  | 156,715 | NA |
|  | 2 RP-1202-I1 | Meters - New | 53,425 | - |  | 53,425 |  | 53,425 | NA |
|  | 3 RP-1202-J1 | Meters - Replaced | 250,318 | - |  | 250,318 |  | 250,318 | NA |
|  | 4 RP-1202-N1 | Offices and Operations Centers | 40,868 | 1,895 |  | 42,762 |  | 42,762 | NA |
|  | 5 RP-1202-Q1 | Process Plant - Facilities and Equi | 74,389 | 948 |  | 75,338 |  | 75,338 | NA |
|  | 6 RP-1202-S1 | Engineering Studies | 52,847 | 3,970 |  | 56,817 |  | 56,817 | NA |
|  | 7 RP-1230-A1 | Mains - New | 8,556 | 34 |  | 8,590 |  | 8,590 | NA |
|  | 8 RP-1230-J1 | Meters - Replaced | 1,353 | - |  | 1,353 |  | 1,353 | NA |
|  | 9 RP-1232-A1 | Mains - New | 11,526 | 279 |  | 11,805 |  | 11,805 | NA |
|  | 0 RP-1232-C1 | Mains - Unscheduled | 7,066 | - |  | 7,066 |  | 7,066 | NA |
|  | 1 RP-1232-E1 | Hydrants, Valves \& Manholes NEW | 14,781 | - |  | 14,781 |  | 14,781 | NA |
|  | 2 RP-1232-F1 | Hydrants, Valves, and Manholes-Rep | 249 | - |  | 249 |  | 249 | NA |
|  | 3 RP-1232-G1 | Services and Laterals - New | 2,934 | - |  | 2,934 |  | 2,934 | NA |
|  | 4 RP-1232-H1 | Services and Laterals - Replaced | 3,792 | - |  | 3,792 |  | 3,792 | NA |
|  | 5 RP-1232-I1 | Meters - New | 2,328 | - |  | 2,328 |  | 2,328 | NA |
| 36 RP-1232-J1 |  | Meters - Replaced | 293 | - |  | 293 |  | 293 | NA |
|  |  |  | 74,507,882 | 2,525,905 | 0 | 77,033,787 |  | 77,033,787 |  |

## KENTUCKY AMERICAN WATER <br> CASE NO: 2010-00036 CONSTRUCTION WORK IN PROGRESS AS OF APRIL 2009

DATA: _X_PRE-BASE PERIOD ___FORECASTED PERIOD
PSCDR1\#10
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TYPE OF FILING: _X_ORIGINAL ___UPDATED ___REVISED
PAGE 11 OF 12
Lance Williams

| Line Project <br> No. Number |  | Description of Project | Accumulated Costs |  |  |  | Jurisdictional Percent | TotalJurisdictionalCost | Estimated Percent Complete |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | Construction Amount | AFUDC Capitalized | Indirect Costs | Total Costs |  |  |  |
|  | 00000012 |  | Conversion Funding Project | (47) | - |  | (47) | 100\% | (47) | NA |
|  | 12020080 | Developer/Govt. Contributions | (75) | - |  | (75) |  | (75) | NA |
|  | 12020201 | LEX-Leestown Rd Main Improvmts | 108,182 | 42,772 |  | 150,955 |  | 150,955 | 90.69\% |
|  | 12020204 | Source of Supply Project Dev | 2,006,672 | - |  | 2,006,672 |  | 2,006,672 | 91.10\% |
|  | 12020402 | Major Highway Relocations | 36,977 | - |  | 36,977 |  | 36,977 | 1.13\% |
|  | 12020508 | Kentucky Reliability Improvemt | 3,246,781 | 333,771 |  | 3,580,552 |  | 3,580,552 | 47.57\% |
|  | 12020607 | New WTP On Pool 3 of Kentucky | 75,462,096 | 2,538,328 |  | 78,000,424 |  | 78,000,424 | 48.01\% |
|  | 12020702 | KY MAJOR HIGHWAY | 100,458 | 15,185 |  | 115,643 |  | 115,643 | 6.92\% |
|  | DV-1202-1 | Projects Funded by Others | 221,127 | - |  | 221,127 |  | 221,127 | NA |
|  | DV-1230-1 | Projects Funded by Others | 195 | 6 |  | 201 |  | 201 | NA |
|  | IP-1202-5 | Nth. Broadway Main Replacement | 379,186 | 10,087 |  | 389,273 |  | 389,273 | NA |
|  | IP-1202-6 | Carrick Rd Main Extension | 71,841 | 2,895 |  | 74,735 |  | 74,735 | NA |
|  | IP-1232-1 | Owenton-Post Acquisition Phase 2 | 79,854 | 3,851 |  | 83,705 |  | 83,705 | NA |
|  | RP-1201-R1 | Capitalized Tank Rehabilitation / P | 92,755 | 1,888 |  | 94,643 |  | 94,643 | NA |
|  | RP-1202-B1 | Mains - Replaced / Restored | 74,982 | 11,879 |  | 86,861 |  | 86,861 | NA |
|  | RP-1202-C1 | Mains - Unscheduled | 144,413 | - |  | 144,413 |  | 144,413 | NA |
|  | RP-1202-D1 | Mains - Relocated | 365,621 | 8,491 |  | 374,113 |  | 374,113 | NA |
|  | RP-1202-E1 | Hydrants, Valves, and Manholes-New | (845) | - |  | (845) |  | (845) | NA |
|  | RP-1202-F1 | Hydrants, Valves, and Manholes-Rep | 12,944 | - |  | 12,944 |  | 12,944 | NA |
|  | RP-1202-G1 | Services and Laterals - New | $(65,750)$ | - |  | $(65,750)$ |  | $(65,750)$ | NA |
|  | RP-1202-H1 | Services and Laterals - Replaced | $(87,112)$ | - |  | $(87,112)$ |  | $(87,112)$ | NA |
|  | RP-1202-II | Meters - New | 53,202 | - |  | 53,202 |  | 53,202 | NA |
|  | RP-1202-J1 | Meters - Replaced | 92,750 | - |  | 92,750 |  | 92,750 | NA |
|  | RP-1202-K1 | ITS Equipment and Systems | $(7,902)$ | - |  | $(7,902)$ |  | $(7,902)$ | NA |
|  | RP-1202-N1 | Offices and Operations Centers | 54,796 | 2,127 |  | 56,923 |  | 56,923 | NA |
|  | RP-1202-Q1 | Process Plant - Facilities and Equi | 83,348 | 1,224 |  | 84,573 |  | 84,573 | NA |
|  | RP-1202-S1 | Engineering Studies | 14,467 | 10 |  | 14,477 |  | 14,477 | NA |
|  | RP-1230-A1 | Mains - New | 0 | 27 |  | 27 |  | 27 | NA |
|  | RP-1230-J1 | Meters - Replaced | 1,353 | - |  | 1,353 |  | 1,353 | NA |
|  | RP-1232-A1 | Mains - New | 17,278 | 411 |  | 17,690 |  | 17,690 | NA |
|  | RP-1232-C1 | Mains - Unscheduled | 9,728 | - |  | 9,728 |  | 9,728 | NA |
|  | RP-1232-F1 | Hydrants, Valves, and Manholes-Rep | 214 | - |  | 214 |  | 214 | NA |
|  | RP-1232-G1 | Services and Laterals - New | 542 | - |  | 542 |  | 542 | NA |
|  | RP-1232-H1 | Services and Laterals - Replaced | 3,500 | - |  | 3,500 |  | 3,500 | NA |
|  | RP-1232-I1 | Meters - New | 1,042 | - |  | 1,042 |  | 1,042 | NA |
|  |  |  | 82,574,575 | 2,972,953 | 0 | 85,547,528 |  | 85,547,528 |  |

## KENTUCKY AMERICAN WATER <br> CASE NO: 2010-00036 CONSTRUCTION WORK IN PROGRESS AS OF MAY 2009

DATA: _X_PRE-BASE PERIOD ___FORECASTED PERIOD
PSCDR1\#10
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WORKPAPER REFERENCE NO(S):
UPDATED $\qquad$ REVISED

| $\begin{array}{ll}\text { Line } & \text { Project } \\ \text { No. } & \text { Number }\end{array}$ |  | Description of Project | $\begin{gathered} \text { Construction } \\ \text { Amount } \\ \hline \end{gathered}$ | Accumulated Costs |  | Total Costs | Jurisdictional Percent | TotalJurisdictionalCost | Estimated <br> Percent Complete |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | AFUDC Capitalized |  | Indirect Costs |  |  |  |  |
| 1 | 12020080 |  | Developer/Govt. Contributions | (73) | - |  | (73) | 100\% | (73) | NA |
|  | 12020201 | LEX-Leestown Rd Main Improvmts | 108,182 | 42,772 |  | 150,955 |  | 150,955 | 90.69\% |
|  | 12020204 | Source of Supply Project Dev | 2,026,772 | - |  | 2,026,772 |  | 2,026,772 | 92.01\% |
|  | 12020402 | Major Highway Relocations | 36,977 | - |  | 36,977 |  | 36,977 | 1.13\% |
|  | 12020607 | New WTP On Pool 3 of Kentucky | 80,974,958 | 3,014,908 |  | 83,989,866 |  | 83,989,866 | 51.70\% |
|  | 12020702 | KY MAJOR HIGHWAY | 100,458 | 15,185 |  | 115,643 |  | 115,643 | 6.92\% |
|  | CS-1201-1 | Business Transformation CPS | 90,199 | 876 |  | 91,075 |  | 91,075 | 43.15\% |
|  | DV-1202-1 | Projects Funded by Others | 306,364 | - |  | 306,364 |  | 306,364 | NA |
|  | DV-1230-1 | Projects Funded by Others | 195 | 6 |  | 201 |  | 201 | NA |
|  | DV-1232-2 | Projects Funded by Others | 66 | 0 |  | 66 |  | 66 | NA |
|  | IP-1202-5 | Nth. Broadway Main Replacement | 451,949 | 12,475 |  | 464,423 |  | 464,423 | NA |
|  | IP-1202-6 | Carrick Rd Main Extension | 75,084 | 3,325 |  | 78,408 |  | 78,408 | NA |
|  | IP-1232-1 | Owenton-Post Acquisition Phase 2 | 79,854 | 3,851 |  | 83,705 |  | 83,705 | NA |
|  | RP-1201-R1 | Capitalized Tank Rehabilitation / P | 92,244 | 2,399 |  | 94,643 |  | 94,643 | NA |
|  | RP-1202-B1 | Mains - Replaced / Restored | 29,563 | 11,897 |  | 41,460 |  | 41,460 | NA |
|  | RP-1202-C1 | Mains - Unscheduled | 151,481 | - |  | 151,481 |  | 151,481 | NA |
|  | RP-1202-D1 | Mains - Relocated | 456,405 | 10,934 |  | 467,339 |  | 467,339 | NA |
|  | RP-1202-E1 | Hydrants, Valves, and Manholes-New | 22 | - |  | 22 |  | 22 | NA |
|  | RP-1202-F1 | Hydrants, Valves, and Manholes-Rep | 22,590 | - |  | 22,590 |  | 22,590 | NA |
|  | RP-1202-G1 | Services and Laterals - New | 3,825 | - |  | 3,825 |  | 3,825 | NA |
|  | RP-1202-H1 | Services and Laterals - Replaced | 1,238 | - |  | 1,238 |  | 1,238 | NA |
|  | RP-1202-I1 | Meters - New | 72,468 | - |  | 72,468 |  | 72,468 | NA |
|  | RP-1202-J1 | Meters - Replaced | 104,192 | - |  | 104,192 |  | 104,192 | NA |
|  | RP-1202-K1 | ITS Equipment and Systems | 1,126 | - |  | 1,126 |  | 1,126 | NA |
|  | RP-1202-M1 | Security Equipment and Systems | 6,902 | 23 |  | 6,925 |  | 6,925 | NA |
|  | RP-1202-N1 | Offices and Operations Centers | 229,697 | 2,375 |  | 232,072 |  | 232,072 | NA |
|  | RP-1202-P1 | Tools and Equipment | 7,418 | - |  | 7,418 |  | 7,418 | NA |
|  | RP-1202-Q1 | Process Plant - Facilities and Equi | 207,767 | 1,433 |  | 209,201 |  | 209,201 | NA |
|  | RP-1202-S1 | Engineering Studies | 14,832 | 35 |  | 14,867 |  | 14,867 | NA |
|  | RP-1230-J1 | Meters - Replaced | 1,353 | - |  | 1,353 |  | 1,353 | NA |
|  | RP-1232-A1 | Mains - New | 45,840 | 652 |  | 46,492 |  | 46,492 | NA |
|  | RP-1232-C1 | Mains - Unscheduled | 8,219 | - |  | 8,219 |  | 8,219 | NA |
|  | RP-1232-E1 | Hydrants, Valves \& Manholes NEW | 475 | - |  | 475 |  | 475 | NA |
|  | RP-1232-F1 | Hydrants, Valves, and Manholes-Rep | 1,961 | - |  | 1,961 |  | 1,961 | NA |
|  | RP-1232-H1 | Services and Laterals - Replaced | 3,218 | - |  | 3,218 |  | 3,218 | NA |
| 36 RP-1232-I1 Meters - New |  |  | 1,675 | - |  | 1,675 |  | 1,675 | NA |
|  |  |  | 85,715,493 | 3,123,147 | 0 | 88,838,641 |  | 88,838,641 |  |

DATA: _ $X$ BASE PERIOD FORECASTED PERIOD
TYPE OF FILING: _ $X$ _ORIGINAL _ UPDATED _ REVISED WORKPAPER REFERENCE NO(S).: W/P-1-4
TYPE OF FILING: _ _ ORIGINAL -_ UPDATED _ REVISED
WORKPAPER REFERENCE NO(S).: WIP-1-4

DATA: BASE PERIOD X FORECASTED PERIOD
TYPE OF FILING: $X$ ORIGINAL_UPDATED_REVISED WORKPAPER REFERENCE NO(S).: W/P-1-4


# KENTUCKY-AMERICAN WATER COMPANY <br> CASE NO. 2010-00036 <br> COMMISSION STAFF'S FIRST REQUEST FOR INFORMATION 

Witness: Lance Williams
11. For each construction project listed in Kentucky-American's response to Item 10, provide the information listed below in the format contained in Schedule 3:
a. Project number;
b. Date on which construction began;
c. Estimated date of project completion;
d. Time elapsed since the beginning of construction as a percentage of total estimated time of construction;
e. Original budget estimate of project's cost;
f. Most recent budget estimate of project's cost;
g. Total expenditure on project; and
h. Total project expenditure as percentage of total budgeted estimate.

## Response:

See attached for the 12 months preceding the base period. Also attached is Exhibit B-4.1, page 1 and 2, detailing the base period and Exhibit B-4.1, page 2 of 2, detailing the forecasted test year.

For electronic version, refer to KAW_R_PSCDR1\#11_

## KENTUCKY AMERICAN WATER

CASE NO: 2010-00036
CONSTRUCTION WORK IN PROGRESS - PERCENT COMPLETE AS OF JUNE 2008

DATA: _X_PRE-BASE PERIOD ___FORECASTED PERIOD
TYPE OF FILING: _X_ORIGINAL___UPDATED ___REVISED
WORKPAPER REFERENCE NO(S):

PSCDR1\#11
PAGE 1 OF 12
Witness Responsible: Lance Williams

| Line No. | Project <br> Number | Description of Project | Date Construction Begin | $\begin{aligned} & \hline \text { Estimated } \\ & \text { Completion } \\ & \text { Date } \\ & \hline \end{aligned}$ | \% of Elapsed Time | Original <br> Budget <br> Estimate | Current <br> Budget <br> Estimate | Total Project Expenditures |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | 100000012 | Conversion Funding Project | N/A | N/A | N/A | N/A | N/A | 3,492 | N/A |
|  | 2 1202000A | LEX-Invest Item A | N/A | N/A | N/A | N/A | N/A | $(5,696)$ | N/A |
|  | 3 1202000R | LEX-Retirements | N/A | N/A | N/A | N/A | N/A | 3,151 | N/A |
|  | 412020080 | Developer/Govt. Contributions | N/A | N/A | N/A | N/A | N/A | $(1,650)$ | N/A |
|  | 512020081 | Network - Replace/Renew | N/A | N/A | N/A | N/A | N/A | $(42,985)$ | N/A |
|  | 612020083 | Hydrants - Replacement | N/A | N/A | N/A | N/A | N/A | 28 | N/A |
|  | 712020084 | Hydrants New | N/A | N/A | N/A | N/A | N/A | 112 | N/A |
|  | 812020086 | Services New | N/A | N/A | N/A | N/A | N/A | $(16,988)$ | N/A |
|  | 912020087 | Meters - Replacement | N/A | N/A | N/A | N/A | N/A | 12,238 | N/A |
| 10 | 012020088 | Meters New | N/A | N/A | N/A | N/A | N/A | $(45,238)$ | N/A |
|  | 112020093 | Process Plant - Replacement | N/A | N/A | N/A | N/A | N/A | 1,677 | N/A |
|  | 212020105 | LEX-Russell Cave Road Tank-1.0 | 2/26/2001 | 11/11/05 | 100\% | 1,300,000 | 1,808,503 | 350 | 100\% |
|  | 312020201 | LEX-Leestown Rd Main Improvmts | 3/1/2002 | 12/31/10 | 72\% | 700,000 | 166,456 | 150,955 | 91\% |
|  | 412020202 | LEX-Major Highway Relocations | 12/1/2000 | 11/1/07 | 100\% | 3,615,898 | 3,615,898 | 1 | 100\% |
|  | 512020204 | Source of Supply Project Dev | 12/21/2001 | 09/20/10 | 75\% | 650,000 | 2,202,810 | 1,856,489 | 84\% |
| 16 | 612020301 | Elevated Storage Tank-2 MG | 1/1/2003 | 08/1/07 | 100\% | 3,000,000 | 3,757,978 | 397 | 100\% |
|  | 712020402 | Major Highway Relocations | 1/23/2004 | 12/21/06 | 100\% | 2,998,150 | 3,263,898 | 382,836 | 100\% |
|  | 812020506 | Sludge Handling Improvement | 5/10/2005 | 11/15/08 | 90\% | 1,998,000 | 2,199,179 | 0 | 0\% |
|  | 912020508 | Kentucky Reliability Improvemt | 3/3/2006 | 12/31/08 | 83\% | 5,000,000 | 7,527,012 | 7,372,400 | 98\% |
|  | 012020602 | Yanallton Road Main Extension | 3/3/2006 | 04/1/09 | 76\% | 200,000 | 442,281 | 30,904 | 7\% |
|  | 112020607 | New WTP On Pool 3 of Kentucky | 4/26/2006 | 09/20/10 | 50\% | 140,000,000 | 162,461,791 | 7,709,371 | 5\% |
| 22 | 212020701 | KENTUCKY INCLINE CAR | 1/16/2007 | 05/11/09 | 64\% | 1,100,000 | 194,940 | 84,387 | 43\% |
| 23 | 312020702 | KY MAJOR HIGHWAY | 2/27/2007 | 12/31/09 | 48\% | 2,000,000 | 1,671,224 | 231,339 | 14\% |
|  | 12300081 | Network - Replace/Renew | N/A | N/A | N/A | N/A | N/A | (0) | N/A |
| 25 | 512300604 | Owen County SCADA System | 3/3/2006 | 11/30/07 | 100\% | 500,000 | 614,577 | 0 | 100\% |
|  | 12320087 | Meters - Replacement | N/A | N/A | N/A | N/A | N/A | 4,605 | N/A |
|  | 7 DV-1202-1 | Projects Funded by Others | N/A | N/A | N/A | N/A | N/A | 179,034 | N/A |
| 28 | 8 DV-1230-1 | Projects Funded by Others | N/A | N/A | N/A | N/A | N/A | 201 | N/A |
| 29 | 9 IP-1202-5 | Nth. Broadway Main Replacement | 4/1/2008 | 10/31/2010 | 10\% | 2,850,037 | 2,770,076 | 17,972 | 1\% |
|  | IP-1202-6 | Carrick Rd Main Extension | 5/1/2008 | 12/31/2012 | 4\% | 2,700,000 | 2,700,000 | 40,965 | 2\% |
|  | 1 IP-1232-1 | Owenton-Post Acquisition Phase 2 | 4/1/2008 | 12/31/2009 | 15\% | 824,804 | 936,758 | 31,796 | 3\% |
|  | 2 RP-1201-R1 | Capitalized Tank Rehabilitation / Paint | N/A | N/A | N/A | N/A | N/A | 21,200 | N/A |
|  | 3 RP-1202-B1 | Mains - Replaced / Restored | N/A | N/A | N/A | N/A | N/A | 71,061 | N/A |
| 34 | 4 RP-1202-C1 | Mains - Unscheduled | N/A | N/A | N/A | N/A | N/A | 34,151 | N/A |
| 35 | 5 RP-1202-D1 | Mains - Relocated | N/A | N/A | N/A | N/A | N/A | 109,856 | N/A |
|  | 6 RP-1202-E1 | Hydrants, Valves, and Manholes-New | N/A | N/A | N/A | N/A | N/A | 841 | N/A |
|  | 7 RP-1202-F1 | Hydrants, Valves, and Manholes-Rep | N/A | N/A | N/A | N/A | N/A | 5,233 | N/A |
| 38 | 8 RP-1202-G1 | Services and Laterals - New | N/A | N/A | N/A | N/A | N/A | 7,072 | N/A |
| 39 | 9 RP-1202-H1 | Services and Laterals - Replaced | N/A | N/A | N/A | N/A | N/A | 70 | N/A |
| 40 | 0 RP-1202-I1 | Meters - New | N/A | N/A | N/A | N/A | N/A | 1,025,729 | N/A |
|  | 1 RP-1202-J1 | Meters - Replaced | N/A | N/A | N/A | N/A | N/A | 2,332,250 | N/A |
|  | 2 RP-1202-K1 | ITS Equipment and Systems | N/A | N/A | N/A | N/A | N/A | 41,176 | N/A |
| 43 | 3 RP-1202-L1 | SCADA Equipment and Systems | N/A | N/A | N/A | N/A | N/A | 1,074 | N/A |
| 44 | 4 RP-1202-M1 | Security Equipment and Systems | N/A | N/A | N/A | N/A | N/A | 4,000 | N/A |
|  | 5 RP-1202-N1 | Offices and Operations Centers | N/A | N/A | N/A | N/A | N/A | 71,100 | N/A |
|  | 6 RP-1202-Q1 | Process Plant - Facilities and Equi | N/A | N/A | N/A | N/A | N/A | 218,393 | N/A |
|  | 7 RP-1202-S1 | Engineering Studies | N/A | N/A | N/A | N/A | N/A | 55,394 | N/A |
| 48 | 8 RP-1230-G1 | Services and Laterals - New | N/A | N/A | N/A | N/A | N/A | 10 | N/A |
| 49 | 9 RP-1230-H1 | Services and Laterals - Replaced | N/A | N/A | N/A | N/A | N/A | 9,797 | N/A |
| 50 | 0 RP-1230-I1 | Meters - New | N/A | N/A | N/A | N/A | N/A | 5 | N/A |
|  | 1 RP-1230-J1 | Meters - Replaced | N/A | N/A | N/A | N/A | N/A | 1,353 | N/A |
|  | 2 RP-1232-F1 | Hydrants, Valves, and Manholes-Rep | N/A | N/A | N/A | N/A | N/A | 16,280 | N/A |
|  | 3 RP-1232-G1 | Services and Laterals - New | N/A | N/A | N/A | N/A | N/A | 1,368 | N/A |
|  | 4 RP-1232-H1 | Services and Laterals - Replaced | N/A | N/A | N/A | N/A | N/A | 17,916 | N/A |
|  | 5 RP-1232-I1 | Meters - New | N/A | N/A | N/A | N/A | N/A | $(3,510)$ | N/A |
|  | 6 RP-1232-J1 | Meters - Replaced | N/A | N/A | N/A | N/A | N/A | 425 | N/A |
|  | 7 RP-1232-K1 | ITS Equipment and Systems | N/A | N/A | N/A | N/A | N/A | 608 | N/A |
|  | 8 RP-1232-Q1 | Process Plant - Facilities and Equi | N/A | N/A | N/A | N/A | N/A | 5,843 | N/A |
|  | 9 RP-1232-S1 | Engineering Studies | N/A | N/A | N/A | N/A | N/A | 4,000 | N/A |

## KENTUCKY AMERICAN WATER

CASE NO: 2010-00036

## CONSTRUCTION WORK IN PROGRESS - PERCENT COMPLETE

AS OF JULY 2008

DATA: _X_PRE-BASE PERIOD ___FORECASTED PERIOD
TYPE OF FILING: _X_ORIGINAL___UPDATED ___REVISED
PSCDR1\#11
WORKPAPER REFERENCE NO(S): $\qquad$ PAGE 2 OF 12

| $\begin{array}{lr}\text { Line } & \text { Project } \\ \text { No. } & \text { Number }\end{array}$ | Description of Project | Date Construction Begin | Estimated Completion Date | \% of Elapsed Time | Original Budget Estimate | Current Budget Estimate | Total Project Expenditures |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 100000012 | Conversion Funding Project | N/A | N/A | N/A | N/A | N/A | 3,492 | N/A |
| 2 1202000A | LEX-Invest Item A | N/A | N/A | N/A | N/A | N/A | $(5,696)$ | N/A |
| 3 1202000R | LEX-Retirements | N/A | N/A | N/A | N/A | N/A | 2,381 | N/A |
| 412020080 | Developer/Govt. Contributions | N/A | N/A | N/A | N/A | N/A | $(1,650)$ | N/A |
| 512020081 | Network - Replace/Renew | N/A | N/A | N/A | N/A | N/A | 234 | N/A |
| 612020083 | Hydrants - Replacement | N/A | N/A | N/A | N/A | N/A | 0 | N/A |
| 712020084 | Hydrants New | N/A | N/A | N/A | N/A | N/A | 112 | N/A |
| 812020086 | Services New | N/A | N/A | N/A | N/A | N/A | 427 | N/A |
| 912020087 | Meters - Replacement | N/A | N/A | N/A | N/A | N/A | 12,238 | N/A |
| 1012020088 | Meters New | N/A | N/A | N/A | N/A | N/A | $(45,238)$ | N/A |
| 1112020093 | Process Plant - Replacement | N/A | N/A | N/A | N/A | N/A | 1,677 | N/A |
| 1212020105 | LEX-Russell Cave Road Tank-1.0 | 2/26/2001 | 11/11/2005 | 100\% | 1,300,000 | 1,808,503 | 350 | 100\% |
| 1312020201 | LEX-Leestown Rd Main Improvmts | 3/1/2002 | 12/31/2010 | 73\% | 700,000 | 166,456 | 150,955 | 91\% |
| 1412020202 | LEX-Major Highway Relocations | 12/1/2000 | 11/1/2007 | 100\% | 3,615,898 | 3,615,898 | 0 | 100\% |
| 1512020204 | Source of Supply Project Dev | 12/21/2001 | 9/20/2010 | 76\% | 650,000 | 2,202,810 | 1,888,764 | 86\% |
| 1612020301 | Elevated Storage Tank - 2 MG | 1/1/2003 | 8/1/2007 | 100\% | 3,000,000 | 3,757,978 | 398 | 100\% |
| 1712020303 | Electrical reliability upgrde | 12/1/2003 | 7/1/2006 | 100\% | 1,024,632 | 1,024,632 | 337 | 100\% |
| 1812020402 | Major Highway Relocations | 1/23/2004 | 12/21/2006 | 100\% | 2,998,150 | 3,263,898 | 382,695 | 100\% |
| 1912020508 | Kentucky Reliability Improvemt | 3/3/2006 | 12/31/2008 | 86\% | 5,000,000 | 7,527,012 | 7,405,483 | 98\% |
| 2012020602 | Yanallton Road Main Extension | 3/3/2006 | 4/1/2009 | 79\% | 200,000 | 442,281 | 32,944 | 7\% |
| 2112020607 | New WTP On Pool 3 of Kentucky | 4/26/2006 | 9/20/2010 | 52\% | 140,000,000 | 162,461,791 | 14,369,763 | 9\% |
| 2212020701 | KENTUCKY INCLINE CAR | 1/16/2007 | 5/11/2009 | 67\% | 1,100,000 | 194,940 | 133,660 | 69\% |
| 2312020702 | KY MAJOR HIGHWAY | 2/27/2007 | 12/31/2009 | 51\% | 2,000,000 | 1,671,224 | 232,887 | 14\% |
| 2412300604 | Owen County SCADA System | 3/3/2006 | 11/30/2007 | 100\% | 500,000 | 614,577 | 0 | 100\% |
| 2512320087 | Meters - Replacement | N/A | N/A | N/A | N/A | N/A | 7,309 | N/A |
| 26 DV-1202-1 | Projects Funded by Others | N/A | N/A | N/A | N/A | N/A | 334,424 | N/A |
| 27 DV-1230-1 | Projects Funded by Others | N/A | N/A | N/A | N/A | N/A | 201 | N/A |
| 28 IP-1202-5 | Nth. Broadway Main Replacement | 4/1/2008 | 10/31/2010 | 14\% | 2,850,037 | 2,770,076 | 20,721 | 1\% |
| 29 IP-1202-6 | Carrick Rd Main Extension | 5/1/2008 | 12/31/2012 | 6\% | 2,700,000 | 2,700,000 | 42,344 | 2\% |
| 30 IP-1232-1 | Owenton-Post Acquisition Phase 2 | 4/1/2008 | 12/31/2009 | 20\% | 824,804 | 936,758 | 35,046 | 4\% |
| 31 RP-1201-R1 | Capitalized Tank Rehabilitation / Paint | N/A | N/A | N/A | N/A | N/A | 26,015 | N/A |
| $32 \mathrm{RP}-1202-\mathrm{B} 1$ | Mains - Replaced / Restored | N/A | N/A | N/A | N/A | N/A | 28,343 | N/A |
| 33 RP-1202-C1 | Mains - Unscheduled | N/A | N/A | N/A | N/A | N/A | 36,346 | N/A |
| 34 RP-1202-D1 | Mains - Relocated | N/A | N/A | N/A | N/A | N/A | 135,824 | N/A |
| 35 RP-1202-E1 | Hydrants, Valves, and Manholes-New | N/A | N/A | N/A | N/A | N/A | 841 | N/A |
| 36 RP-1202-F1 | Hydrants, Valves, and Manholes-Rep | N/A | N/A | N/A | N/A | N/A | 1,044 | N/A |
| $37 \mathrm{RP}-1202-\mathrm{G} 1$ | Services and Laterals - New | N/A | N/A | N/A | N/A | N/A | 3,382 | N/A |
| $38 \mathrm{RP}-1202-\mathrm{H} 1$ | Services and Laterals - Replaced | N/A | N/A | N/A | N/A | N/A | 70 | N/A |
| 39 RP-1202-11 | Meters - New | N/A | N/A | N/A | N/A | N/A | 1,020,513 | N/A |
| 40 RP-1202-J1 | Meters - Replaced | N/A | N/A | N/A | N/A | N/A | 2,513,952 | N/A |
| 41 RP-1202-K1 | ITS Equipment and Systems | N/A | N/A | N/A | N/A | N/A | 185,791 | N/A |
| $42 \mathrm{RP}-1202-\mathrm{L} 1$ | SCADA Equipment and Systems | N/A | N/A | N/A | N/A | N/A | 3,214 | N/A |
| $43 \mathrm{RP}-1202-\mathrm{N} 1$ | Offices and Operations Centers | N/A | N/A | N/A | N/A | N/A | 82,346 | N/A |
| 44 RP -1202-Q1 | Process Plant - Facilities and Equi | N/A | N/A | N/A | N/A | N/A | 198,167 | N/A |
| 45 RP-1202-S1 | Engineering Studies | N/A | N/A | N/A | N/A | N/A | 56,894 | N/A |
| $46 \mathrm{RP}-1230-\mathrm{J} 1$ | Meters - Replaced | N/A | N/A | N/A | N/A | N/A | 1,353 | N/A |
| $47 \mathrm{RP}-1232-\mathrm{F} 1$ | Hydrants, Valves, and Manholes-Rep | N/A | N/A | N/A | N/A | N/A | 10,905 | N/A |
| $48 \mathrm{RP}-1232-\mathrm{H} 1$ | Services and Laterals - Replaced | N/A | N/A | N/A | N/A | N/A | 31,294 | N/A |
| 49 RP-1232-J1 | Meters - Replaced | N/A | N/A | N/A | N/A | N/A | 18,510 | N/A |
| $50 \mathrm{RP}-1232-\mathrm{K} 1$ | ITS Equipment and Systems | N/A | N/A | N/A | N/A | N/A | 610 | N/A |
| 51 RP-1232-Q1 | Process Plant - Facilities and Equi | N/A | N/A | N/A | N/A | N/A | 5,843 | N/A |
| $52 \mathrm{RP}-1232-\mathrm{S} 1$ | Engineering Studies | N/A | N/A | N/A | N/A | N/A | 13,353 | N/A |

KENTUCKY AMERICAN WATER
CASE NO: 2010-00036

## construction work in progress - percent complete

AS OF AUGUST 2008

DATA: _X_PRE-BASE PERIOD ___FORECASTED PERIOD
SCDR1\#11
TYPE OF FILING: _X_ORIGINAL___UPDATED ___ REVISED
PAGE 3 OF 12
WORKPAPER REFERENCE NO(S):

| Line No. | Project Number | Description of Project | Date Construction Begin | Estimated Completion Date | $\begin{gathered} \hline \% \text { of } \\ \text { Elapsed } \\ \text { Time } \end{gathered}$ | Original Budget <br> Estimate |  | Total Project Expenditures | \% of Total Expenditures to Budget Est. |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | 00000012 | Conversion Funding Project | N/A | N/A | N/A | N/A | N/A | 3,492 | N/A |
|  | 1202000A | LEX-Invest Item A | N/A | N/A | N/A | N/A | N/A | $(5,696)$ | N/A |
|  | 1202000R | LEX-Retirements | N/A | N/A | N/A | N/A | N/A | 2,381 | N/A |
|  | 12020080 | Developer/Govt. Contributions | N/A | N/A | N/A | N/A | N/A | $(1,647)$ | N/A |
|  | 12020081 | Network - Replace/Renew | N/A | N/A | N/A | N/A | N/A | 228 | N/A |
|  | 12020084 | Hydrants New | N/A | N/A | N/A | N/A | N/A | 112 | N/A |
|  | 12020086 | Services New | N/A | N/A | N/A | N/A | N/A | 427 | N/A |
|  | 12020087 | Meters - Replacement | N/A | N/A | N/A | N/A | N/A | 12,238 | N/A |
|  | 12020088 | Meters New | N/A | N/A | N/A | N/A | N/A | $(45,767)$ | N/A |
|  | 12020105 | LEX-Russell Cave Road Tank-1.0 | 2/26/2001 | 11/11/2005 | 100\% | 1,300,000 | 1,808,503 | 350 | 100\% |
|  | 12020201 | LEX-Leestown Rd Main Improvmts | 3/1/2002 | 12/31/2010 | 74\% | 700,000 | 166,456 | 150,955 | 91\% |
|  | 12020202 | LEX-Major Highway Relocations | 12/1/2000 | 11/1/2007 | 100\% | 3,615,898 | 3,615,898 | 0 | 100\% |
|  | 12020204 | Source of Supply Project Dev | 12/21/2001 | 9/20/2010 | 77\% | 650,000 | 2,202,810 | 1,893,837 | 86\% |
|  | 12020301 | Elevated Storage Tank - 2 MG | 1/1/2003 | 8/1/2007 | 100\% | 3,000,000 | 3,757,978 | 398 | 100\% |
|  | 12020303 | Electrical reliability upgrde | 12/1/2003 | 7/1/2006 | 100\% | 1,024,632 | 1,024,632 | 337 | 100\% |
|  | 12020402 | Major Highway Relocations | 1/23/2004 | 12/21/2006 | 100\% | 2,998,150 | 3,263,898 | 19,951 | 100\% |
|  | 12020508 | Kentucky Reliability Improvemt | 3/3/2006 | 12/31/2008 | 89\% | 5,000,000 | 7,527,012 | 7,406,785 | 98\% |
|  | 12020602 | Yanallton Road Main Extension | 3/3/2006 | 4/1/2009 | 82\% | 200,000 | 442,281 | 45,444 | 10\% |
|  | 12020607 | New WTP On Pool 3 of Kentucky | 4/26/2006 | 9/20/2010 | 54\% | 140,000,000 | 162,461,791 | 19,616,145 | 12\% |
|  | 12020701 | KENTUCKY INCLINE CAR | 1/16/2007 | 5/11/2009 | 71\% | 1,100,000 | 194,940 | 145,692 | 75\% |
|  | 12020702 | KY MAJOR HIGHWAY | 2/27/2007 | 12/31/2009 | 54\% | 2,000,000 | 1,671,224 | 233,666 | 14\% |
|  | 12300604 | Owen County SCADA System | 3/3/2006 | 11/30/2007 | 100\% | 500,000 | 614,577 | 0 | 100\% |
|  | DV-1202-1 | Projects Funded by Others | N/A | N/A | N/A | N/A | N/A | 235,074 | N/A |
|  | DV-1230-1 | Projects Funded by Others | N/A | N/A | N/A | N/A | N/A | 201 | N/A |
|  | IP-1202-5 | Nth. Broadway Main Replacement | 4/1/2008 | 10/31/2010 | 17\% | 2,850,037 | 2,770,076 | 73,821 | 3\% |
|  | IP-1202-6 | Carrick Rd Main Extension | 5/1/2008 | 12/31/2012 | 8\% | 2,700,000 | 2,700,000 | 42,344 | 2\% |
|  | IP-1232-1 | Owenton-Post Acquisition Phase 2 | 4/1/2008 | 12/31/2009 | 25\% | 824,804 | 936,758 | 54,764 | 6\% |
|  | RP-1201-R1 | Capitalized Tank Rehabilitation / Paint | N/A | N/A | N/A | N/A | N/A | 32,130 | N/A |
|  | RP-1202-B1 | Mains - Replaced / Restored | N/A | N/A | N/A | N/A | N/A | 82,213 | N/A |
|  | RP-1202-C1 | Mains - Unscheduled | N/A | N/A | N/A | N/A | N/A | 43,581 | N/A |
|  | RP-1202-D1 | Mains - Relocated | N/A | N/A | N/A | N/A | N/A | 60,059 | N/A |
|  | RP-1202-E1 | Hydrants, Valves, and Manholes-New | N/A | N/A | N/A | N/A | N/A | 2,329 | N/A |
|  | RP-1202-F1 | Hydrants, Valves, and Manholes-Rep | N/A | N/A | N/A | N/A | N/A | 1,044 | N/A |
|  | RP-1202-G1 | Services and Laterals - New | N/A | N/A | N/A | N/A | N/A | 3,583 | N/A |
|  | RP-1202-H1 | Services and Laterals - Replaced | N/A | N/A | N/A | N/A | N/A | 70 | N/A |
|  | RP-1202-I1 | Meters - New | N/A | N/A | N/A | N/A | N/A | 1,054,535 | N/A |
|  | RP-1202-J1 | Meters - Replaced | N/A | N/A | N/A | N/A | N/A | 2,613,270 | N/A |
|  | RP-1202-K1 | ITS Equipment and Systems | N/A | N/A | N/A | N/A | N/A | 224,532 | N/A |
|  | RP-1202-L1 | SCADA Equipment and Systems | N/A | N/A | N/A | N/A | N/A | 8,564 | N/A |
|  | RP-1202-M1 | Security Equipment and Systems | N/A | N/A | N/A | N/A | N/A | 480 | N/A |
|  | RP-1202-N1 | Offices and Operations Centers | N/A | N/A | N/A | N/A | N/A | 381,407 | N/A |
|  | RP-1202-O1 | Vehicles | N/A | N/A | N/A | N/A | N/A | 131,610 | N/A |
|  | RP-1202-Q1 | Process Plant - Facilities and Equi | N/A | N/A | N/A | N/A | N/A | 166,082 | N/A |
|  | RP-1202-S1 | Engineering Studies | N/A | N/A | N/A | N/A | N/A | 70,894 | N/A |
|  | RP-1230-G1 | Services and Laterals - New | N/A | N/A | N/A | N/A | N/A | 52 | N/A |
|  | RP-1230-H1 | Services and Laterals - Replaced | N/A | N/A | N/A | N/A | N/A | 16,217 | N/A |
|  | RP-1230-I1 | Meters - New | N/A | N/A | N/A | N/A | N/A | 4,442 | N/A |
|  | RP-1230-J1 | Meters - Replaced | N/A | N/A | N/A | N/A | N/A | 2,423 | N/A |
|  | RP-1232-F1 | Hydrants, Valves, and Manholes-Rep | N/A | N/A | N/A | N/A | N/A | 11,919 | N/A |
|  | RP-1232-H1 | Services and Laterals - Replaced | N/A | N/A | N/A | N/A | N/A | 43,864 | N/A |
|  | RP-1232-J1 | Meters - Replaced | N/A | N/A | N/A | N/A | N/A | 28,211 | N/A |
|  | RP-1232-Q1 | Process Plant - Facilities and Equi | N/A | N/A | N/A | N/A | N/A | 5,843 | N/A |
|  | RP-1232-S1 | Engineering Studies | N/A | N/A | N/A | N/A | N/A | 16,353 | N/A |

## KENTUCKY AMERICAN WATER

CASE NO: 2010-00036 CONSTRUCTION WORK IN PROGRESS - PERCENT COMPLETE AS OF SEPTEMBER 2008

DATA: _X_PRE-BASE PERIOD ___FORECASTED PERIOD
TYPE OFFILING: X_ORIGINAL___UPDATED ___ REVISED WORKPAPER REFERENCE NO(S):

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| Line <br> No. | Project <br> Number | Description of Project | Date Construction Begin | Estimated Completion Date | $\begin{gathered} \hline \% \text { of } \\ \text { Elapsed } \\ \text { Time } \end{gathered}$ | Original Budget Estimate | Current Budget <br> Estimate | Total Project Expenditures | \% of Total Expenditures to Budget Est. |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | 100000012 | Conversion Funding Project | N/A | N/A | N/A | N/A | N/A | 1,497 | N/A |
|  | 2 1202000R | LEX-Retirements | N/A | N/A | N/A | N/A | N/A | 519 | N/A |
|  | 312020080 | Developer/Govt. Contributions | N/A | N/A | N/A | N/A | N/A | 2,241 | N/A |
|  | 412020084 | Hydrants New | N/A | N/A | N/A | N/A | N/A | 112 | N/A |
|  | 512020087 | Meters - Replacement | N/A | N/A | N/A | N/A | N/A | 12,238 | N/A |
|  | 612020088 | Meters New | N/A | N/A | N/A | N/A | N/A | $(45,767)$ | N/A |
|  | 712020201 | LEX-Leestown Rd Main Improvmts | 3/1/2002 | 11/11/2005 | 100\% | 700,000 | 166,456 | 150,955 | 100\% |
|  | 812020204 | Source of Supply Project Dev | 12/21/2001 | 9/20/2010 | 78\% | 650,000 | 2,202,810 | 1,907,332 | 87\% |
|  | 912020402 | Major Highway Relocations | 1/23/2004 | 12/21/2006 | 100\% | 2,998,150 | 3,263,898 | 20,475 | 100\% |
|  | 12020508 | Kentucky Reliability Improvemt | 3/3/2006 | 12/31/2008 | 92\% | 5,000,000 | 7,527,012 | 7,408,979 | 98\% |
|  | 12020602 | Yanallton Road Main Extension | 3/3/2006 | 4/1/2009 | 84\% | 200,000 | 442,281 | 407,894 | 92\% |
|  | 12020607 | New WTP On Pool 3 of Kentucky | 4/26/2006 | 9/20/2010 | 56\% | 140,000,000 | 162,461,791 | 25,543,829 | 16\% |
|  | 12020702 | KY MAJOR HIGHWAY | 2/27/2007 | 12/31/2009 | 57\% | 2,000,000 | 1,671,224 | 233,666 | 14\% |
|  | 4 DV-1202-1 | Projects Funded by Others | N/A | N/A | N/A | N/A | N/A | 306,432 | N/A |
|  | 5 DV-1230-1 | Projects Funded by Others | N/A | N/A | N/A | N/A | N/A | 201 | N/A |
|  | 6 IP-1202-5 | Nth. Broadway Main Replacement | 4/1/2008 | 10/31/2010 | 20\% | 2,850,037 | 2,770,076 | 104,921 | 4\% |
|  | 7 IP-1202-6 | Carrick Rd Main Extension | 5/1/2008 | 12/31/2012 | 9\% | 2,700,000 | 2,700,000 | 42,344 | 2\% |
|  | $8 \mathrm{IP}-1232-1$ | Owenton-Post Acquisition Phase 2 | 4/1/2008 | 12/31/2009 | 30\% | 824,804 | 936,758 | 77,377 | 8\% |
|  | 9 RP-1201-R1 | Capitalized Tank Rehabilitation / Paint | N/A | N/A | N/A | N/A | N/A | 74,930 | N/A |
|  | 0 RP-1202-B1 | Mains - Replaced / Restored | N/A | N/A | N/A | N/A | N/A | 72,824 | N/A |
|  | 1 RP-1202-C1 | Mains - Unscheduled | N/A | N/A | N/A | N/A | N/A | 46,714 | N/A |
|  | 2 RP-1202-D1 | Mains - Relocated | N/A | N/A | N/A | N/A | N/A | 58,825 | N/A |
|  | 3 RP-1202-E1 | Hydrants, Valves, and Manholes-New | N/A | N/A | N/A | N/A | N/A | 10,514 | N/A |
|  | 4 RP-1202-F1 | Hydrants, Valves, and Manholes-Rep | N/A | N/A | N/A | N/A | N/A | 1,083 | N/A |
|  | 5 RP-1202-G1 | Services and Laterals - New | N/A | N/A | N/A | N/A | N/A | 3,382 | N/A |
|  | 6 RP-1202-H1 | Services and Laterals - Replaced | N/A | N/A | N/A | N/A | N/A | 70 | N/A |
|  | 7 RP-1202-I1 | Meters - New | N/A | N/A | N/A | N/A | N/A | 5,266 | N/A |
|  | 8 RP-1202-J1 | Meters - Replaced | N/A | N/A | N/A | N/A | N/A | 13,507 | N/A |
|  | 9 RP-1202-K1 | ITS Equipment and Systems | N/A | N/A | N/A | N/A | N/A | 242,425 | N/A |
|  | 0 RP-1202-L1 | SCADA Equipment and Systems | N/A | N/A | N/A | N/A | N/A | 12,844 | N/A |
|  | 1 RP-1202-M1 | Security Equipment and Systems | N/A | N/A | N/A | N/A | N/A | 1,480 | N/A |
|  | 2 RP-1202-N1 | Offices and Operations Centers | N/A | N/A | N/A | N/A | N/A | 823,178 | N/A |
|  | $3 \mathrm{RP}-1202-\mathrm{O} 1$ | Vehicles | N/A | N/A | N/A | N/A | N/A | 52,656 | N/A |
|  | 4 RP-1202-P1 | Tools and Equipment | N/A | N/A | N/A | N/A | N/A | 6,591 | N/A |
|  | 5 RP-1202-Q1 | Process Plant - Facilities and Equi | N/A | N/A | N/A | N/A | N/A | 151,391 | N/A |
|  | 6 RP-1202-S1 | Engineering Studies | N/A | N/A | N/A | N/A | N/A | 73,263 | N/A |
|  | 7 RP-1230-A1 | Mains - New | N/A | N/A | N/A | N/A | N/A | 1,392 | N/A |
|  | 8 RP-1230-H1 | Services and Laterals - Replaced | N/A | N/A | N/A | N/A | N/A | 16,217 | N/A |
|  | RP-1230-I1 | Meters - New | N/A | N/A | N/A | N/A | N/A | 4,442 | N/A |
|  | 0 RP-1230-J1 | Meters - Replaced | N/A | N/A | N/A | N/A | N/A | 2,423 | N/A |
|  | 1 RP-1232-G1 | Services and Laterals - New | N/A | N/A | N/A | N/A | N/A | 7,992 | N/A |
|  | 2 RP-1232-S1 | Engineering Studies | N/A | N/A | N/A | N/A | N/A | 29,043 | N/A |


| $157,922,991$ | $184,142,306$ | $37,887,697$ |
| :--- | ---: | ---: |

## KENTUCKY AMERICAN WATER

CASE NO: 2010-00036 CONSTRUCTION WORK IN PROGRESS - PERCENT COMPLETE AS OF OCTOBER 2008

DATA: _X_PRE-BASE PERIOD ___FORECASTED PERIOD
PSCDR1\#11
TYPE OF FILING: _X_ORIGINAL UPDATED $\qquad$ REVISED
$\qquad$ Witness Responsible: Lance Williams


KENTUCKY AMERICAN WATER
CASE NO: 2010-00036 CONSTRUCTION WORK IN PROGRESS - PERCENT COMPLETE AS OF NOVEMBER 2008

DATA: _X_PRE-BASE PERIOD ___FORECASTED PERIOD
PSCDR1\#11
PAGE 6 OF 12
TYPE OF FILING: _X_ORIGINAL UPDATED $\qquad$ REVISED

PAGE 6 OF 12
ance Williams

| Line <br> No. | Project <br> Number | Description of Project | Date Construction Begin | Estimated Completion Date | $\begin{gathered} \hline \% \text { of } \\ \text { Elapsed } \\ \text { Time } \\ \hline \end{gathered}$ | Original Budget Estimate | Current Budget Estimate | Total Project Expenditures | \% of Total Expenditures to Budget Est. |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | 100000012 | Conversion Funding Project | N/A | N/A | N/A | N/A | N/A | (47) | N/A |
|  | 2 1202000R | LEX-Retirements | N/A | N/A | N/A | N/A | N/A | 440 | N/A |
|  | 312020080 | Developer/Govt. Contributions | N/A | N/A | N/A | N/A | N/A | (10) | N/A |
|  | 412020084 | Hydrants New | N/A | N/A | N/A | N/A | N/A | 112 | N/A |
|  | 512020087 | Meters - Replacement | N/A | N/A | N/A | N/A | N/A | 1,505 | N/A |
|  | 612020201 | LEX-Leestown Rd Main Improvmts | 3/1/2002 | 11/11/2005 | 100\% | 700,000 | 166,456 | 150,955 | 100\% |
|  | 712020204 | Source of Supply Project Dev | 12/21/2001 | 9/20/2010 | 80\% | 650,000 | 2,202,810 | 1,977,995 | 90\% |
|  | 812020402 | Major Highway Relocations | 1/23/2004 | 12/21/2006 | 100\% | 2,998,150 | 3,263,898 | 31,998 | 100\% |
|  | 912020508 | Kentucky Reliability Improvemt | 3/3/2006 | 12/31/2008 | 98\% | 5,000,000 | 7,527,012 | 6,892,384 | 92\% |
|  | 12020607 | New WTP On Pool 3 of Kentucky | 4/26/2006 | 9/20/2010 | 59\% | 140,000,000 | 162,461,791 | 39,738,157 | 24\% |
|  | 112020702 | KY MAJOR HIGHWAY | 2/27/2007 | 12/31/2009 | 63\% | 2,000,000 | 1,671,224 | 114,026 | 7\% |
|  | 12300403 | Owen County Main Extensions | 1/23/2004 | 12/31/2008 | 99\% | 1,100,000 | 2,296,130 | 64 | 0\% |
|  | 3 DV-1202-1 | Projects Funded by Others | N/A | N/A | N/A | N/A | N/A | 514,674 | N/A |
|  | 4 DV-1230-1 | Projects Funded by Others | N/A | N/A | N/A | N/A | N/A | 201 | N/A |
|  | $5 \mathrm{IP}-1202-5$ | Nth. Broadway Main Replacement | 4/1/2008 | 10/31/2010 | 27\% | 2,850,037 | 2,770,076 | 202,921 | 7\% |
|  | 6 IP-1202-6 | Carrick Rd Main Extension | 5/1/2008 | 12/31/2012 | 13\% | 2,700,000 | 2,700,000 | 57,743 | 2\% |
|  | 7 IP-1232-1 | Owenton-Post Acquisition Phase 2 | 4/1/2008 | 12/31/2009 | 39\% | 824,804 | 936,758 | 80,740 | 9\% |
|  | $8 \mathrm{RP}-1201-\mathrm{R} 1$ | Capitalized Tank Rehabilitation / Paint | N/A | N/A | N/A | N/A | N/A | 52,386 | N/A |
|  | 9 RP-1202-B1 | Mains - Replaced / Restored | N/A | N/A | N/A | N/A | N/A | 233,496 | N/A |
|  | $0 \mathrm{RP}-1202-\mathrm{C} 1$ | Mains - Unscheduled | N/A | N/A | N/A | N/A | N/A | 56,053 | N/A |
|  | 1 RP-1202-D1 | Mains - Relocated | N/A | N/A | N/A | N/A | N/A | 118,202 | N/A |
|  | 2 RP-1202-E1 | Hydrants, Valves, and Manholes-New | N/A | N/A | N/A | N/A | N/A | 29,990 | N/A |
|  | 3 RP-1202-F1 | Hydrants, Valves, and Manholes-Rep | N/A | N/A | N/A | N/A | N/A | 3,588 | N/A |
|  | 4 RP-1202-G1 | Services and Laterals - New | N/A | N/A | N/A | N/A | N/A | 3,382 | N/A |
|  | $5 \mathrm{RP}-1202-\mathrm{H} 1$ | Services and Laterals - Replaced | N/A | N/A | N/A | N/A | N/A | 14,942 | N/A |
|  | $6 \mathrm{RP}-1202-11$ | Meters - New | N/A | N/A | N/A | N/A | N/A | 6,588 | N/A |
|  | 7 RP-1202-J1 | Meters - Replaced | N/A | N/A | N/A | N/A | N/A | 14,134 | N/A |
|  | 8 RP-1202-K1 | ITS Equipment and Systems | N/A | N/A | N/A | N/A | N/A | 18,444 | N/A |
|  | 9 RP-1202-M1 | Security Equipment and Systems | N/A | N/A | N/A | N/A | N/A | 31,946 | N/A |
|  | 0 RP-1202-N1 | Offices and Operations Centers | N/A | N/A | N/A | N/A | N/A | 1,392,322 | N/A |
|  | 1 RP-1202-O1 | Vehicles | N/A | N/A | N/A | N/A | N/A | 153,516 | N/A |
|  | 2 RP-1202-P1 | Tools and Equipment | N/A | N/A | N/A | N/A | N/A | 42,339 | N/A |
|  | 3 RP-1202-Q1 | Process Plant - Facilities and Equi | N/A | N/A | N/A | N/A | N/A | 65,777 | N/A |
|  | 4 RP-1202-S1 | Engineering Studies | N/A | N/A | N/A | N/A | N/A | 83,182 | N/A |
|  | 5 RP-1230-A1 | Mains - New | N/A | N/A | N/A | N/A | N/A | 7,910 | N/A |
|  | 6 RP-1230-J1 | Meters - Replaced | N/A | N/A | N/A | N/A | N/A | 2,423 | N/A |
|  | 7 RP-1232-C1 | Mains - Unscheduled | N/A | N/A | N/A | N/A | N/A | 165 | N/A |
|  | $8 \mathrm{RP}-1232-\mathrm{G} 1$ | Services and Laterals - New | N/A | N/A | N/A | N/A | N/A | 128 | N/A |
|  | 9 RP-1232-H1 | Services and Laterals - Replaced | N/A | N/A | N/A | N/A | N/A | 333 | N/A |
|  | $0 \mathrm{RP}-1232-\mathrm{S} 1$ | Engineering Studies | N/A | N/A | N/A | N/A | N/A | 32,365 | N/A |

## KENTUCKY AMERICAN WATER

CASE NO: 2010-00036 CONSTRUCTION WORK IN PROGRESS - PERCENT COMPLETE AS OF DECEMBER 2008

DATA: _X_PRE-BASE PERIOD ___FORECASTED PERIOD
PSCDR1\#11
TYPE OF FILING: X_ORIGINAL__UPDATED___REVISED
PAGE 7 OF 12
Lance Williams
WORKPAPER REFERENCE NO(S):

| Line <br> No. | Project Number | Description of Project | Date Construction Begin | Estimated Completion Date | \% of Elapsed Time | Original Budget Estimate | Current Budget Estimate | Total Project Expenditures | \% of Total Expenditures to Budget Est. |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | 100000012 | Conversion Funding Project | N/A | N/A | N/A | N/A | N/A | (47) | N/A |
|  | 12020081 | Network - Replace/Renew | N/A | N/A | N/A | N/A | N/A | (120) | N/A |
|  | 312020201 | LEX-Leestown Rd Main Improvmts | 3/1/2002 | 11/11/2005 | 100\% | 700,000 | 166,456 | 150,955 | 100\% |
|  | 412020204 | Source of Supply Project Dev | 12/21/2001 | 9/20/2010 | 81\% | 650,000 | 2,202,810 | 2,007,500 | 91\% |
|  | 512020402 | Major Highway Relocations | 1/23/2004 | 12/21/2006 | 100\% | 2,998,150 | 3,263,898 | 37,008 | 100\% |
|  | 612020508 | Kentucky Reliability Improvemt | 3/3/2006 | 12/31/2008 | 100\% | 5,000,000 | 7,527,012 | 3,903,476 | 100\% |
|  | 712020607 | New WTP On Pool 3 of Kentucky | 4/26/2006 | 9/20/2010 | 61\% | 140,000,000 | 162,461,791 | 46,491,383 | 29\% |
|  | 12020701 | KENTUCKY INCLINE CAR | 1/16/2007 | 5/11/2009 | 85\% | 1,100,000 | 194,940 | $(1,188)$ | -1\% |
|  | 12020702 | KY MAJOR HIGHWAY | 2/27/2007 | 12/31/2009 | 66\% | 2,000,000 | 1,671,224 | 115,257 | 7\% |
|  | DV-1202-1 | Projects Funded by Others | N/A | N/A | N/A | N/A | N/A | 303,527 | N/A |
|  | 1 DV-1230-1 | Projects Funded by Others | N/A | N/A | N/A | N/A | N/A | 201 | N/A |
|  | IP-1202-5 | Nth. Broadway Main Replacement | 4/1/2008 | 10/31/2010 | 30\% | 2,850,037 | 2,770,076 | 299,377 | 11\% |
|  | IP-1202-6 | Carrick Rd Main Extension | 5/1/2008 | 12/31/2012 | 15\% | 2,700,000 | 2,700,000 | 62,506 | 2\% |
|  | 4 IP-1232-1 | Owenton-Post Acquisition Phase 2 | 4/1/2008 | 12/31/2009 | 44\% | 824,804 | 936,758 | 81,520 | 9\% |
|  | RP-1201-R1 | Capitalized Tank Rehabilitation / P | N/A | N/A | N/A | N/A | N/A | 60,726 | N/A |
|  | 6 RP-1202-B1 | Mains - Replaced / Restored | N/A | N/A | N/A | N/A | N/A | 101,661 | N/A |
|  | 7 RP-1202-C1 | Mains - Unscheduled | N/A | N/A | N/A | N/A | N/A | 57,293 | N/A |
|  | $8 \mathrm{RP}-1202-\mathrm{D} 1$ | Mains - Relocated | N/A | N/A | N/A | N/A | N/A | 65,914 | N/A |
|  | 9 RP-1202-E1 | Hydrants, Valves, and Manholes-New | N/A | N/A | N/A | N/A | N/A | 102,992 | N/A |
|  | RP-1202-F1 | Hydrants, Valves, and Manholes-Rep | N/A | N/A | N/A | N/A | N/A | 3,244 | N/A |
|  | 1 RP-1202-G1 | Services and Laterals - New | N/A | N/A | N/A | N/A | N/A | 3,382 | N/A |
|  | RP-1202-H1 | Services and Laterals - Replaced | N/A | N/A | N/A | N/A | N/A | 70 | N/A |
|  | RP-1202-I1 | Meters - New | N/A | N/A | N/A | N/A | N/A | 6,582 | N/A |
|  | 4 RP-1202-J1 | Meters - Replaced | N/A | N/A | N/A | N/A | N/A | 24,238 | N/A |
|  | $5 \mathrm{RP}-1202-\mathrm{M} 1$ | Security Equipment and Systems | N/A | N/A | N/A | N/A | N/A | 3,618 | N/A |
|  | 6 RP-1202-N1 | Offices and Operations Centers | N/A | N/A | N/A | N/A | N/A | 351,243 | N/A |
|  | 7 RP-1202-P1 | Tools and Equipment | N/A | N/A | N/A | N/A | N/A | 95,796 | N/A |
|  | $8 \mathrm{RP}-1202-\mathrm{Q} 1$ | Process Plant - Facilities and Equi | N/A | N/A | N/A | N/A | N/A | 33,195 | N/A |
|  | RP-1202-S1 | Engineering Studies | N/A | N/A | N/A | N/A | N/A | 93,356 | N/A |
|  | RP-1230-A1 | Mains - New | N/A | N/A | N/A | N/A | N/A | 8,560 | N/A |
|  | 1 RP-1230-J1 | Meters - Replaced | N/A | N/A | N/A | N/A | N/A | 2,423 | N/A |
|  | $2 \mathrm{RP}-1232-\mathrm{F} 1$ | Hydrants, Valves, and Manholes-Rep | N/A | N/A | N/A | N/A | N/A | 1 | N/A |
|  | RP-1232-S1 | Engineering Studies | N/A | N/A | N/A | N/A | N/A | 35,277 | N/A |

## KENTUCKY AMERICAN WATER

CASE NO: 2010-00036

## CONSTRUCTION WORK IN PROGRESS - PERCENT COMPLETE <br> AS OF JANUARY 2009

DATA: _X_PRE-BASE PERIOD ___FORECASTED PERIOD
PSCDR1\#11 PAGE 8 OF 12
TYPE OF FILING: _ X_ORIGINAL__ UPDATED __ REVISED WORKPAPER REFERENCE NO(S):
$\qquad$
Witness Responsible: Lance Williams

| $\begin{array}{lr}\text { Line } & \text { Project } \\ \text { No. } & \text { Number }\end{array}$ | Description of Project | Date Construction Begin | Estimated Completion Date | $\begin{gathered} \hline \% \text { of } \\ \text { Elapsed } \\ \text { Time } \\ \hline \end{gathered}$ | Original Budget <br> Estimate | $\begin{gathered} \hline \text { Current } \\ \text { Budget } \\ \text { Estimate } \end{gathered}$ | Total Project Expenditures | \% of Total Expenditures to Budget Est. |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 100000012 | Conversion Funding Project | N/A | N/A | N/A | N/A | N/A | (47) | N/A |
| 212020080 | Developer/Govt. Contributions | N/A | N/A | N/A | N/A | N/A | 2 | N/A |
| 312020081 | Network - Replace/Renew | N/A | N/A | N/A | N/A | N/A | (120) | N/A |
| 412020201 | LEX-Leestown Rd Main Improvmts | 3/1/2002 | 11/11/2005 | 100\% | 700,000 | 166,456 | 150,955 | 100\% |
| 512020204 | Source of Supply Project Dev | 12/21/2001 | 9/20/2010 | 82\% | 650,000 | 2,202,810 | 1,986,894 | 90\% |
| 612020402 | Major Highway Relocations | 1/23/2004 | 12/21/2006 | 100\% | 2,998,150 | 3,263,898 | 36,910 | 100\% |
| 712020508 | Kentucky Reliability Improvemt | 3/3/2006 | 12/31/2008 | 100\% | 5,000,000 | 7,527,012 | 3,467,981 | 100\% |
| 812020607 | New WTP On Pool 3 of Kentucky | 4/26/2006 | 9/20/2010 | 63\% | 140,000,000 | 162,461,791 | 52,482,300 | 32\% |
| 912020701 | KENTUCKY INCLINE CAR | 1/16/2007 | 5/11/2009 | 89\% | 1,100,000 | 194,940 | $(1,188)$ | -1\% |
| 1012020702 | KY MAJOR HIGHWAY | 2/27/2007 | 12/31/2009 | 68\% | 2,000,000 | 1,671,224 | 115,643 | 7\% |
| 11 DV-1202-1 | Projects Funded by Others | N/A | N/A | N/A | N/A | N/A | 412,167 | N/A |
| 12 DV-1230-1 | Projects Funded by Others | N/A | N/A | N/A | N/A | N/A | 201 | N/A |
| $13 \mathrm{IP}-1202-5$ | Nth. Broadway Main Replacement | 4/1/2008 | 10/31/2010 | 33\% | 2,850,037 | 2,770,076 | 310,869 | 11\% |
| 14 IP-1202-6 | Carrick Rd Main Extension | 5/1/2008 | 12/31/2012 | 17\% | 2,700,000 | 2,700,000 | 69,931 | 3\% |
| 15 IP-1232-1 | Owenton-Post Acquisition Phase 2 | 4/1/2008 | 12/31/2009 | 49\% | 824,804 | 936,758 | 81,860 | 9\% |
| 16 RP-1201-R1 | Capitalized Tank Rehabilitation / P | N/A | N/A | N/A | N/A | N/A | 60,865 | N/A |
| 17 RP-1202-B1 | Mains - Replaced / Restored | N/A | N/A | N/A | N/A | N/A | 144,866 | N/A |
| 18 RP-1202-C1 | Mains - Unscheduled | N/A | N/A | N/A | N/A | N/A | 64,730 | N/A |
| 19 RP-1202-D1 | Mains - Relocated | N/A | N/A | N/A | N/A | N/A | 65,980 | N/A |
| 20 RP-1202-E1 | Hydrants, Valves, and Manholes-New | N/A | N/A | N/A | N/A | N/A | 68,656 | N/A |
| 21 RP-1202-F1 | Hydrants, Valves, and Manholes-Rep | N/A | N/A | N/A | N/A | N/A | 3,405 | N/A |
| 22 RP-1202-G1 | Services and Laterals - New | N/A | N/A | N/A | N/A | N/A | 39,540 | N/A |
| 23 RP-1202-H1 | Services and Laterals - Replaced | N/A | N/A | N/A | N/A | N/A | 67,493 | N/A |
| 24 RP-1202-II | Meters - New | N/A | N/A | N/A | N/A | N/A | 60,289 | N/A |
| 25 RP-1202-J1 | Meters - Replaced | N/A | N/A | N/A | N/A | N/A | 42,116 | N/A |
| 26 RP-1202-K1 | ITS Equipment and Systems | N/A | N/A | N/A | N/A | N/A | 1,488 | N/A |
| 27 RP-1202-M1 | Security Equipment and Systems | N/A | N/A | N/A | N/A | N/A | 3,618 | N/A |
| 28 RP-1202-N1 | Offices and Operations Centers | N/A | N/A | N/A | N/A | N/A | 32,437 | N/A |
| 29 RP-1202-Q1 | Process Plant - Facilities and Equi | N/A | N/A | N/A | N/A | N/A | 50,789 | N/A |
| $30 \mathrm{RP}-1202-\mathrm{S} 1$ | Engineering Studies | N/A | N/A | N/A | N/A | N/A | 93,543 | N/A |
| 31 RP-1230-A1 | Mains - New | N/A | N/A | N/A | N/A | N/A | 8,590 | N/A |
| 32 RP-1230-J1 | Meters - Replaced | N/A | N/A | N/A | N/A | N/A | 2,423 | N/A |
| 33 RP-1232-C1 | Mains - Unscheduled | N/A | N/A | N/A | N/A | N/A | 4,644 | N/A |
| 34 RP-1232-G1 | Services and Laterals - New | N/A | N/A | N/A | N/A | N/A | 45 | N/A |
| 35 RP-1232-H1 | Services and Laterals - Replaced | N/A | N/A | N/A | N/A | N/A | 663 | N/A |
| 36 RP-1232-I1 | Meters - New | N/A | N/A | N/A | N/A | N/A | 921 | N/A |
| 37 RP-1232-S1 | Engineering Studies | N/A | N/A | N/A | N/A | N/A | 35,547 | N/A |

## KENTUCKY AMERICAN WATER

CASE NO: 2010-00036

## CONSTRUCTION WORK IN PROGRESS - PERCENT COMPLETE

AS OF FEBRUARY 2009

DATA: _X_PRE-BASE PERIOD ___FORECASTED PERIOD
TYPE OF FILING: _X_ORIGINAL_ _UPDATED $\qquad$ REVISED
WORKPAPER REFERENCE NO(S):

PSCDR1\#11<br>PAGE 9 OF 12<br>PAGE 9 OF 12

| Line No. | Project Number | Description of Project | Date Construction Begin | Estimated Completion Date | $\begin{gathered} \hline \% \text { of } \\ \text { Elapsed } \\ \text { Time } \\ \hline \end{gathered}$ | Original Budget Estimate | Current Budget Estimate | Total Project Expenditures | \% of Total Expenditures to Budget Est. |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | 100000012 | Conversion Funding Project | N/A | N/A | N/A | N/A | N/A | (47) | N/A |
|  | 12020080 | Developer/Govt. Contributions | N/A | N/A | N/A | N/A | N/A | (2) | N/A |
|  | 312020201 | LEX-Leestown Rd Main Improvmts | 3/1/2002 | 11/11/2005 | 100\% | 700,000 | 166,456 | 150,955 | 100\% |
|  | 412020204 | Source of Supply Project Dev | 12/21/2001 | 9/20/2010 | 82\% | 650,000 | 2,202,810 | 1,994,380 | 91\% |
|  | 512020402 | Major Highway Relocations | 1/23/2004 | 12/21/2006 | 100\% | 2,998,150 | 3,263,898 | 37,010 | 100\% |
|  | 612020508 | Kentucky Reliability Improvemt | 3/3/2006 | 12/31/2008 | 100\% | 5,000,000 | 7,527,012 | 3,468,049 | 100\% |
|  | 712020607 | New WTP On Pool 3 of Kentucky | 4/26/2006 | 9/20/2010 | 65\% | 140,000,000 | 162,461,791 | 60,120,358 | 37\% |
|  | 812020702 | KY MAJOR HIGHWAY | 2/27/2007 | 12/31/2009 | 71\% | 2,000,000 | 1,671,224 | 115,643 | 7\% |
|  | 9 DV-1202-1 | Projects Funded by Others | N/A | N/A | N/A | N/A | N/A | 156,829 | N/A |
|  | DV-1230-1 | Projects Funded by Others | N/A | N/A | N/A | N/A | N/A | 201 | N/A |
|  | 1 IP -1202-5 | Nth. Broadway Main Replacement | 4/1/2008 | 10/31/2010 | 36\% | 2,850,037 | 2,770,076 | 312,243 | 11\% |
|  | $2 \mathrm{IP}-1202-6$ | Carrick Rd Main Extension | 5/1/2008 | 12/31/2012 | 18\% | 2,700,000 | 2,700,000 | 73,928 | 3\% |
|  | IP-1232-1 | Owenton-Post Acquisition Phase 2 | 4/1/2008 | 12/31/2009 | 53\% | 824,804 | 936,758 | 83,426 | 9\% |
|  | 4 RP-1201-R1 | Capitalized Tank Rehabilitation / P | N/A | N/A | N/A | N/A | N/A | 61,030 | N/A |
|  | 5 RP -1202-B1 | Mains - Replaced / Restored | N/A | N/A | N/A | N/A | N/A | 64,187 | N/A |
|  | 6 RP-1202-C1 | Mains - Unscheduled | N/A | N/A | N/A | N/A | N/A | 108,369 | N/A |
|  | 7 RP-1202-D1 | Mains - Relocated | N/A | N/A | N/A | N/A | N/A | 200,054 | N/A |
|  | 8 RP -1202-E1 | Hydrants, Valves, and Manholes-New | N/A | N/A | N/A | N/A | N/A | 108,992 | N/A |
|  | 9 RP-1202-F1 | Hydrants, Valves, and Manholes-Rep | N/A | N/A | N/A | N/A | N/A | 9,857 | N/A |
|  | 0 RP-1202-G1 | Services and Laterals - New | N/A | N/A | N/A | N/A | N/A | 158,804 | N/A |
|  | $1 \mathrm{RP-1202-H1}$ | Services and Laterals - Replaced | N/A | N/A | N/A | N/A | N/A | 16,537 | N/A |
|  | RP-1202-I1 | Meters - New | N/A | N/A | N/A | N/A | N/A | 55,781 | N/A |
|  | 3 RP-1202-J1 | Meters - Replaced | N/A | N/A | N/A | N/A | N/A | 81,815 | N/A |
|  | 4 RP-1202-K1 | ITS Equipment and Systems | N/A | N/A | N/A | N/A | N/A | 5,887 | N/A |
|  | $5 \mathrm{RP}-1202-\mathrm{M} 1$ | Security Equipment and Systems | N/A | N/A | N/A | N/A | N/A | 3,618 | N/A |
|  | 6 RP-1202-N1 | Offices and Operations Centers | N/A | N/A | N/A | N/A | N/A | 64,721 | N/A |
|  | 7 RP-1202-P1 | Tools and Equipment | N/A | N/A | N/A | N/A | N/A | 74,691 | N/A |
|  | 8 RP-1202-Q1 | Process Plant - Facilities and Equi | N/A | N/A | N/A | N/A | N/A | 72,316 | N/A |
|  | 9 RP-1202-S1 | Engineering Studies | N/A | N/A | N/A | N/A | N/A | 56,440 | N/A |
|  | RP-1230-A1 | Mains - New | N/A | N/A | N/A | N/A | N/A | 8,590 | N/A |
|  | 1 RP-1230-J1 | Meters - Replaced | N/A | N/A | N/A | N/A | N/A | 2,423 | N/A |
|  | $2 \mathrm{RP}-1232-\mathrm{A} 1$ | Mains - New | N/A | N/A | N/A | N/A | N/A | 6,382 | N/A |
|  | 3 RP-1232-C1 | Mains - Unscheduled | N/A | N/A | N/A | N/A | N/A | 4,507 | N/A |
|  | 4 RP-1232-E1 | Hydrants, Valves \& Manholes NEW | N/A | N/A | N/A | N/A | N/A | 979 | N/A |
|  | 5 RP-1232-F1 | Hydrants, Valves, and Manholes-Rep | N/A | N/A | N/A | N/A | N/A | 14,936 | N/A |
|  | 6 RP-1232-G1 | Services and Laterals - New | N/A | N/A | N/A | N/A | N/A | 759 | N/A |
|  | 7 RP-1232-H1 | Services and Laterals - Replaced | N/A | N/A | N/A | N/A | N/A | 4,528 | N/A |
|  | RP-1232-I1 | Meters - New | N/A | N/A | N/A | N/A | N/A | 998 | N/A |

KENTUCKY AMERICAN WATER
CASE NO: 2010-00036 CONSTRUCTION WORK IN PROGRESS - PERCENT COMPLETE AS OF MARCH 2009

DATA: _X_PRE-BASE PERIOD ___FORECASTED PERIOD
PSCDR1\#11
TYPE OF FILING: _ X_ORIGINAL___UPDATED___REVISED PAGE 10 OF 12 WORKPAPER REFERENCE NO(S): PAGE 10 OF 12
Lance Williams

| Line <br> No. | Project Number | Description of Project | Date Construction Begin | Estimated Completion Date | \% of Elapsed Time | Original Budget Estimate | Current Budget Estimate | Total Project Expenditures | \% of Total Expenditures to Budget Est. |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | 00000012 | Conversion Funding Project | N/A | N/A | N/A | N/A | N/A | (47) | N/A |
|  | 12020080 | Developer/Govt. Contributions | N/A | N/A | N/A | N/A | N/A | (75) | N/A |
|  | 12020201 | LEX-Leestown Rd Main Improvmts | 3/1/2002 | 11/11/2005 | 100\% | 700,000 | 166,456 | 150,955 | 100\% |
|  | 12020204 | Source of Supply Project Dev | 12/21/2001 | 9/20/2010 | 83\% | 650,000 | 2,202,810 | 1,995,880 | 91\% |
|  | 12020402 | Major Highway Relocations | 1/23/2004 | 12/21/2006 | 100\% | 2,998,150 | 3,263,898 | 62,034 | 100\% |
|  | 12020508 | Kentucky Reliability Improvemt | 3/3/2006 | 12/31/2008 | 100\% | 5,000,000 | 7,527,012 | 3,526,313 | 100\% |
|  | 12020607 | New WTP On Pool 3 of Kentucky | 4/26/2006 | 9/20/2010 | 67\% | 140,000,000 | 162,461,791 | 69,092,758 | 43\% |
|  | 12020702 | KY MAJOR HIGHWAY | 2/27/2007 | 12/31/2009 | 74\% | 2,000,000 | 1,671,224 | 115,643 | 7\% |
|  | DV-1202-1 | Projects Funded by Others | N/A | N/A | N/A | N/A | N/A | 205,915 | N/A |
|  | DV-1230-1 | Projects Funded by Others | N/A | N/A | N/A | N/A | N/A | 201 | N/A |
|  | P-1202-5 | Nth. Broadway Main Replacement | 4/1/2008 | 10/31/2010 | 39\% | 2,850,037 | 2,770,076 | 314,273 | 11\% |
|  | P-1202-6 | Carrick Rd Main Extension | 5/1/2008 | 12/31/2012 | 20\% | 2,700,000 | 2,700,000 | 75,989 | 3\% |
|  | P-1232-1 | Owenton-Post Acquisition Phase 2 | 4/1/2008 | 12/31/2009 | 58\% | 824,804 | 936,758 | 83,705 | 9\% |
|  | RP-1201-R1 | Capitalized Tank Rehabilitation / P | N/A | N/A | N/A | N/A | N/A | 94,643 | N/A |
|  | RP-1202-B1 | Mains - Replaced / Restored | N/A | N/A | N/A | N/A | N/A | 61,469 | N/A |
|  | RP-1202-C1 | Mains - Unscheduled | N/A | N/A | N/A | N/A | N/A | 123,657 | N/A |
|  | RP-1202-D1 | Mains - Relocated | N/A | N/A | N/A | N/A | N/A | 277,054 | N/A |
|  | RP-1202-E1 | Hydrants, Valves, and Manholes-New | N/A | N/A | N/A | N/A | N/A | 97,022 | N/A |
|  | RP-1202-F1 | Hydrants, Valves, and Manholes-Rep | N/A | N/A | N/A | N/A | N/A | 16,027 | N/A |
|  | RP-1202-G1 | Services and Laterals - New | N/A | N/A | N/A | N/A | N/A | 51,805 | N/A |
|  | RP-1202-H1 | Services and Laterals - Replaced | N/A | N/A | N/A | N/A | N/A | 156,715 | N/A |
|  | RP-1202-I1 | Meters - New | N/A | N/A | N/A | N/A | N/A | 53,425 | N/A |
|  | RP-1202-J1 | Meters - Replaced | N/A | N/A | N/A | N/A | N/A | 250,318 | N/A |
|  | RP-1202-N1 | Offices and Operations Centers | N/A | N/A | N/A | N/A | N/A | 42,762 | N/A |
|  | RP-1202-Q1 | Process Plant - Facilities and Equi | N/A | N/A | N/A | N/A | N/A | 75,338 | N/A |
|  | RP-1202-S1 | Engineering Studies | N/A | N/A | N/A | N/A | N/A | 56,817 | N/A |
|  | RP-1230-A1 | Mains - New | N/A | N/A | N/A | N/A | N/A | 8,590 | N/A |
|  | RP-1230-J1 | Meters - Replaced | N/A | N/A | N/A | N/A | N/A | 1,353 | N/A |
|  | RP-1232-A1 | Mains - New | N/A | N/A | N/A | N/A | N/A | 11,805 | N/A |
|  | RP-1232-C1 | Mains - Unscheduled | N/A | N/A | N/A | N/A | N/A | 7,066 | N/A |
|  | RP-1232-E1 | Hydrants, Valves \& Manholes NEW | N/A | N/A | N/A | N/A | N/A | 14,781 | N/A |
|  | RP-1232-F1 | Hydrants, Valves, and Manholes-Rep | N/A | N/A | N/A | N/A | N/A | 249 | N/A |
|  | RP-1232-G1 | Services and Laterals - New | N/A | N/A | N/A | N/A | N/A | 2,934 | N/A |
|  | RP-1232-H1 | Services and Laterals - Replaced | N/A | N/A | N/A | N/A | N/A | 3,792 | N/A |
|  | RP-1232-I1 | Meters - New | N/A | N/A | N/A | N/A | N/A | 2,328 | N/A |
|  | RP-1232-J1 | Meters - Replaced | N/A | N/A | N/A | N/A | N/A | 293 | N/A |

KENTUCKY AMERICAN WATER
CASE NO: 2010-00036 CONSTRUCTION WORK IN PROGRESS - PERCENT COMPLETE AS OF APRIL 2009

DATA: _X_PRE-BASE PERIOD ___FORECASTED PERIOD
TYPE OF FILING: _X_ORIGINAL___UPDATED ___ REVISED
PSCDR1\#11
WORKPAPER REFERENCE NO(S):
PAGE 11 OF 12

| Line <br> No. | Project Number | Description of Project | Date Construction Begin | Estimated Completion Date | \% of Elapsed Time | Original Budget Estimate | Current <br> Budget <br> Estimate | Total Project Expenditures | \% of Total Expenditures to Budget Est. |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | 100000012 | Conversion Funding Project | N/A | N/A | N/A | N/A | N/A | (47) | N/A |
|  | 212020080 | Developer/Govt. Contributions | N/A | N/A | N/A | N/A | N/A | (75) | N/A |
|  | 312020201 | LEX-Leestown Rd Main Improvmts | 3/1/2002 | 11/11/2005 | 100\% | 700,000 | 166,456 | 150,955 | 100\% |
|  | 412020204 | Source of Supply Project Dev | 12/21/2001 | 9/20/2010 | 84\% | 650,000 | 2,202,810 | 2,006,672 | 91\% |
|  | 512020402 | Major Highway Relocations | 1/23/2004 | 12/21/2006 | 100\% | 2,998,150 | 3,263,898 | 36,977 | 100\% |
|  | 612020508 | Kentucky Reliability Improvemt | 3/3/2006 | 12/31/2008 | 100\% | 5,000,000 | 7,527,012 | 3,580,552 | 100\% |
|  | 712020607 | New WTP On Pool 3 of Kentucky | 4/26/2006 | 9/20/2010 | 69\% | 140,000,000 | 162,461,791 | 78,000,424 | 48\% |
|  | 812020702 | KY MAJOR HIGHWAY | 2/27/2007 | 12/31/2009 | 77\% | 2,000,000 | 1,671,224 | 115,643 | 7\% |
|  | 9 DV-1202-1 | Projects Funded by Others | N/A | N/A | N/A | N/A | N/A | 221,127 | N/A |
|  | 0 DV-1230-1 | Projects Funded by Others | N/A | N/A | N/A | N/A | N/A | 201 | N/A |
|  | 1 IP-1202-5 | Nth. Broadway Main Replacement | 4/1/2008 | 10/31/2010 | 43\% | 2,850,037 | 2,770,076 | 389,273 | 14\% |
|  | 2 IP-1202-6 | Carrick Rd Main Extension | 5/1/2008 | 12/31/2012 | 22\% | 2,700,000 | 2,700,000 | 74,735 | 3\% |
|  | 3 IP-1232-1 | Owenton-Post Acquisition Phase 2 | 4/1/2008 | 12/31/2009 | 63\% | 824,804 | 936,758 | 83,705 | 9\% |
|  | 4 RP-1201-R1 | Capitalized Tank Rehabilitation / P | N/A | N/A | N/A | N/A | N/A | 94,643 | N/A |
|  | 5 RP-1202-B1 | Mains - Replaced / Restored | N/A | N/A | N/A | N/A | N/A | 86,861 | N/A |
|  | 6 RP-1202-C1 | Mains - Unscheduled | N/A | N/A | N/A | N/A | N/A | 144,413 | N/A |
|  | 7 RP-1202-D1 | Mains - Relocated | N/A | N/A | N/A | N/A | N/A | 374,113 | N/A |
|  | 8 RP-1202-E1 | Hydrants, Valves, and Manholes-New | N/A | N/A | N/A | N/A | N/A | (845) | N/A |
|  | 9 RP-1202-F1 | Hydrants, Valves, and Manholes-Rep | N/A | N/A | N/A | N/A | N/A | 12,944 | N/A |
|  | $0 \mathrm{RP}-1202-\mathrm{G} 1$ | Services and Laterals - New | N/A | N/A | N/A | N/A | N/A | $(65,750)$ | N/A |
|  | $1 \mathrm{RP-1202-H1}$ | Services and Laterals - Replaced | N/A | N/A | N/A | N/A | N/A | $(87,112)$ | N/A |
|  | $2 \mathrm{RP}-1202-11$ | Meters - New | N/A | N/A | N/A | N/A | N/A | 53,202 | N/A |
|  | 3 RP-1202-J1 | Meters - Replaced | N/A | N/A | N/A | N/A | N/A | 92,750 | N/A |
|  | 4 RP-1202-K1 | ITS Equipment and Systems | N/A | N/A | N/A | N/A | N/A | $(7,902)$ | N/A |
|  | $5 \mathrm{RP}-1202-\mathrm{N} 1$ | Offices and Operations Centers | N/A | N/A | N/A | N/A | N/A | 56,923 | N/A |
|  | 6 RP-1202-Q1 | Process Plant - Facilities and Equi | N/A | N/A | N/A | N/A | N/A | 84,573 | N/A |
|  | 7 RP-1202-S1 | Engineering Studies | N/A | N/A | N/A | N/A | N/A | 14,477 | N/A |
|  | $8 \mathrm{RP}-1230-\mathrm{A} 1$ | Mains - New | N/A | N/A | N/A | N/A | N/A | 27 | N/A |
|  | 9 RP-1230-J1 | Meters - Replaced | N/A | N/A | N/A | N/A | N/A | 1,353 | N/A |
|  | 0 RP-1232-A1 | Mains - New | N/A | N/A | N/A | N/A | N/A | 17,690 | N/A |
|  | 1 RP-1232-C1 | Mains - Unscheduled | N/A | N/A | N/A | N/A | N/A | 9,728 | N/A |
|  | 2 RP-1232-F1 | Hydrants, Valves, and Manholes-Rep | N/A | N/A | N/A | N/A | N/A | 214 | N/A |
|  | $3 \mathrm{RP}-1232-\mathrm{G} 1$ | Services and Laterals - New | N/A | N/A | N/A | N/A | N/A | 542 | N/A |
|  | 4 RP-1232-H1 | Services and Laterals - Replaced | N/A | N/A | N/A | N/A | N/A | 3,500 | N/A |
|  | $5 \mathrm{RP}-1232-11$ | Meters - New | N/A | N/A | N/A | N/A | N/A | 1,042 | N/A |

## KENTUCKY AMERICAN WATER

CASE NO: 2010-00036 CONSTRUCTION WORK IN PROGRESS - PERCENT COMPLETE AS OF MAY 2009

DATA: _X_PRE-BASE PERIOD ___FORECASTED PERIOD
PSCDR1\#11
PAGE 12 OF 12
TYPE OF FILING: _X_ORIGINAL __ UPDATED __ REVISED
WORKPAPER REFERENCE NO(S):
$\qquad$ : Lance Williams

| Line <br> No. | Project Number | Description of Project | $\qquad$ | Estimated Completion Date | \% of Elapsed Time | Original Budget Estimate | $\begin{gathered} \hline \text { Current } \\ \text { Budget } \\ \text { Estimate } \\ \hline \end{gathered}$ | Total Project Expenditures | \% of Total Expenditures to Budget Est. |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | 12020080 | Developer/Govt. Contributions | N/A | N/A | N/A | N/A | N/A | (73) | N/A |
|  | 12020201 | LEX-Leestown Rd Main Improvmts | 3/1/2002 | 11/11/2005 | 100\% | 700,000 | 166,456 | 150,955 | 100\% |
|  | 12020204 | Source of Supply Project Dev | 12/21/2001 | 9/20/2010 | 85\% | 650,000 | 2,202,810 | 2,026,772 | 92\% |
|  | 12020402 | Major Highway Relocations | 1/23/2004 | 12/21/2006 | 100\% | 2,998,150 | 3,263,898 | 36,977 | 100\% |
|  | 12020607 | New WTP On Pool 3 of Kentucky | 4/26/2006 | 9/20/2010 | 71\% | 140,000,000 | 162,461,791 | 83,989,866 | 52\% |
|  | 12020702 | KY MAJOR HIGHWAY | 2/27/2007 | 12/31/2009 | 80\% | 2,000,000 | 1,671,224 | 115,643 | 7\% |
|  | CS-1201-1 | Business Transformation CPS | 6/3/2009 | 6/30/2010 | 1\% | 211,056 | 211,056 | 91,075 | 43\% |
|  | DV-1202-1 | Projects Funded by Others | N/A | N/A | N/A | N/A | N/A | 306,364 | N/A |
|  | DV-1230-1 | Projects Funded by Others | N/A | N/A | N/A | N/A | N/A | 201 | N/A |
|  | DV-1232-2 | Projects Funded by Others | N/A | N/A | N/A | N/A | N/A | 66 | N/A |
|  | IP-1202-5 | Nth. Broadway Main Replacement | 4/1/2008 | 10/31/2010 | 46\% | 2,850,037 | 2,770,076 | 464,423 | 17\% |
|  | IP-1202-6 | Carrick Rd Main Extension | 5/1/2008 | 12/31/2012 | 24\% | 2,700,000 | 2,700,000 | 78,408 | 3\% |
|  | IP-1232-1 | Owenton-Post Acquisition Phase 2 | 4/1/2008 | 12/31/2009 | 68\% | 824,804 | 936,758 | 83,705 | 9\% |
|  | RP-1201-R1 | Capitalized Tank Rehabilitation / P | N/A | N/A | N/A | N/A | N/A | 94,643 | N/A |
|  | RP-1202-B1 | Mains - Replaced / Restored | N/A | N/A | N/A | N/A | N/A | 41,460 | N/A |
|  | RP-1202-C1 | Mains - Unscheduled | N/A | N/A | N/A | N/A | N/A | 151,481 | N/A |
|  | RP-1202-D1 | Mains - Relocated | N/A | N/A | N/A | N/A | N/A | 467,339 | N/A |
|  | RP-1202-E1 | Hydrants, Valves, and Manholes-New | N/A | N/A | N/A | N/A | N/A | 22 | N/A |
|  | RP-1202-F1 | Hydrants, Valves, and Manholes-Rep | N/A | N/A | N/A | N/A | N/A | 22,590 | N/A |
|  | RP-1202-G1 | Services and Laterals - New | N/A | N/A | N/A | N/A | N/A | 3,825 | N/A |
|  | RP-1202-H1 | Services and Laterals - Replaced | N/A | N/A | N/A | N/A | N/A | 1,238 | N/A |
|  | RP-1202-I1 | Meters - New | N/A | N/A | N/A | N/A | N/A | 72,468 | N/A |
|  | RP-1202-J1 | Meters - Replaced | N/A | N/A | N/A | N/A | N/A | 104,192 | N/A |
|  | RP-1202-K1 | ITS Equipment and Systems | N/A | N/A | N/A | N/A | N/A | 1,126 | N/A |
|  | RP-1202-M1 | Security Equipment and Systems | N/A | N/A | N/A | N/A | N/A | 6,925 | N/A |
|  | RP-1202-N1 | Offices and Operations Centers | N/A | N/A | N/A | N/A | N/A | 232,072 | N/A |
|  | RP-1202-P1 | Tools and Equipment | N/A | N/A | N/A | N/A | N/A | 7,418 | N/A |
|  | RP-1202-Q1 | Process Plant - Facilities and Equi | N/A | N/A | N/A | N/A | N/A | 209,201 | N/A |
|  | RP-1202-S1 | Engineering Studies | N/A | N/A | N/A | N/A | N/A | 14,867 | N/A |
|  | RP-1230-J1 | Meters - Replaced | N/A | N/A | N/A | N/A | N/A | 1,353 | N/A |
|  | RP-1232-A1 | Mains - New | N/A | N/A | N/A | N/A | N/A | 46,492 | N/A |
|  | RP-1232-C1 | Mains - Unscheduled | N/A | N/A | N/A | N/A | N/A | 8,219 | N/A |
|  | RP-1232-E1 | Hydrants, Valves \& Manholes NEW | N/A | N/A | N/A | N/A | N/A | 475 | N/A |
|  | RP-1232-F1 | Hydrants, Valves, and Manholes-Rep | N/A | N/A | N/A | N/A | N/A | 1,961 | N/A |
|  | RP-1232-H1 | Services and Laterals - Replaced | N/A | N/A | N/A | N/A | N/A | 3,218 | N/A |
| 36 RP-1232-I1 |  | Meters - New | N/A | N/A | N/A | N/A | N/A | 1,675 | N/A |
|  |  |  |  |  |  | 152,934,047 | 176,384,069 | 88,838,641 |  |

KENTUCKY-AMERICAN WATER COMPANY
CASE NO: 2010-00036
CONSTRUCTION WORK IN PROGRESS - PERCENT COMPLETE
AS OF MAY 31, 2010

KENTUCKY-AMERICAN WATER COMPANY
CONSTRUCTION WORK IN PROGRESS - PERCENT COMPLETE
OCTOBER 1, 2010 TO SEPTEMBER 30,2011
DATA:_BASE PERIOD X_FORECASTED PERIOD
TYPE OF FILING: $\quad$ X_ORIGINAL_UPDATED _ REVISED
WORKPAPER REFERENCE NO(S).: WIP-1-4
Date
Construction
 CS-1201-3
Project
Number

| 2 | DV |
| :---: | :---: |
| 3 | DV |
| 4 | DV |
| 5 | DV |
| 6 | A |
| 7 | B |
| 8 | C |
| 9 | D |
| 10 | E |
| 11 | F |
| 12 | G |
| 13 | H |
| 14 | I |
| 15 | J |
| 16 | K |
| 17 | L |
| 18 | M |
| 19 | N |
| 20 | O |
| 21 | P |
| 22 | Q |
| 23 | R |
| 24 | S |
| 25 | $\mathrm{IP}-1202-6$ |
| 26 | $\mathbb{P}-1202-18$ |
| 27 | $\mathbb{P}-1202-19$ |
| 28 | $\mathrm{P}-1202-22$ |
| 29 | $\mathbb{I P}-1202-31$ |
| 30 | $\mathbb{I P}-1202-32$ |
| 31 | $\mathrm{IP}-1232-3$ |
| 32 | $\mathrm{CS}-1201-3$ |




| $\$ 30,371,813$ | $\$ 30,372,081$ |
| :--- | :--- |





\$15,015,289

 ( $\rightarrow$ 为 12,771,812 12,771,812 $2,200,000$
$1,500,000$
200,000
$1,000,000$
$2,00,000$
$7,000,000$
$12,771,812$ \$

# KENTUCKY-AMERICAN WATER COMPANY <br> CASE NO. 2010-00036 <br> COMMISSION STAFF'S FIRST REQUEST FOR INFORMATION 

Witness: Paul Herbert
12. Provide a copy of all schedules presented in the cost-of-service study, electronically, in Microsoft Office Excel format, allowing for the review of and unrestricted access to the underlying formulas.

## Response:

Please refer to the excel file that was filed electronically as
KAW_R_PSCDR1\#12_031610.xls.

For electronic version of this document, refer to KAW_R_PSCDR1\#12_031610.pdf.

# KENTUCKY-AMERICAN WATER COMPANY <br> CASE NO. 2010-00036 <br> COMMISSION STAFF'S FIRST REQUEST FOR INFORMATION 

Witness: Sheila Miller
13. a. Provide Kentucky-American's budgeted and actual regular wages, overtime wages, and total wages by employee group, by month, for the most recent two years available in the format provided as Schedule 4. Kentucky-American shall supplement its response as further information becomes available.
b. For each variance that exceeds 5 percent in a monthly period, state the reasons for the variance.

## Response:

Please see attached.
For the electronic version, please refer to KAW_R_PSCDR1\#13_031610.pdf.
Kentucky American Water
PSC Data Request 1_13
Year ending 12/31/08

|  |  |  | ACTUAL |  |  | BUDGET |  |  | VARIANCE \% |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| YEAR | MONTH | DEPT | REG | OT | TOTAL | REG | OT | TOTAL | REG | OT | TOTAL |
| 1 Admin |  |  | 50,135 | 340 | 50,475 | 74,316 | 401 | 74,717 | -32.5\% | -15.2\% | -32.4\% |
| Network |  |  | 211,491 | 42,351 | 253,842 | 262,315 | 35,904 | 298,219 | -19.4\% | 18.0\% | -14.9\% |
| Jan-08 1 Total Production |  |  | 116,562 | 11,311 | 127,873 | 161,702 | 14,775 | 176,477 | -27.9\% | -23.4\% | -27.5\% |
|  |  |  | 378,188 | 54,002 | 432,190 | 498,333 | 51,080 | 549,413 | -24.1\% | 5.7\% | -21.3\% |


| $-28.0 \%$ | $-12.2 \%$ | $-27.8 \%$ |
| :--- | ---: | ---: |
| $-13.8 \%$ | $-7.7 \%$ | $-13.0 \%$ |

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Kentucky American Water PSC Data Request $1 \_13$
Year ending 12／31／08

|  |  |  | ACTUAL |  |  | BUDGET |  |  | VARIANCE \％ |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| YEAR | MONTH | DEPT | REG | OT | TOTAL | REG | OT | TOTAL | REG | OT | TOTAL |

Explanation Work dates from 6／16－7／28；pay period over 30 days





$\stackrel{\circ}{\circ}$
$\stackrel{0}{0}$ $-10.6 \%$
$41.8 \%$
$-11.2 \%$




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$-25.3 \%$
$-17.3 \%$
$-1.7 \%$
$-13.7 \%$



78,526
273,691
161,378
513,595
O
0
$\infty$
$\infty$
82,639
291,317
174,564
548，520
86,141
299,654

75,220
268,465
163,481
507,166

S6T＇Z9カ‘9

1,077
38,195
17,004
56,276


615
40,816
21,507
62,938
9LE＇0T9

81,562
253,122
157,560
492,244
85,392
264,561
164,672
514,625

85,187
281,682
167,400
534,269
6T8‘TS8‘s
57,934
250,589
166,400
474,923
61，935
263，767
171,068
496,770
64,090
270,022
183,951
518,063
62,825
288,339
170,535
521,699
82,769
348,569
213,090
644,428
カGO＇tナO‘9
534
45,309
9,740
55,583
1,014
54,541
16,187
71,742
686
50,167
12,000
62,853
939


Explanation Work dates from 11／17－12／28；pay period over 30 days
Nov－08 11 Total
Explanation Variance due to more capitalized labor than plan
61，886
61,88
$\mathbf{2 2 3}, 786$
153,719
11 Total 439，391
11 Admin
Admin
Network
Productio
Aug－08 8 Total Production
Aug－08
Explanation

Variance due to more capitalized labor than plan

Explanation Variance due to more capitalized labor than plan
 63,404
219,855
171，951 455，210

## u！up $\forall$ OT <br> Production

Sep－08 9 Total
Explanation
Oct－08 10 Total
2008 Total
＊Timing of work dates recorded vs plan；twice yearly，the pay period will span more that 30 days．Overall，the labor variance is $6.5 \%$ favorable to plan due to more capitalized labor
Kentucky American Water
Year ending 12/31/09

|  |  |  | ACTUAL |  |  | BUDGET |  |  | VARIANCE \% |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| YEAR | MONTH | DEPT | REG | OT | TOTAL | REG | OT | TOTAL | REG | OT | TOTAL |
| 1 Admin |  |  | 61,068 | 458 | 61,526 | 66,819 | 3,045 | 69,864 | -8.6\% | -85.0\% | -11.9\% |
| Jan-10 1 Total $\begin{aligned} & \text { Network } \\ & \text { Production }\end{aligned}$ |  |  | 258,805 | 59,212 | 318,017 | 264,177 | 44,760 | 308,937 | -2.0\% | 32.3\% | 2.9\% |
|  |  |  | 140,001 | 13,613 | 153,614 | 156,591 | 18,017 | 174,608 | -10.6\% | -24.4\% | 12.0\% |
|  |  |  | 459,874 | 73,283 | 533,157 | 487,587 | 65,822 | 553,409 | 5.7\% | 11.3\% | -3.7\% |

Explanation * Variance due to more capitalized labor than plan







$\begin{array}{llll}13,074 & 504,148 & -28.8 \% & -38.0 \%\end{array}$
69,864 -2.1\% -94.5\%


-89.0\%






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$\underset{1}{-1}$
72,662
312,303
177,871
562,836



3,169
45,205
18,158
66,532
3,169
45,925
18,158
67,252
3,169
44,969
13,607
61,745

3,045
44,534
13,495
61,074
3,045
44,706
13,495
61,246
487,587 61,246
66,819
264,177
156,591
487,587
69,493
267,098
159,713
496,304
66,273
255,098
152,538
473,909
69,493
267,098
159,713
496,304
$\begin{array}{lll}0 \\ & \text { N } \\ \text { N } \\ \text { N } \\ \text { N } \\ \text { N } \\ \text { N } \\ \text { In }\end{array}$
60,646
239,985
142,443
443,074

57,984
187,289
108,087
353,360
Explanation * Variance due to more capitalized labor than plan; 3 week pay period
65,591






166
36,300
4,349
40,815

##  <br> 76,376 <br> 349 40,931 <br> | 222,546 |  |
| :--- | :--- |
| 138,190 | 16,146 | <br> 4 Admin <br> Production <br> 

$\begin{array}{lr}3 \text { Admin } & 65,425 \\ \text { Network } & 228,135 \\ \text { Production } & 174,854 \\ & 468,414\end{array}$
65,425

2 Admin
Network
Production

57,052
158,120
100,340
315,512
Explanation * Variance due to more capitalized labor than plan
Mar-09 3 Total
Feb-09

## Apr-09 4 Total

## Explanation

May-09 5 Total

## 5 Admin <br> Network Productio



Explanation * Variance due to more capitalized labor than plan


Work dates $5 / 18-6 / 30$; pay period over 30 days
6 Admin
Network
Production

6 Total
$\begin{array}{ll}\text { Admin } & 113,876 \\ \text { Network } & 341,440 \\ \text { Production } & 214,610 \\ & 669,926\end{array}$
79,947


$$
\begin{array}{r}
73,577 \\
219,499 \\
136,793 \\
429,869
\end{array}
$$

5 Admin 73,577

5 Total Production

Jun-09
Explanation
Kentucky American Water
Year ending 12/31/09

|  |  |  | ACTUAL |  |  | BUDGET |  |  | VARIANCE \% |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| YEAR | MONTH | DEPT | REG | OT | TOTAL | REG | OT | TOTAL | REG | OT | TOTAL |

Explanation * Variance due to more capitalized labor than plan
69,442 $-17.8 \%-58.7 \% \quad 14.3 \%$

$\stackrel{\circ}{\stackrel{\circ}{4}}$





$-10.3 \% \quad-3.1 \%$

* Timing of work dates recorded vs plan; twice yearly, the pay period will span more that 30 days. Overall, the labor variance is $3 \%$ favorable to plan due to more capitalized labor


# KENTUCKY-AMERICAN WATER COMPANY <br> CASE NO. 2010-00036 <br> COMMISSION STAFF'S FIRST REQUEST FOR INFORMATION 

Witness: Michael Miller
14. Provide a complete copy of all wage, compensation, and employee benefits studies, analyses, and surveys that Kentucky-American has conducted, commissioned, or used.

## Response:

The Company has used a wage band survey study prepared by its corporate parent.
Providing the study publicly would place the Company at a competitive disadvantage. Therefore, the Company has filed a Petition for Confidential Treatment of the study contemporaneously with these responses. The Company will provide copies of the study to all parties in this case upon execution of an appropriate confidentiality agreement.

For the electronic version, refer to KAW_R_PSCDR1\#14_031610.pdf.

## KENTUCKY-AMERICAN WATER COMPANY <br> CASE NO. 2010-00036 <br> COMMISSION STAFF'S FIRST REQUEST FOR INFORMATION

Witness: Sheila Miller
15. State for each employee group the amount, percentage increases, and effective dates for general wage increases and, separately, for merit increases granted for calendar years 2007, 2008, and 2009, the base period and the forecasted period.

## Response:

2007
November 1, 2007
Outside Union
3.0\%

April 1, 2007
Non-bargaining
3.5\%

2008
November 1, 2008
Outside Union
3.0\%

April 1, $2008 \quad$ Non-bargaining 3.6\%
Inside union decertified 1/28/08 and was given a $3 \%$ increase on $1 / 2 / 08$.

| 2009 | November 1, 2009 | Outside Union | $3.0 \%$ |
| :--- | :--- | :--- | :--- |
| April 1, 2009 | Non-bargaining | $3.25 \%$ |  |

Base Year
12 mo ending
05/31/10 November 1, 2009
Outside Union 3.0\%
January 1, 2010
Non-bargaining 2.25\%
Forecast
12 mo ending
09/30/11 November 1, 2010
Outside Union 3.0\%
January 1, 2010
Non-Union Hourly 3.5\%

Salary 3.0\%
For the electronic version, refer to KAW_R_PSCDR1\#15_031610.pdf.

# KENTUCKY-AMERICAN WATER COMPANY <br> CASE NO. 2010-00036 <br> COMMISSION STAFF'S FIRST REQUEST FOR INFORMATION 

Witness: Michael Miller
16. a. Provide complete details of all early retirement plans or other employee reduction programs that Kentucky-American or American Water Works Company ("American Water") intends to offer to its employees during the base period and the forecasted test period.
b. For each program listed above, provide all cost-benefit analyses or studies upon which the program is based.

## Response:

a. Neither Kentucky-American nor American Water Works Company intends to offer any type of early retirement plan to its employees during the forecasted test period.
b. Not applicable

For electronic version, please refer to KAW_R_PSCDR1\#16_031610.pdf.

# KENTUCKY-AMERICAN WATER COMPANY <br> CASE NO. 2010-00036 <br> COMMISSION STAFF'S FIRST REQUEST FOR INFORMATION 

Witness: Michael Miller
17. a. List all fringe or other employee benefits available to Kentucky-American employees and indicate which benefits, if any, are limited to management employees.
b. For each benefit listed above, state the expected cost of each benefit in the base period and the forecasted test period and its historical cost for each of the two years preceding the base period.
c. List each change in fringe or other employee benefits or the availability of such benefits that has occurred within two years of the start of the base period.

## Response:

a. Kentucky American provides: 1) Group Health Coverage; 2) Group Dental Coverage; 3) Prescription Drug Coverage; 4) Group Vision Coverage; 5) Group Term Life Insurance, 6) Voluntary Group Term Life Insurance for Employee, Spouse and Children (additional contribution required); 7) Employee Assistance Plan; and 8) Disability Income Plan (Short Term). For details of these benefits please see attachments 1 and 2 of the response to Staff question 21.

Also, Kentucky American provides: 9) Defined Benefit Pension Plan (eligibility requirements apply); 10) Post Retirement Health Care Plan (eligibility requirements apply); 11) Defined Contribution Pension Plan (for employees not eligible for Defined Benefit Plan); 12) 401K Company Match (more generous benefit for employees with Defined Contribution pension Plan); 13) Paid Vacation (varies depending on years of service); 14) Paid Holidays; 15) Education Assistance Plan; and 16) A "Reserved Share" program for all employees and retirees as a part of the Initial Public Offering undertaken by American Water Works Company, Inc. in April, 2008.

There are also two Incentive Plans for which certain employees are eligible. The Annual Incentive Plan is available to all exempt salaried employees, and a Long Term Incentive Plan, for which only key salaried employees are eligible. Finally, an Employee Stock Purchase Plan was instituted in conjunction with the recent Initial Public Offering of publicly traded equity of American Water Works Company, Inc.

| b. | 2008 | 2009 | Base Period | Forecast |
| :--- | ---: | ---: | ---: | ---: |
| Group Insurance | $\$ 1,104,724$ | $\$ 1,173,186$ | $\$ 1,350,581$ | $\$ 1,403,138$ |
| Pensions | 622,650 | $1,386,324$ | $1,262,429$ | $1,267,732$ |
| OPEB's | 577,728 | $1,000,212$ | 907,004 | 910,398 |
| 401(k) | 99,336 | 106,973 | 117,841 | 130,830 |
| Incentive Plan | 397,284 | 360,347 | 347,830 | 376,757 |
| DCP | 78,902 | 97,228 | 107,480 | 151,641 |
| Retirees Med Oper Ex | 10,260 | 8,261 | 6,650 | 10,318 |
| ESPP | 0 | 6,448 | 2,689 | 7,323 |

c. The only changes to benefits made within the specified period have been the institution of an Employee Stock Purchase Plan and the Reserved Share program, both in conjunction with the recent Initial Public Offering of publicly traded equity of American Water Works Company, Inc. (as already noted in part a. above). The Long Term Incentive Plan was also changed in conjunction with the recent Initial Public Offering of publicly traded equity of AWWC.

For electronic version, please refer to KAW_R_PSCDR1\#17_031610.pdf.

## KENTUCKY-AMERICAN WATER COMPANY <br> CASE NO. 2010-00036 <br> COMMISSION STAFF'S FIRST REQUEST FOR INFORMATION

Witness: Sheila Miller
18. List separately the budgeted and actual number of full- and part-time employees by employee group, by month and by year, for the five years immediately preceding the base period, the base period, and the forecasted period.

## Response:

Please see attached.
For electronic version, see KAW_R_PSCDR1\#18_031610.pdf
Kentucky American Water Company Case No. 2010-00031
PSCDR1\#18

5 YEARS PRIOR TO BASE


# KENTUCKY-AMERICAN WATER COMPANY <br> CASE NO. 2010-00036 <br> COMMISSION STAFF'S FIRST REQUEST FOR INFORMATION 

Witness: Michael Miller
19. Provide a detailed description of each Other Post-retirement Employee Benefits package that Kentucky-American or American Water provides to Kentucky-American employees.

## Response:

Please see attached Summary Descriptions for Post Retirement benefits provided to eligible Kentucky American employees through the American Water Retiree Welfare Plan. Pages 2-22 relate to individuals who were not eligible for retirement or early retirement as of January 10, 2003. Pages 23-34 relate to those individuals who were eligible for retirement or early retirement as of that date

For the electronic version, please refer to KAW_R_PSCDR1\#19_031610.pdf.


October 23, 2009

2010 Open Enrollment

## Dear American Water Retiree:

The 2010 healthcare open enrollment period for retirees will begin on October 26, 2009 and extend through November 16, 2009. During this time:

- You may change medical plans or choose to decline coverage
* You may add or delete dependents under our medical plan or choose to decline coverage


## What's New Effective January 1, 2010?

- Expansion of full-time student definition
- Mental Health Parity and Addiction Equity Act
* Michelle's Law

Information is attached concerning our annual obligation to provide notice as required under federal law for the following:

* Women's Health and Cancer Rights Act
* Health Insurance Portability and Accountability Act of 1996 (HIPAA)
- Children's Health Insurance Program Reauthorization Act of 2009 (CHIPRA)
- Summary Material Modification - Mental Health Parity and Addiction Equity Act of 2008 and Michelle's Law

The health care crisis is a very complex issue in which we all have a role. We urge you to take steps to be part of the solution for a healthier future. Some services that could help you and the company are available:

* Horizon's website www. horizonblue.com/nationalaccounts. We encourage you to use this website to access generic vs. brand drug alternatives.

Please follow the instructions for each benefit plan listed below:

## - Medical Plan RetireefDependent Under Age 65

Decide if you want to remain in your current Medical Plan, change Medical Plans, enroll or elect to decline coverage (see chart below for costs). Coverage provisions will not change. Attached is a Medical Plan Comparison chart that allows you to view the services and rembursements allowed

## 2010 Retiree Open Enroliment

Page 2
under the plans. Please note that mental health and chemical dependency benefits will be treated in the same manner as other medical, hospital and surgical benefits under the coverage option that you have chosen (see attached Summary of Material Modifications). If you make no election, you will automatically remain in the same plan; you should only complete the attached enrollment form if you are making a change and return it to the Benefits Service Center by November 16, 2009.

Your healthcare contributions beginning January 1, 2010 are listed below. These contributions may change in the future as we review our benefits package.

## Medical and Dental Choices

2010 Contribution Rates - Retirees Under Age 65
Contribution Rates are based on the age of the retiree at retirement. Your contribution rates for 2010 have changed. The rates consist of three parts:

- The surcharge based on your age at retirement, and
- $50 \%$ of the current active monthly contribution, which will change annually, and
- The medical plan you select

Your 2010 contribution rates will be as follows:

|  | Pre-65 |  |  |  |  |  |  | Standard PPO |  | Premium PPO |  | EPO |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Age at <br> Retirement | Single | Two or More <br> Participants | Single | Two or More <br> Participants | Single | Two or More <br> Participants |  |  |  |  |  |  |  |
| 55 | $\$ 130$ | $\$ 163$ | $\$ 138.50$ | $\$ 180$ | $\$ 141.50$ | $\$ 184$ |  |  |  |  |  |  |  |
| 56 | $\$ 120$ | $\$ 153$ | $\$ 128.50$ | $\$ 170$ | $\$ 131.50$ | $\$ 174$ |  |  |  |  |  |  |  |
| 57 | $\$ 110$ | $\$ 143$ | $\$ 118.50$ | $\$ 160$ | $\$ 121.50$ | $\$ 164$ |  |  |  |  |  |  |  |
| 58 | $\$ 100$ | $\$ 133$ | $\$ 108.50$ | $\$ 150$ | $\$ 111.50$ | $\$ 154$ |  |  |  |  |  |  |  |
| 59 | $\$ 90$ | $\$ 123$ | $\$ 98.50$ | $\$ 140$ | $\$ 101.50$ | $\$ 144$ |  |  |  |  |  |  |  |
| $60-61$ | $\$ 80$ | $\$ 113$ | $\$ 88.50$ | $\$ 130$ | $\$ 91.50$ | $\$ 134$ |  |  |  |  |  |  |  |
| $62-64$ | $\$ 30$ | $\$ 63$ | $\$ 38.50$ | $\$ 80$ | $\$ 41.50$ | $\$ 84$ |  |  |  |  |  |  |  |

If you're age 65 or older'.. You will retain the same medical plan you're currently enrolled in, so you do not need to take any action during the enrollment period (unless you are adding or dropping dependents).

If you, as the retiree, are age 65 or older...The monthly contributions you pay for health care coverage are based on the retiree's age even if your dependent is under age 65. There will be no increase in your 2010 monthly contributions. They remain as follows:

- Retiree:
$\$ 50$
- Retiree plus spouse: $\$ 100$
- Family:\$125


## Medicare D

With this letter, we have included information for you if you are age 65 or about to turn age 65 . The attached Notice of Creditable Coverage is about Medicare Part D's prescription drug benefit. You will likely find that your American Water retiree medical plan provides more generous prescription drug benefits than Fart D and you should not take any action during the Medicare Part D enrollment
period. If you do enroll in Part D, you will lose your comprehensive American Water medical and prescription drug coverage.

## What Do You Need To Do?

Medical Plan - Decide if you want to remain in your current Medical Plan, change medical plans, or decline coverage. If you make no election, you will automatically remain in the same plan; you should only complete the attached enrollment form if you are making a change to current election or adding or deleting dependents and return it to the Benefits Service Center by November 16, 2009.

## Special Note - Dependent Eligibility for 2010 Newly Added Dependents

You will be required to provide proofs to verify the eligibility of each dependent you add to your group insurance plans. For proof of marital status you will be required to provide a marriage certificate and a current tax return showing "married filing jointly" or "married filing separately". For each dependent child you will be required to provide a birth certificate. If the dependent is not your natural born child, you will be required to submit additional documentation. If you are adding a child who is between the ages of 19 and 23 , you will be required to provide proof that your child is a full-time student with a total of 12 credit hours for undergraduate studies or 9 credit hours for graduate studies. Effective January 1, 2010, if the institution is a post secondary technical school that does not utilize the credits measurement criteria, you will be required to provide a letter from the school confirming the length of the current program and your child's full-time attendance. When your enrollment form is received and it is determined that additional documentation is needed for your newly enrolled dependents, the Benefits Service Center will contact you.

Please contact the Benefits Service Center at 1.866 .888 .8269 if you have any questions.
Please Note: After Open Enrollment, you will only be able to make changes to your benefits if you experience a qualified family status change and notify the BSC within 31 days of the status change.

Sincerely,


Deborah L. Krauss-Kelleher

## DKK/jhs

Attachments

## Women's Health and Cancer Rights Act

On October 21, 1998, a new federal law, the Women's Health and Cancer Rights Act, became effective. This law requires group health plans that provide coverage for mastectomies to also cover reconstructive surgery and prosthesis following mastectomies.

All medical plan options are in compliance with this law. The law mandates that a member receiving benefits for a medically necessary mastectomy who elects breast reconstruction after the mastectomy, will also receive coverage for:

- Reconstruction of the breast on which the mastectomy has been performed
- Surgery and reconstruction of the other breast to produce a symmetrical appearance
- Prosthesis
- Treatment of the physical complications of all stages of mastectomy, including lymphedemas.

This coverage will be provided in consultation with the attending physician and the patient, and will be subject to the same annual deductibles and coinsurance that apply for the mastectomy.

If you have any questions about coverage of mastectomies or reconstructive surgery, please contact the Horizon Member Services number on the back of your Horizon BC/BS ID card.

## Medicare Part D Notice of Creditable Coverage for employees over 65 still actively at work

If you are actively at work at age 65 or older and then you retire and become Medicareeligible you must call the Benefits Service Center to request a Notice of Creditable Coverage to avoid the Medicare Part D late enrollment fee.

## Continuing Coverage

If your coverage or a dependent's coverage is terminated during the year, you may be able to continue some benefits coverage as provided for under a federal law known as the Consolidated Omnibus Reconciliation Act of 1986 (COBRA), as amended.

## Right to Amend or Terminate the Plans

American Water reserves the right to amend or terminate at any time the benefits described in this benefit guide without prior notice to participants.

## Plan Documents Govern

This benefit guide highlights some important information about these benefit plans. If a question ever arises concerning the nature and extent of the benefits under any of the plans described here, the terms of the plans as described in the actual legal documents of the plans will always govern.

## NOTICE OF PRIVACY PRACTICES

HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT OF 1996

## THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

This Notice describes the practices of the American Water ("Company") group health plans (the "Plan") for protecting the privacy of protected health information. "Protected health information" is individually identifiable health information created or received by or on behalf of the Plan, that relates to your physical or mental health or condition, the health care provided to you, or payment for your health care.

This Notice describes how the Plan may use, disclose, and safeguard protected health information. The Plan is required by law to maintain the privacy of protected health information and to give you this Notice about its privacy practices and legal duties with respect to such health information.

Several of the health benefit programs offered to you under the Plan are administered by other entities (the "Third Party Administrators") on behalf of the Plan. This Notice only addresses the privacy practices of the Third Party Administrators for the Plan. You should be aware that there are also several health benefit programs offered to you under the Plan which are insured by the insurance companies. If you participate in any of the insured benefits under the Plan, you will receive a separate notice of privacy practices from the applicable insurance company.

Your personal doctor, hospital or other health care provider may have different policies or practices regarding use and disclosure of your health information created in the doctor's office or hospital. This Notice does not address the health information policies or practices of your health care providers.

## HOW THE PLAN OR THIRD PARTY ADMINISTRATORS MAY USE AND DISCLOSE PROTECTED HEATH INFORMATION

The following categories describe the different ways that the Plan or Third Party Administrator (on the Plans' behalf) may use and disclose protected health information. Not every use or disclosure within a category will be listed.

For Treatment. It is unlikely, but possible that the Third Party Administrator or Plan may disclose protected health information to a health care provider that is treating you. For example, if you were unconscious or otherwise unable to provide your medical history as a result of an accident, the Third Party Administrator or Plan might disclose
protected health information to an emergency room physician regarding the nature of other treatments or prescription drugs you have received.

For Payment. The Third Party Administrator or Plan may use and disclose protected health information so that claims for payment with respect to health care services and supplies you receive from various health care providers may be processed and paid to the extent permitted under the terms of the Plan. For example, the Third Party Administrator may receive and maintain information about the prescription drugs you receive, or about surgery you receive at a hospital, in order to process the related claims for payment. As part of the claims process, the Third Party Administrator may input the information about the health care services or supplies you receive into an electronic claims processing system maintained by a nonaffiliated business.

For Heath Care Operations. The Third Party Administrator or Plan may use and disclose protected health information for operations for the Plan. For example, the Third Party Administrator may use protected health information for case management or to make certain that the Plan Participants receive the health benefits to which they are entitled. Other examples include business planning, customer service, audits, underwriting, actuarial studies, and fraud and abuse detection. The Third Party Administrator or the Plan also may disclose protected health information to certain nonaffiliated vendors who assist the Plan with its health care operations, including benefits administration.

To the Company, as Sponsor. The Plan or Third Party Administrator may disclose protected health information to the Company, as the sponsor of the Plan, to permit the Company to perform Plan administration functions. For example, the Company, as sponsor, may contact the Third Party Administrator regarding a member's question about claims, benefits, etc. The Third Party Administrator or Plan also may disclose summary health information about the Plan enrollees to the Company, as sponsor, in order for the Company to obtain premium bids for the health insurance coverage offered through the Plan or to decide whether to modify, amend or terminate the Plan.

Special Situations. The Third Party Administrator also may use or disclose protected health information for the following purposes:

Alternative Care. To inform you about alternative treatments, therapies, health care providers, or settings of care.

Health-Related Benefits, Products and Services. To inform you about case management or care coordination, or about a health-related product or service (or payment for such product or service) that is provided by, or included in your plan benefits. This includes informing you about health care providers in provider network, replacement of, or enhancements to, the Plan, and health-related products or services available only to Plan members that add value to, but are not part of, the Plan Benefits.

Research. Under certain circumstances and subject to limitations and conditions imposed by law, for research purposes.

As Required By Law. When required by federal, state, or local law.
To Avert Serious Threat to Health or Safety. As permitted under law, when necessary to prevent a serious threat to your health and safety, or that of another person, or the public.

Organ and Tissue Donation. To appropriate organizations as necessary to facilitate your organ or tissue donation and transplantation.

Worker's Compensation. To comply with laws relating to workers' compensation or similar programs.

Health Oversight and Public Health Activities. To public health authorities for their authorized activities, including, for example, oversight, audits, investigations, inspections, and licensure. These activities are necessary for the government to monitor the health care system, certain government programs, and compliance with civil rights laws. The Third Party Administrator or Plan also may disclose protected health information for public health activities, including to prevent or control disease, injury or disability; to report child abuse, neglect or domestic violence; or to notify people of recalls of products they may be using.

Lawsuits and Disputes. To respond to a subpoena, discovery request, summons or other court or administrative order or other lawful process.

Others Involved in Your Health Care. To a family member of friend that you have identified as being involved in your health care or payment of your health care, unless you object. The Third Party Administrator or Plan also may disclose protected health information to an entity assisting in a disaster relieve effort, so that family members may be notified about your condition, status and location.

Coroners, Medical Examiners, and Funeral Directors. To a coroner or medical examiner for purposes of identifying a deceased person, determining the cause of death, or for other duties authorized by law. The Third Party Administrator or Plan may also release protected health information to funeral directors, as necessary to carry out their duties.

Military and Veterans. As required by military command authorities, if you are a member of the United States armed forces.

National Security, Intelligence Activities, and Protective Services. To authorized federal officials (1) for intelligence, counterintelligence, and other national security activities authorized by law; and (2) to enable them to provide protection to the President
of the Unites States, other authorized persons or foreign heads of state or to conduct special investigations.

Inmates. To a correctional institution or law enforcement official if you become an inmate in a correctional institution or are placed under the custody of a law enforcement official. Such release would be necessary (1) for the institution to provide you with health care; (2) to protect your health and safety or the health and safety of others; or (3) for the safety and security of the correctional institution and its personnel.

Law Enforcement. If asked to do so by a law enforcement official to provide information to identify or locate a suspect, fugitive, material witness, or missing person; about the victim of a crime under certain limited circumstances; about a death that may be the result of criminal conduct; about criminal conduct at Company sites; or, in emergency circumstances, as necessary to report a crime or certain related information.

## OTHER USES AND DISCLOSURES OF PROTECTED HEALTH INFORMATION

Other uses and disclosures of protected health information not covered by this Notice or by law may be used only with your written authorization and you may with certain exceptions revoke such authorization, in writing, at any time. Revocation will be effective only on a going forward basis; the Third Party Administrator or Plan will be unable to take back any disclosures the Third Party Administrator or Plan already may have while your authorization was in effect.

## YOUR RIGHTS REGARDING PROTECTED HEALTH INFORMATION

You have the rights described below regarding protected health information. Generally, these rights are accessible through the Third Party Administrator, unless the plan has protected health information that the Third Party Administrator does not have; this would be rare.

Right to Inspect and Copy. With certain exceptions, you may inspect and copy protected health information. To inspect and copy protected health information, you must submit a written request to the Third Party Administrator. You may be charged a fee for the cost of copying, mailing or other supplies associated with your request. If you agree in advance, the Third Party Administrator or Plan may provide a summary or explanation of the requested information instead of allowing inspection and copying for the information. You also would need to agree in advance to any fees for providing a summary or explanation.

A request to inspect and copy may be denied in limited circumstances. If you are denied access to protected health information, you may request that the denial be reviewed. If the grounds for denial of access are reviewable in accordance with law, the Third Party Administrator will designate a licensed health care professional to review your request and the denial.

Right to Amend. If you believe that the protected health information is incorrect or incomplete, you may ask that the information be amended. To request an amendment, you must submit a written request to the Third Party Administrator. A request for an amendment may be denied if the request is not in writing or does not include a reason to support the request, or if you ask to amend protected health information that: was not created by the Third Party Administrator or Plan (unless the person or entity that created the information is no longer available to make the amendment), or is not part of the information which you would be permitted to inspect and copy; or is accurate and complete.

Right to Accounting or Disclosures. You may request an accounting report of certain disclosures the Third Party Administrator or Plan has made of protected health information for certain reasons other than for treatment, payment and health care operations. Please keep in mind that most disclosures of protected health information will be for purposes of payment or health care operations, and therefore would not be included in an accounting report.

You must submit a request for an accounting report to the Third Party Administrator. You will need to state a time period of disclosures that may not be longer than six years prior to the date of your request, and may not include dates before April 14, 2003. The first accounting report you request within a 12 -month period will be free. For additional lists requested during that period, you may be charged a fee for the costs of providing the accounting report. You will be notified of the cost involved and you may choose to withdraw or modify your request before any cost is incurred.

Right to Request Restrictions. You may request a restriction on certain uses and disclosures of protected health information. You also may request a restriction on disclosures of protected health information to someone who is involved in your care or payment for your care, like a family member or close friend. Neither the Plan nor the Third Party Administrator is required to agree to your request. If the Third Party Administrator or Plan does agree, the Third Party Administrator or Plan will comply with your request, unless the information is needed to provide you with emergency treatment and the Third Party Administrator or Plan discloses such information to a health care provider who will provide such treatment to you. Also, the Plan may at any time terminate its agreement to comply with the restriction, but only on a going-forward basis with respect to protected health information created or received after the termination.

To request a restriction, you must submit a request to the Third Party Administrator. Your request must state (1) what information you want to limit; (2) whether you want to limit use, disclosure or both; and (3) to whom you want the limits to apply.

Right to Request Confidential Communications. You may request that the Third Party Administrator or Plan communicate with you about protected health information by alternative means or at alternative locations if you clearly state that disclosure of such information could endanger you. For example, you can ask that the Third Party Administrator send you the explanation of benefits forms on claims you file for benefits under the Plan at work or by mail to a specified address. To request confidential communications, you must send a written request to the Third Party Administrator. The Plan will not ask you the reason for your request, but the Plan does require that your request state that you believe that the information could endanger you if it were not communicated by the alternative means or the alternative location you request. Your request must specify how or where you wish to be contacted. The Plan will accommodate all reasonable requests.

Right to a Paper Copy of This Notice. You may request a paper copy of this Notice, even if you have agreed to receive this Notice Electronically. To obtain a paper copy of this notice at any time, contact the Plan as directed at the end of this notice.

Right to Submit a Complaint. You may complain in writing to the Plan if you believe your privacy rights have been violated. Written complains may be submitted to the Third Party Administrator or the Plan, as directed at the end of this Notice.

You also may file a complaint with the Secretary of the United States Department of Health and Human Services if you believe that your privacy rights have been violated.

We support your rights as described above. You will not be retaliated against for exercising any of these rights, including the filing of a complaint with the Third Party Administrator, the Plan, or the Secretary of the United States Department of Health and Human Services.

## EFFECTIVE DATE, AND CHANGES TO THIS NOTICE

The Plan is required to abide by the terms of this Notice as currently in effect. This notice is effective as of the date shown in the header. The Plan reserves the right to change its privacy practices and this Notice at any time. The Plan reserves the right to make the revised or changed practices and Notice effective for protected health information the Plan or Third Party Administrator already has about you, as well as any information the Plan of Third Party Administrator may receive in the future. Any revised notice will state its effective date. The Plan will notify the employee/policyholder (not each dependent) within 60 days of making material changes to this Notice. You may request a copy of the Notice at any time. The Plan reserves the right to send future Notices by email with consent.

## CONTACT INFORMATION

Please contact the Third Party Administrator if you have any questions, or to exercise your rights under this Notice, or to submit a complaint. The Third Party Administrator may be reached at the number and address listed on your identification card.

Alternatively, you may contact the Plan if you have any questions about this Notice or the Plan's privacy practices, or to submit a complaint. Please contact the Plan as follows:

American Water<br>Benefits Service Center 1025 Laurel Oak Road Voorhees, NJ 08043<br>Telephone: (866) 888-8269

# Summary of Material Modifications to the American Water Group Insurance Plan Special Enrollment 

## CHILDREN'S HEALTH INSURANCE PROGRAM REAUTHORIZATION ACT OF 2009

The expanded Children's Health Insurance Program "CHIP" faw creates a new Health Insurance Portability And Accountability Act of 1996 "HIPAA" special enrollment period for eligible employees and their dependents if they become ineligible for Medicaid or "CHIP" and lose coverage, or if they become eligible for a state's premitum assistance program. Untike current HIPAA special enrollment rights, which give employees 30 days after a triggering event to enroll, employees experiencing a Medicaid/"CHIP" event have 60 days from the date of the event to request enrollment in the employer plan.

## The following is an outline of Special Enrollment Rights

If you are declining enrollment with the American Water Medical Plans for yourself or your dependents (including your spouse) because of other health insurance or group health plan coverage, you may be able to enroll yourself and your dependents in the American Water plan due to the following circumstances:

* If you or your dependents lose eligibility for that other coverage (or if the employer stops contributing towards you or your dependents' other coverage),
* If you or your dependents lose Medicaid or Children's Health Insurance Program "CHIP" coverage as a result of a loss of eligibility for such coverage, or
* If you or your dependents become eligible for a premium assistance subsidy under Medicaid or " CHIP ".

However, you must request enrollment within 31 days after you or your dependents' other coverage ends; or after the employer stops contributing toward the other coverage; or within " 60 days" in the case of changes related to Medicaid or "CHIP".

In addition, if you have a new dependent as a result of marriage, birth, adoption, or placement for adoption, you may be able to enroll yourself and your dependents. However, you must request enrollment within 31 days after the marriage, birth, adoption, or placement for adoption.

To request special enrollment or obtain more information, contact:

American Water Benefits Service Center<br>P. O. Box 5600<br>Cherry Hill, NJ 08034<br>866-888-8269

# Summary of Material Modifications to the American Water Group Insurance Plan 

## MENTAL HEALTH PARITY AND ADDICTION EQUITY ACT OF 2008

In general, effective January 1,2010 , mental heaith and substance abuse benefits will be treated in the same manner as other medical/hospital/surgical benefits under the Plan. Therefore, the following changes will become effective next year.

- The cap on the maximum number of days of inpatient treatment of alcoholism, drug abuse or mental disorders is eliminated.
- For inpatient treatment of alcoholism and drug abuse, there will no longer be a limit to courses of treatment during your lifetime.
- For outpatient treatment of alcoholism, drug abuse or mental disorders, there will no longer be a limit on the number of days of treatment in a calendar year.
- Visits to mental health and substance abuse providers will be subject to the same payment terms (including copays, coinsurance, etc.) as other medical/hospital/surgical benefits under the coverage option that you have chosen.

Further refinement of these provisions may be necessary once the expected guidance is issued by the government under the Mental Health Parity Act.

## MICHELLE'S LAW

## Extension of Coverage for Student-Dependent on Medically Necessary Leave of Absence

The Plan provides that a dependent child over age 19 continues to be eligible for coverage until age 23 if they are attending high school or attending an accredited learning institution with at least 12 credits. Effective January 1,2010, any such child who takes a "medically necessary leave of absence" from school is entitled to the same benefits as if that dependent child continued to be enrolled as a student.

For purposes of this provision, a "medically necessary leave of absence" occurs when the child starts a leave of absence from the education institution that (i) commences while the child is suffering from a serious ilness or injury, (ii) is medically necessary, and (iii) would ordinarily cause the child to lose fulltime student status for purposes of coverage under the terms of the Plan.

To continue participation under this provision, the Plan must be provided with a certification by a treating physician that verifies that (i) the child is suffering from a serious illness or injury, and (ii) the leave of absence is medically necessary.

The Plan will treat a child who meets the requirements of this provision as a student eligible to participate in the Plan (assuming other eligibility requirements are satisfied) for one year after the first day of the medically necessary leave of absence or until the date on which such coverage would otherwise terminate under the terms of the Plan (such as attaining the maximum age for full-time student coverage), whichever occurs first.

# Important Notice from American Water About Your Prescription Drug Coverage and Medicare Annual Notice of Creditable Coverage 

Please read this notice carefully and keep it where you can find it. This notice has information about your current prescription drug coverage with American Water and about your options under Medicare's prescription drug coverage. This information can help you decide whether or not you want to join a Medicare drug plan. Information about where you can get help to make decisions about your prescription drug coverage is at the end of this notice.

1. Medicare prescription drug coverage became available in 2006 to everyone with Medicare. You can get this coverage if you join a Medicare Prescription Drug Plan or join a Medicare Advantage Plan (like an HMO or PPO) that offers prescription drug coverage. All Medicare drug plans provide at least a standard level of coverage set by Medicare. Some plans may also offer more coverage for a higher monthly premium.
2. American Water has determined that the prescription drug coverage offered by the Group Insurance Plan for Employees of American Water Works Co. Inc. and Its Designated Subsidiaries is, on average for all plan participants, expected to pay out at least as much as standard Medicare prescription drug coverage pays and is considered Creditable Coverage.

Because your existing coverage is, on average, at least as good as standard Medicare prescription drug coverage, you can keep this coverage and not pay a higher premium (a penalty) if you later decide to join a Medicare drug plan.

You can join a Medicare drug plan when you first become eligible for Medicare and each year from November $15^{\text {th }}$ through December $31^{\text {st }}$. This may mean that you may have to wait to join a Medicare drug plan and that you may pay a higher premium (a penalty) if you join later. You may pay that higher premium (a penalty) as long as you have Medicare prescription drug coverage. However, if you lose creditable prescription drug coverage, through no fault of your own, you will be eligible for a sixty ( 60 ) day Special Enroilment Period (SEP) because you lost creditable coverage to join a Part D plan. In addition, if you lose or decide to leave American Water's coverage; you will be eligible to join a Part D plan at that time using an Employer Group Special Enrollment Period. You should compare your current coverage, including which drugs are covered at what cost, with the coverage and costs of the plans offering Medicare prescription drug coverage in your area.

If you decide to join a Medicare drug plan, your American Water coverage will be affected. See below for more information about what happens to your current coverage if you join a Medicare drug plan.

If you do decide to join a Medicare drug plan and drop your American Water prescription drug coverage, be aware that you and your dependents will not be able to get this coverage back.

You should also know that if you drop or lose your coverage with American Water and don't join a Medicare drug plan within 63 continuous days after your current coverage ends, you may pay a higher premium (a penalty) to join a Medicare drug plan later.

If you go 63 continuous days or longer without prescription drug coverage that's at least as good as Medicare's prescription drug coverage, your monthly premium may go up by at least $1 \%$ of the base beneficiary premium per month for every month that you did not have that coverage. For example, if you go nineteen months without coverage, your premium may consistently be at least $19 \%$ higher than the base beneficiary premium. You may have to pay this higher premium (a penalty) as long as you have Medicare prescription drug coverage. In addition, you may have to wait until the following November to join.

For more information about this notice or your current prescription drug coverage...

Contact the Benefits Service Center at 866-888-8269. NOTE: You'll get this notice each year. You will also get it before the next period you can join a Medicare drug plan, and if this coverage through American Water changes. You also may request a copy.

For more information about your options under Medicare prescription drug coverage...

More detailed information about Medicare plans that offer prescription drug coverage is in the "Medicare \& You" handbook. You'll get a copy of the handbook in the mail every year from Medicare. You may also be contacted directly by Medicare drug plans.

For more information about Medicare prescription drug coverage:

- Visit www.medicare.gov
- Call your State Health Insurance Assistance Program (see the inside back cover of your copy of the "Medicare \& You" handbook for their telephone number) for personalized help,
- Call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-4862048.

If you have limited income and resources, extra help paying for Medicare prescription drug coverage is available. For information about this extra help, visit Social Security on the web at www socialsecurity cov, or call them at 1-800-772-1213 (TTY 1-800-3250778).

Remember: Keep this Creditable Coverage notice. If you decide to join one of the Medicare drug plans, you may be required to provide a copy of this notice when you join to show whether or not you have maintained creditable coverage and whether or not you are required to pay a higher premium (a penalty).

Date:<br>Name of Entity/Sender:<br>Contact Office:<br>Address:<br>Phone Number:<br>10/31/09<br>American Water<br>Benefits Service Center<br>1025 Laurel Oak Road, Voorhees, NJ 08043<br>866-888-8269



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| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  |  |  |
|  | Pre-65 Plans |  |  |  |  | Post-65 Plan* |
| Plan Feature | Standard PPO |  | Premium PPO |  | EPO | Medicare Supplement Plan |
| Network coverage type | In-network | Out-of-network | in-network | Out-of-network | In-network benefits only |  |
| Office visits (primary care and speciatist) | 80\% after deductible | 60\% after deductible | $100 \%$ after $\$ 15$ copay | $70 \%$ after deductible | 100\% after \$15 copay | 80\% after deductible |
| Allergy testing and treatment centers | 80\% after deductible | 60\% after deductible | $100 \%$ after $\$ 15$ copay | $70 \%$ after deductible | 100\% | 80\% after deductible |
| Diagnostic $x$-ray and lab | 80\% after deductible | 60\% after deductible | Independent Lab: 100\% <br> Physician's Office: $100 \%$ atter \$15 copay | $70 \%$ after deductible | 100\% | 80\% after deductible |
| Hospital inpatient services | 80\% after deductible | 60\% after deductible | 90\% | $70 \%$ after deductible and $\$ 250$ copay per admit | $100 \%$ after $\$ 100$ copay per admit | $100 \%$ for first 120 days; $80 \%$ thereatter |
| Outpatient surgery | 80\% after deductible | 60\% after deductible | 100\% | $70 \%$ after deductible | 100\% | 80\% after deductible |
| Outpatient preadmission testing | 80\% after deductible | 60\% after deductible | 100\% | $70 \%$ after deductible | 100\% | 80\% after deductible |
| Ambulance (if medically necessary) | 80\% after deductible | 80\% after deductible | 90\% | 90\% | 100\% | 80\% after deductible |
| Emergency room | 80\% after deductible | 60\% after deductible | $100 \%$ after $\$ 25$ copay (waived if admitted) | $\begin{gathered} 100 \% \text { after } \$ 25 \\ \text { copay (waived if } \\ \text { admitted) } \end{gathered}$ | $100 \%$ atter $\$ 35$ copay (waived if admitted) | 80\% after deductible |
| Hospitalalternatives |  |  |  |  |  |  |
| Home health care | $80 \%$ after deductible (120visit maximum per calendar year) | 60\% after deductible (120-visit maximum per calendar year) | $90 \%$ (120-visit maximum per calendar year) | $70 \%$ after deductible (120visit maximum per calendar year) | 100\% | $80 \%$ after deductible (120-maximum per calendar year) |

*In addition tr . $\mathrm{t}-65$ retirees, this plan also covers disabled retirees under age 65 who $\approx$ ntitled to recelve disability benefits from Social Security.

*In addition to post- 65 retrirees, this plan also covers disabled retirees under age 65 who are entitled to receive disability benefits from Social Security.


Revised 10/2/09
*In addition to" ${ }^{+}$- 65 retirees, this plan also covers disabled retirees under age 65 who ar titled to receive disability benefits from Social Security.
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Your Signature:
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Dear American Water Retiree:
The 2010 healthcare open enrollment period for retirees will begin on October 22, 2009 and extend through November 12, 2009. During this time you may add or delete dependents under our medical plan or choose to decline coverage.

## What's New Effective January 1, 2010?

- Expansion of full-time student definition
- Mental Health Parity and Addiction Equity Act
- Michelle's Law

Your current coverage with Horizon will remain the same. If you would like to add or delete a dependent or cancel coverage, please contact the Benefits Service Center toll free at 1.866.888.8269 no later than November 12, 2009.

Information is attached concerning our annual obligation to provide notice as required under federal law for the following:

- Women's Health and Cancer Rights Act
- Health Insurance Portability and Accountability Act of 1996 (HIPAA)
- Children's Health Insurance Program Reauthorization Act of 2009 (CHIPRA)
- Summary Material Modification - Mental Health Parity and Addiction Equity Act of 2008 and Michelle's Law

The health care crisis is a very complex issue in which we all have a role. We urge you to take steps to be part of the solution for a healthier future. Some services that could help you and the company are available:

- Horizon's website www.horizonblue.com/nationalaccounts. We encourage you to use this website to access generic vs. brand drug alternatives.

We continue to enjoy minimal monthly contributions for our medical insurance while our company continues to offer excellent health care programs that provide real quality and value.

## Women's Health and Cancer Rights Act

On October 21, 1998, a new federal law, the Women's Health and Cancer Rights Act, became effective. This law requires group health plans that provide coverage for mastectomies to also cover reconstructive surgery and prosthesis following mastectomies.

All medical plan options are in compliance with this law. The law mandates that a member receiving benefits for a medically necessary mastectomy who elects breast reconstruction after the mastectomy, will also receive coverage for:

- Reconstruction of the breast on which the mastectomy has been performed
- Surgery and reconstruction of the other breast to produce a symmetrical appearance
- Prosthesis
- Treatment of the physical complications of all stages of mastectomy, including lymphedemas.

This coverage will be provided in consultation with the attending physician and the patient, and will be subject to the same annual deductibles and coinsurance that apply for the mastectomy.

If you have any questions about coverage of mastectomies or reconstructive surgery, please contact the Horizon Member Services number on the back of your Horizon BC/BS ID card.

## Medicare Part D Notice of Creditable Coverage for employees over 65 still actively at work

If you are actively at work at age 65 or older and then you retire and become Medicareeligible you must call the Benefits Service Center to request a Notice of Creditable Coverage to avoid the Medicare Part D late enrollment fee.

## Continuing Coverage

If your coverage or a dependent's coverage is terminated during the year, you may be able to continue some benefits coverage as provided for under a federal law known as the Consolidated Omnibus Reconciliation Act of 1986 (COBRA), as amended.

## Right to Amend or Terminate the Plans

American Water reserves the right to amend or terminate at any time the benefits described in this benefit guide without prior notice to participants.

## Plan Documents Govern

This benefit guide highlights some important information about these benefit plans. If a question ever arises concerning the nature and extent of the benefits under any of the plans described here, the terms of the plans as described in the actual legal documents of the plans will always govern.

# NOTICE OF PRIVACY PRACTICES 

 HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT OF 1996
## THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

This Notice describes the practices of the American Water ("Company") group health plans (the "Plan") for protecting the privacy of protected health information. "Protected health information" is individually identiffable health information created or received by or on behalf of the Plan, that relates to your physical or mental health or condition, the health care provided to you, or payment for your health care.

This Notice describes how the Plan may use, disclose, and safeguard protected health information. The Plan is required by law to maintain the privacy of protected health information and to give you this Notice about its privacy practices and legal duties with respect to such health information.

Several of the health benefit programs offered to you under the Plan are administered by other entities (the "Third Party Administrators") on behalf of the Plan. This Notice only addresses the privacy practices of the Third Party Administrators for the Plan. You should be aware that there are also several health benefit programs offered to you under the Plan which are insured by the insurance companies. If you participate in any of the insured benefits under the Plan, you will receive a separate notice of privacy practices from the applicable insurance company.

Your personal doctor, hospital or other health care provider may have different policies or practices regarding use and disclosure of your health information created in the doctor's office or hospital. This Notice does not address the health information policies or practices of your health care providers.

## HOW THE PLAN OR THIRD PARTY ADMINISTRATORS MAY USE AND DISCLOSE PROTECTED HEATH INFORMATION

The following categories describe the different ways that the Plan or Third Party Administrator (on the Plans' behalf) may use and disclose protected health information. Not every use or disclosure within a category will be listed.

For Treatment. It is unlikely, but possible that the Third Party Administrator or Plan may disclose protected health information to a health care provider that is treating you. For example, if you were unconscious or otherwise unable to provide your medical history as a result of an accident, the Third Party Administrator or Plan might disclose

Research. Under certain circumstances and subject to limitations and conditions imposed by law, for research purposes.

As Required By Law. When required by federal, state, or local law.
To Avert Serious Threat to Health or Safety. As permitted under law, when necessary to prevent a serious threat to your health and safety, or that of another person, or the public.

Organ and Tissue Donation. To appropriate organizations as necessary to facilitate your organ or tissue donation and transplantation.

Worker's Compensation. To comply with laws relating to workers' compensation or similar programs.

Health Oversight and Public Health Activities. To public health authorities for their authorized activities, including, for example, oversight, audits, investigations, inspections, and licensure. These activities are necessary for the government to monitor the health care system, certain government programs, and compliance with civil rights laws. The Third Party Administrator or Plan also may disclose protected health information for public health activities, including to prevent or control disease, injury or disability; to report child abuse, neglect or domestic violence; or to notify people of recalls of products they may be using.

Lawsuits and Disputes. To respond to a subpoena, discovery request, summons or other court or administrative order or other lawful process.

Others Involved in Your Health Care. To a family member of friend that you have identified as being involved in your bealth care or payment of your health care, unless you object. The Third Party Administrator or Plan also may disclose protected health information to an entity assisting in a disaster relieve effort, so that family members may be notified about your condition, status and location.

Coroners, Medical Examiners, and Funeral Directors. To a coroner or medical examiner for purposes of identifying a deceased person, determining the cause of death, or for other duties authorized by law. The Third Party Administrator or Plan may also release protected health information to funeral directors, as necessary to carry out their duties.

Military and Veterans. As required by military command authorities, if you are a member of the United States armed forces.

National Security, Intelligence Activities, and Protective Services. To authorized federal officials (1) for intelligence, counterintelligence, and other national security activities authorized by law; and (2) to enable them to provide protection to the President

Right to Amend. If you believe that the protected health information is incorrect or incomplete, you may ask that the information be amended. To request an amendment, you must submit a written request to the Third Party Administrator. A request for an amendment may be denied if the request is not in writing or does not include a reason to support the request, or if you ask to amend protected health information that: was not created by the Third Party Administrator or Plan (unless the person or entity that created the information is no longer available to make the amendment), or is not part of the information which you would be permitted to inspect and copy; or is accurate and complete.

Right to Accounting or Disclosures. You may request an accounting report of certain disclosures the Third Party Administrator or Plan has made of protected health information for certain reasons other than for treatment, payment and health care operations. Please keep in mind that most disclosures of protected health information will be for purposes of payment or health care operations, and therefore would not be included in an accounting report.

You must submit a request for an accounting report to the Third Party Administrator. You will need to state a time period of disclosures that may not be longer than six years prior to the date of your request, and may not include dates before April 14, 2003. The first accounting report you request within a 12 -month period will be free. For additional lists requested during that period, you may be charged a fee for the costs of providing the accounting report. You will be notified of the cost involved and you may choose to withdraw or modify your request before any cost is incurred.

Right to Request Restrictions. You may request a restriction on certain uses and disclosures of protected health information. You also may request a restriction on disclosures of protected health information to someone who is involved in your care or payment for your care, like a family member or close friend. Neither the Plan nor the Third Party Administrator is required to agree to your request. If the Third Party Administrator or Plan does agree, the Third Party Administrator or Plan will comply with your request, unless the information is needed to provide you with emergency treatment and the Third Party Administrator or Plan discloses such information to a health care provider who will provide such treatment to you. Also, the Plan may at any time terminate its agreement to comply with the restriction, but only on a going-forward basis with respect to protected health information created or received after the termination.

To request a restriction, you must submit a request to the Third Party Administrator. Your request must state (1) what information you want to limit; (2) whether you want to limit use, disclosure or both; and (3) to whom you want the limits to apply.

## CONTACT INFORMATION

Please contact the Third Party Administrator if you have any questions, or to exercise your rights under this Notice, or to submit a complaint. The Third Party Administrator may be reached at the number and address listed on your identification card.

Altematively, you may contact the Plan if you have any questions about this Notice or the Plan's privacy practices, or to submit a complaint. Please contact the Plan as follows:

American Water Benefits Service Ceater 1025 Laurel Oak Road<br>Voorhees, NJ 08043<br>Telephone: (866) 888-8269

# Summary of Material Modifications to the American Water Group Insurance Plan Special Enrollment 

## CHILDREN'S HEALTH INSURANCE PROGRAM REAUTHORIZATION ACT OF 2009

The expanded Children's Health Insurance Program "CHIP" law creates a new Health Insurance Portability And Accountability Act of 1996 "HIPAA" special enrollment period for eligible employees and their dependents if they become ineligible for Medicaid or "CHIP" and lose coverage, or if they become eligible for a state's premium assistance program. Unlike current HIPAA special enrolment rights; which give employees 30 days after a triggering event to enroll, employees experiencing a Medicaid/" CHIP " event have 60 days from the date of the event to request enrollment in the employer plan.

## The following is an outline of Special Enrollment Rights

If you are declining enrollment with the American Water Medical Plans for yourself or your dependents (including your spouse) because of other health insurance or group health plan coverage, you may be able to enroll yourself and your dependents in the American Water plan due to the following circumstances:

* If you or your dependents lose eligibility for that other coverage (or if the employer stops contributing towards you or your dependents' other coverage),
* If you or your dependents lose Medicaid or Children's Health Insurance Program "CHIP" coverage as a result of a loss of eligibility for such coverage, or
* If you or your dependents become eligible for a premium assistance subsidy under Medicaid or "CHIP".

However, you must request enrolment within 31 days after you or your dependents' other coverage ends; or after the employer stops contributing toward the other coverage; or within " 60 days" in the case of changes related to Medicaid or "CHIP".

In addition, if you have a new dependent as a result of marriage, birth, adoption, or placement for adoption, you may be able to enroll yourself and your dependents. However, you must request enrollment within 31 days after the marriage, birth, adoption, or placement for adoption.

To request special enrolment or obtain more information, contact:
American Water Benefits Service Center
P. O. Box 5600

Cherry Hill, NJ 08034
866-888-8269

## Summary of Material Modifications to the American Water Group Insurance Plan

## MENTAL HEALTH PARITY AND ADDICTION EQUITY ACT OF 2008

In general, effective January 1,2010, mental health and substance abuse benefits will be treated in the same manner as other medical/hospital/surgical benefits under the Plan. Therefore, the following changes will become effective next year:

- The cap on the maximum number of days of inpatient treatment of alcoholism, drug abuse or mental cisorders is eliminated.
- For inpatient treatment of alcoholism and drug abuse, there will no longer be a limit to courses of treatment during your lifetime.
- For outpatient treatment of alcoholism, drug abuse or mental disorders, there will no longer be a limit on the number of days of treatment in a calendar year.
- Visits to mental health and substance abuse providers will be subject to the same payment terms (including copays, coinsurance, etc.) as other medical/hospital/surgical benefits under the coverage option that you have chosen.

Further refinement of these provisions may be necessary once the expected guidance is issued by the government under the Mental Health Parity Act.

## MICHELLE'S LAW

## Extension of Coverage for Student-Dependent on Medically Necessary Leave of Absence

The Plan provides that a dependent child over age 19 continues to be eligible for coverage until age 23 if they are attending high school or attending an accredited learning institution with at least 12 credits. Effective January 1, 2010, any such child who takes a "medically necessary leave of absence" from school is entitled to the same benefits as if that dependent child continued to be enrolled as a student.

For purposes of this provision, a "medically necessary leave of absence" occurs when the child starts a leave of absence from the education institution that (i) commences while the child is suffering from a serious illness or injury, (ii) is medically necessary, and (iii) would ordinarily cause the child to lose fulltime student status for purposes of coverage under the terms of the Plan.

To continue participation under this provision, the Plan must be provided with a certification by a treating physician that verifies that (i) the child is suffering from a serious illness or injury, and (i) the leave of absence is medically necessary.

The Plan will treat a child who meets the requirements of this provision as a student eligible to participate in the Plan (assuming other eligibility requirements are satisfied) for one year after the first day of the medically necessary leave of absence or until the date on which such coverage would otherwise terminate under the terms of the Plan (such as attaining the maximum age for full-time student coverage), whichever occurs first.

# Important Notice from American Water About Your Prescription Drug Coverage and Medicare Annual Notice of Creditable Coverage 


#### Abstract

Please read this notice carefully and keep it where you can find it. This notice has information about your current prescription drug coverage with American Water and about your options under Medicare's prescription drug coverage. This information can help you decide whether or not you want to join a Medicare drug plan. Information about where you can get help to make decisions about your prescription drug coverage is at the end of this notice.


1. Medicare prescription drug coverage became available in 2006 to everyone with Medicare. You can get this coverage if you join a Medicare Prescription Drug Plan or join a Medicare Advantage Plan (like an HMO or PPO) that offers prescription drug coverage. All Medicare drug plans provide at least a standard level of coverage set by Medicare. Some plans may also offer more coverage for a higher monthly premium.
2. American Water has determined that the prescription drug coverage offered by the Group Insurance Plan for Employees of American Water Works Co. Inc. and Its Designated Subsidiaries is, on average for all plan participants, expected to pay out at least as much as standard Medicare prescription drug coverage pays and is considered Creditable Coverage.

Because your existing coverage is, on average, at least as good as standard Medicare prescription drug coverage, you can keep this coverage and not pay a higher premium (a penalty) if you later decide to join a Medicare drug plan.

You can join a Medicare drug plan when you first become eligible for Medicare and each year from November $15^{\text {th }}$ through December $31^{\text {st }}$. This may mean that you may have to wait to join a Medicare drug plan and that you may pay a higher premium (a penalty) if you join later. You may pay that higher premium (a penalty) as long as you have Medicare prescription drug coverage. However, if you lose creditable prescription drug coverage, through no fault of your own, you will be eligible for a sixty (60) day Special Enrollment Period (SEP) because you lost creditable coverage to join a Part D plan. In addition, if you lose or decide to leave American Water's coverage; you will be eligible to join a Part D plan at that time using an Employer Group Special Enrollment Period. You should compare your current coverage, including which drugs are covered at what cost, with the coverage and costs of the plans offering Medicare prescription drug coverage in your area.

If you have limited income and resources, extra help paying for Medicare prescription drug coverage is available. For information about this extra help, visit Social Security on the web at www. socialsecurity gov, or call them at 1-800-772-1213 (TTY 1-800-3250778).

Remember: Keep this Creditable Coverage notice. If you decide to join one of the Medicare drug plans, you may be required to provide a copy of this notice when you join to show whether or not you have maintained creditable coverage and whether or not you are required to pay a higher premium (a penalty).

Date: 10/31/09
Name of Entity/Sender:
Contact Office:
Address:
Phone Number:

American Water
Benefits Service Center
1025 Laurel Oak Road, Voorhees, NJ 08043
866-888-8269
American Water Works Company, Inc. - Retiree Medical Lomparison Chart
(Excluding Pennsylvania)

*n addition to post-65 retirees, this plan also covers disabled retirees under age 65 who are entitled to receive disability benefits from Social Security.
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American Water Works Company, Inc. - Retiree Medical Comparison Chart
(Excluding Pennsylvania)

This chart only highlights medical option features, and certain limits may apply to some features. Benefits may be subject to Reasonable and Customary ( $R \& C$ )
limits. Official Plan documents govern in the event of any inconsistency between the provisions shown here and in the Plan documents.
*in addition to post-65 retirees, this plan also covers disabled retirees under age 65 who are entified to receive disability benefits from Social Security.
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## KENTUCKY-AMERICAN WATER COMPANY <br> CASE NO. 2010-00036 <br> COMMISSION STAFF'S FIRST REQUEST FOR INFORMATION

Witness: Michael Miller
20. Provide all employment contracts between Kentucky-American and its non-management employees that are currently in effect and the most recent contracts previously in effect.

## Response:

Please see attached.
For electronic version, refer to KAW_R_PSCDR1\#20_031610.pdf.

## CONTRACT

## BETWEEN

## KENTUCKY-AMERICAN WATER

AND
NATHONAL CONFERENCE OF FIREMEN ANH OHLERS LOCAL UNION 320
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## AGREEMENT

THIS AGREEMENT executed on $\qquad$ and effective as of the _th of , by and between KENTUCKY-AMERICAN WATER of Lexington, Kentucky, party of the first part, hereinafter referred to as the "Company," and NATIONAL CONFERENCE OF FIREMEN AND OILERS, LOCAL 320, of Louisville, Kentucky, party of the second part, hereinafter referred to as the "Union;"

## WI TNESSETH:

WHEREAS, the Company is engaged in furnishing an essential public service which vitally affects the health, safety, comfort, and general well-being of a large number of people in the communities furnished water service by the Company; and

WHEREAS, the very existence of the Company is conditioned upon carrying out its obligations and responsibilities to the public served; and

WHEREAS, this responsibility to the public is a mutual responsibility of Associates and management which requires that any disputes arising between the Associates and management be settled in an orderly way without interruption of water service; and

WHEREAS, both parties to this Agreement hereby recognize this mutual responsibility of service to the public.

NOW, THEREFORE, in furtherance of harmonious relations among Associates, the Management, and the public, it is mutually agreed by the parties hereto that there shall be no strike or lockout during the term of this Agreement, and this mutually agreed covenant shall continue through the future relations between the parties hereto, and that all matters of dispute pertaining to the interpretation or application of the terms of this Agreement shall be settled by arbitration as hereinafter provided.

It is further agreed as follows:

## SECTION 1. RECOGNITION

The Company shall recognize the Union as the sole representative of Associates covered by this Agreement except for the associates covered by what is known as the Inside Contract group, non-union/non-management and management personnel. The Company agrees to bargain collectively with the properly constituted and proven representatives of the Union on the matters affecting such associates.

## SECTION 2. NEW ASSOCIATES

It is recognized by the parties hereto that in the operation of the water works property of the Company on account of the responsibility at all times to furnish a safe and adequate supply of water to the City of Lexington and surrounding territory, there can be no division of this responsibility, and it is agreed that the Company, therefore, must be unhampered in the selection of its associates.

The Company agrees that in the filling of vacancies it will give preference to former qualified associates of the Company whose employment was terminated by layoff. Moreover, the Company agrees that this Section is to be understood as subject to the provisions of this Agreement in regard to seniority, and any differences between the Company and the Union under this Section will be subject to the arbitration provisions of this Agreement.

## SECTION 3. UNION SECURITY

The Company agrees that all present associates of the Company represented by the Bargaining Unit must, as a condition of continued employment, become members of the Union within thirty (30) calendar days from the effective date of this Agreement and remain members in good standing for the duration of this Agreement.

The Company further agrees that all new associates eligible for membership in the Bargaining Unit will be required as a condition of continued employment to become members of the Union within thirty (30) calendar days from the date of their employment and remain members in good standing for the duration of this Agreement.

It is further agreed that each new associate shall be granted a period not to exceed ninety (90) calendar days as a probationary period to demonstrate their ability and qualifications to perform the duties for which they were hired. In the event a new associate fails to qualify within the ninety- (90) calendar day period following the date of their employment they shall be discharged. This provision in no way relieves the associate of joining the Union as provided above.

It is agreed between the parties that seniority rights for new associates shall not exist until after ninety- (90) calendar day's continuous employment by the Company. However, after ninety(90) calendar day's continuous employment, seniority rights shall revert to, and be considered to have been in full force and effect, since the beginning of the ninety- (90) calendar day's continuous employment. An evaluation shall be performed at interim periods during the employment.

## SECTION 4. UNION DUES

Dues shall be deducted bi-weekly by the Company from the wages of each member of the Union who is an associate of the Company, and who requests and authorizes the Company in writing to make such deductions from their wages or salary. Deductions shall be made by the Company every other week and shall be remitted once per month to the Secretary-Treasurer of the Union.

## SECTION 5. RULES, REGULATIONS, AND GOOD FAITH

The Union agrees that its officers and members will live up to the Company's reasonable rules and regulations in the interest of safety, economy and continuity of service to the public.

The Union and Company agree that they will not engage in subterfuge for the purpose of defeating or evading the provisions of this Agreement.

## SECTION 6. SENIORITY

Beginning with the effective date of this contract, the seniority provisions are as follows:
It is understood and agreed that in all cases of job bidding and transfer of associates, the following factors shall be considered.

1. Length of continuous service. (defined as seniority within the outside union group)
2. Qualifications.
3. Physical fitness.

The Company will review all relevant information relating to all bidders on any job and has the right to determine which bidder has the qualifications for the position. Only if it is determined that items 2 and 3 are equal, shall item 1 govern. The first criteria determining the length of continuous service will be company-wide seniority. All associates in the Unien are divided into two departments:

## Production

Associates in the Production Department are classified as follows:
Treatment Plant Operator
Maintenance Technician I
Maintenance Technician II
Treatment Plant Operator - Fixed Relief
Treatment Plant Operator - Relief
Treatment Plant Operator - Utility

## Network

The associates in the Network Department are classified as follows:
Backhoe Operator
Junior Backhoe/Crew Leader
Crew Leader
Utility
Meter Technician
Field Service Representative
Meter Reader (as of 11-1-88)
Meter Reader (after 11-1-88 but prior to 11-1-98)
Meter Reader (as of 11-1-98)
The associates in the Utility classification may be assigned to either the Network or Production Departments.

The evening shift crew/s, if qualified, will be allowed to use the small backhoe without calling in a Backhoe Operator.

Whenever a large backhoe is needed, the senior available qualified Backhoe Operator must be contacted. The Junior Backhoe/Crew Leader will relieve the Backhoe Operator during vacancies, if in the judgment of the company it is needed. The Company reserves the right to fill the Junior Backhoe/Crew Leader position with the senior qualified associate when the position is vacant.

In cases of job bidding or transfer or decrease of associates in any particular department, factor 1 in this Section shall be interpreted to mean length of continuous service within the company.

Seniority shall be in accordance with overall company-wide seniority within the outside union group.

Notice of vacancy in an existing position or a newly created position shall be posted at places accessible to associates affected, and shall remain posted for a period of four consecutive days, within which time applicants eligible and desiring to fill such vacancy shall apply in writing to the official of the Company designated in the notice. Such notice shall set forth title of position to be filled, hours of work, days of relief, rate of pay and outline of duties. Within four consecutive days after the expiration of the posting period, the Company shall have assigned the accepted applicant to such vacancy or newly created position. In the event circumstances exist which will not allow the Company to move the successful bidder, the Company will be granted up to thirty (30) calendar days to move the associate to the duties of the bidded position. If at the end of this thirty- (30) calendar day period the associate is not actually performing these duties, the rate of pay for the bidded position will begin, provided pay scales are not a lower rate of pay.

The decision to apply or not to apply for promotion or transfer to an existing position or a newly created position is entirely within the associate's own option. The Union shall receive a copy of all bids.

When a job vacancy is posted and awarded to the successful bidder in accordance with the provisions of this Agreement, the second successful bidder will be listed on the Notice of Assignment. If the successful bidder who was awarded the position in accordance with this section does not qualify, or within the first 15 working days voluntarily steps down, the job will be awarded to the second successful bidder on the Notice of Assignment. If the second successful bidder does not qualify, or within the first 15 working days voluntarily steps down, the job will be reposted. This procedure will be applicable to all job vacancies, which will be affected by such disqualification or voluntary disqualification, within the first 15 working days, providing the associate, or associates involved have not qualified for the position they presently hold.

In the event a vacancy occurs while an associate is on vacation or sick leave, it is agreed that the Union and Company will jointly notify said associate of the existing vacancy. The Company will send a copy of this notice by regular U.S. mail delivery. The notice will be sent to the address of an associate as listed in the Company files. A copy of all mailed notices will be given to the appropriate shop stewards.

If the Union and the Company are unable to contact said associate, the associate shall be granted 48 hours at the conclusion of their vacation or sick leave the opportunity to bid on the vacancy.

Any associate assigned to a new position shall have up to ninety (90) working days in which to demonstrate their qualifications to perform the duties of that position as determined by the Company. If an associate is unable to qualify, or within the first 15 working days voluntarily steps down, they may return to the position from which they came without loss of seniority, even though an extension of the period has been granted, but shall forfeit for twelve (12) months all rights to bid for any job requiring like skills which may be subsequently posted. When an associate qualifies for a position, their seniority reverts back to the date of the awarding of the job. Company agrees to pay an associate in training for a classified position the rate of pay for that position when they perform the duties by themselves. An associate in training for a higher paying job shall be paid their present rate of pay for the first 90 working days or less if they are qualified sooner by the Company. Payment of the rate of pay as mentioned above shall in no way indicate that the associate has qualified for the position.

When an associate permanently fills a vacancy that requires certification by federal, state or local governmental agencies, they must demonstrate their ability to pass the certification test within ninety (90) calendar days. However, if the associate does not have the required job experience to fulfill the certification requirements of the governmental agency, they may be granted the necessary time to gain the job experience.

The Company reserves the right to temporarily fill any vacancy pending the operation of the procedure described hereinbefore. Temporary layoff shall be considered permanent when the associate has been laid off for twenty-four (24) consecutive months, and any seniority rights established prior to permanent layoff shall, in event of rehiring, be considered nil.

If an associate fails to return to work within ten (10) working days after they have been notified by registered mail to return to work after such layoffs, and does not give a satisfactory reason after investigation by the Company and the Union for their failure to return within said ten
(10) working days, any seniority record theretofore established shall be broken and such seniority record shall thereupon be considered nil.

The senior associate in the top ranking classification in each of the shift departments shall have the right to select the shift they are to work and shall have the right to choose their weekly days off; provided, however, that after the choice is made by the senior operator in the Production Department, the other seniors in the department must choose their days and shifts so as not to require a swing shift associate to work sixteen (16) hours per day, or require the services of more than one (1) swing shift associate for operators. The selection, once made, shall be final unless changed under provision of Section 14.

It is mutually understood and agreed by all parties hereto that because of the Company's responsibility hereinbefore mentioned, the management must and shall be the judge of any associate's qualifications for promotion. However, should any difference of opinion occur in this regard, such differences shall be settled in accordance with the arbitration provisions of this Agreement.

The Company agrees to post permanently, in a conspicuous place in each department and plant, a company-wide seniority list, and such list shall be posted every six- (6) months. After the seniority list is posted, the associates will have thirty (30) calendar days during which they may protest the accuracy of the list in writing. Failing to make such protest within the thirty-(30) calendar day period shall constitute agreement and the list shall become permanent.

In the event an associate is displaced from their classification or department due to a cutback or revision of production or network methods, they may exercise their seniority rights in accordance with their overall company seniority within the outside union group.

## SECTION 7. RESPONSIBILITY

The shift operator on duty shall be in charge of the normal operation of the Pumping Station.

It is agreed by the parties that the Treatment Plant Operators may be assigned to other non-operator duties within the Plant during emergencies and/or when the plant is shut down.

It is agreed that associates in the various shift classifications will not be transferred from their normal duties to perform duties normally performed by associates in other classifications when it is necessary to replace this associate, except in cases of emergency.

## SECTION 8. TEMPORARY TRANSFERS

Associates may be assigned temporarily to positions on a reverse seniority basis when feasible and practical, provided no senior associate desires the assignment. Associates temporarily assigned shall be returned to their normal positions within a period not to exceed twenty-five (25) calendar days unless an extension be granted by mutual consent; provided, however, that where such temporary assignments are made to fill vacancies due to vacations, they may be continued for a period of thirty-five (35) calendar days.

When it becomes necessary for the Company to shift associates temporarily to new assignments, there shall be no change in the rate of pay to the associate so temporarily assigned except when such temporary assignment shifts an associate into a higher classification. In such cases the associate shifted temporarily to a higher classification shall receive for such temporary assignment the basic rate of pay established for the position. Associates transferred temporarily to lower paid positions shall continue to receive their regular rate of pay during such temporary transfer. Associates transferred permanently to other positions shall receive the rate of pay for the position to which they are transferred.

It is mutualiy agreed that adjustments in pay shall not be made under the provisions of this Section unless the transfer continues in effect for two (2) hours or more, and in no case shall the rate of pay of an associate be changed during any work shift or any work day except that when an associate continues without interruption for two (2) hours or more in such temporary assignment, that associate shall be paid the higher rate of pay for all time worked in the higher paid assignment.

When an associate is assigned to repair AMR meters, the Company agrees to pay for work performed at the field service representative rate of pay.

## SECTION 9. DEMOTION OR DECREASE

When and if it should become necessary to curtail employment in any department associates affected are to be laid off in the inverse order of their employment in accordance with their overall company seniority and re-employed in the reverse order. An associate laid off from any department because of lack of work, may exercise their Company seniority by bumping any less senior associate, provided that they are able to perform the required duties of the new position and meet all the requirements in Section 6 Seniority. In all such cases the Company agrees to notify the Union ten (10) calendar days in advance where the layoff affects permanent full-time associates, and to seek an agreement as to the application of the seniority rights under this Section and under the Seniority Section of the Agreement. If such an agreement cannot be reached, then the question shall be settled under the arbitration provisions of this Agreement.

## SECTION 10. REPRESENTATION AND ARBITRATION

The direct representatives of the Union shall be associates of the Company and shall be known as "Shop Stewards."

The Shop Stewards shall first attempt to handle all grievances before such grievances are referred to an International Representative of the Union. Associates may have a Shop Steward or witness present when conferences are held between associates and supervisors. Supervisors or other management personnel may require that a Shop Steward or witness be present when conferences are held with associates.

1. Should grievances arise over interpretation or application of the items of this Agreement, the aggrieved party must submit their grievance in writing to a Shop Steward whose duty it will be to confer, within three (3) working days of the occurrence, with the supervisor in an attempt to effect a settlement. The supervisor will have three (3) working days to respond to the grievance at this first step in writing.
2. Should this procedure not result in a settlement, within five (5) working days of the denial at the first step, the matter shall be referred in writing to the Production or Network Superintendent or a designated representative who shall give a reply in writing within five (5) working days of the receipt of the grievance at this level.
3. Failing satisfactory settlement through this office, within fifteen (15) working days of the denial at the second step, the matter shall be referred in writing to the senior ranking official or a designated representative and to an International Representative of the Union. The senior ranking official or a designated representative shall give a reply in writing within a period of fifteen (15) working days of the receipt of the grievance at this level.
4. Should this procedure fail to effect a settlement, the matter shall be referred within five (5) working days, (unless an extension of time is requested by either party, not to exceed fifteen (15) working days), of the denial at the third step, to a mediator who will be selected from either the State Mediation or Federal Mediation services.
5. Should this procedure fail to effect a settlement, the matter shall be referred within five (5) working days, (unless an extension of time is requested by either party, not to exceed fifteen (15) working days), of the denial at the fourth step, to an arbitration board for the selection of an arbitrator.

The Company and the Union will request a representative from the American Arbitration Association who would be mutually accepted by the Company and the Union.

The Arbitrator so constituted shall render a decision within sixty (60) calendar days after meeting, such decision being final and binding upon both parties to this Agreement.

The expense, if any, of the Arbitrator and rental of meeting facilities, shall be shared equally by the parties hereto. Both parties must agree on the location of the meeting facilities.

If an associate claims to have been unjustly discharged, they must file a complaint with the Union to this effect within five (5) working days after the effective date of the discharge. The Union and Company agree that steps 1 and 2 of the grievance procedure will be waived and the grievance moved to the 3rd step. The 3rd step procedure for discharges is that the Union must submit this grievance in writing within fifteen (15) working days of the effective date of the discharge to the senior ranking official of the Company or a designated representative. The senior ranking official or a designated representative shall give a reply in writing within a period of thirty (30) working days of the receipt of the grievance at this level. No person will be terminated without the chief steward, or an international union representative present.

## SECTION 11. LEAVE OF ABSENCE

Associates may be granted ninety (90) calendar days leave of absence for good cause but without pay and without prejudice to seniority or other rights and such leave of absence may be renewed for one or more successive ninety (90) calendar day periods by mutual agreement between the Company and the Union. Associates seeking such leave of absence must make a request in writing stating the cause, and must present such request to a joint conference between Shop Stewards and management for consideration. If the Shop Stewards and management fail to agree on the granting or denial of the request for leave of absence, then the questions shall be
settled under the arbitration provision of this Agreement. Should such leave of absence be granted as herein provided and the associate is employed by another concern, or should they violate the terms of their leave during such leave of absence, said associate shall forfeit any or all seniority rights herein established.

## SECTION 12. WAGES AND HOURS - NETWORK DEPARTMENT

The provisions of this Section shall apply to all associates in the Network Department who are engaged in reading, testing, repairing, removing and resetting meters, discontinuing and restoring service to consumers, engaged in excavation, backfilling, and other work necessary in the construction, operation and maintenance of the system; in installing and maintaining mains, servicing meters, meter installation, hydrants and valves, including pipe joiners' work, cutting and replacing pavements, yarning, caulking, heating and pouring jointing material, operating and using air compressor, using air compressor tools and equipment, machinery work, carpenter work, painting work and any other trade work necessary in construction and maintaining of vaults, manholes, any other structure in the system, or installation and maintenance of drainage, bracing or sheathing; in loading and unloading pipe, service material, meters, hydrants, and other equipment or materials necessary in the construction, operation or maintenance of the system; in the operating and maintenance of watershed buildings, equipment or any other property; and in the driving of automobiles or trucks incidental to the performance of the various types of work above mentioned.

The Company agrees that present associates of record on November 1, 1982, who are members of the Union shall be assured forty (40) hours of pay per week, provided that the associates are at all times, during such work week, available for work. This assurance will not be applicable to any associate hired after November 1, 1982.

Except in cases of emergency, associates performing the classes of work specified in this Section shall not be required to work on Sundays and the following holidays:

| New Year's Day | (2) Personal Floating Holidays* |
| :--- | :--- |
| Good Friday** | Thanksgiving Day |
| Memorial Day | Friday after Thanksgiving |
| Fourth of July | Christmas Eve (December 24th) |
| Labor Day | Christmas |

*One (1) of the Personal Floating Holidays may be taken with as much notification as reasonably possible to their supervisor. The remaining Personal Floating Holiday may be taken with at least three (3) working days notice to the Company. The Company has the final decision to grant the day off as determined by the current workload. The Company has the right to deny the request the day prior to this scheduled day off, if conditions warrant. Personal Floating Holidays shall be taken within the calendar year January 1 through December 31.
**The Sunday Network crew will substitute Easter Sunday for the Good Friday holiday that is observed by all other bargaining unit employees.

When any of these holidays falls on Sunday, it will be observed on the Monday following, except when a holiday falls on Sunday and is followed on Monday by another holiday. In this case the holidays will be observed on Sunday and Monday. Associates not required to work on either holiday will be assured of eight- (8) hours pay at their regular hourly rate for these
holidays. Also, any holiday that falls-on Saturday will be observed on the preceding Friday, except when such holiday is preceded by a holiday on Friday, the holidays will be observed on Friday and Saturday.

Each associate with ninety (90) calendar days of continuous service covered by provisions of this Section who does not work on a holiday is assured of eight- (8) hours pay at their regular hourly rate for these holidays.

If the associate is absent anytime during the last four and one-half ( $4-1 / 2$ ) hours of their last scheduled work day prior to a holiday(s) or anytime during the first four and one-half (4-1/2) hours of their first scheduled work day following the holiday(s) (or the day the holiday(s) is/are observed) when they are scheduled to work, they shall not be paid for the holiday(s) unless they are subpoenaed or entitled to pay under leave of absence for sickness or accident disability, paid jury duty, paid vacation, or paid funeral leave.

When a holiday falls on Saturday or Sunday and is observed by the company on Friday or Monday as the case may be, the holiday bonus will be paid to shift workers for time actually worked on the Saturday and Sunday that the holiday actually falls on, but shall not be paid for time worked by those employees on the Friday or Monday on which the company observes the holiday. An employee required to work on such a holiday shall receive, in addition, one and onehalf (1-1/2) times their regular rate of pay for the hours worked up to eight (8) hours per day or forty (40) hours per week and shall be paid double-time for all time worked in excess of eight (8) hours per day on such Holiday. However, associates shall not be paid both daily and weekly overtime for the same hours worked.

Overtime will be paid at one and one half ( $11 / 2$ ) times their regular hourly rate of pay for all time worked in excess of forty (40) hours per week or eight (8) hours per day. All associates covered by this Section who are required to work on their second scheduled day off shall be paid two (2) times their regular hourly rate of pay. Associates shall not be paid both daily and weekly overtime for the same hours worked.

Associates engaged in programmed inspecting and flushing of fire hydrants shall be paid the regular straight time hourly rate of the Field Service Representative classification and the appropriate shift differential for the hours actually worked as set forth in this contract.

Applications will be received from associates in the Crew Leader and Utility Classifications after a notice has been posted by the Company setting forth its intention to inspect and flush fire hydrants. Selection of the associates for this job shall be in accordance with Section 6 - Seniority.

For the associates covered by this Section, the regular hourly rates of pay shall be as follows:

## CLASSIFICATIONS

| NETWORK DEPARTMENT | 11/1/07 | 11/1/08 | 11/1/09 |
| :---: | :---: | :---: | :---: |
| Backhoe Operator | \$21.68 | \$22.33 | \$23.00 |
| Junior Backhoe/Crew Leader | \$21.19 | \$21.83 | \$22.48 |
| Crew Leader | \$20.70 | \$21.32 | \$21.96 |
| Utility | \$19.63 | \$20.22 | \$20.83 |
| Meter Technician | \$22.05 | \$22.71 | \$23.39 |
| Field Service Representative | \$21.68 | \$22.33 | \$23.00 |
| Meter Reader (as of 11-1-88) | \$21.68 | \$22.33 | \$23.00 |
| Meter Reader (after 11-2-88 but prior to 11-1-98) | \$20.70 | \$21.32 | \$21.96 |
| Meter Reader (as of 11-1 98) | \$19.63 | \$20.22 | \$20.83 |

The Company has the right to increase or decrease the number of shifts necessary to perform the work of the Company. A lunch period of thirty minutes will be allowed during each shift. If associates are assigned to shifts other than 7:30 a.m. - 4:00 p.m. or 8:00 a.m. to 4:30 p.m., they will receive shift differential premium rate, when appropriate, including overtime on a continuation basis.

The night shift network crew/s will consist of Crew Leader and Utility. This crew will substitute Sunday and Monday for the current listed Saturday and Sunday under Section 12 in regard to holiday observance. Examples of work schedules for the network crews are as follows:

| Monday - Friday | 7:00 a.m. $-3: 30$ p.m. |
| :--- | :--- |
| Monday - Friday | 7:30 a.m. $-4: 00$ p.m. |
| Monday - Friday | 12:30 p.m. $-9: 00$ p.m. |
| Tuesday - Saturday | 7:30 a.m. $-4: 00$ p.m. |
| Sunday - Thursday | 7:30 a.m. $-4: 00$ p.m. |

In the event no associates bid on the open positions in the network department, the Junior Crew Leader/s and Junior Qualified Utility/s will fill these positions. The night shift Crew Leader position will be bid. If no one bids this relief position, the next Junior Utility Person will be assigned these duties.

The night shift crew will arrange all vacations with the network supervisor.

The Company will make the decision to fill a vacancy due to sickness, personal business, short-term absences, etc. depending on the workload and anticipated duration of the absence. Only one night shift Field Service Representative associate will be allowed to take their vacation at a time arranged through their immediate supervisor.

When any associate covered by the provisions of this Section is directed to report for work they shall receive four (4) hours pay at the rate prescribed in this Agreement, unless notified the night before not to report for work.

There shall be ten (10) associates who will be classified as Crew Leader and who shall receive the Crew Leader rate of pay. When a vacancy occurs in the Crew Leader classification it will be bid.

If a Utility is assigned to be in charge of a vehicle, they shall be paid at the Crew Leader rate of pay.

An associate called back to work after having left the premises of the Water Company will be paid a minimum of two (2) hours pay at one and one-half (1-1/2) times their regular hourly rate, unless called in less than two (2) hours prior to their regular scheduled working hours in which event they shall be paid for the hours worked. Call-in pay is not applicable to those associates awaiting emergency calls or standby duties as covered by Section 16.

If an associate is required to work sixteen (16) or more consecutive hours, he/she shall be permitted to take up to an eight (8) hour rest period. This rest period will be excused but unpaid by the Company.

Associates covered by this Section (Hydrant Flushing), and also Section 16 of this contract, who are required to work on either of the two shifts between 4:00 p.m. and 8:00 a.m. will be paid an additional thirty cents ( $\$ 0.30$ ) per hour for the $4: 00$ p.m. to 12:00 midnight shift and forty cents ( $\$ 0.40$ ) per hour for the 12:00 midnight to 8:00 a.m. shift for those hours actually worked. The Field Service Representative associates working other than the normal day shift will receive the shift differential that is applicable from 4:30 p.m. till 8:00 a.m.

It is agreed that the hauling and unloading of chemicals will be performed by associates with less seniority when feasible and practical.

## SECTION 13. WAGES AND HOURS - PRODUCTION DEPARTMENT

This section shall apply to all associates engaged in the operation and maintenance of the Pumping Station and Filter Plants, pumping and transmitting equipment now maintained at tank sites.

The normal workweek for all associates performing the classes of work specified in this Section shall be forty (40) hours consisting of five (5) consecutive eight (8) hour days. Days off shall be consecutive except in the case of the Treatment Plant Operator-Relief classification. For all time worked in excess of forty (40) hours in any one week or eight (8) hours per day, one and one-half ( $1-1 / 2$ ) times the regular hourly rate of pay shall be paid, with the understanding that
because of the necessity of continuous operation there-shall be no premium pay for work done on Sundays as such. If the associate covered by this Section is required or requested by the Company to perform work on a day which is normally their second day off, they shall in that event be paid two (2) times their regular hourly rate of pay for all time worked on such day.

No daily overtime shall be paid when associates are changing from one shift to another, or when associates at their own request are working extra time in order to get off during regular shifts. Associates shall not be paid daily and weekly overtime for the same hours worked.

The Company agrees that present associates of record on November 1, 1982, who are members of this Union shall be assured forty (40) hours of pay per week, provided that the associates are at all times, during such work week, available for work. This assurance will not be applicable to any associate hired after November 1, 1982.

Associates performing classes of work specified in this Section are normally required to work on the following eleven (11) holidays, namely;

| New Year's Day | (2) Personal Floating Holidays* |
| :--- | :--- |
| Good Friday | Thanksgiving Day |
| Memorial Day | Friday after Thanksgiving |
| Fourth of July | Christmas Eve (December 24th) |
| Labor Day | Christmas |

when such holidays fall on what are scheduled working days for the associates.
*One (1) of the Personal Floating Holidays may be taken with as much notification as reasonably possible to their supervisor. The remaining Personal Floating Holiday may be taken with at least three-(3) working days notice to the Company. The Company has the final decision to grant the day off as determined by the current workload. The Company has the right to deny the request the day prior to this scheduled day off, if conditions warrani. Personal Floating Holidays shall be taken within the calendar year January 1 through December 31.

If the associate is absent any time during the last four and one-half (4-1/2) hours of their last scheduled work day prior to a holiday(s) or any time during the first four and one-half (4-1/2) hours of their first scheduled work day following the holiday(s) (or the day the holiday(s) is/are observed) when they are scheduled to work, they shall not be paid for the holiday(s) unless they are subpoenaed or entitled to pay under leave of absence for sickness or accident disability, paid jury duty, paid vacations or paid funeral leave.

When a holiday falls on Saturday or Sunday and is observed by the company on Friday or Monday as the case may be, the holiday bonus will be paid to shift workers for time actually worked on the Saturday and Sunday that the holiday actually falls on, but shall not be paid for time worked by those employees on the Friday or Monday on which the company observes the holiday. An employee required to work on such a holiday shall receive, in addition, one and onehalf ( $1-1 / 2$ ) times their regular rate of pay for the hours worked up to eight (8) hours per day or forty (40) hours per week and shall be paid double-time for all time worked in excess of eight (8) hours per day on such Holiday. However, associates shall not be paid both daily and weekly overtime for the same hours worked.

Associates who are scheduled to work on such holidays, but who are not required to do so shall be paid eight (8) hours pay for each such holiday at regular hourly rates of pay. On a holiday, the associate working the actual holiday will receive the premium pay for that day.

When any of these holidays falls on Sunday, it will be observed on the Monday after, except when a holiday falls on Sunday and is followed on Monday by another holiday. In this case the holiday will be observed on Sunday and Monday. Also, any holiday that falls on Saturday will be observed on the preceding Friday except when such holiday is preceded by a holiday on Friday, the holidays will be observed on Friday and Saturday.

Each associate with ninety (90) calendar days or more of continuous service covered by provisions of this Section who does not work on the observed holiday is assured of eight (8) hours pay at their regular hourly rate for the holiday.

For associates covered by this Section, the regular hourly rate of pay shall be as follows:
CLASSIFICATIONS

| PRODUCTION DEPARTMENT | $\underline{11 / 1 / 07}$ |  | $11 / 1 / 08$ |  |
| :--- | :--- | :--- | :--- | :--- |
| Treatment Plant Operator (Monday - Friday day shift) | $\$ 22.05$ | $\$ 22.71$ |  | $\$ 23.39$ |
| Treatment Plant Operator (12 Mid. - 8:00 a.m. Shift) | $\$ 23.03$ | $\$ 23.72$ | $\$ 24.43$ |  |
| Treatment Plant Operator (4:00 p.m. - 12 Mid. shift) | $\$ 22.73$ | $\$ 23.41$ | $\$ 24.11$ |  |
| Treatment Plant Operator (Swing shift) | $\$ 22.82$ | $\$ 23.50$ | $\$ 24.21$ |  |
| Maintenance Technician I | $\$ 22.05$ | $\$ 22.71$ | $\$ 23.39$ |  |
| Maintenance Technician II | $\$ 22.05$ | $\$ 22.71$ | $\$ 23.39$ |  |
| Treatment Plant Operator - Fixed Relief | $\$ 21.66$ | $\$ 22.31$ | $\$ 22.98$ |  |
| Treatment Plant Operator - Relief * | $\$ 20.98$ | $\$ 21.61$ | $\$ 22.26$ |  |
| Treatment Plant Operator - Utility (day shift) | $\$ 20.70$ | $\$ 21.32$ | $\$ 21.96$ |  |
| Treatment Plant Operator - Utility (12 Mid - 8:00 a.m.) | $\$ 21.70$ | $\$ 22.35$ | $\$ 23.02$ |  |
| Treatment Plant Operator - Utility (4:00 p.m. - 12 Mid.) | $\$ 21.39$ | $\$ 22.03$ | $\$ 22.69$ |  |
| Treatment Plant Operator - Utility (Swing Shift) | $\$ 21.31$ | $\$ 21.95$ | $\$ 22.61$ |  |

## NOTE for Refereme:

The following shift differential rates will be included for these affected shifts.


#### Abstract

Fixed Relief 12 Midnight - 8:00 a.m. shift - 4-12 Midnight shift - $\$ 0.12 \quad$ Swing Shift $\$ 0.28$ $\$ 0.40$ $\$ 0.30$ Swing Shift Utility $\$ 0.22$

Note: Amman wage increases are based on base rate but the rate does not include shift differemtiallo


The senior Treatment Plant Operator-Relief associate will have the right to select the shift they are to relieve, however, once assigned they shall remain on this shift for the duration of the vacancy.

## Production Maintemames On Call:

The associates in the Maintenance Technician I \& II classifications will be called upon, one each week, to be available at all times to receive and take calls in the Production Department. They will receive during that week two (2) times their regular rate of pay for all hours worked due to being called out for overtime. If they are called out to work overtime on their second day off they will receive two and one half ( $21 / 2$ ) times their regular rate of pay for those hours worked.

If an associate is required to work sixteen (16) or more consecutive hours, he/she shall be permitted to take up to an eight (8) hour rest period. This rest period will be excused but unpaid by the Company.

## SECTION 14. RIGHT TO CHANGE SHIFTS

Associates may, if they so desire, temporarily exchange their shifts provided the change is agreeable to the Company and the Union, and does not interfere with the orderly operation of pumping and filter plants. There will be no change in the employee's normal rate of pay during these exchanges. Temporary exchanges of shifts may be effected if agreeable to associates directly concerned but must occur during the bi-weekly pay period.

Any overtime worked as a result of such exchange shall be paid at the employee's normal rate of pay.

## SECTION 15. SHARING OF OVERTIME

All overtime shall be shared equally and alike in each classification insofar as reasonable and practical (Changing the words "class of work" to "classification" will not change the intent or present interpretation in the handling or sharing of overtime.) If overtime must be assigned, it will be assigned to the individual with the least amount of overtime in each classification. Note: The sharing of overtime by the three (3) Backhoe Operators will occur with as much time as reasonably possible.

## SECTION 16. AWAITING EVIERGENCY CALLS

Four (4) qualified associates with the greatest continuous length of service in the Network Department will be called upon, one each week, to receive and respond to emergency Network calls. The associates so assigned shall be assured of eight (8) hours of standby pay per week to be paid at one and one-half (1-1/2) times their regular rate of pay after meeting the requirements of the eight (8) hours per day/forty (40) hours per week overtime eligibility provision. Work performed on Sunday, or their regular scheduled second day off, will be paid at two (2) times their regular rate of pay. Once these four (4) associates assume this duty they must continue to perform such duties unless they notify the Company in writing sixty ( 60 ) calendar days prior to the date they desire to be relieved of such duties. Once a request of this type is received they will not be eligible for eighteen (18) months to reassume these duties and then only if there is such a vacancy in existence. When one of these four (4) associates is on vacation or off for sickness and is scheduled for this duty, the next standby person on the scheduled standby roster will be called upon to fill these duties for that standby period.

## Network Maintemance On Call

One Utility and one Crew Leader in the Network Department will be called upon each week to receive and respond to maintenance related emergency calls. The associates so assigned shall be assured of eight (8) hours of standby pay per week to be paid at one and one half (1/2) times their regular rate of pay after meeting the requirements of the eight (8) hours per day/forty (40) hours per week eligibility provision. Work performed on their normal second day off will be paid at two (2) times their regular rate of pay.

When one of these associates is sick or on vacation at the time of their scheduled assignment, the next person in the classification of the absent associate on the standby roster will be called upon to fill these duties for that standby period.

Associates may, if they so desire, exchange their standby assignments provided the change is agreeable to the Company and the Union. Once the yearly schedule has been posted and at any time assignment changes are desired, it will be the responsibility of the scheduled associate to find their replacement from the classification of which they hold a position. Crew Leaders and Utility persons assigned to Field Service Emergency Standby duty will not be assigned to the yearly Network on Call schedule, but may fill vacancies on a volunteer basis provided the change is agreeable with the Company and the Union.

## SECTION 17. PAY DAYS

All associates shall be paid BI-weekly for work done during the two workweeks ending on the preceding Sunday midnight. All pay will be made by direct deposit and will be available in the employee's financial institution on the Friday following the end of the payroll period. Payroll stubs will be placed in the employee's company mailbox as they become available.

Associates who have been continuously in the service of the Company shall be entitled to the following weeks vacation annually:

Vacation Based on Completed Years of Continuous Service

| 1 year | 10 days | 14 years | 19 days |
| :--- | :--- | :--- | :--- |
| 2 years | 11 days | 15 years | 20 days |
| 3 years | 12 days | 16 years | 20 days |
| 4 years | 13 days | 17 years | 21 days |
| 5 years | 15 days | 18 years | 21 days |
| 6 years | 15 days | 19 years | 22 days |
| 7 years | 16 days | 20 years | 22 days |
| 8 years | 16 days | 21 years | 23 days |
| 9 years | 17 days | 22 years | 23 days |
| 10 years | 17 days | 23 years | 24 days |
| 11 years | 18 days | $* 24$ years | 24 days |
| 12 years | 18 days | $* 25$ years plus | 25 days |
| 13 years | 19 days | $* 30$ years plus | 30 days |

*NOTE: Any new hires after November 1, 1998 will no longer be able to earn more than the current allowance of five (5) weeks of vacation for working 24 or more years of service.

Effective January 1, 2008, employees hired during the current vacation year will be entitled to one (1) day of vacation for each "Completed Month of Continuous Service" up to 10 days, provided the employee has successfully completed their probationary period. This vacation must be taken before the end of the calendar year, with approval of the supervisor. The Company will allow an exception to this clause for a new associate who is hired during the last quarter of the year.

Vacation pay shall be equal to the normal weekly wage of the associate, which is forty (40) hours at a regular straight time hourly rate, with the exception of those associates who work from 4:00 p.m. to 12:00 midnight, or 12:00 midnight to 8:00 a.m., and their pay shall be equal to the normal weekly wage plus shift differential.

The Company will allow associates who have earned up to ten (10) days of vacation the option to take two (2) weeks of vacation in increments of one day with as much notification as reasonably possible to their supervisor. The first period will be selected in order of Company seniority and the second pick selected when an opening exists. The Company has the sole right to determine the number of associates exercising this option at any given time.

The company agrees to grant vacations at the time most desired by the associates if possible to do so without interfering with the orderly operation of the plant.

In order to provide each associate with the most desirable dates to schedule their vacation, it is agreed that the vacation roster listing associates in descending order of the company seniority be posted November 1 and removed December 15 of each year. The senior associate shall list their desired date as soon as possible, and will post their desired date within 24 hours after being
notified by their supervisor to do so. It is further understood that the 24 -hour directive will not be given prior to November 5 of each year.

Associates shall be allowed to change their vacation schedule by giving the Company a ten (10) calendar-day notice, provided it does not conflict with another associate's vacation.

An associate bidding into different classifications after the vacation schedule has been posted will reschedule their vacation so that it will not conflict with other associates in that classification or category for that year. All following years, vacation schedules will be made by seniority.

Seniority for vacation purposes shall be divided into five categories as follows:

1. Three associates in the Production Department, exclusive of Maintenance Persons will be permitted to take their vacation at the same time. The senior Treatment Plant OperatorRelief associate would have the right to select the shift they are to relieve, however, once assigned; they shall remain on this shift for the duration of the vacancy.
2. Maintenance Persons. The Maintenance Persons in the Production Department will arrange their vacation schedule with the supervisor of the department.
3. Meter Reader Classification. Two associates in this classification may take their vacations at the same time.
4. Crew Leader and Utility. Two associates in these classifications may take their vacations at the same time.
5. Backhoe Operator. The Backhoe Operators will arrange their vacation schedule with the supervisor of the department.
6. Field Service Representative Classification. Two associates in this classification may take their vacations at the same time.

In the event that a holiday occurs during an associate's vacation, they shall be given, in addition to their regular vacation pay, a bonus equal to the number of hours they would normally work on such day multiplied by their straight time hourly rate.

## SECTION 19. DEATH IN FAMILY

The Company shall grant three (3) consecutive scheduled working days at straight time in the event of the death of one of the following members of the associates' immediate family. Immediate family includes husband and wife, children, mother or fathers, brother, sister and mother-in-law or father-in-law, stepfather or stepmother only. The company shall grant two (2) scheduled work days with pay at straight time for the purpose of attending the funeral of a grandchild, grandmother and grandfather and one (1) scheduled work day with pay at straight time for the purpose of attending the funeral of an immediate brother-in-law, sister-in-law, grandmother and grandfather of spouse. The associate shall report to work no later than the second scheduled workday following the funeral. The associate shall advise the Company when he or she shall return to work.

## SECTION 20. DISABILITY BENEFITS AND LIFE INSURANCE

A. Leaves of Absence for Sickness or Accident Disability

Associates will be granted leaves of absence for sickness or accident disability for the maximum periods shown below:

Length of Service
Up to six months
Six months but less than two years
Two years but less than five years
Five years and over

Maximum Period of
Leave of Absence
Two weeks
Twenty-eight weeks
One year
Two years
B. Payments During Leaves of Absence for Sickness or Accident Disability

During periods of leave of absence for sickness or accident disability, except for occupational disability incurred while in the employ of another employer or while selfemployed, associates will be paid in maximum amounts hereinafter set forth (as referenced in the Group Insurance SPD Plan booklet, page 149, regarding 52 weeks of coverage):

An associate shall not be paid for the first day sick leave unless they have not been absent on sick leave during the previous six (6) months or unless they are hospitalized.

The six months above will be reduced to five months for associates with five years of continuous service and will be reduced one additional month for each additional year of continuous service with the company.

Each associate who is disabled and unable to perform their regular duties as a consequence of illness or accident shall be paid as follows during such disability:

## Length of Service

At least six months but less than One year

Over one year

Maximum Number of Weeks in Any "Disability Year" in Which Payment Will Be Made by Company

One week

One week for each complete year of service with a minimum of two weeks

1. If the associate is entitled to, in any given week, Weekly Sickness and NonOccupational Benefits under the Group Insurance Plan or Temporary Total Disability Benefits under the Kentucky Workers' Compensation Act, the payment by the Company in such week shall be limited to the difference between the associate's normal weekly earnings and the amount of such benefits.
2. The company may require a suitable statement from the associate's medical doctor certifying to the disability or may elect to have a medical doctor selected by it examine the associate.
3. The associate's anniversary date of employment shall be used to determine the maximum benefits to which they are entitled.
4. The "Disability Year" shall be defined as the twelve month period between January and December. The disability period will renew in January of each year. The commencement of such a disability year is activated by an absence due to sickness or accident and the extent of benefits for that disability year is determined by the length of service at the beginning of the disability year.

If an illness continues from one year to another, the employee will continue to draw pay from the company until they have received the maximum weeks available in the year the illness originally occurred. Employees shall not then be entitled to further payments until they return to active employment at least one day, nor shall they be entitled to further payments for the same or related disability until they have returned to active employment for two weeks.

In recognition of the fact that delay sometimes occurs in the determination of benefits payable under the Workers' Compensation Law, the company agrees in order to assure the continuity of income to a disabled associate that it will pay the associate's normal weekly wages in full for the period indicated to the schedule above, subject to agreement by the associate that any benefits currently or subsequently received from the Workers' Compensation Carrier (other than reimbursement of expenses) with respect to said period of disability, shall be assigned to the company.

It is understood that these payments from the Compensation Carrier to be assigned to the company include only weekly benefits for temporary disability.

## SECTION 21. INSURANCE PLAN, PENSION AND 401 (K) SAVINGS PLANS

The Company and the Union agree that the provisions of the American Water System Group Insurance Plan, Pension Plan and 401 (K) Savings Plan shall be in full force and effect through July 31, 2010. The respective Plans may thereafter be amended, modified or terminated through negotiations between American Water Works Company, Inc. and The National Conference of Firemen and Oilers Union. The Company and Union agree to be bound by the results of any renegotiations of the Group Insurance Plan, Pension Plan and 401 (K) Savings Plan between the American Water Works Company, Inc. and the National Conference of Firemen and Oilers Union. Group Insurance, Pension Plan and 401 (K) Savings Plan issues shall not be subject to any local negotiations.

## SECTION 22. DEPARTMENT HEAD NOT TO PERFORM WORK - EXCEPTION

Except in case of actual emergency, the head of a department or foreman covered by this Agreement shall not perform any of the work normally performed by associates under their supervision, but they shall have the right to demonstrate how they desire to have the work performed.

The company may temporarily assign a trainee to work with one of the maintenance or construction crews for the purpose of acquainting the trainee with the various elements of the job to be carried out, along with acquainting the trainee with the various terminology that is used in describing the materials used for a particular job, as well as the type of equipment, etc. that is used. The Company agrees that when this trainee is actually performing the duties that would normally be carried out by members of the bargaining unit, that a member of the bargaining unit will not be required to perform any work, and will simply advise the trainee as to the procedure to be used to carry out the particular job. The Company's intention is to not replace a member of the bargaining unit with the trainee, but to simply assign the trainee as an additional person to a particular job for training purposes.

## SECTION 23. GUARANTEED WORK WEEK AND RIGHT TO SUBCONTRACTING

1. The Company may contract for the following:
A. Installation of mains and new fire hydrants.
B. Service line renewals which include the tap, the service line, the meter setter and meter box, meter and initiation of service.
C. All new service lines which includes the tap, the service line, the meter setter and meter box, meter and initiation of service.
D. Painting of fire hydrants.
E. Changing length of service meters.

Provided, however, that present associates of record on November 1, 1982, who are members of this union shall be assured forty (40) hours of pay per week, provided that the associates are at all times, during such work week, available for work. This assurance will not be applicable to any associate hired after November 1, 1982.
2. It is further agreed that all maintenance work required, except for the field repair and testing of large (larger than 2") meters in the Meter Repair Program, after the completion of the contracted work referenced in paragraph one of this Section will be performed by members of this Union.
3. It is further understood that members of this Union will perform the installation of other meters, not covered in 1-B, 1-C, and 1-E above.
4. In addition, the Company may, by giving a fifteen-(15) day written notifieation to the Union, be permitted to utilize contractors to perform union work during peak periods. The notification will include what work is to be performed and the duration of the contracting period.

The Company may contract with temporary employment firms to fulfill summer temporary laborer openings in any Department covered by this contract for periods not to exceed 90 calendar days.

## SECTION 24. EOUAL OPPORTUNITY EMPLOYER

The employer and the Union agree not to discriminate against any individual with respect to employment matters, including transfer, recruitment, selection for training, discipline, layoff, or rates of pay and other compensation. Further there shall be no discrimination in terms or conditions of employment because of such individual's gender, marital status, race, color, religion, sex, national origin or age, disability, veteran status, sexual orientation or any other characteristic protected by law nor will they limit, segregate or classify associates in any way to deprive any individual associate of employment opportunities because of their race, color, religion, sex, national origin, or age.

## SECTION 25. SAFETY SHOES

All associates affected by this agreement will wear safety shoes and these shoes will meet with the current OSHA and ANSI Z41.1 standards. The associates will make all safety shoe purchases and the style of shoe to be purchased will be determined by the company. These purchases will not be made while on company time. Whenever an associate feels new shoes are needed they are to check with their immediate supervisor who will issue an authorization form to allow the employee to purchase a new pair of safety shoes. Safety shoe purchases will be made at the approved Shoe-Supplier who will provide a list of approved styles. If the cost of the safety shoes selected exceeds the established dollar limit designated by the Company the associate will pay any overage at the time of purchase to the shoe supplier. Employees will not be allowed to utilize the supplier's online service for this transaction.

## SECTION 26. SMOKING IN THE WORKPLACE POLICY

Kentucky-American Water is dedicated to providing a healthy and safe work environment for its associates. Efforts to maintain clean indoor air, in facilities and vehicles, by minimizing exposure to side-stream or secondary tobacco smoke are consistent with this goal. The Company will reach this goal by prohibiting the smoking or use of tobacco products in any company facility or vehicle. The chewing of tobacco, use of snuff, etc. are prohibited in all Company facilities and vehicles due to sanitary conditions poor appearance and reduced image which is reflected negatively toward the Company. In addition, these tobacco products will not be allowed at any outdoor job-site if associates are working with or around asbestos cement pipe, underground petroleum tanks, or any chemical storage tank or area. This policy will use the progressive disciplinary steps as outlined in the Company Code of Conduct.

The Union recognizes that except as expressly limited by this agreement, the management of the associates, the direction of the workforce and the operation of the plant are vested in the employer. The Union further recognizes that as an aspect of such management rights, the
employer may make and enforce such rules as the Company may deem necessary or proper for the conduct of its associates and the operation of the plant, except to the extent that such rules may conflict with the provisions of this agreement.

The above-mentioned management rights are not to be interpreted as being all-inclusive, but merely indicate the type of rights, which belong to and are inherent to management. It is understood that any of the rights, power or authority the Company had prior to the signing of this agreement are retained by the Company, except those specifically abridged, granted or delegated to others or modified by this agreement.

## SECTION 28. COMPLETE AGREEMENT

It is the intent of the parties hereto that the provisions of this agreement, which supersedes all prior agreements and understandings including past practices, oral or written, expressed or implied, between such parties, shall govern their entire relationship and shall be the sole source of any and all rights or claims which may be asserted in arbitration hereunder, or otherwise.

The provisions of this agreement can be amended, supplemented, rescinded or otherwise altered only by mutual agreement in writing hereafter signed by the parties.

## SECTION 29. DURATION OF AGREEMENT

This agreement shall be in effect from 12:01 a.m., November 1, 2007, and continue until 12:00 midnight, October 31, 2010. Notwithstanding any other provision of this contract, the parties agree that either party may, during the sixty (60) calendar period immediately proceeding the anniversary date of this contract, give notice, in writing, to the other party of its desire to renegotiate a revised agreement.

IN WITNESS WHEREOF, the parties hereto have hereunto set their hands the day and year first above written.
$\mathbb{K} \mathbb{N} T U C K Y-A \mathbb{M E R I C A N}$ WATER


NATIONAL CONFERENCE OF FIREMEN AN ID OILERS, LOCAL. 320

Representative Local No. 320

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## AGREEMENT

THIS AGREEMENT executed on $\qquad$ and effective as of the .th of , by and between KENTUCKY-AMERICAN WATER of Lexington, Kentucky, party of the first part, hereinafter referred to as the "Company," and NATIONAL CONFERENCE OF FIREMEN AND OILERS, LOCAL 320, of Louisville, Kentucky, party of the second part, hereinafter referred to as the "Union;"

## WITNESSETH:

WHEREAS, the Company is engaged in furnishing an essential public service which vitally affects the health, safety, comfort, and general well-being of a large number of people in the communities furnished water service by the Company; and

WHEREAS, the very existence of the Company is conditioned upon carrying out its obligations and responsibilities to the public served; and

WHEREAS, this responsibility to the public is a mutual responsibility of Associates and management which requires that any disputes arising between the Associates and management be settled in an orderly way without interruption of water service; and

WHEREAS, both parties to this Agreement hereby recognize this mutual responsibility of service to the public

NOW, THEREFORE, in furtherance of harmonious relations among Associates, the Management, and the public, it is mutually agreed by the parties hereto that there shall be no strike or lockout during the term of this Agreement, and this mutually agreed covenant shall continue through the future relations between the parties hereto, and that all matters of dispute pertaining to the interpretation or application of the terms of this Agreement shall be settled by arbitration as hereinafter provided.

It is further agreed as follows:

## SECTION 1. RECOGNITION

The Company shall recognize the Union as the sole representative of Associates covered by this Agreement except for the associates covered by what is known as the Inside Contract group, non-union/non-management and management personnel. The Company agrees to bargain collectively with the properly constituted and proven representatives of the Union on the matters affecting such associates.

## SECTION 2. NEW ASSOCIATES

It is recognized by the parties hereto that in the operation of the water works property of the Company on account of the responsibility at all times to furnish a safe and adequate supply of water to the City of Lexington and surrounding territory, there can be no division of this responsibility, and it is agreed that the Company, therefore, must be unhampered in the selection of its associates.

The Company agrees that in the filling of vacancies it will give preference to former qualified associates of the Company whose employment was terminated by layoff Moreover, the Company agrees that this Section is to be understood as subject to the provisions of this Agreement in regard to seniority, and any differences between the Company and the Union under this Section will be subject to the arbitration provisions of this Agreement.

## SECTION 3. UNION SECURITY

The Company agrees that all present associates of the Company represented by the Bargaining Unit must, as a condition of continued employment, become members of the Union within thirty (30) calendar days from the effective date of this Agreement and remain members in good standing for the duration of this Agreement.

The Company further agrees that all new associates eligible for membership in the Bargaining Unit will be required as a condition of continued employment to become members of the Union within thirty (30) calendar days from the date of their employment and remain members in good standing for the duration of this Agreement.

It is further agreed that each new associate shall be granted a period not to exceed ninety (90) calendar days as a probationary period to demonstrate their ability and qualifications to perform the duties for which they were hired. In the event a new associate fails to qualify within the ninety- ( 90 ) calendar day period following the date of their employment they shall be discharged This provision in no way relieves the associate of joining the Union as provided above.

It is agreed between the parties that seniority rights for new associates shall not exist until after ninety m (90) calendar day's continuous employment by the Company. However, after ninety(90) calendar day's continuous employment, seniority rights shall revert to, and be considered to have been in full force and effect, since the beginning of the ninety- (90) calendar day's continuous employment. An evaluation shall be performed at interim periods during the employment.

## SECTION 4. UNION DUES

Dues shall be deducted bi-weekly by the Company from the wages of each member of the Union who is an associate of the Company, and who requests and authorizes the Company in writing to make such deductions from their wages or salary. Deductions shall be made by the Company every other week and shall be remitted once per month to the Secretary-Treasurer of the Union. Authorization given the Company by the associate shall be irrevocable as long as the associate is a member of the bargaining unit.

## SECTION 5. RULES, REGULATIONS, AND GOOD FAITH

The Union agrees that its officers and members will live up to the Company's reasonable rules and regulations in the interest of safety, economy and continuity of service to the public.

The Union and Company agree that they will not engage in subterfuge for the purpose of defeating or evading the provisions of this Agreement.

## SECTION 6. SENIORITY

Beginning with the effective date of this contract, the senionity provisions are as follows:
It is understood and agreed that in all cases of job bidding and transfer of associates, the following factors shall be considered.

1. Length of continuous service (defined as senionity within the outside union group)
2. Qualifications.

## 3. Physical fitness

The Company will review all relevant information relating to all bidders on any job and has the right to determine which bidder has the qualifications for the position. Only if it is determined that items 2 and 3 are equal, shall item 1 govern. The first criteria determining the length of continuous service will be company-wide seniority. All associates in the Union are divided into two departments:

## Production

Associates in the Production Department are classified as follows:
Treatment Plant Operator
Maintenance Technician I
Maintenance Technician II
Treatment Plant Operator - Fixed Relief
Treatment Plant Operator - Relief
Treatment Plant Operator - Utility

The associates in the Network Department are classified as follows:
Backhoe Operator
Junior Backhoe/Crew Leader
Crew Leader
Utility
Temporary Laborer
Meter Technician
Field Service Representative
Meter Reader (as of 11-1-88)
Meter Reader (after 11-1-88 but prior to 11-1-98)
Meter Reader (as of 11-1-98)

The associates in the Utility classification may be assigned to either the Network or Production Departments

The evening shift crew/s, if qualified, will be allowed to use the small backhoe without calling in a Backhoe Operator.

Whenever a large backhoe is needed, the senior available qualified Backhoe Operator must be contacted. The Junior Backhoe/Crew Leader will relieve the Backhoe Operator during vacancies, if in the judgment of the company it is needed. The Company reserves the right to fill the Junior Backhoe/Crew Leader position with the senior qualified associate when the position is vacant.

In cases of job bidding or transfer or decrease of associates in any particular department, factor 1 in this Section shall be interpreted to mean length of continuous service within the company

Seniority shall be in accordance with overall company-wide seniority within the outside union group

Notice of vacancy in an existing position or a newly created position shall be posted at places accessible to associates affected, and shall remain posted for a period of four consecutive days, within which time applicants eligible and desiring to fill such vacancy shall apply in writing to the official of the Company designated in the notice. Such notice shall set forth title of position to be filled, hours of work, days of relief, rate of pay and outline of duties. Within four consecutive days after the expiration of the posting period, the Company shall have assigned the accepted applicant to such vacancy or newly created position. In the event circumstances exist which will not allow the Company to move the successful bidder, the Company will be granted up to thirty (30) calendar days to move the associate to the duties of the bidded position. If at the end of this thirty- (30) calendar day period the associate is not actually performing these duties, the rate of pay for the bidded position will begin, provided pay scales are not a lower rate of pay.

The decision to apply or not to apply for promotion or transfer to an existing position or a newly created position is entirely within the associate's own option. The Union shall receive a copy of all bids.

When a job vacancy is posted and awarded to the successful bidder in accordance with the provisions of this Agreement, the second successful bidder will be listed on the Notice of Assignment. If the successful bidder who was awarded the position in accordance with this section does not qualify, or within the first 15 working days voluntarily steps down, the job will be awarded to the second successful bidder on the Notice of Assignment. If the second successful bidder does not qualify, or within the first 15 working days voluntarily steps down, the job will be reposted. This procedure will be applicable to all job vacancies, which will be affected by such disqualification or voluntary disqualification, within the first 15 working days, providing the associate, or associates involved have not qualified for the position they presently hold.

In the event a vacancy occurs while an associate is on vacation or sick leave, it is agreed that the Union and Company will jointly notify said associate of the existing vacancy. The Company will send a copy of this notice by regular U.S. mail delivery. The notice will be sent to the address of an associate as listed in the Company files. A copy of all mailed notices will be given to the appropriate shop stewards.

If the Union and the Company are unable to contact said associate, the associate shall be granted 48 hours at the conclusion of their vacation or sick leave the opportunity to bid on the vacancy.

Any associate assigned to a new position shall have up to ninety (90) working days in which to demonstrate their qualifications to perform the duties of that position as determined by the Company. If an associate is unable to qualify, or within the first 15 working days voluntarily steps down, they may return to the position from which they came without loss of seniority, even though an extension of the period has been granted, but shall forfeit for twelve (12) months all rights to bid for any job requiring like skills which may be subsequently posted. When an associate qualifies for a position, their seniority reverts back to the date of the awarding of the job. Company agrees to pay an associate in training for a classified position the rate of pay for that position when they perform the duties by themselves. An associate in training for a higher paying job shall be paid their present rate of pay for the first 90 working days or less if they are qualified sooner by the Company. Payment of the rate of pay as mentioned above shall in no way indicate that the associate has qualified for the position.

When an associate permanently fills a vacancy that requires certification by federal, state or local governmental agencies, they must demonstrate their ability to pass the certification test within ninety ( 90 ) calendar days. However, if the associate does not have the required job experience to fulfill the certification requirements of the governmental agency, they may be granted the necessary time to gain the job experience.

The Company reserves the right to temporarily fill any vacancy pending the operation of the procedure described hereinbefore. Temporary layoff shall be considered permanent when
the associate has been laid off for twenty-four (24) consecutive months, and any seniority rights established prior to permanent layoff shall, in event of rehiring, be considered nil.

If an associate fails to return to work within ten (10) working days after they have been notified by registered mail to return to work after such layoffs, and does not give a satisfactory reason after investigation by the Company and the Union for their failure to return within said ten (10) working days, any seniority record theretofore established shall be broken and such seniority record shall thereupon be considered nil

The senior associate in the top ranking classification in each of the shift departments shall have the right to select the shift they are to work and shall have the right to choose their weekly days off, provided, however, that after the choice is made by the senior operator in the Production Department, the other seniors in the department must choose their days and shifts so as not to require a swing shift associate to work sixteen (16) hours per day, or require the services of more than one (1) swing shift associate for operators. The selection, once made, shall be final unless changed under provision of Section 14.

It is mutually understood and agreed by all parties hereto that because of the Company's responsibility hereinbefore mentioned, the management must and shall be the judge of any associate's qualifications for promotion. However, should any difference of opinion occur in this regard, such differences shall be settled in accordance with the arbitration provisions of this Agreement.

The Company agrees to post permanently, in a conspicuous place in each department and plant, a company-wide seniority list, and such list shall be posted every six- (6) months. After the seniority list is posted, the associates will have thirty (30) calendar days during which they may protest the accuracy of the list in writing. Failing to make such protest within the thirty-(30) calendar day period shall constitute agreement and the list shall become permanent.

In the event an associate is displaced from their classification or department due to a cutback or revision of production or network methods, they may exercise their seniority rights in accordance with their overall company seniority within the outside union group.

## SECTION 7. RESPONSIBILITY

The shift operator on duty shall be in charge of the normal operation of the Pumping Station.

It is agreed by the parties that the Treatment Plant Operators may be assigned to other non-operator duties within the Plant during emergencies and/or when the plant is shut down

It is agreed that associates in the various shift classifications will not be transferred from their normal duties to perform duties normally performed by associates in other classifications when it is necessary to replace this associate, except in cases of emergency.

## SECTION 8. TEMPORARY TRANSFERS

Associates may be assigned temporarily to positions on a reverse seniority basis when feasible and practical, provided no senior associate desires the assignment. Associates temporarily așsigned shall be returned to their normal positions within a period not to exceed twenty-five (25) calendar days unless an extension be granted by mutual consent; provided, however, that where such temporary assignments are made to fill vacancies due to vacations, they may be continued for a period of thirty-five (35) calendar days.

When it becomes necessary for the Company to shift associates temporarily to new assignments, there shall be no change in the rate of pay to the associate so temporarily assigned except when such temporary assignment shifts an associate into a higher classification. In such cases the associate shifted temporarily to a higher classification shall receive for such temporary assignment the basic rate of pay established for the position. Associates transferred temporarily to lower paid positions shall continue to receive their regular rate of pay during such temporary transfer. Associates transferred permanently to other positions shall receive the rate of pay for the position to which they are transferred

It is mutually agreed that adjustments in pay shall not be made under the provisions of this Section unless the transfer continues in effect for two (2) hours or more, and in no case shall the rate of pay of an associate be changed during any work shift or any work day except that when an associate continues without interruption for two (2) hours or more in such temporary assignment, that associate shall be paid the higher rate of pay for all time worked in the higher paid assignment.

When a meter reader is assigned to change AMR meters, the Company agrees to pay for work performed at the field service representative rate of pay.

## SECTION 9. DEMOTION OR DECREASE

When and if it should become necessary to curtail employment in any department associates affected are to be laid off in the inverse order of their employment in accordance with their overall company seniority and re-employed in the reverse order. An associate laid off from any department because of lack of work, may exercise their Company seniority by bumping any less senior associate, provided that they are able to perform the required duties of the new position and meet all the requirements in Section 6 Seniority. In all such cases the Company agrees to notify the Union ten (10) calendar days in advance where the layoff affects permanent full-time associates, and to seek an agreement as to the application of the seniority rights under this Section and under the Seniority Section of the Agreement. If such an agreement cannot be reached, then the question shall be settled under the arbitration of this Agreement.

## SECTION 10. REPRESENTATION AND ARBITRATION

The direct representatives of the Union shall be associates of the Company and shall be known as "Shop Stewards."

The Shop Stewards shall first attempt to handle all grievances before such grievances are referred to an International Representative of the Union. Associates may have a Shop Steward or witness present when conferences are held between associates and supervisors. Supervisors or other management personnel may require that a Shop Steward or witness be present when conferences are held with associates.

1. Should grievances arise over interpretation or application of the items of this Agreement, the aggrieved party must submit their grievance in writing to a Shop Steward whose duty it will be to confer, within three (3) working days of the occurrence, with the supervisor in an attempt to effect a settlement. The supervisor will have three (3) working days to sespond to the grievance at this first step in writing.
2. Should this procedure not result in a settlement, within five (5) working days of the denial at the first step, the matter shall be referred in writing to the Production or Network Superintendent or a designated representative who shall give a reply in writing within five (5) working days of the receipt of the grievance at this level.
3. Failing satisfactory settlement through this office, within fifteen (15) working days of the denial at the second step, the matter shall be referred in writing to the senior ranking official or a designated representative and to an International Representative of the Union. The senior ranking official or a designated representative shall give a reply in writing within a period of fifteen (15) working days of the receipt of the grievance at this level.
4. Should this procedure fail to effect a settlement, the matter shall be referred within five (5) working days, (unless an extension of time is requested by either party, not to exceed fifteen (15) working days), of the denial at the third step, to a mediator who will be selected from either the State Mediation or Federal Mediation services.
5. Should this procedure fail to effect a settlement, the matter shall be referred within five (5) working days, (unless an extension of time is requested by either party, not to exceed fifteen (15) working days), of the denial at the fourth step, to an arbitration board for the selection of an arbitrator.

The Company and the Union will request a representative from the American Arbitration Association who would be mutually accepted by the Company and the Union

The Arbitrator so constituted shall render a decision within sixty (60) calendar days after meeting, such decision being final and binding upon both parties to this Agreement.

The expense, if any, of the Arbitrator and rental of meeting facilities, shall be shared equally by the parties hereto. Both parties must agree on the location of the meeting facilities.

If an associate claims to have been unjustly discharged, they must file a complaint with the Union to this effect within five (5) working days after the effective date of the discharge. The Union and Company agree that steps 1 and 2 of the grievance procedure will be waived and the grievance moved to the 3 rd step. The 3 rd step procedure for discharges is that the Union
must submit this grievance in writing within fifteen (15) working days of the effective date of the discharge to the senior ranking official of the Company or a designated representative. The senior ranking official or a designated representative shall give a reply in writing within a period of thirty (30) working days of the receipt of the grievance at this level. No person will be terminated without the chief steward, or an international union representative present.

## SECTION 11. LEAVE OF ABSENCE

Associates may be granted ninety (90) calendar days leave of absence for good cause but without pay and without prejudice to seniority or other rights and such leave of absence may be renewed for one or more successive ninety (90) calendar day periods by mutual agreement between the Company and the Union. Associates seeking such leave of absence must make a request in writing stating the cause, and must present such request to a joint conference between Shop Stewards and management for consideration. If the Shop Stewards and management fail to agree on the granting or denial of the request for leave of absence, then the questions shall be settled under the arbitration provision of this Agreement. Should such leave of absence be granted as herein provided and the associate is employed by another concern, or should they violate the terms of their leave during such leave of absence, said associate shall forfeit any or all seniority rights herein established

## SECTION 12. WAGES AND HOURS - NETWORK DEPARTMENT

The provisions of this Section shall apply to all associates in the Network Department who are engaged in reading, testing, repairing, removing and resetting meters, discontinuing and restoring service to consumers, engaged in excavation, backfilling, and other work necessary in the construction, operation and maintenance of the system; in installing and maintaining mains, servicing meters, meter installation, hydrants and valves, including pipe joiners' work, cutting and replacing pavements, yarning, caulking, heating and pouring jointing material, operating and using air compressor, using air compressor tools and equipment, machinery work, carpenter work, painting work and any other trade work necessary in construction and maintaining of vaults, manholes, any other structure in the system, or installation and maintenance of drainage, bracing or sheathing; in loading and unloading pipe, service material, meters, hydrants, and other equipment or materials necessary in the construction, operation or maintenance of the system; in the operating and maintenance of watershed buildings, equipment or any other property; and in the driving of automobiles or trucks incidental to the performance of the various types of work above mentioned.

The Company agrees that present associates of record on November 1, 1982, who are members of the Union shall be assured forty (40) hours of pay per week, provided that the associates are at all times, during such work week, available for work. This assurance will not be applicable to any associate hired after November 1, 1982.

Except in cases of emergency, associates performing the classes of work specified in this Section shall not be required to work on Sundays and the following holidays:

| New Year's Day | (2) Personal Floating Holidays* |
| :--- | :--- |
| Good Friday | Thanksgiving Day |
| Memorial Day | Friday after Thanksgiving |
| Fourth of July | Christmas Eve (December 24th) |
| Labor Day | Christmas |

*One (1) of the Personal Floating Holidays may be taken with as much notification as reasonably possible to their supervisor. The remaining Personal Floating Holiday may be taken with at least three (3) working days notice to the Company. The Company has the final decision to grant the day off as determined by the current workload. The Company has the right to deny the request the day prior to this scheduled day off, if conditions warrant. Personal Floating Holidays shall be taken within the calendar year January 1 through December 31

When any of these holidays falls on Sunday, it will be observed on the Monday following, except when a holiday falls on Sunday and is followed on Monday by another holiday. In this case the holidays will be observed on Sunday and Monday. Associates not required to work on either holiday will be assured of eight- (8) hours pay at their regular hourly rate for these holidays. Also, any holiday that falls on Saturday will be observed on the preceding Friday, except when such holiday is preceded by a holiday on Friday, the holidays will be observed on Friday and Saturday

Each associate with ninety (90) calendar days of continuous service covered by provisions of this Section who does not work on a holiday is assured of eight- (8) hours pay at their regular hourly rate for these holidays.

If the associate is absent anytime during the last four and one-half (4-1/2) hours of their last scheduled work day prior to a holiday(s) or anytime during the first four and one-half ( $4-1 / 2$ ) hours of their first scheduled work day following the holiday(s) (or the day the holiday(s) is/are observed) when they are scheduled to work, they shall not be paid for the holiday(s) unless they are subpoenaed or entitled to pay under leave of absence for sickness or accident disability, paid jury duty, paid vacation, or paid funeral leave.

When a holiday falls on Saturday or Sunday and is observed by the company on Friday or Monday as the case may be, the holiday bonus will be paid to shitt workers for time actually worked on the Saturday and Sunday that the holiday actually falls on, but shall not be paid for time worked by those employees on the Friday or Monday on which the company observes the holiday. An employee required to work on such a holiday shall receive, in addition, one and onehalf ( $1-1 / 2$ ) times their regular rate of pay for the hours worked up to eight (8) hours per day or forty (40) hours per week and shall be paid double-time for all time worked in excess of eight (8) hours per day on such Holiday. However, associates shall not be paid both daily and weekly overtime for the same hours worked.

Overtime will be paid at one and one half ( $1 \mathrm{I} / 2$ ) times their regular hourly rate of pay for all time worked in excess of forty (40) hours per week or eight (8) hours per day. All associates covered by this Section who are required to work on their second scheduled day off shall be paid two (2) times their regular hourly rate of pay, except those associates on scheduled standby duty who will be paid one and one-half ( $1-1 / 2$ ) times their regular hourly rate for all hours worked. Associates shall not be paid both daily and weekly overtime for the same hours worked.

Associates engaged in programmed inspecting and flushing of fire hydrants shall be paid the regular straight time hourly rate of the Field Service Representative classification and the appropriate shift differential for the hours actually worked as set forth in this contract.

Applications will be received from associates in the Crew Leader and Utility Classifications after a notice has been posted by the Company setting forth its intention to inspect and flush fire hydrants. Selection of the associates for this job shall be in accordance with Section 6 - Seniority.

For the associates covered by this Section, the regular hourly rates of pay shall be as follows.

## CLASSIFICATIONS



Crew Leader

NETWORK DEPARTMENT
Backhoe Operator

## REGULAR HOURLY RATE EFFECTIVE

11/1/04 11/1/05 11/1/06
$\$ 19.36$
$\$ 20.19 \quad \$ 21.05$
$\$ 18.91$
$\$ 19.73$
$\$ 20.57$
$\$ 18.47$
$\$ 19.27$
$\$ 20.10$

| Utility | $\$ 17.49$ | $\$ 1826$ | $\$ 19.06$ |
| :--- | :--- | :--- | :--- |
| Temporary Laborer | $\$ 12.17$ | $\$ 12.79$ | $\$ 13.42$ |
| Meter Technician | $\$ 1970$ | $\$ 20.54$ | $\$ 2141$ |
| Field Service Representative | $\$ 19.36$ | $\$ 20.19$ | $\$ 21.05$ |
| Meter Reader (as of 11-1-88) | $\$ 19.36$ | $\$ 20.19$ | $\$ 21.05$ |
| Meter Reader (after 11-2-88 but prior to 11-1-98) | $\$ 18.47$ | $\$ 19.27$ | $\$ 20.10$ |
| Meter Reader (as of 11-1 98) | $\$ 17.49$ | $\$ 1826$ | $\$ 1906$ |

The Company has the right to increase or decrease the number of shifts necessary to perform the work of the Company. A lunch period of thirty minutes will be allowed during each shift. If associates are assigned to shifts other than 7:30 a.m. $-4: 00$ p.m. or $8: 00 \mathrm{a} . \mathrm{m}$. to $4: 30$ p.m., they will receive shift differential premium rate, when appropriate, including overtime on a continuation basis.

The night shift network crew/s will consist of Crew Leader and Utility. This crew will substitute Sunday and Monday for the current listed Saturday and Sunday under Section 12 in regard to holiday observance. Examples of work schedules for the network crews are as follows:

| Monday - Friday | $7: 00 \mathrm{a} \mathrm{m}-3: 30 \mathrm{p} . \mathrm{m}$ |
| :--- | :--- |
| Monday - Friday | $7: 30 \mathrm{a} . \mathrm{m} .4: 00 \mathrm{p} . \mathrm{m}$ |
| Monday - Friday | $12: 30 \mathrm{p} . \mathrm{m}-9: 00 \mathrm{p} . \mathrm{m}$ |
| Tuesday - Saturday | $7: 30 \mathrm{a} . \mathrm{m}-4: 00 \mathrm{p} . \mathrm{m}$ |
| Sunday - Thursday | $7: 30 \mathrm{am}-4: 00 \mathrm{p} . \mathrm{m}$. |

In the event no associates bid on the open positions in the network department, the Junior Crew Leader/s and Junior Qualifed Utility/s will fill these positions. The night shift Crew Leader position will be bid. If no one bids this relief position, the next Junior Utility Person will be assigned these duties

The night shift crew will arrange all vacations with the network supervisor
The Company will make the decision to fill a vacancy due to sickness, personal business, short-term absences, etc depending on the workload and anticipated duration of the absence. Only one night shift Field Service Representative associate will be allowed to take their vacation at a time arranged through their immediate supervisor.

When any associate covered by the provisions of this Section is directed to report for work they shall receive four (4) hours pay at the rate prescribed in this Agreement, unless notified the night before not to report for work

There shall be ten (10) associates who will be classified as Crew Leader and who shall receive the Crew Leader rate of pay. When a vacancy occurs in the Crew Leader classification it will be bid. If the Company determines that it is necessary to go outside of the Meter Group (Meter Technician and Meter Reader classifications) to fill a temporary opening, the senior Crew Leader person desiring to fill in temporarily in these classifications will be given the opportunity to do so. The Company will not be required to advance the senior qualified Utility to the Crew Leader classification during temporary work periods unless management has decided the workłoad is sufficient to require the vacant Crew Leader position be filled.

If a Utility is assigned to be in charge of a vehicle, they shall be paid at the Crew Leader rate of pay.

An associate called back to work after having left the premises of the Water Company will be paid a minimum of two (2) hours pay at one and one-half (1-1/2) times their regular hourly rate, unless called in less than two (2) hours prior to their regular scheduled working hours in which event they shall be paid for the hours worked. Call-in pay is not applicable to those associates awaiting emergency calls or standby duties as covered by Section 16 .

It is agreed that the hauling and unloading of chemicals will be performed by associates with less seniority when feasible and practical

## SECTION 13. WAGES AND HOURS - PRODUCTION DEPARTMENT

This section shall apply to all associates engaged in the operation and maintenance of the Pumping Station and Filter Plants, pumping and transmitting equipment now maintained at tank sites.

The normal workweek for all associates performing the classes of work specified in this Section shall be forty (40) hours consisting of five (5) consecutive eight (8) hour days. Days off shall be consecutive except in the case of the Treatment Plant Operator-Relief classification. For all time worked in excess of forty (40) hours in any one week or eight (8) hours per day, one and one-half ( $1-1 / 2$ ) times the regular hourly rate of pay shall be paid, with the understanding that because of the necessity of continuous operation there shall be no premium pay for work done on Sundays as such. If the associate covered by this Section is required or requested by the Company to perform work on a day which is normally their second day off, they shall in that event be paid two (2) times their regular hourly rate of pay for all time worked on such day.

No daily overtime shall be paid when associates are changing from one shift to another, or when associates at their own request are working extra time in order to get off during regular shifts. Associates shall not be paid daily and weekly overtime for the same hours worked.

The Company agrees that present associates of record on November 1, 1982, who are members of this Union shall be assured forty (40) hours of pay per week, provided that the associates are at all times, during such work week, available for work. This assurance will not be applicable to any associate hired after November 1, 1982.

Associates performing classes of work specified in this Section are normally required to work on the following eleven (11) holidays, namely;

| New Year's Day | (2) Personal Floating Holidays* |
| :--- | :--- |
| Good Friday | Thanksgiving Day |
| Memorial Day | Friday after Thanksgiving |
| Fourth of July | Christmas Eve (December 24th) |
| Labor Day | Christmas |

New Year's Day
Good Friday
Memorial Day
Fourth of July
Labor Day
(2) Personal Floating Holidays*

Thanksgiving Day
Friday after Thanksgiving
Christmas Eve (December 24th)
Christmas
when such holidays fall on what are scheduled working days for the associates
*One (1) of the Personal Floating Holidays may be taken with as much notification as reasonably possible to their supervisor. The remaining Personal Floating Holiday may be taken with at least three-(3) working days notice to the Company. The Company has the final decision to grant the day off as determined by the current workload. The Company has the right to deny the request the day prior to this scheduled day off, if conditions warrant. Personal Floating Holidays shall be taken within the calendar year January 1 through December 31.

If the associate is absent any time during the last four and one-half (4-1/2) hours of their last scheduled work day prior to a holiday(s) or any time during the first four and one-half (4-1/2) hours of their first scheduled work day following the holiday(s) (or the day the holiday(s) is/are observed) when they are scheduled to work, they shall not be paid for the holiday(s) unless they are subpoenaed or entitled to pay under leave of absence for sickness or accident disability, paid jury duty, paid vacations or paid funeral leave.

When a holiday falls on Saturday or Sunday and is observed by the company on Friday or Monday as the case may be, the holiday bonus will be paid to shift workers for time actually worked on the Saturday and Sunday that the holiday actually falls on, but shall not be paid for time worked by those employees on the Friday or Monday on which the company observes the holiday. An employee required to work on such a holiday shall receive, in addition, one and onehalf $(1-1 / 2)$ times their regular rate of pay for the hours worked up to eight ( 8 ) hours per day or forty (40) hours per week and shall be paid double-timie for all time worked in excess of eight (8) hours per day on such Holiday. However, associates shall not be paid both daily and weekly overtime for the same hours worked.

Associates who are scheduled to work on such holidays, but who are not required to do so shall be paid eight (8) hours pay for each such holiday at regular hourly rates of pay. On a holiday, the associate working the actual holiday will receive the premium pay for that day.

When any of these holidays falls on Sunday, it will be observed on the Monday after, except when a holiday falls on Sunday and is followed on Monday by another holiday. In this case the holiday will be observed on Sunday and Monday. Also, any holiday that falls on Saturday will be observed on the preceding Friday except when such holiday is preceded by a holiday on Friday, the holidays will be observed on Friday and Saturday.

Each associate with ninety ( 90 ) calendar days or more of continuous service covered by provisions of this Section who does not work on the observed holiday is assured of eight (8) hours pay at their regular hourly rate for the holiday.

For associates covered by this Section, the regular hourly rate of pay shall be as follows:

| CLASSIFICATIONS REGY | REGULAR HOURLY RATE EFFECTIVE |  |  |
| :---: | :---: | :---: | :---: |
| PRODUCTION DEPARTMENT | 11/1/04 | 11/1/05 | 11/1/06 |
| Treatment Plant Operator (Monday - Friday day shift) | \$19.70 | \$20.54 | \$21.41 |
| Treatment Plant Operator (12 Mid - 8:00 a.m. Shif) | \$20.60 | \$21.47 | \$22.36 |
| Treatment Plant Operator (4:00 p.m. 12 Mid , shift) | \$20.32 | \$21.18 | \$22.07 |
| Treatment Plant Operator (Swing shif) | \$20.41 | \$21.27 | \$22.16 |
| Maintenance Technician I | \$19.70 | \$20.54 | \$21.41 |
| Maintenance Technician II | \$19.70 | \$20.54 | \$21 41 |
| Treatment Plant Operator - Fixed Relief | \$19.34 | \$20.17 | \$21.03 |
| Treatment Plant Operator-Relief * | \$18.72 | \$19.53 | \$20.37 |
| Treatment Plant Operator - Utility (day shift) | \$18.47 | \$19.27 | \$20.10 |
| Treatment Plant Operator - Utility (12 Mid - 8:00 a.m.) | \$19.38 | \$20.21 | \$21.07 |
| Treatment Plant Operator - Utility (4:00 p.m. - 12 Mid ) | \$19.10 | \$1992 | \$20.77 |
| Treatment Plant Operator - Utility (Swing Shift) | \$19.02 | \$19.84 | \$20.69 |

* Plus appropriate shift differential for all hours worked other than day shift hours worked. Swing shift and Fixed Relief rates are a weighted average of appropriate classifications worked to include appropriate shift bonus and shift differential.
NOTE for Reference:
Included shift differential incentive pay into an hourly equivalent and add to the regular rate of pay for those positions affected (Production Department):

12 midnight shift-
$\$ 0.48$
Swing Shift \& 4-12 midnight shift - \$0 31
Fixed Relief \& Relief -
$\$ 0.24$

Include shift differential into appropriate Production scheduled shift hourly rates:
12 Midnight - 8:00 a.m shift -
$\$ 0.40$
4-12 Midnight shift -
$\$ 0.30$

Note: Annual wage increases are based on day shift base rate in Production, not the inclusion of the shift differential incentive pay and shift differential.

The senior Treatment Plant Operator-Relief associate will have the right to select the shift they are to relieve, however, once assigned they shall remain on this shift for the duration of the vacancy.

Associates covered by this Section and Section 12, Paragraph 11 (Hydrant Flushing), and also Section 16 of this contract, who are required to work on either of the two shifts between 4:00 pm. and 8:00 arm. will be paid an additional thirty cents ( $\$ 0.30$ ) per hour for the 4:00 p.m. to 12:00 midnight shift and forty cents ( $\$ 0.40$ ) per hour for the 12:00 midnight to 8:00 a m. shift for those hours actually worked. The Field Service Representative associates working other than the normal day shift will receive the shift differential that is applicable from 4:30 p.m. till 8:00 am. NOTE: Shift Differential rates are included in the appropriate Production hourly rates listed above.

## Production Maintenance On Call:

The associates in the Maintenance Technician I \& II classifications will be called upon, one each week, to be available at all times to receive and take calls in the Production Department. They will receive during that week two (2) times their regular rate of pay for all hours worked due to being called out for overtime. If they are called out to work overtime on their second day off they will receive two and one half $(21 / 2)$ times their regular rate of pay for those hours worked

## SECTION 14. RIGHI TO CHANGE SHIFTS

Associates may, if they so desire, temporarily exchange their shifts provided the change is agreeable to the Company and the Union, and does not interfere with the orderly operation of pumping and filter plants. Temporary exchanges of shifts may be effected if agreeable to associates directly concerned but must occur during the bi-weekly pay period

Any overtime worked as a result of such exchange shall be paid at the regular straight time rate.

## SECTION 15. SHARING OF OVERTIME

All overtime shall be shared equally and alike in each classification insofar as reasonable and practical (Changing the words "class of work" to "classification" will not change the intent or present interpretation in the handling or sharing of overtime.) Note: The sharing of overtime by the three (3) Backhoe Operators will occur with as much reason as is possible.

## SECTION 16. AWAITING EMERGENCY CALLS

Four (4) qualified associates with the greatest continuous length of service in the Network Department will be called upon, one each week, to remain at home to receive and take care of emergency calls. The associates so assigned shall be assured of eight (8) hours of standby pay per week to be paid at one and one-half ( $1-1 / 2$ ) times their regular rate of pay after meeting the requirements of the eight (8) hours per day/forty (40) hours per week overtime eligibility provision. Sunday, as their second day off, will be paid at one and one half (11/2) times their regular rate of pay. Once these four (4) associates assume this duty they must continue to perform such duties unless they notify the Company in writing sixty (60) calendar days prior to the date they desire to be relieved of such duties. Once a request of this type is received they will not be eligible for eighteen (18) months to reassume these duties and then only if there is such a vacancy in existence. When one of these four (4) associates is on vacation or off for sickness and is scheduled for this duty, the next standby person on the scheduled standby roster will be called upon to fill these duties for that standby period. It is understood that when a vacancy occurs in the classification of Meter Technician, the Company shall have the right to schedule a Meter Technician associate during the hours stated below. It is further understood that the Meter Technician presently assigned may elect to bid on the contemplated job assignment, to work at meter repairing or other assigned duties, and shall also answer and take care of emergency calls between the hours of 4:00 p.m. and 8:00 a.m., beginning at 12:01 a.m., Monday through 12:00 midnight, Friday. Their rate of pay will be the regular hourly rate of a Meter Technician, but not the overtime rate during these hours In addition, they will be paid shift differential in accordance with the $3^{\text {rid }}$ from the last paragraph of Section 13

## SECTION 17. PAY DAYS

All associates shall be paid BI-weekly for work done during the two workweeks ending on the preceding Sunday midnight. Associates who are scheduled off on Friday may pick up their checks at the Business Office on Thursday afternoon, provided they are available. Paychecks will be given to associates only unless written authorization is given to release the check to a specific person

## SECTION 18. VACATIONS

Associates who have been continuously in the service of the Company shall be entitled to the following weeks vacation annually:

Vacation Based on Completed Years of Continuous Service

| 1 year | 10 days | 14 years | 19 days |
| :--- | :--- | :--- | :--- |
| 2 years | 11 days | 15 years | 20 days |
| 3 years | 12 days | 16 years | 20 days |
| 4 years | 13 days | 17 years | 21 days |
| 5 years | 15 days | 18 years | 21 days |
| 6 years | 15 days | 19 years | 22 days |
| 7 years | 16 days | 20 years | 22 days |
| 8 years | 16 days | 21 years | 23 days |
| 9 years | 17 days | 22 years | 23 days |
| 10 years | 17 days | 23 years | 24 days |
| 11 years | 18 days | $* 24$ years | 24 days |
| 12 years | 18 days | $* 25$ years plus | 25 days |
| 13 years | 19 days | $* 30$ years plus | $\mathbf{3 0}$ days |

${ }^{*}$ NOTE: Any new hires after November 1, 1998 will no longer be able to earn more than the current allowance of five (5) weeks of vacation for working 24 or more years of service.

Employees hired during the current vacation year will be entitled to 1 day of vacation for each "Completed Month of Continuous Service" up to 10 days. This vacation must be taken any time after a "Completed Month of Continuous Service," must be taken before the end of the calendar year

Vacation pay shall be equal to the normal weekly wage of the associate, which is forty (40) hours at a regular straight time hourly rate, with the exception of those associates who work from 4:00 p.m. to 12:00 midnight, or 12:00 midnight to 8:00 a.m., and their pay shall be equal to the normal weekly wage plus shift differential

The Company will allow associates who have eared up to ten (10) days of vacation the option to take two (2) weeks of vacation in increments of one day with as much notification as reasonably possible to their supervisor. The first period will be selected in order of Company seniority and the second pick selected when an opening exists. The Company has the sole right to determine the number of associates exercising this option at any given time.

The company agrees to grant vacations at the time most desired by the associates if possible to do so without interfering with the orderly operation of the plant.

In order to provide each associate with the most desirable dates to schedule their vacation, it is agreed that the vacation roster listing associates in descending order of the company seniority be posted November 1 and removed December 15 of each year. The senior associate shall list their desired date as soon as possible, and will post their desired date within 24 hours after being notified by their supervisor to do so. It is further understood that the 24 -hour directive will not be given prior to Novernber 5 of each year.

Associates shall be allowed to change their vacation schedule by giving the Company a ten (10) calendar-day notice, provided it does not conflict with another associate's vacation.

An associate bidding into different classifications after the vacation schedule has been posted will reschedule their vacation so that it will not conflict with other associates in that classification or category for that year. All following years, vacation schedules will be made by seniority.

Seniority for vacation purposes shall be divided into five categories as follows:

1. Three associates in the Production Department, exclusive of Maintenance Persons will be permitted to take their vacation at the same time. The senior Treatment Plant OperatorRelief associate would have the right to select the shift they are to relieve, however, once assigned; they shall remain on this shift for the duration of the vacancy.
2. Maintenance Persons. The Maintenance Persons in the Production Department will arrange their vacation schedule with the supervisor of the department.
3. Meter Reader Classification. Two associates in this classification may take their vacations at the same time.
4. Crew Leader and Utility. Two associates in these classifications may take their vacations at the same time.
5. Backhoe Operator The Backhoe Operators will arrange their vacation schedule with the supervisor of the department.
6. Field Service Representative Classification. Two associates in this classification may take their vacations at the same time.

In the event that a holiday occurs during an associate's vacation, they shall be given, in addition to their regular vacation pay, a bonus equal to the number of hours they would normally work on such day multiplied by their straight time hourly rate

## SECTION 19. DEATH IN FAMILY

When death occurs in the immediate family of an associate and in a locality where it is reasonably possible for the associate to attend the funeral, the company shall grant said associate up to three (3) consecutive scheduled working days at straight time for the purpose of making necessary arrangements and attending the funeral. The associate shall report to work no later than the second scheduled workday following the funeral. The company should be advised when the associate plans to return to work. Within the meaning of this section, immediate family includes husband and wife, children, mother or fathers, brother, sister and immediate mother-inlaw or father-in-law, stepfather or stepmother only. The company shall grant two (2) scheduled work days with pay at straight time for the purpose of attending the funeral of a grandchild, grandmother and grandfather and one (1) scheduled work day with pay at straight time for the purpose of attending the funeral of an immediate brother-in-law, sister-in-law, grandmother and grandfather of spouse.

# SECTION 20. DISABILITY BENEFITS AND LIFE INSURANCE 

## A. Leaves of Absence for Sickness or Accident Disability

Associates will be granted leaves of absence for sickness or accident disability for the maximum periods shown below:

|  | Maximum Period of <br> Length of Service |
| :--- | :--- |
| Leave of Absence |  |

## B. Payments During Leaves of Absence for Sickness or Accident Disability

During periods of leave of absence for sickness or accident disability, except for occupational disability incurred while in the employ of another employer or while selfemployed, associates will be paid in maximum amounts hereinafter set forth (as referenced in the Group Insurance SPD Plan booklet, page 149, regarding 52 weeks of coverage):

An associate shall not be paid for the first day sick leave unless they have not been absent on sick leave during the previous six (6) months or unless they are hospitalized.

The six months above will be reduced to five months for associates with five years of continuous service and will be reduced one additional month for each additional year of continuous service with the company

Each associate who is disabled and unable to perform their regular duties as a consequence of illness or accident shall be paid as follows during such disability:

## Length of Service

At least six months but less than
One year
Over one year

Maximum Number of Weeks in Any "Disability Year" in Which Payment Will Be Made by Company

One week

One week for each complete year of service with a minimum of two weeks

1. If the associate is entitled to, in any given week, Weekly Sickness and NonOccupational Benefits under the Group Insurance Plan or Temporary Total Disability Benefits under the Kentucky Workers ${ }^{1}$ Compensation Act, the payment by the Company in such week shall be limited to the difference between the associate's normal weekly earnings and the amount of such benefits.
2. The company may require a suitable statement from the associate's medical doctor certifying to the disability or may elect to have a medical doctor selected by it examine the associate.
3. The associate's anniversary date of employment shall be used to determine the maximum benefits to which they are entitled.
4. The "Disability Year" shall be defined as the twelve month period between January and December. The disability period will renew in January of each year. The commencement of such a disability year is activated by an absence due to sickness or accident and the extent of benefits for that disability year is determined by the length of service at the beginning of the disability year.

If an illness continues from one year to another, the employee will continue to draw pay from the company until they have received the maximum weeks available in the year the illness originally occurred. Employees shall not then be entitled to further payments until they return to active employment at least one day, nor shall they be entitled to further payments for the same or related disability until they have returned to active employment for two weeks.

In recognition of the fact that delay sometimes occurs in the determination of benefits payable under the Workers' Compensation Law, the company agrees in order to assure the continuity of income to a disabled associate that it will pay the associate's normal weekly wages in full for the period indicated to the schedule above, subject to agreement by the associate that any benefits currently or subsequently received from the Workers' Compensation Carrier (other than reimbursement of expenses) with respect to said period of disability, shall be assigned to the company.

It is understood that these payments from the Compensation Carrier to be assigned to the company include only weekly benefits for temporary disability.

## SECTION 21. INSURANCE PLAN

The Company and the Union agree that the provisions of the American Water System Group Insurance Plan as dated March 8, 2001 shall be in full force and effect through July 31, 2005. The Plan may thereafter be amended, modified or terminated through negotiations between American Water Works Company, Inc and The National Conference of Firemen and Oilers Union. The Company and Union agree to be bound by the results of any renegotiations of the Group Insurance Plan between the American Water Works Company, Inc. and the National Conference of Firemen and Oilers Union Group Insurance issues shall not be subject to any local negotiations

## SECTION 22. PENSION PLAN

The Company and the Union agree that the provisions of the Pension Plan described in the booklet entitled American Water System Pension Plan dated March 8, 2001 shall remain in fuil force and effect through July 31, 2005. The Plan may thereafter be amended, modified, or terminated through negotiations between American Water Works Company, Inc and the National Conference of Firemen and Oilers. The Company and Union agree to be bound by the results of any renegotiations of the Pension Plan between the American Water Works Company, Inc. and the National Conference of Firemen and Oilers. Pension issues shall not be subject to any local negotiations.

## SECTION 23. 401(K) SAVINGS PLAN

The 401 (K) Savings Plan, effective March 8, 2001 shall remain in full force and effect through July 31, 2005. The Savings Plan may thereafter be amended, modified or terminated through negotiations between American Water Works Company, Inc. and the National Conference of Firemen and Oilers. The Company and the Union agree to be bound by the results of any renegotiations of the Savings Plan between the American Water Works Company, Inc. and the National Conference of Firemen and Oilers. Savings Plan issues shall not be subject to any local negotiations.

## SECTION 24. DEPARTMENT HEAD NOT TO PERFORM WORK - EXCEPTION

Except in case of actual emergency, the head of a department or foreman covered by this Agreement shall not perform any of the work normally performed by associates under their supervision, but they shall have the right to demonstrate how they desire to have the work performed.

The company may temporarily assign a trainee to work with one of the maintenance or construction crews for the purpose of acquainting the trainee with the various elements of the job to be carried out, along with acquainting the trainee with the various terminology that is used in describing the materials used for a particular job, as well as the type of equipment, etc that is used. The Company agrees that when this trainee is actually performing the duties that would normally be carried out by members of the bargaining unit, that a member of the bargaining unit will not be required to perform any work, and will simply advise the trainee as to the procedure to be used to carry out the particular job The Company's intention is to not replace a member of the bargaining unit with the trainee, but to simply assign the trainee as an additional person to a particular job for training purposes

## SECTION 25. GUARANTEED WORK WEEK AND RIGHT TO SUBCONTRACTING

1. The Company may contract for the following:
A. Installation of mains and new fire hydrants.
B. Service line renewals which include the tap, the service line, the meter setter and meter box, meter and initiation of service
C. All new service lines which includes the tap, the service line, the meter setter and meter box, meter and initiation of service
D. Painting of fire hydrants.
E. Changing length of service meters.

Provided, however, that present associates of record on November 1, 1982, who are members of this union shall be assured forty (40) hours of pay per week, provided that the associates are at all times, during such work week, available for work. This assurance will not be applicable to any associate hired after November 1, 1982.
2. It is further agreed that all maintenance work required, except for the field repair and testing of large (larger than 2") meters in the Meter Repair Program, after the completion of the contracted work referenced in paragraph one of this Section will be performed by members of this Union
3. It is further understood that members of this Union will perform the installation of other meters, not covered in 1-B, 1-C, and 1-E above
4. In addition, the Company may, by giving a fifteen- (15) day written notification to the Union, be permitted to utilize contractors to perform union work during peak periods. The notification will include what work is to be performed and the duration of the contracting period

The Company may contract with temporary employment firms to fulfill summer temporary laborer openings in any Department covered by this contract for periods not to exceed 90 calendar days.

## SECTION 26. EQUAL OPPORTUNTTY EMPLOYER

The employer and the Union agree not to discriminate against any individual with respect to their hiring, compensation, terms or conditions of employment because of such individualts race, color, religion, sex, national origin or age, nor will they limit, segregate or classify associates in any way to deprive any individual associate of employment opportunities because of their race, color, religion, sex, national origin, or age.

## SECTION 27. SAFETY SHOES

All associates affected by this agreement will wear safety shoes and these shoes will meet with the current OSHA and ANSI Z41.1 standards. The associates will make all safety shoe purchases and the style of shoe to be purchased will be determined by the company. These purchases will not be made while on company time. Whenever an associate feels new shoes are needed, they are to check with their immediate supervisor for authorization to purchase a new pair and they will be issued a purchase order number, which can be used at the approved shoe supplier to purchase a pair of safety shoes, which are on the approved list of styles. If the cost of the safety shoes selected exceeds the established dollar limit designated by the Company the associate will pay any overage at the time of purchase to the shoe supplier.

## SECTION 28. SMOKING IN THE WORKPLACE POLICX

Kentucky-American Water is dedicated to providing a healthy and safe work environment for its associates. Efforts to maintain clean indoor air, in facilities and vehicles, by minimizing exposure to side-stream or secondary tobacco smoke are consistent with this goal. The Company will reach this goal by prohibiting the smoking or use of tobacco products in any company facility or vehicle. The chewing of tobacco, use of snuff, etc are prohibited in all Company facilities and vehicles due to sanitary conditions poor appearance and reduced image which is reflected negatively toward the Company. In addition, these tobacco products will not be allowed at any outdoor job-site if associates are working with or around asbestos cement pipe, underground petroleum tanks, or any chemical storage tank or area. This policy will use the progressive disciplinary steps as outlined in the Company Code of Conduct.

## SECTION 29. MANAGEMENT OF BUSINESS

The Union recognizes that except as expressly limited by this agreement, the management of the associates, the direction of the workforce and the operation of the plant are vested in the employer. The Union further recognizes that as an aspect of such management rights, the employer may make and enforce such rules as the Company may deem necessary or proper for the conduct of its associates and the operation of the plant, except to the extent that such rules may conflict with the provisions of this agreement.

The above-mentioned management rights are not to be interpreted as being all-inclusive, but merely indicate the type of rights, which belong to and are inherent to management. It is understood that any of the rights, power or authority the Company had prior to the signing of this agreement are retained by the Company, except those specifically abridged, granted or delegated to others or modified by this agreement.

## SECTION 30. COMPLETE AGREEMENT

It is the intent of the parties hereto that the provisions of this agreement, which supersedes all prior agreements and understandings including past practices, oral or written, expressed or implied, between such parties, shall govern their entire relationship and shall be the sole source of any and all rights or claims which may be asserted in arbitration hereunder, or otherwise

The provisions of this agreement can be amended, supplemented, rescinded or otherwise altered only by mutual agreement in writing hereafter signed by the parties

## SECTION 31. DURATION OF AGREEMENT

This agreement shall be in effect from 12:01 am. November 1, 2004, and continue until 12:00 midnight, October 31, 2007. Notwithstanding any other provision of this contract, the parties agree that either party may, during the sixty (60) calendar period immediately proceeding the anniversary date of this contract, give notice, in writing, to the other party of its desire to renegotiate a revised agreement.

If no agreement is reached before the anniversary date of this agreement, then any wage rates eventually agreed to between the Company and Union shall be retroactive to the expiration date of this agreement.

IN WITNESS WHEREOF, the parties hereto have hereunto set their hands the day and year first above written.

KENTUCKY-AMERICAN WATER


NATIONAL CONFERENCE OF FIREMEN AND OILERS, LOCAL 320

By



By f. $R$. pith


By Rick Curry

Both parties agree that any proposals not agreed to during the bargaining process will be removed from consideration on a non-precedence setting basis.

KENTUCKY AMERICAN WATER


NATIONAL CONFERENCE OF FIREMEN AND OLLERS, LOCAL 320


KAW_R_PSCDR1\#21_PART1_031610
Page 1 of 213

## KENTUCKY-AMERICAN WATER COMPANY <br> CASE NO. 2010-00036 <br> COMMISSION STAFF'S FIRST REQUEST FOR INFORMATION

Witness: Michael Miller
21. Provide a complete copy of each group medical insurance policy that KentuckyAmerican currently maintains for its employees.

## Response:

Please find attached the American Water Group Insurance Plan Summaries.
For the electronic version, please refer to the following documents:
KAW_R_PSCDR1\#21_PART1_031610.pdf
KAW_R_PSCDR1\#21_PART2_031610.pdf
KAW_R_PSCDR1\#21_PART3_031610.pdf

## American Water

## Group Insurance Plan Summary Plan Description For Non-Union Employees

Introduction<br>Eligibility<br>Overview and Comparison Chart<br>The Preferred Provider Organization (PPO) Plans<br>The Exclusive Provider Organization (EPO) Plan<br>Provisions That Apply to All Medical Plans<br>The Prescription Drug Benefit Program<br>The Dental Plans<br>The Vision Plan<br>Flexible Spending Accounts<br>Disability Coverage<br>Life Insurance<br>Employee Assistance Program<br>Additional Information<br>Claim Filing and Appeal Process<br>ERISA Rights<br>COBRA General Notice<br>Glossary

The Plan described in this booklet is based on plan documents and contracts that govern its operation. Because this booklet is a summary only, it does not describe all of the provisions of the Plan and the possible fact situations that may occur. If a conflict arises between this summary and any official plan documents, the official plan documents will govern.

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## Introduction

Just as American Water provides a comprehensive range of products and services which can be tailored for our customers' individual needs, we provide a flexible, comprehensive benefits package which allows our employees to select the benefits that best meet their needs.
This Summary Plan Description ("SPD") of the Group Insurance Plan of American Water Works Co., Inc. and Its Designated Subsidiaries and Affiliates (the "Plan") supplements the booklets and certificates provided by the various insurance carriers and provides a general description, written in non-technical language, of the important provisions of the Plan. There may be other materials (such as an insurance policy or other contractual agreement with a health care or other service provider) that contain more detailed information about Plan benefits. Every effort has been made to ensure that all of these materials contain a consistent description of the Plan's benefits. However, if there is any conflict or inconsistency between these materials, it is the Plan Administrator's responsibility to interpret the conflicting provisions and determine what benefits will be provided under the Plan.

American Water provides this SPD to comply with certain laws and to give you the information you need to use your benefits. Nothing in this booklet is meant to interpret, extend, or change in any way the provisions of this Plan. No one speaking on behalf of the Plan or the Company can alter the terms of the Plan.

## About This Booklet

The benefits described are provided by American Water Works Company, Inc., referred to as American Water throughout this Summary Plan Description.

Please read this Summary Plan Description carefully and refer to it whenever you have questions about the American Water benefits program or the specific coverages that apply to you. If you have questions about these plans, please contact the Benefits Service Center at (866) 888-8269 or email Benefits_Service_Center@amwater.com.
American Water reserves the right to amend the benefit plans described in this summary at any time, without prior notice to participants, including the right to change eligibility criteria or program costs and the right to restrict or eliminate benefits provided.

American Water also reserves the right to terminate or discontinue these benefits any time, without prior notice to employees.
If a question should ever arise concerning the nature and extent of benefits under any aspect of these plans, the actual legal plan documents - and not this Summary Plan Description - will govern.

## The Benefit Programs

Your American Water benefits have been designed to reward your commitment to provide excellent service and drive business performance. It can add up to a significant part of your total compensation, giving you added security and peace of mind.
This SPD describes the following employee benefit programs:

- Medical
(Standard and Premium PPOs, EPO, and Opt Out of Coverage)
- Prescription Drug
- Vision
- Dental
- Flexible Spending Accounts
(Health Care and Dependent Care)
- Disability
(Sick Days, STD, and LTD)
- Life Insurance
(Basic, AD\&D, Supplemental, Spouse and Dependent, and Travel Accident)
- Employee Assistance Program


## Eligibility

You and your dependents are eligible to participate in the benefits described in this Summary Plan Description if you are an American Water non-bargaining employee and you are a full-time employee (working not less than 35 hours each week).

You are ineligible to participate in the Plan if you (1) are a part-time employee (working less than 35 hours each week), (2) are classified as a temporary employee in accordance with the Company's personnel policies and practices, (3) are an employee covered by a collective bargaining unit, (4) perform services for the Company pursuant to an arrangement with a leasing organization or any other third-party, including but not limited to a "leased employee" within the meaning of section 414(n) of the Code, or (5) person who is classified as an independent contractor or otherwise as a person who is not treated as an employee for purposes of withholding federal employment taxes, regardless of any contrary governmental or judicial determination relating to such employment status or tax withholding obligation. If a person described in the preceding sentence is subsequently reclassified as, or determined to be, an employee by the Internal Revenue Service, any other governmental agency or authority, or a court, or if the Company is required to reclassify such an individual as an employee as a result of such reclassification or determination (including any reclassification by the Company in settlement of any claim or action relating to such individual's employment status), such individual shall not become eligible to become a participant in the Plan by reason of such reclassification or determination.

Your eligibility and participation date is the first day of the month after you complete one full month of continuous service with the Company. Example: If your start date is January 21, your Benefits Eligibility Date is March 1. If you are on a layoff, on disability, or on leave of absence on your eligibility date, coverage will begin on the day you return to active work.

Your eligible dependents include:

- Your wife or husband
- Your unmarried children from birth to age 19 who are:
- Fully dependent on you for support
- Not employed full-time and
- Not in the military service

The phrase "live with you in a parent-child relationship" means that the child resides in your home on a permanent basis as the place of his or her legal residence - even though the child may be away from your home during certain periods of the year (e.g., to attend school).

Adopted children are eligible to participate in an American Water medical plan on the date they are placed for adoption. A child is considered "placed" when you assume and intend to retain a legal obligation for the child's support, in anticipation of adopting the child - regardless of where the child resides.

■ Your unmarried children ages 19 to 23, while:

- Fully dependent on you for support
- Full-time students (attending high school or attending an accredited learning institution with at least 12 credits)
- Not employed full-time and
- Not in the military service

The word "children" includes adopted children, foster children, grandchildren, and stepchildren who meet all of the above criteria, live with you in a parent-child relationship, and must be claimed as dependents for federal income tax purposes

Dependents cannot participate unless you, the employee, also participate. An individual is not eligible as both an employee and a dependent, nor as a dependent of more than one employee.

## Health Plan Coverage for Handicapped <br> Dependent Children

Health Plan Coverage for your fully handicapped child may be continued past the maximum age for a dependent child if the child has not been issued a personal medical conversion policy.

Coverage for your fully handicapped child may be continued past the maximum age for a dependent child if the child has not been issued a personal medical conversion policy.
Your child is fully handicapped if:

- He or she is unable to earn his or her own living because of mental retardation or a physical handicap which started before the date he or she reaches the maximum age for dependent children, and
- He or she depends chiefly on you for support and maintenance.

Proof that your child is fully handicapped must be submitted to Horizon no later than 31 days after the date your child reaches the maximum age of 19 , or up to age 23 if attending school full-time.
Coverage will cease on the first to occur of:

- Cessation of the handicap,
- Failure to give proof that the handicap continues,
- Failure to have any required exam,
- Termination of Dependent Coverage for your child for any reason other than reaching the maximum age.

Horizon will have the right to require proof of the continuation of the handicap. Horizon also has the right to examine your child, at its own expense, as often as needed while the handicap continues. An exam will not be required more often than once each year after two years from the date your child reaches the maximum age.

## Special Rules That Apply to an Adopted Child

Medical (or dental) coverage for an adopted child will become effective on the date the child is placed with you for adoption, if you make a written request for coverage within 31 days of his or her placement with your family.

## An Overview of Your Options

Eligible employees and their dependents may participate in the Standard Preferred Provider Organization (Standard PPO) Plan, the Premium Preferred Provider Organization (Premium PPO) Plan, or the Exclusive Provider Organization (EPO) Plan.

The PPO Plans emphasize both preventive care and protection against the cost of illness and serious injury.

Horizon Blue Cross Blue Shield (Horizon) provides the PPO and EPO plans. Horizon has negotiated special rates with in-network health care providers in the plans to offer you competitive health care. To locate participating network providers, call (800) 810-BLUE (2583) or use the Provider Finder at www.horizonblue.com/nationalaccounts.

Note: Eligible Hawaii employees and their dependents may participate in the HMSA Medical Plan. The Horizon Plans do not

The EPO is a plan that emphasizes both preventive care and protection against the cost of illness and serious injury with innetwork benefits only.
apply to Hawaii employees. HMSA is part of the American Water Group Health Plan.

## Standard PPO Plan and Premium PPO Plan

With the Standard PPO and the Premium PPO, you have a choice to make each time you use the plan: whether to receive care from a doctor, hospital, or health care provider that is part of the plan's network, or from any provider outside the network. You will receive a higher level of coverage (i.e., the plan will pay a higher percentage of the cost of service) when you receive care through the network and your out-of-pocket costs will be lower compared to receiving care outside of the network.
You do not have to select a primary care doctor to coordinate your care (e.g., when you need specialty services). However, it is always a good idea to maintain a relationship with a doctor who knows you and your medical history and who can help you make the right choices about your care.

## What's the Difference?

The Standard PPO and the Premium PPO operate identically. The Standard PPO and Premium PPO differ by the deductible and coinsurance amounts, and by the amounts you pay out of your paycheck for coverage. Detailed descriptions of these plans begin on page 16.

## Exclusive Provider Organization (EPO)

In contrast to the PPO plans, the EPO plan offers no out-of-network benefits. What does that mean? In order to receive plan benefits, you must receive care from a doctor, hospital, or health care provider that is part of the plan's network. The EPO includes comprehensive benefits -- you pay a copay and then the plan covers $100 \%$ of the remaining costs -- so at the time of service, you pay a set, flat amount. Similar to the PPO, you do not have to select a primary care doctor to coordinate your care (for example, when you need specialty services).

## Hawaii

Your medical plan will continue to be administered by HMSA. Please contact the Benefits Service Center for information.

## Listings of Network Providers

To locate providers that participate in the Horizon network, you can call (800) 810-BLUE (2583) or use the Provider Finder at www.horizonblue.com/nationalaccounts.

## Medical Opt-Out of Coverage

The medical opt-out provisions give you the opportunity not to elect medical coverage.

You have two options for opting out of coverage:

- You may choose not to enroll in medical coverage and receive only dental/vision coverage.
- Dental/vision coverages are bundled and you can elect to purchase this coverage even if you do not enroll in medical. If you elect to receive dental/vision coverage only, you will receive premium dental and your monthly contributions will be deducted from your paycheck on a pre-tax basis.
- You may choose not to enroll in any medical, dental or vision plans at all.

If you were hired before January 1, 2006, and choose to opt out of medical, dental and vision coverage for yourself and your dependents, the Company will credit you $\$ 100$ per month.

## Please note, to receive the cash credit:

- You must make an election not to enroll in medical/dental/vision to receive the full credit.
- You must have equivalent medical coverage under another medical plan if you elect the Medical Opt-Out Option. Be sure to review the other medical plan's provisions to confirm that this decision is right for you and your family.
- During the year, if you experience a Change in Status that would allow you to drop your medical coverage, you must provide documentation that you have medical coverage elsewhere. A signed affidavit obtained from the Benefits Service Center can be used as proof. This is not required during open enrollment or if you are a new hire.

If a husband and wife are American Water employees, the Medical Opt-Out Option and Cash Credit is not available.

## Plan Comparison Chart

Below is a comparison of benefits for the Standard PPO, the Premium PPO, and the EPO.

| Horizon Medical Plans |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Plan Feature | Standard PPO |  | Premium PPO |  | EPO |
|  | In-network | Out-of-network | In-network | Out-of-network | In-network benefits only |
| Deductible (single/family) | \$1,000/\$3,000 | \$1,500/\$4,500 | None | \$200/\$600 | None |
| Coinsurance | 80\% | 60\% | 90\% | 70\% | 100\% |
| Out-of-pocket maximum (single/family) | \$3,500/\$10,500 | \$4,000/\$12,000 | \$1,000/\$3,000 | $\$ 3,000$ per person | None |
| Lifetime maximum benefit | Unlimited |  | Unlimited |  | Unlimited |
| Preventive Care |  |  |  |  |  |
| Routine physical exam | $\begin{aligned} & 100 \% \\ & \text { (up to } \$ 250 \text { per } \\ & 24 \text { months), } \\ & \text { well baby to } 6 \\ & \text { yrs } \end{aligned}$ | Not Covered | $100 \%$ after $\$ 15$ copay (one every 24 months), well baby to 6 yrs | Not Covered | $100 \%$ after \$15 copay |
| Immunizations | 100\% | Not Covered | $100 \%$ after $\$ 15$ copay | Not Covered | 100\% after $\$ 15$ copay |
| Routine hearing exam | 100\% (one every 24 months) | Not Covered | 100\% after $\$ 15$ copay | Not Covered | 100\% after \$15 copay |
| Routine OB/GYN exam | $100 \%$ (one per calendar year) | Not Covered | $100 \%$ after $\$ 15$ copay (one per calendar year) | Not Covered | $100 \%$ after $\$ 15$ copay |
| Mammography | $100 \%$ (one baseline between age 35-39, annual screening age 40 and above) | Not Covered | $100 \%$ after \$15 copay (one baseline between age 35-39, annual screening age 40 and above) | Not Covered | 100\% (one baseline between age 35-39, annual screening age 40 and above) |
| Doctor and Hospital Services |  |  |  |  |  |
| Office visits (primary care and specialist) | 80\% <br> after deductible | $60 \%$ <br> after deductible | 100\% after $\$ 15$ copay | $70 \%$ <br> after deductible | $100 \%$ after \$15 copay |
| Allergy testing and treatment centers | 80\% <br> after deductible | $\begin{gathered} 60 \% \\ \text { after deductible } \end{gathered}$ | 100\% after $\$ 15$ copay | $\begin{gathered} 70 \% \\ \text { after deductible } \end{gathered}$ | 100\% |


| Horizon Medical Plans |  |  |  |  |  |
| :--- | :---: | :---: | :---: | :---: | :---: |
| Plan Feature | Standard PPO |  |  |  |  |


| Horizon Medical Plans |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Plan Feature | Standard PPO |  | Premium PPO |  | EPO |
|  | In-network | Out-of-network | In-network | Out-of-network | In-network benefits only |
| Short-term rehabilitation (for acute conditions only) | $80 \%$ after deductible (60day maximum per calendar year) | $60 \%$ after deductible (60day maximum per calendar year) | 90\% (60-day maximum per calendar year) | $70 \%$ after deductible (60day maximum per calendar year) | 100\% <br> (60-day maximum per calendar year) |
| Mental Health and Chemical Dependency |  |  |  |  |  |
| Inpatient treatment of mental/nervous conditions | 80\% after deductible (45-day maximum per calendar year) | 60\% after deductible (45-day maximum per calendar year) | $\begin{gathered} 90 \% \\ \text { (45-day } \\ \text { maximum per } \\ \text { calendar year) } \end{gathered}$ | $70 \%$ after deductible (45-day maximum per calendar year), $\$ 250$ copay per confinement | 100\% <br> (30-day maximum per calendar year) |
| Outpatient treatment of mental/nervous conditions | 80\% after deductible (20-visit maximum per calendar year) | 50\% after deductible (20-visit maximum per calendar year) | $\begin{gathered} \hline \text { 100\% after \$20 } \\ \text { copay } \\ (20 \text {-visit } \\ \text { maximum per } \\ \text { calendar year }) \\ \hline \end{gathered}$ | $50 \%$ after deductible (20-visit maximum per calendar year) | $\begin{gathered} \hline 100 \% \text { after } \$ 25 \\ \text { copay } \\ (20 \text {-visit } \\ \text { maximum per } \\ \text { calendar year }) \\ \hline \end{gathered}$ |
| Inpatient alcohol/drug treatment | $80 \%$ after deductible (45day maximum per calendar year, 2 courses of treatment per lifetime) | $60 \%$ after deductible (45day maximum per calendar year, 2 courses of treatment per lifetime) | 90\% <br> (45-day maximum per calendar year, 2 courses of treatment per lifetime) | $70 \%$ after deductible (45day maximum per calendar year, 2 courses of treatment per lifetime), \$250 copay/ confinement | $\begin{gathered} 100 \% \\ \text { (30-day } \\ \text { maximum per } \\ \text { calendar year; } \\ 90 \text {-day } \\ \text { lifetime) } \end{gathered}$ |
| Outpatient alcohol/drug treatment | 80\% after deductible (20-visit maximum per calendar year) | $50 \%$ after deductible (20-visit maximum per calendar year) | $100 \%$ after $\$ 20$ copay (20-visit maximum per calendar year) | 50\% after deductible (20-visit maximum per calendar year) | $100 \%$ for first treatment; the lesser of \$25 copay or $50 \%$ covered second and subsequent treatment courses (60-visit maximum per calendar year; 120-visit lifetime maximum) |


| Horizon Medical Plans |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Plan Feature | Standard PPO |  | Premium PPO |  | EPO |
|  | In-network | Out-of-network | In-network | Out-of-network | In-network benefits only |
| Prescription drugs(participantcoinsurance orcopay) |  |  |  |  |  |
| Retail: <br> - Generic <br> - Preferred brand <br> - Non-preferred brand | $\begin{aligned} & 10 \% \\ & 20 \% \\ & 20 \% \end{aligned}$ |  | $\begin{aligned} & 10 \% \\ & 20 \% \\ & 20 \% \end{aligned}$ |  | $\begin{aligned} & 10 \% \\ & 20 \% \\ & 20 \% \end{aligned}$ |
| Mail order: <br> - Generic <br> - Preferred brand <br> - Non-preferred brand | \$14 copay <br> $\$ 30$ copay <br> $\$ 70$ copay |  | $\$ 14$ copay <br> $\$ 30$ copay <br> $\$ 70$ copay |  | \$14 copay <br> $\$ 30$ copay <br> $\$ 70$ copay |

This chart is only a highlight of the medical option features, and certain limits may apply to some features. Out of network benefits may be subject to Reasonable and Customary (R\&C) limits and you may be responsible for nonnetwork provider charges in excess of R\&C limits in addition to a coinsurance. All maximums are combined for mental health and chemical dependency expenses. Mental health and chemical dependency amounts do not apply to your out-of-pocket maximum. Official Plan documents govern in the event of any inconsistency between the provisions shown here and in the Plan documents.

## Enrolling For Medical Coverage

When you enroll in a medical plan, you are automatically enrolled in American Water Dental, Vision, and Prescription Drug Plans. You also have the option of declining coverage for yourself or your eligible dependents or electing only dental and vision coverage.

The Benefits Service Center will conduct a benefits orientation with newly hired employees to review benefits and explain the enrollment process.

When enrolling in medical coverage, you will need to complete an American Water Benefit Enrollment Form if you want to participate in either:

- The Standard Preferred Provider Organization Plan
- The Premium Preferred Provider Organization Plan
- The Exclusive Provider Organization Plan
- Premium Dental/Vision Only
- The Medical Opt-Out Option and Cash Credit (if applicable)

If you are newly hired eligible employee (see "Eligibility" above) and you want to enroll you and your dependent(s) in a medical plan, you must return your completed enrollment form to the Benefits Service Center before your Benefits Eligibility Date. Your Benefits Eligibility Date is the first day of the month following completion of one full month of continuous employment. Example: If your start date is January 21, your Benefits Eligibility Date is March 1 and your enrollment form should be returned by February 7.

Unless you are taking the Opt-Out Option, you must include the following documentation along with your enrollment form:

- a copy of your birth certificate and your dependent(s) birth certificate(s); and
- a copy of your marriage certificate, if applicable.

If you do not submit the completed form and required documentation, you will not be enrolled in Medical and Dental/Vision Plans or the Opt-Out Option, if applicable; and you will not receive the $\$ 100$ optout credit per month, if applicable. In addition, you will not be able to enroll in a medical plan until the next Open Enrollment period unless you have a Change in Status or a Special Enrollment Period.

The annual Open Enrollment Period is an important opportunity to review your coverage levels and make changes to meet your benefit needs for the next Plan Year.

Coverage levels are defined as "Single" or "Family." Family is defined as yourself, your spouse, and any eligible dependents.

All plans provide reasonable access to primary care, specialists, and network hospitals. The standard for distance from an Employee's home to a provider who is accepting new patients is set forth in the following chart, although the actual distance may be greater in some cases:

|  | Urban Area | Rural Area |
| :--- | :---: | :---: |
| Adult Doctor <br> (includes Family Practice and <br> General Internal Medicine) | 3 doctors in 8 miles | 2 doctors in 12 miles |
| Pediatrician | 2 doctors in 8 miles | 2 doctors in 12 miles |
| OB/GYN | 2 doctors in 8 miles | 2 doctors in 12 miles |
| Hospital | 1 hospital <br> within 10 miles | 1 hospital <br> within 15 miles |

## Changes in Status

You may enroll in a Plan as a new hire or during the annual Open Enrollment period. However, if you or your family experience a Change in Status (as described below), you may enroll or add or drop dependents during the Plan Year on account of, and consistent with, the Change in Status. You must contact the Benefits Service Center to notify them of your Change in Status within 31 days after the change has occurred. A new benefit form must be completed.
Note: A Change in Status does not allow you to change your current medical plan option (for example, switch from the Standard PPO to the Premium PPO) unless the change also entitles you to a special enrollment period described below.

The following events are changes in status:

- Marriage, death of spouse, divorce, legal separation, or annulment;
- A child qualifies as a dependent;
- Birth, adoption, placement for adoption, or death of a dependent;
- Termination or commencement of employment by you, your spouse or dependent;
- Reduction or increase in hours of employment by you, your spouse or dependent, including a switch between part-time and full-time, strike or lockout, or taking or returning from an unpaid leave;
- Dependent no longer qualifies because of age, student status, or marriage;
- Change in residence or worksite of you, your spouse or dependent;
- If your spouse's employer holds open enrollment at a time other than American Water;
- You became disabled;
- Coverage changes, such as a change in coverage under a spouse's plan.

You can also enroll or add or drop dependents during the Plan Year if a judgment, decree, or order resulting from divorce, legal separation, annulment or change in custody requires health coverage for your dependent or dependent foster child or if you or a dependent become entitled (or cease to be entitled) to Medicare or Medicaid.

## Special Enrollment Rights

If you decline enrollment for yourself or your dependents (including your spouse) because of other health insurance or group health plan coverage, you may be able to enroll yourself and your dependents in this Plan if you or your dependents lose eligibility for that other coverage (or if the employer stops contributing towards your or your dependents' other coverage). However, you must request enrollment within 31 days after your or your dependents' other coverage ends (or after the employer stops contributing toward the other coverage).

A newborn child, an adopted child, or a child placed with you for adoption is automatically covered for the first 31 days of life, the date the child was adopted, or the date the child was placed for adoption. To continue coverage for a newborn beyond 31 days, you must enroll within 31 days of the birth. To continue coverage for an adopted child or a child placed with you for adoption beyond 31 days, you must enroll within 31 days of the adoption or placement.

In addition, if you have a new dependent as a result of marriage, you may be able to enroll yourself and your dependents. However, you must request enrollment within 31 days after the marriage.

To request special enrollment or obtain more information, contact the Benefits Service Center.

Note: Certain events could result in an immediate loss of eligibility for dependents: if you get divorced or legally separated; if your dependent child marries; or if your dependent child reaches age 19 (age 23, if a full-time student) or graduates from college before age 23 .

# The Preferred Provider Organization (PPO) Plans (Standard and Premium) 

## The Preferred Provider Organization Plans (Standard and Premium)

The Plans are selfinsured by American Water. Horizon-Blue Shield provides certain administrative services under the Plan.

The Preferred Provider Organization (PPO) Plans are self-insured by American Water. A plan is considered to be "self-insured" when a company uses its own funds to pay claims. Horizon provides certain administrative and claim payment services under the Plans, but does not guarantee benefit payments. The PPO Plans emphasize preventive care and protects you from the cost of illness and serious injury while providing you with access to a high level of benefits.

If you want to receive the advantages of the PPO Plans, you should select a doctor within Horizon's network. As you may know, Horizon maintains a nationally recognized health care provider network. In fact, most providers and hospitals currently used by our employees are members of the Horizon network. If you cover any college-age dependents, we anticipate that they will have access to network doctors when they are away at school. To learn which doctors are in the network, call Horizon at (800) 810-BLUE (2583) or use the Provider Finder at www.horizonblue.com/nationalaccounts.

You do not have to coordinate your care through a primary care physician (PCP) to receive a high level of benefits. In addition, you do not need to obtain a referral from your PCP in order to see a specialist. However, it's a good idea to see a PCP first to make sure you are getting appropriate care.

If you obtain care from an out-of-network doctor, the Plan may pay a lower level of benefits and some services (such as preventive care services) are not covered at all.

## How the Preferred Provider Organization Plans Work

With the PPO Plans, you do not need to select a PCP before you receive medical care, nor do you need to obtain referrals to see a specialist. However, when you need care, you should choose a doctor from a "network" of health care providers to receive the highest level of benefits under the Plan.

You can select a network provider from among those listed on Horizon's website at www.horizonblue.com/national accounts or by calling Horizon at (800) 810-BLUE (2583)

IF YOU CHOOSE A PROVIDER IN THE NETWORK, you receive a higher level of reimbursement for your medical expenses than you would receive if you chose a provider outside the network.

- You do not have to meet an annual deductible with the Premium PPO if you use an in-network provider (the Standard PPO does have an annual deductible for in-network providers).
- Your in-network healthcare providers file all your claims.
- Your in-network doctor initiates all required precertification.
- You will not experience any reduction in benefits under the "reasonable and customary" rule because health care providers in the network are allowed to charge only the special rates that Horizon has negotiated with them. (See the Glossary for a definition of "reasonable and customary charge.")

Under the PPOs, you may receive care from any provider you choose. IF THE PROVIDER IS OUTSIDE THE NETWORK:

- You will have to meet an annual deductible with both the Standard and Premium PPOs,
- Your level of benefits reimbursable will be lower,
- You will have to file your own claims,
- You will need to initiate precertification for inpatient hospitalization and certain outpatient procedures, and
- You will have to pay any expenses in excess of the "reasonable and customary charges" on which Plan payment is based, in addition to the applicable coinsurance amount.


## When You Need a Specialist

If you need specialized care, you do not need a referral. Remember, in order to receive the highest level of benefits, you must use a specialist who belongs to the network.
If you need medical services or treatment that is not available within the PPO network, your doctor may recommend a specialist who does not belong to the network. In this case, your doctor must obtain
precertification from Horizon and you will receive the higher level of benefits.

## Coverage for Dependents Who Live Outside the Network Area

If your child is away at school, you should select a doctor from the area where you live and routine care may be arranged during school breaks.

In a non-emergency situation, always call your doctor first.

In a non-emergency situation, always call your doctor first.

The PPO options have special provisions to meet the needs of your covered dependents who live outside the network area. In general, when selecting doctors for your out-of-area children, consider these guidelines:

- If your child is away at school, you should select a doctor from the area where you live and arrange for routine care during school breaks. If your child needs medical care during the school year, he or she should visit the school infirmary and find in-network doctors or hospitals on the website. Benefits will be paid at the innetwork level.
- If your child lives permanently outside the network area (with another parent or stepparent, for example) your child may visit any doctor in the local area and benefits will be paid at the out-ofnetwork level. If you are enrolled in a PPO and a PPO network is available in that area, your child may select a doctor from the local network and receive the higher level of benefits. To locate providers in the Horizon network, call (800) 810-BLUE (2583) or use the Provider Finder at www.horizonblue.com/nationalaccounts.
- There is no coverage for Routine Physical Exams, Routine Eye Exams, and Routine Hearing Exams.


## Coverage When You Are Traveling

You should call Horizon Member Services at (800) 355-BLUE (2583) for a list of participating doctors and hospitals to receive the highest level of benefits.

An emergency is a sudden and unexpected life-threatening medical condition that requires immediate medical or surgical care.

Procedures
Which Must Be Precertified

## In Case of Emergency

In case of emergency, get the care you need from the nearest health care facility or doctor. A medical emergency is defined as "a sudden and unexpected life-threatening medical condition that requires immediate medical or surgical care in order to prevent death or a severe health crisis." Examples include convulsions, excessive bleeding, serious burns, and suspected heart attack.

You will be paid at the Plan's higher benefit level for emergency care -24 hours a day, 365 days a year - whether you are at home or away. When you need emergency care, it's important to seek immediate care at the nearest appropriate facility.

When a covered person is confined as a full-time inpatient as the result of an emergency admission, you, the person's doctor, or the hospital must call Horizon Member Services to request certification within 48 hours of the start of the confinement. If the call cannot be made within 48 hours, the call must be made as soon as reasonably possible. The 48 -hour requirement is extended to 72 hours when the confinement starts on a Friday or Saturday.

## Precertification

Precertification is an important feature of the PPO Plans. In order for you to receive the highest level of benefits available, you, the network hospital, or your doctor must notify Horizon to precertify any hospital admission and certain outpatient surgical procedures, treatments, and tests. The purpose of this process is to review the medical necessity of a procedure and to approve an appropriate length of stay.

If you elect to get care from an out-of-network provider you will have to initiate the precertification process yourself.

Precertification is required for:

- All hospital and skilled nursing/convalescent facility admissions;
- Home health care, hospice care, and skilled nursing care;

How to Request Precertification for a Medical Procedure or Admission

- Inpatient treatment for substance abuse and mental disorders. Call Horizon for all other procedures.

To request precertification of an admission or procedure, call the precertification telephone number listed on your ID card, or call Horizon Member Services, toll-free, at (800) 355-BLUE (2583) to be directed to the Patient Management site for your area.

To request precertification of an out-of-network admission or procedure, just call the precertification telephone number listed on your ID card or Horizon Member Services, toll-free, at (800) 355BLUE (2583). You should call at least 14 days before any scheduled admission or outpatient procedure, or as soon as you are aware you need medical care. In case of emergency, you or a family member should contact Horizon Member Services within 48 hours after the admission or procedure.

When you call, you will speak to a Medical Consultant who will ask you:

- Your name and Identification number,
- The relationship of the patient to you,

■ The type of surgical procedure or test you need,

- The name and telephone number of your doctor, and
- When the procedure is scheduled.

The Medical Consultant will review the medical necessity of the proposed inpatient admission, the proposed surgical procedures and treatments, or the proposed inpatient treatment for substance abuse and mental disorders. He or she will compare information about your case with generally accepted medical standards.

Mental Health and Substance Abuse admissions are precertified by Magellan at (800) 224-1233.

If the proposed inpatient admission or treatment is medically necessary in accordance with such standards, it will be certified by the Medical Consultant. On the other hand, if other treatment is more appropriate, alternative treatment settings may be suggested. See page 37 for more information regarding precertification.

There's A
Penalty If You Do Not Precertify

If Your Hospital Stay Is Longer Than Expected

If you do not call to precertify a hospital admission or any of the procedures or tests listed, you will have to pay a separate $\$ 150$ penalty charge, in addition to your deductible, before benefits are paid for covered services. This penalty charge will not be applied toward your deductible or your out-of-pocket limit.

If your hospital stay is longer than the approved period, you must notify Horizon Member Services as soon as you are aware your stay must be extended. The Medical Consultant can then work with your doctor to extend the certification of your hospital stay.

## Your Share of Medical Expenses

American Water Medical Plans have been carefully designed to provide quality care and the most value for each dollar spent by you and the Company. Here is how we share the costs of these valuable benefits.

A deductible is the amount you must pay before the Plan begins to pay benefits for covered expenses. All deductibles are calculated on an annual basis and must be met every year. Copayments do not count toward meeting the annual deductibles.

## - Single Deductible Limit (per calendar year)

- \$1,000 (Standard PPO, in-network)
- \$1,500 (Standard PPO, out-of-network)
- \$200 (Premium PPO, out-of network only; no deductible for in-network)
This Calendar Year Deductible applies to all expenses incurred for Out-of-Network and for care for dependents who live permanently outside the Network.
- Family Deductible Limit (per calendar year) must be met by expenses of more than one family member
- \$3,000 (Standard PPO, in-network)
- \$4,500 (Standard PPO, out-of-network)
- $\$ 600$ (Premium PPO, out-of network only; no deductible for in-network)

Inpatient Hospital Copay

This Calendar Year Deductible applies to all expenses incurred for Out-of-Network and for care for dependents who live permanently outside the Network.

In Network and Out of Network deductibles are separate deductibles.
Under the Premium PPO, there is a separate $\$ 250$ copayment for each confinement in an out-of-network hospital. This is a separate amount you pay for each hospital confinement. The Inpatient Hospital Copay will be applied only once to each hospital confinement, regardless of cause, which is separated by less than 10 days from another confinement.

Expenses used to meet the Inpatient Hospital Copay cannot be used to meet any other applicable deductible. Expenses used to meet any other applicable deductible cannot be used to meet the Inpatient Hospital Copay.

## - Inpatient Hospital Copay

- $\$ 250$ per confinement (Premium PPO, out-of network only)

This Inpatient Hospital Copay applies to Inpatient Hospital Confinements, including Inpatient Alcoholism, Drug Abuse, and Mental Disorder confinements incurred for Out-of-Network and for care for dependents who live permanently outside the Network.
However, for a confinement of a well newborn child that starts on the day of birth, the Inpatient Hospital Copay will not exceed the hospital's actual charge for room and board for the first day of confinement on which the child's coverage is in force. To maintain continuous coverage on the newborn, you must add him or her to the Plan as a dependent within 31 days of birth.

## - Emergency Room Copay

- $\$ 25$ (Premium PPO, in- network and out-of network; waived if admitted)

This separate Emergency Room Copay must be paid for each visit to a hospital's emergency room for emergency care. This copay will be waived if the person is admitted to the hospital as an inpatient immediately following the emergency room visit.

The Emergency Room Copay also applies to Hospital Expenses incurred for emergency care provided by an Out-of-Network Provider and for care for dependents who live permanently outside the Network.

Note: Standard PPO benefits are different than the PPO Benefits (see the chart which begins on page 8).

## Coinsurance

|  | Plan Pays | You Pay | Up to Annual Out-of-Pocket Limit <br> (single/family) |
| :--- | :---: | :---: | :---: |
| Standard PPO | $80 \%$ | $20 \%$ | $\$ 3,500 / \$ 10,500$ |
| Premium PPO | $90 \%$ | $10 \%$ | $\$ 1,000 / \$ 3,000$ |

If you use out-of-network doctors, hospitals or hospital alternatives, the generally plan pays as follows (although there may be other limits, such as limits on the number of treatments or visits):

|  | Plan Pays | You Pay | Up to Annual Out-of-Pocket Limit <br> (single/family) |
| :--- | :---: | :---: | :---: |
| Standard PPO | $60 \%$ | $40 \%$ | $\$ 4,000 / \$ 12,000$ |
| Premium PPO | $70 \%$ | $30 \%$ | $\$ 3,000$ per person |

Your in-network coinsurance amounts do not count toward your out-of-network deductible and coinsurance limits.

## Out-of-Pocket

 LimitsAfter you meet the applicable annual deductible, you and American Water share the remaining expenses through coinsurance.
If you use network doctors, hospitals or hospital alternatives, the plan generally pays as follows (although there may be other limits, such as limits on the number of treatments or visits):

There is a limit to your share of medical expenses each calendar year, called the "out-of-pocket" limit. Your coinsurance amounts count toward these out-of-pocket limits, but copayments, deductibles and amounts you are required to pay to out-of-network providers in excess of the reasonable and customary charge do not count.

- Out-of-Pocket Limits (single/family)
- \$3,500 / \$10,500 (Standard PPO, in-network)
- \$4,000 / \$12,000 (Standard PPO, out-of-network)
- \$1,000 / \$3,000 (Premium PPO, in-network)
- \$3,000 per person (Premium PPO, out-of-network)

If you reach your out-of-pocket limit during a calendar year, your covered expenses will be paid at $100 \%$ for the remainder of that year (in-network) and at $100 \%$ of reasonable and customary charges (out-of-network). If you do not reach your out-of-pocket limit, you must start accumulating expenses again in January.

Lifetime
Maximum
Benefit

Your
Contributions

However, any expense not determined to be a covered expense, as well as mental health and chemical dependency charges and precertification penalties, do not count toward your out-of-pocket limit.

Both the Standard and Premium PPO Plans provide an unlimited Lifetime Maximum Benefit for you and each covered member of your family.

You pay your share of the cost for your benefits each pay cycle through convenient pre-tax payroll deductions. Pre-tax means that your contributions are withheld before federal (and in most cases, state (other than New Jersey) and local) income and FICA (Social Security) taxes are withheld. This reduces your taxable income and the amount of tax you pay. As a result, you have more take-home pay. Because your pre-tax contributions are not subject to FICA taxes, your Social Security benefit at retirement may be slightly reduced if your earnings are under the Social Security Taxable Wage Base (\$94,200 for 2006; $\$ 97,500$ for 2007). However, the loss in future retirement benefits should be more than offset by the current tax savings under the Plan.

## Benefits Payable

After any applicable deductible or copay amount, the Plan pays benefits at the Payment Percentage which applies to the type of Covered Medical Expense, except for any different benefit levels described elsewhere in this Summary Plan Description. If an expense is covered as one type of Covered Medical Expense, it cannot be covered as any other type.

## Benefit Maximums

All maximums included in this Plan are combined maximums between Network and Out-of-Network, where applicable, unless specifically stated otherwise.
The following limitations apply to some of the benefits under the PPO Plans:

## - Private Duty Nursing Care

70 shifts per calendar year

## - Home Health Care

120 visits per calendar year
(a "visit" is considered to be four hours or less in duration)

- Skilled Nursing/Convalescent Facility

120 days per calendar year

- Hospice Care

Inpatient- 90-day lifetime maximum
Outpatient- \$5,000 lifetime maximum

- Short-Term Rehabilitation

60 days per calendar year

- Private Room Limit

The institution's semi-private rate

## Covered Expenses

## Inpatient

 Hospital CareInpatient admissions must be precertified to qualify for the maximum benefit payable.

## Outpatient <br> Hospital Care

## Skilled Nursing/

 ConvalescentFacility
Precertification of skilled nursing/ convalescent facility services is necessary to receive the maximum benefit payable by the Plan.

The Plan covers charges made by a hospital for room (semi-private only), board, and other hospital services and supplies for a person who is confined as a full-time inpatient for the treatment of an injury or illness.

The Plan covers charges made by a hospital for services and supplies for a person who is not confined as a full-time inpatient.

The Plan covers charges made by a skilled nursing/convalescent facility for the following services and supplies furnished to a person while confined to convalesce from an illness or injury.

- Room and Board. This includes charges for services such as general nursing care made in connection with room occupancy. Charges for daily room and board in a private room over the Private Room Limit are not covered.

■ Use of special treatment rooms


# Routine Physical Exams 

The charges made by your doctor for a routine physical exam given to you, your spouse, or your dependent child may be included as Covered Expenses.

## The Plan does not cover charges made for:

- Services or supplies that are not a part of the home health care plan,
- Services of a person who usually lives with you or is a member of your or your spouse's family,
- Services of a social worker,
- Transportation.

Covered Medical Expenses include charges made by your doctor for a routine physical exam given to you, your spouse, or your dependent child.

A routine physical exam is a medical exam given by a doctor for a reason other than to diagnose or treat a suspected or identified injury or illness. Included are:

- X-rays and laboratory and other tests given in connection with the exam, and
- Materials for the administration of immunizations for infectious illness and testing for tuberculosis.

To qualify as a covered physical exam, the doctor's exam must include at least:

- A review and written record of the patient's complete medical history,
- A check of all body systems, and
- A review and discussion of the exam results with the patient or the parent or guardian.

For a child under age six, Covered Medical Expenses include charges for:

- Up to six exams in the first year of the child's life,
- Up to two exams in the second year of the child's life, and
- One exam per year during the next four years of the child's life.

For a child age six and over, Covered Medical Expenses do not include charges for more than one exam in a period of 24 consecutive months.

For you or your spouse, Covered Medical Expenses do not include charges for more than one exam in a period of 24 consecutive months.

## Charges for routine physical exams do not include:

- Services and supplies furnished by an out-of-network Provider;
- Services covered to any extent under any other part of this Plan or any other group plan sponsored by American Water;
- Services to diagnose or treat a suspected or identified injury or illness;
- Exams given to a person confined in a hospital or other facility for medical care;
- Services not given by a doctor or under his or her direction;
- Medicines, drugs, appliances, equipment, or supplies;
- Psychiatric, psychological, personality, or emotional testing or exams;
- Exams in any way related to employment;
- Premarital exams;
- Vision, hearing, or dental exams;
- Doctor's office visits in connection with immunization or testing for tuberculosis.


## Routine Hearing Exams

The American Water Plan covers a routine hearing exam by a participating provider once every 24 month under the Standard PPO Plan.

Covered Medical Expenses include charges for an audiometric exam. The services must be performed by a network doctor who is certified as an otolaryngologist or otologist, or by an audiologist who:

- Is legally qualified in audiology or holds a certificate of Clinical Competence in Audiology from the American Speech and Hearing Association in the absence of any applicable licensing requirements, and
- Performs the exam at the written direction of a legally qualified otolaryngologist or otologist.

Covered Medical Expenses will not include charges for more than one hearing exam in a period of 24 consecutive months under the Standard PPO Plan.

## Covered Medical Expenses do not include charges for:

- Ear or hearing exams to diagnose or treat an illness or injury;
- Drugs or medicines;
- Hearing care services or supplies covered to any extent under any other part of this Plan or any other group plan sponsored by American Water;
- Hearing care services or supplies for which benefits are provided under any Workers' Compensation law or any other law of similar purpose, whether benefits are payable for all or only part of the charges;
- Hearing care services or supplies which do not meet professionally accepted standards;
- Services or supplies received while the person is not covered;
- Exams given while the person is confined in a hospital or other facility for medical care;
- Exam required by an employer as a condition of employment, or that an employer is required to provide under a labor agreement or required by law;
- Services or supplies furnished by an out-of-network Provider.


## Routine Pap Smear

## Routine

Mammogram

## Benefits Related to Breast <br> Reconstruction

Covered Medical Expenses include charges for one routine Pap smear and related laboratory expenses each calendar year.

Covered Medical Expenses include charges incurred by a female for routine mammograms as follows:

- One baseline mammogram for women at least age 35 but less than age 40,

■ One mammogram each calendar year for women age 40 or over.

The Plan provides benefits related to breast reconstruction in compliance with the Women's Health and Cancer Rights Act of 1998. This federal law states that group health plans that provide medical and surgical benefits for mastectomy must provide certain additional benefits related to breast reconstruction.

If you (or a covered dependent) are receiving mastectomy benefits, you are entitled to coverage for:

- Reconstruction of the breast on which the mastectomy has been performed;
- Surgery and reconstruction of the other breast to produce a symmetrical appearance;
- Prostheses and treatment for physical complications for all stages of a mastectomy, including lymphedemas (swelling associated with the removal of lymph nodes).
The Plan will determine the manner of coverage in consultation with you and your attending doctor. Coverage for breast reconstruction and related services will be subject to the same annual deductibles and coinsurance provisions that apply for the mastectomy.


## Annual Gynecological Exam

You may visit your network gynecologist once a year for a routine exam.

## Maternity

Benefits are payable for pregnancy-related expenses of female employees and dependents on the same basis as for an illness.

The charges made by a doctor or hospital for a vasectomy or tubal ligation for voluntary sterilization, even though not incurred in connection with the diagnosis or treatment of an illness or injury, are Covered Medical Expenses. Charges for the reversal of a sterilization procedure are not covered.

Expenses incurred for one routine self-referred gynecological exam per calendar year, performed by a network doctor, will be considered a Covered Medical Expense. The routine gynecological exam, including one Pap smear and related laboratory expenses, is considered Office Care. No coverage is provided if the exam is performed by an out-ofnetwork Provider.

Pregnancy expenses must be incurred while the person is covered under this Plan. If expenses are incurred after the coverage ceases, they will be considered for benefits only if satisfactory evidence is furnished to Horizon that the person has been totally disabled since her coverage terminated.

Any pregnancy benefits payable by previous group health coverage will be subtracted from health benefits payable for the same expenses under this Plan.

The Plan does not restrict benefits for any hospital length of stay in connection with childbirth for the mother or newborn child to less than 48 hours following a normal vaginal delivery, or less than 96 hours following a caesarean section, or require that a provider obtain authorization from the Plan for prescribing a length of stay not in excess of the above periods.

The attending provider, after consulting with the mother, may discharge the mother and newborn earlier than 48 hours following a vaginal delivery or 96 hours following a caesarean section.

## Mouth, Jaws, and Teeth

The Medical Plan covers certain treatments of the mouth, jaws, and teeth only in the event of injury. Treatment must be of, or related to, the teeth, mouth, jaws, jaw joints, or supporting tissues (these include bones, muscles, and nerves).

The Medical Plan will cover certain dental expenses, but only in the event of injury. Charges for root canal therapy; routine tooth removal (which does not involve cutting of the bone); and in-mouth appliances, crowns, bridgework, dentures, tooth restorations, and any related fitting or adjustment services (whether or not their purpose is to relieve pain) are covered if they are required as the result of injury to the mouth, jaw, or teeth.
The Medical Plan does not cover charges to remove, repair, replace, restore, or reposition teeth which are lost or damaged in the course of biting or chewing. Charges to repair, replace, or restore fillings, crowns, dentures, or bridgework are not covered by the Medical Plan. Non-surgical periodontal treatment is excluded, as are charges for dental cleaning; in-mouth scaling, planing, or scraping; and myofunctional therapy (muscle training therapy to correct or control harmful habits).
The following services and supplies furnished for the treatment of the mouth, jaws, jaw joints, teeth, and supporting tissues (including bones, muscles, and nerves) are Covered Medical Expenses and not part of the Dental Plan. For these expenses, "doctor" includes a dentist.

- Surgery needed to treat a fracture, dislocation, or wound or to cut out teeth partly or completely impacted in the jawbone. Covered surgery may cut out teeth that will not erupt through the gum, as well as other teeth that cannot be removed without cutting into bone.
- Also covered are surgeries that cut out the roots of a tooth without removing the entire tooth, as well as removing cysts, tumors, or other diseased tissues while cutting into the gums and tissues of the mouth. This is covered only when not done in connection with the removal, replacement, or repair of teeth. Covered surgery may also alter the jaw, jaw joints, or bite relationships by a cutting procedure when appliance therapy alone cannot result in functional improvement.
- Non-surgical treatment of infections or illnesses of the mouth, jaws, jaw joints, and supporting tissues (including bones, muscles, and nerves). This does not include those of, or related to, the teeth.
- Dental work, surgery, and orthodontic treatment needed to remove, repair, replace, restore, or reposition natural teeth damaged, lost, or removed, and other body tissues of the mouth fractured or cut due to injury. The accident causing the injury must occur while the person is covered under the Medical Plan.

Any such teeth must have been free from decay or in good repair and firmly attached to the jawbone at the time of the injury.

## Skilled Nursing Care

Coverage for private duty nursing is limited to 70 shifts per calendar year. Each period of private duty nursing of up to 8 hours will be considered one private duty nursing shift.

If crowns (caps), dentures (false teeth), bridgework, or in-mouth appliances are installed due to such injury, Covered Medical Expenses include only charges for the following:

- the first denture or fixed bridgework to replace lost teeth,
- the first crown needed to repair each damaged tooth, and
- an in-mouth appliance used in the first course of orthodontic treatment after the injury.

Except as provided for injury, the Medical Plan does not cover charges for in-mouth appliances, crowns, bridgework, dentures, tooth restorations, or any related fitting or adjustment services, whether or not the purpose of such services or supplies is to relieve pain. In addition, the Medical Plan does not cover root canal therapy or routine tooth removal (not needing cutting of the bone).

Charges made by an RN or LPN or nursing agency for "skilled nursing services" are included as Covered Medical Expenses. No other charges made by an RN or LPN or a nursing agency are covered. As used here, "skilled nursing services" means these services:
■ Visiting nursing care by an RN or LPN. Visiting nursing care means a visit of up to 4 hours for the purpose of performing specific skilled nursing tasks.

- Private duty nursing by an RN or LPN if the person's condition requires skilled nursing care and visiting nursing care is not adequate. Benefits will not be paid during a calendar year for private duty nursing for any shifts in excess of the Private Duty Nursing Care Maximum Shifts. Each period of private duty nursing of up to eight hours will be considered one private duty nursing shift.
"Skilled nursing care" does not include:
- The part (or all) of any nursing care that does not require the education, training, and technical skills of an RN or LPN, such as transportation, meal preparation, charting of vital signs, and companionship activities.
- Private duty nursing care given while the person is an inpatient in a hospital or other health care facility.
- Care provided to help a person in the activities of daily life, such as bathing, feeding, personal grooming, dressing, getting in and out of a bed or chair, or toileting.
- Care provided solely for skilled observation, excluding one period per day of up to 4 hours for no more than 10 consecutive days following the occurrence of:
- a change in patient medication;
- the need for urgent or emergency medical services provided by a doctor or the onset of symptoms indicating the likely need for such services;
- surgery; or
- release from inpatient confinement.
- Any service provided solely to administer oral medicines, except where applicable law requires that such medicines be administered by an RN or LPN.

Hospice Care

The Plan covers inpatient or outpatient hospice care for an individual who has been diagnosed as having six months or less to live.

Inpatient hospice care must be precertified to be covered at the highest level payable by the Plan.

Outpatient hospice care is subject to a lifetime maximum of $\$ 5,000$.

Charges made for the following inpatient services furnished to a person for hospice care when given as a part of a Hospice Care Program are included as Covered Medical Expenses.

## Inpatient Care

Room and board and other services and supplies furnished to a fulltime inpatient for pain control and other acute and chronic symptom management.
Charges for daily room and board in a semi-private room over the Private Room Limit are not included. Inpatient hospice care is limited to a total of 90 days for all confinements.

## Facility and doctor Expenses

The Plan covers charges made on its own behalf by $a$ :

- Hospice Care Facility
- Hospital
- Skilled Nursing/Convalescent Facility, or
- Doctor


## Outpatient Care

The Plan covers charges made by a Hospice Care Agency for the following outpatient services and supplies (if precertified), up to a lifetime maximum of $\$ 5,000$.

- Part-time or intermittent nursing care by an RN or LPN for up to eight hours per day.
- Medical social services under the direction of a doctor, including:
- assessment of the person's social, emotional, and medical needs, and the home and family situation;
- identification of available community resources;
- assisting the person to obtain resources needed to meet the person's assessed needs.
- Psychological and dietary counseling.
- Consultation or case management services by a doctor.
- Physical and occupational therapy.
- Part-time or intermittent home health aide services (consisting mainly of caring for the person) for up to eight hours per day.
- Medical supplies, drugs, and medicines prescribed by a doctor.

Charges made by the Providers below for Outpatient Care, but only if the provider is not an Employee of a Hospice Care Agency and the agency retains responsibility for the care of the person:

- A doctor for consultant or case management services.
- A physical or occupational therapist.
- A Home Health Care Agency for:
- physical or occupational therapy;
- part-time or intermittent home health aide services consisting mainly of caring for the person) for up to eight hours per day;
- medical supplies, drugs, and medicines prescribed by a doctor;
- psychological and dietary counseling.


## Charges for the following services are not included:

■ Bereavement counseling.

- Funeral arrangements.
- Pastoral counseling.
- Financial or legal counseling, including estate planning or the drafting of a will.
- Homemaker or caretaker services. These are services which are not solely related to care of the person, including sitter or companion services for either the person who is ill or to other members of the family, transportation, housecleaning, and maintenance of the house.
- Respite care. This is care furnished during a period of time when the person's family or usual caretaker is unable or unwilling to attend to the person's needs.

Short-Term
Rehabilitation

Charges made by a doctor, or a licensed or certified physical, occupational, or speech therapist for Short-Term Rehabilitation services to treat acute conditions are Covered Medical Expenses.

Short-Term
Rehabilitation is therapy which is expected to result in the improvement of a body function (including the restoration of the level of an existing speech function) which has been lost or impaired due to an injury, an illness, or a congenital defect.

You and your covered dependents are covered for a maximum of 60 days of Short-Term Rehabilitation services during a calendar year, as long as the treatment is certified by Horizon.

Short-term rehabilitation services consist of:

- Physical therapy,
- Occupational therapy, or
- Speech therapy,
furnished to a person who is not confined as an inpatient in a hospital or other facility for medical care. This therapy shall be expected to result in significant improvement of the person's condition within 60 days from the date the therapy begins.

Charges for Short-Term Rehabilitation services are covered for a maximum of 60 days per calendar year, as long as the treatment is precertified.

## Charges for the following services are not covered:

- Services covered to any extent under any other part of this Plan or any other group plan sponsored by American Water.
- Services received while the person is confined in a hospital or other facility for medical care.
- Services not performed by a doctor or not under his or her direct supervision.
- Services rendered by a physical, occupational, or speech therapist who lives in the person's home, or who is a part of the family of either the person or the person's spouse.
- Services rendered for the treatment of delays in speech development, unless resulting from:
- illness,
- injury, or
- congenital defect.
- Special education, including lessons in sign language, to instruct a person whose ability to speak has been lost or impaired, to function without that ability.
- Any services not provided in accordance with a specific treatment plan that:
- Details the treatment to be rendered and the frequency and duration of the treatment,
- Provides for ongoing reviews and is renewed only if therapy is still necessary.


## Emergency Care

In the event of a medical emergency, the Plan covers treatment in a hospital emergency room.

Non-Emergency
Care in an Emergency Room

Other Covered Medical Expenses

If emergency care is received in a hospital emergency room while a person is not a full-time inpatient, the hospital's charges will be Covered Medical Expenses and paid at the Payment Percentage.
"Emergency care" means the first treatment given in a hospital emergency room right after the sudden and (at that time) unexpected onset of a change in a person's physical or mental condition that requires hospital level care because:

- The care could not safely and adequately have been provided other than in a hospital or adequate care was not available elsewhere in the area at the time and place it was needed, and
- If the hospital level care were not given, the emergency described above could, as determined by Horizon, reasonably be expected to result in:
- loss of life, limb, or
- significant impairment to bodily function, or
- permanent dysfunction of a body part.

If non-emergency care treatment is received in a hospital emergency room while a person is not a full-time inpatient, no benefits will be paid.

Other Covered Medical Expenses include:

- Doctor's charges.
- Diagnostic lab work and X-rays.
- X-ray, radium, and radioactive isotope therapy.
- Anesthetics and oxygen.
- Rental of durable medical or surgical equipment. Not included are charges for more than one item of equipment for the same or similar purpose.
- "Durable Medical and Surgical Equipment" is equipment made to withstand prolonged use and used mainly in the treatment of an illness or injury. It must be suited for use in the home, not normally of use to persons without an illness or injury, and not used to alter quality or temperature, or for exercise or training.
- The purchase, repair, or replacement of durable medical and surgical equipment and accessories needed to operate it.
- The initial purchase is covered only if Horizon agrees that long-term use is planned and the equipment cannot be rented, or it is likely to cost less to buy it than to rent it.
- Replacement is covered only if Horizon agrees that it is needed because of a change in the person's physical condition, or it is likely to cost less to buy a replacement than to repair the existing equipment or to rent similar equipment.
- Artificial limbs and eyes. Eyeglasses, hearing aids, orthopedic shoes, or other devices to support the feet are not included.
- Professional ambulance service to transport a person from the place of the injury or onset of illness to the first hospital where treatment is given.


## Pre-Existing Conditions

Pre-Existing Conditions do not apply under any Horizon Plan.

## Certification for Hospital Admissions

Inpatient hospital confinements must be precertified to qualify for the highest level of benefits paid by the Plan. If precertification is not obtained, benefits will be reduced or denied.

Inpatient hospital confinements must be precertified to qualify for the highest level of benefits paid by the Plan. Covered Medical Expenses incurred on any day not certified during the confinement will be paid as shown below if:

- A person becomes confined in a hospital as a full-time inpatient, and
- It has not been certified that the confinement (or any day of the confinement) is necessary, and
- The confinement has not been ordered and prescribed by your doctor.


## Hospital Expenses Incurred During the Confinement

If certification has been requested and denied for part of the confinement, no benefits will be paid for Hospital Expenses incurred for room and board for that day(s). Benefits for all other Hospital Expenses will be paid at the Payment Percentage.

If certification has not been obtained, you will have to pay a $\$ 150$ penalty charge before benefits are paid for covered services.

Call the precertification number on your ID card or Horizon Member Services at (800) 355BLUE (2583) to obtain certification of a hospital inpatient admission. Written notice of the number of days certified will be sent promptly to the hospital. A copy will be sent to you and the doctor.

Benefits for expenses in excess of the Excluded Amount will be paid at the Payment Percentage.

If certification has not been requested and the confinement (or any day of the confinement) is necessary, Hospital Expenses up to the Excluded Amount will not be deemed to be Covered Medical Expenses. Benefits for all other Hospital Expenses will be payable at the Payment Percentage.

## Other Covered Medical Expenses

Benefits will be paid at the Payment Percentage.
Whether or not a day of confinement is certified, no benefit will be paid for expenses incurred on any day of confinement as a full-time inpatient if excluded by any other terms of this Plan, except that if certification has been given for a day of confinement, excluding services and supplies because they are not necessary will not be applied to expenses for hospital room and board.

In the event of an urgent admission, you, the person's doctor, or the hospital must call Horizon Member Services for certification before the person is confined as a full-time inpatient.
An urgent admission is one required as the result of an injury caused by an accident; the diagnosis of an illness; or the onset of, or change in, an illness. The person's condition does not require emergency medical care, but is severe enough to require confinement in a hospital within two weeks of the date the doctor determines that confinement is required.

A "non-urgent admission" is one which is not an emergency admission or an urgent admission.

When a covered person is confined as a full-time inpatient as the result of an emergency admission, you, the person's doctor, or the hospital must call Horizon Member Services to request certification within 48 hours of the start of the confinement. If the call cannot be made within 48 hours, the call must be made as soon as reasonably possible. The 48 -hour requirement is extended to 72 hours when the confinement starts on a Friday or Saturday.

An admission is considered to be an emergency when the doctor admits the person to the hospital right after the sudden and (at that time) unexpected onset of a change in the person's physical or mental condition which could be life-threatening or result in significant impairment or permanent dysfunction if the person is not immediately confined as a full-time hospital inpatient.

If, in your doctor's opinion, it is necessary for you to be confined for a longer time than already certified, you, the doctor, or the hospital may

Precertification is required for confinements in a skilled nursing/convalescent facility or hospice, and for home health care and outpatient hospice care. If precertification is not obtained, benefits may be reduced.

Facility Expenses
request that more days be certified by calling the precertification number on your ID card or Horizon Member Services at (800) 355BLUE (2583). This must be done on or before the last day that has already been certified.
Written notice of the number of days certified will be sent promptly to the hospital. A copy will be sent to you and the doctor.

## Certification for Skilled

## Nursing/Convalescent Facility Care, Home Health Care, and Hospice

Covered Medical Expenses will be paid as shown below if incurred:

- While a person is confined in a skilled nursing/convalescent facility or hospice; or
- For services or supplies for home health care, hospice care, or skilled nursing care when a person is not confined as an inpatient; and
- It has been certified that such confinement or care is necessary; and
- The confinement or care has been ordered and prescribed by your doctor.

If certification has been requested and denied, no benefits will be paid for Skilled Nursing/Convalescent Facility Expenses or Hospice Care Facility Expenses incurred for room and board. Benefits for all other Skilled Nursing/Convalescent Facility Expenses or Hospice Care Facility Expenses incurred during the confinement will be paid at the Payment Percentage.

If certification has not been requested and the confinement (or any day of the confinement) is not necessary, no benefits will be paid for Skilled Nursing/Convalescent Facility Expenses or Hospice Care Facility Expenses incurred for room and board. For all other Skilled Nursing/Convalescent Facility Expenses or Hospice Care Facility Expenses incurred during the confinement:

- Expenses up to the Excluded Amount will not be deemed to be Covered Medical Expenses.
- Benefits for all other such expenses will be paid at the Payment Percentage.


## Expenses for Services or Supplies

To get certification you must call the precertification number on your ID card or Horizon Member Services at (800) 355BLUE (2583). Such certification must be obtained before an expense is incurred. Prompt written notice will be provided to you of the days of confinement and services or supplies which have been certified.

If certification has not been requested and the confinement (or any day of the confinement) is necessary, skilled nursing/convalescent Facility Expenses or Hospice Care Facility Expenses incurred during the confinement, up to the Excluded Amount, will not be deemed to be Covered Medical Expenses. Benefits for all other such expenses incurred during the confinement will be paid at the Payment Percentage. As to all other Covered Medical Expenses incurred during the confinement, benefits will be paid at the Payment Percentage.

If certification for a service or supply has been requested and denied, or if certification has not been requested and the service or supply is not necessary, no benefits will be paid for the denied or unnecessary service or supply.
If certification has not been requested for a service or supply and the service or supply is necessary, benefits for the necessary service or supply will be paid as follows:

- Expenses incurred for the service or supply, up to the Excluded Amount, will not be deemed to be Covered Medical Expenses;
- Benefits for all other Covered Medical Expenses incurred for the service or supply will be paid at the Payment Percentage.
Whether or not a day of confinement or a service or supply has been certified, no benefit will be paid if the charges for the confinement or service or supply are excluded by any other terms of this Plan, except that, to the extent a day of confinement has been certified, excluding services and supplies because they are not necessary will not apply to:
- Skilled Nursing/Convalescent Facility Expenses for room and board, or
- Hospice Care Facility Expenses for room and board.

To the extent that such service or supply has been certified for home health care, hospice care, or skilled nursing care, excluding services or supplies because they are not necessary will not apply to the service or supply.

If a person's doctor believes that the person needs more days of confinement or services or supplies beyond those which have been already certified, a call must be made to the precertification number on your ID card or Horizon Member Services at (800) 355-BLUE (2583) to certify more days of confinement or services or supplies.
Prompt written notice will be provided to you of the days of confinement and services or supplies which have been certified.

If services and supplies for hospice care have been certified and the person later requires hospital confinement for pain control or acute symptom management, any other certification requirement in this Plan will be waived for any such day of hospital confinement.

## Certification for Certain Procedures and Treatments

Certification for certain procedures and treatments is required:

- Before the procedure is performed, or
- Before the treatment starts, unless the procedure or treatment has been ordered and prescribed by your doctor.
When any of the procedures or treatments shown below will be performed on an inpatient or outpatient basis, Covered Medical Expenses for the procedure or treatment will be payable as follows:
- If the procedure or treatment is not necessary, no benefits will be payable whether or not certification has been requested.
- If certification has been requested and the procedure or treatment is necessary, benefits will be payable at the Payment Percentage.
- If certification has not been requested and the procedure or treatment is necessary, expenses up to the Excluded Amount will not be considered to be Covered Medical Expenses. Benefits for Covered Medical Expenses in excess of the Excluded Amount will be payable at the Payment Percentage.
Certain procedures or treatments require precertification before they are performed, regardless of whether done on an inpatient or outpatient basis. Call Horizon to determine if your procedure requires precertification.
You or the provider performing the procedure or treatment must call the precertification number on your ID card or Horizon Member Services at (800) 355-BLUE (2583) to request certification.

If the procedure or treatment is performed due to an Emergency Condition, the call must be made:

- Before the procedure or treatment is performed, or
- Not later than 48 hours after the procedure or treatment is performed, unless the call cannot be made within that time. In that case, the call must be made as soon as it is reasonably possible. In the event the procedure or treatment is performed on a Friday or Saturday, the 48 -hour requirement will be extended to 72 hours.

If the procedure or treatment is performed for any condition other than an Emergency Condition, the call must be made at least 14 days before the date of the procedure or the date treatment begins. If it is not possible to make the call during the specified time, it must be made as
soon as reasonably possible before the date of the procedure or the date treatment begins.
Written notice of the certification decision will be sent promptly to you and the provider performing the procedure or treatment. This decision will be valid for 60 days from the date you receive the notice. If the procedure or treatment is to be performed after this 60 -day period, certification must again be requested, as described above.

## Certification for Hospital and Treatment Facility Admissions for Alcoholism, Drug <br> Abuse, or Mental Disorders

Precertification is required for inpatient admissions to treat alcoholism, drug abuse, and mental disorders. Benefits may be reduced if certification is not obtained.

Facility Room and Board Expenses

Covered Medical Expenses for the effective treatment of alcoholism, drug abuse, or mental or nervous disorders will be paid as described below if incurred:

- While a person is confined in a hospital or treatment facility, and
- It has not been certified that such confinement is necessary, and
- The confinement has not been ordered and prescribed by your doctor.

If certification has been requested and denied, or if certification has not been requested and the confinement (or any day of it) is not necessary, no benefits will be paid.
If certification has not been requested and the confinement is necessary, expenses up to the Excluded Amount will not be considered Covered Medical Expenses.

If certification has been requested and denied, or if certification has not been requested and the confinement is necessary, only expenses after the $\$ 150$ precertification penalty will be considered Covered Medical Expenses.

If certification has not been requested and the confinement is not necessary, no benefits will be paid.
Whether or not a day of confinement is certified, no benefits will be payable for Covered Medical Expenses incurred on any day of confinement as a full-time inpatient if excluded by any other terms of this Plan, except that if certification has been given for any day of

To request certification, you must call the precertification number on your ID card or Horizon Member Services at (800) 355BLUE (2583). Such certification must be obtained before confinement as a fulltime inpatient, or in the case of Emergency Care, within 48 hours after the start of a confinement as a full-time inpatient or as soon as reasonably possible.
confinement, services and supplies applicable to hospital and treatment facility room and board will not be excluded as "unnecessary."
"Emergency Care" means the first treatment given in a hospital's emergency room for the sudden and unexpected onset of a change in a person's physical or mental condition which:

- Requires hospital level care because the care could not safely and adequately have been provided other than in a hospital; or
- Adequate care was not available elsewhere in the area at the time and place it was needed; and
- If hospital level care were not given could, as determined by Horizon, reasonably be expected to result in:
- loss of life or limb, or
- significant impairment to bodily function, or
- permanent dysfunction of a body part.

If the person's doctor believes that the person needs more days of confinement beyond those which have already been certified, additional days of confinement must be certified on or before the last day that has already been certified.

## Treatment of Alcoholism, Drug Abuse, or Mental Disorders

## Inpatient

 TreatmentIf a person is a full-time inpatient in either a hospital or treatment facility, expenses for the following are covered:

- Treatment of the medical complications of alcoholism or drug abuse, such as cirrhosis of the liver, delirium tremens, or hepatitis.
- Effective treatment of alcoholism or drug abuse.
- Treatment of a mental disorder.
- Room and Board. Charges for daily room and board in a private room over the Private Room Limit are not covered.

■ Other necessary services and supplies.
The above expenses are covered only if they are incurred during the first 45 days of all such confinements during any one calendar year.

For alcoholism and drug abuse, benefits will be paid for only two courses of treatment during your lifetime.

Benefits will be paid at the Payment Percentage.

## Outpatient

Treatment

Expenses incurred for the effective treatment of alcoholism or drug abuse, or the treatment of mental disorders while the person is not confined as a full-time inpatient in a hospital or treatment facility, will be considered Covered Medical Expenses.

Benefits will be paid at the Payment Percentage. Benefits will not be paid for more than the Special Outpatient Calendar Year Maximum Visits in any one calendar year.

## Submitting Claims

All claims must be filed within two years from the date of the incurred expense. Your claims must be in writing and you must give proof of the nature and extent of the expense. You may obtain Medical Plan Benefits Request forms from the Benefits Service Center; directly from Horizon's website (www.horizonblue.com/nationalaccounts); or by contacting Horizon Member Services at (800) 355-BLUE (2583).

## How Your Benefits Are Paid

American Water has contracted with Horizon to assist in administering benefits under the PPO Plans as the Claims Administrator. Your claims will be paid as soon as Horizon receives the necessary written proof supporting your claim. In order to speed claims processing, Horizon will pay medical benefits directly to the provider unless you specify that you want the benefits paid to you. If you are a minor or otherwise legally unable to give a valid release, Horizon may make payment to any of your relatives whom it determines to be fairly entitled to the payment.

With the exception of the copayment for doctor office visits, you should never pay a provider directly until you receive an Explanation of Benefits (EOB).

## Filing Medical Claims

When you use a network provider, you will not have to complete a Medical Plan Benefits Request form. The network provider will handle all claim filing for you.

Fast processing of your out-of-network claim depends on complete, accurate information on your Benefits Request form. When filing a claim, please remember to:

- Complete all applicable sections of your Benefits Request form. Any unanswered questions will cause delay in processing your claim.
- Include your Identification number on all claims, including claims for your dependent(s), and be sure to sign the form.
- Attach the itemized bill to the form. An itemized bill must include the following information:
- the patient's full name,
- the patient's relationship to you,
- the date the service was provided,
- the name of the health care professional providing the service,
- the provider's taxpayer identification number,
- the type of service provided,
- the nature of the illness or injury, and
- the charges for the service or treatment (multiple expenses should be itemized).
If any of this information is missing, write it on the bill yourself and sign your name. Your health care provider should complete the doctor/supplier section of the claim form if he or she has not given you an itemized statement.

If you have other group coverage (or Medicare coverage) that pays benefits before the American Water Plan, you will need to provide Horizon with a copy of the other carrier's Explanation of Benefits (EOB) reflecting the benefits paid under the other coverage for the expenses being submitted for payment to this Plan.

Once you have completed the Medical Plan Benefits Request form and attached the itemized bills, send everything to:

## Horizon Blue Cross Blue Shield of New Jersey P.O. Box 1219 <br> Newark, NJ 07101-1219

If you have any questions about the status of your claim, call Horizon Member Services at (800) 355-BLUE (2583).

# The Exclusive Provider Organization (EPO) Plan 

## The Exclusive Provider Organization (EPO) Plan

The Plans are self-insured by American Water. Horizon provides certain administrative services under the Plan.
Like the PPOs, the Exclusive Provider Organization (EPO) Plan is self-insured by American Water, with certain administrative services provided by Horizon. However, it offers no out-of-network benefits.

If you want to receive benefits under the EPO Plan, you must receive care from a doctor, hospital, or health care provider within the Horizon network. As you may know, Horizon maintains a nationally recognized health care provider network. In fact, most providers and hospitals currently used by our employees are members of the Horizon network. If you cover any college-age dependents or any of your dependents live permanently outside the network area, you should consider carefully before enrolling in the EPO option.

To locate participating network providers, call (800) 810-BLUE (2583) or use the Provider Finder at: www.horizonblue.com/national accounts.

With the EPO Plan, you do not need to select a Primary Care Physician before you receive medical care, nor do you need to obtain referrals to see a specialist. However, when you need care, you must use a provider within the Horizon network in order to receive benefits.

## EPO Plan Advantages

Because you are using a provider within the Horizon network:

- Your healthcare providers file all your claims;

■ Your doctor initiates all required precertification;

- You will not experience any reduction in benefits under the "reasonable and customary" rule because health care providers in the network are allowed to charge only the special rates that Horizon has negotiated with them. (See the Glossary for a definition of "reasonable and customary charge").


## Coverage for Dependents Who Live Outside the Network Area

Because the EPO Plan offers no out-of-network benefits, expenses incurred by your dependents who live outside the network area will not be covered. Therefore, if your child is away at school or lives permanently outside the network area (with another parent or stepparent, for example), you should consider carefully before enrolling in the EPO option.

## Coverage When You Are Traveling

If you are traveling (and out of a Horizon network area) and you need medical care in a non-emergency situation, the EPO Plan offers no out-of-network benefits.

## In Case of Emergency

An emergency is a sudden and unexpected lifethreatening medical condition that requires immediate medical or surgical care.

In case of emergency, get the care you need from the nearest health care facility or doctor. A medical emergency is defined as "a sudden and unexpected life-threatening medical condition that requires immediate medical or surgical care in order to prevent death or a severe health crisis." Examples include convulsions, excessive bleeding, serious burns, and suspected heart attack.

You will be paid at the Plan's benefit level for emergency care - 24 hours a day, 365 days a year - whether you are at home or away, in- or out-of-network. When you need emergency care, it is important to seek immediate care at the nearest appropriate facility.
When a covered person is confined as a full-time inpatient as the result of an emergency admission, you, the person's doctor, or the hospital must call Horizon Member Services to request certification within 48 hours of the start of the confinement. If the call cannot be made within 48 hours, the call must be made as soon as reasonably possible. The 48 -hour requirement is extended to 72 hours when the confinement starts on a Friday or Saturday.

## Precertification

Precertification is an important feature of the EPO Plan. In order for you to receive the highest level of benefits available, Horizon must be notified to precertify any hospital admission and certain outpatient surgical procedures, treatments, and tests. The purpose of this process is to review the medical necessity of a procedure and to approve an appropriate length of stay.

You, the network hospital, or your network doctor will initiate all required precertification.

## Procedures Which Must Be Precertified

How to Request Precertification for a Medical Procedure or Admission

> All hospital and skilled nursing/convalescent facility admissions
> Home health care, hospice care, and skilled nursing care
> Inpatient treatment for substance abuse and mental disorders
> Call Horizon for all other procedures.

Certain procedures or treatments require precertification before they are performed, regardless of whether done on an inpatient or outpatient basis. Call Horizon to determine if your procedure requires precertification.
You or the provider performing the procedure or treatment must call the precertification number on your ID card or Horizon Member Services at (800) 355-BLUE (2583) to request certification.

The hospital or doctor should call at least 14 days before any scheduled admission or outpatient procedure, or as soon as the need for medical care is evident. In case of emergency, you or a family member should contact Horizon Member Services within 48 hours after the admission or procedure.

At Member Services, a Medical Consultant will ask:

- The patient's name and Identification number,
- The type of surgical procedure or test ,
- The doctor's name and telephone number, and
- When the procedure is scheduled.

The Medical Consultant will review the medical necessity of the proposed inpatient admission, the proposed surgical procedures and treatments, or the proposed inpatient treatment for substance abuse and
mental disorders. He or she will compare information about your case with generally accepted medical standards.

Mental Health and Substance Abuse admissions are precertified by Magellan at (800) 224-1233.

If the proposed inpatient admission or treatment is medically necessary in accordance with such standards, it will be certified by the Medical Consultant. On the other hand, if other treatment is more appropriate, alternative treatment settings may be suggested. See page 63 for more information regarding precertification.

There's A
Penalty For Not Precertifying

If Your Hospital Stay Is Longer Than Expected

If a hospital admission or any of the procedures or tests listed is not precertified, you will have to pay a $\$ 150$ penalty charge before benefits are paid for covered services.

If your hospital stay is longer than the approved period, you must notify Horizon Member Services as soon as you are aware your stay must be extended. The Medical Consultant can then work with your doctor to extend the certification of your hospital stay.

## Your Share of Medical Expenses

American Water Medical Plans have been carefully designed to provide quality care and the most value for each dollar spent by you and the Company. Here is how we share the costs of these valuable benefits.

## Deductibles <br> The EPO Plan has no deductibles.

Copayments

You pay your share of expenses through copays.
When you visit your network provider, you pay a flat fee for certain network services. This fee is called a "copayment" or "copay." If you are admitted to a network hospital or hospital alternative, you will generally be covered at $100 \%$ after a $\$ 100$ copay per admission.

A separate Hospital Emergency Room copay of $\$ 35$ must be paid for each visit to a hospital's emergency room for emergency care. This copay will be waived if the person is admitted to the hospital as an inpatient immediately following the emergency room visit.

## No Out-of-Pocket Limit

## Lifetime

Maximum

Your
Contributions

American Water pays the majority of your benefit costs.

The EPO Plan has no "out-of-pocket" limit. You are responsible for paying all of your copayments for the entire calendar year.

The EPO Plan provides an unlimited Lifetime Maximum Benefit for you and each covered member of your family.

You pay your share of the cost for your benefits each pay cycle through convenient pre-tax payroll deductions. Pre-tax means that your contributions are withheld before federal (and in most cases, state (other than New Jersey) and local) income and FICA (Social Security) taxes are withheld. This reduces your taxable income and the amount of tax you pay. As a result, you have more take-home pay. Because your pre-tax contributions are not subject to FICA taxes, your Social Security benefit at retirement may be slightly reduced if your earnings are under the Social Security Taxable Wage Base ( $\$ 94,200$ for 2006; $\$ 97,500$ for 2007). However, the loss in future retirement benefits should be more than offset by the current tax savings under the Plan.

## Benefits Payable

After any applicable copay amount, the EPO Plan generally pays 100\% of Covered Medical Expenses, except for any different benefit levels described elsewhere in this Summary Plan Description. If an expense is covered as one type of Covered Medical Expense, it cannot be covered as any other type.

## Benefit Maximums

The following limitations apply to some of the benefits under the Plan:

## - Skilled nursing facility

100 days per calendar year

- Short-Term Rehabilitation (for acute conditions only)

60 days per calendar year if certified by your doctor

- Private Room Limit

The institution's semi-private rate

## Covered Expenses

## Inpatient

Hospital Care
Inpatient admissions must be precertified to qualify for the maximum benefit payable.

## Outpatient Hospital Care

Skilled Nursing/
Convalescent Facility Care

Precertification of skilled nursing/ convalescent facility services is necessary to receive the maximum benefit payable by the Plan.

The Plan covers charges made by a Horizon network hospital for room, board, and other hospital services and supplies for a person who is confined as a full-time inpatient for the treatment of an injury or illness.

The Plan covers charges made by a Horizon network hospital for services and supplies for a person who is not confined as a full-time inpatient.

The Plan covers charges made by a Horizon network skilled nursing/convalescent facility for the following services and supplies furnished to a person while confined to convalesce from an illness or injury.

- Room and Board. This includes charges for services such as general nursing care made in connection with room occupancy. Charges for daily room and board in a private room over the Private Room Limit are not covered.
- Use of special treatment rooms
- X-ray and lab work
- Physical, occupational, or speech therapy
- Oxygen and other gas therapy
- Other medical services usually given by a skilled nursing/convalescent facility, excluding private or special nursing, or doctors' services
- Medical supplies

The Plan does not cover skilled nursing/convalescent facility charges made for treatment of:

- Drug addiction
- Chronic brain syndrome
- Alcoholism
- Senility
- Mental retardation
- Any other mental disorder

Home Health
Care

## Routine Physical Exams

The charges made by your doctor for a routine physical exam given to you, your spouse, or your dependent child may be included as Covered Expenses.

Home health care expenses from a Horizon network provider are covered if:

- The charge is made by a home health care agency,
- The care is given to a person in his or her home.

Home health care expenses are charges for:

- Part-time or intermittent care by an RN, or by an LPN if an RN is not available;

■ Part-time or intermittent home health aide services for patient care;

- Physical, occupational, and speech therapy;
- Expenses covered to the extent they would have been covered under this Plan if the person had been confined in a hospital or skilled nursing/convalescent facility:
- medical supplies, drugs, and medicines prescribed by a doctor, and
- lab services provided by or for a home health care agency.


## The Plan does not cover charges made for:

- Services or supplies that are not a part of the home health care plan,
- Services of a person who usually lives with you or is a member of your or your spouse's family,
- Services of a social worker,
- Transportation.

Covered Medical Expenses include charges made by a Horizon network doctor for a routine physical exam given to you, your spouse, or your dependent child.
A routine physical exam is a medical exam given by a network doctor for a reason other than to diagnose or treat a suspected or identified injury or illness. Included are:

- X-rays and laboratory and other tests given in connection with the exam, and
- Materials for the administration of immunizations for infectious illness and testing for tuberculosis.

To qualify as a covered physical exam, the doctor's exam must include at least:

- A review and written record of the patient's complete medical history,
- A check of all body systems, and
- A review and discussion of the exam results with the patient or the parent or guardian.


## Charges for routine physical exams do not include:

- Services and supplies furnished by a non-network provider;
- Services covered to any extent under any other part of this Plan or any other group plan sponsored by American Water;
- Services to diagnose or treat a suspected or identified injury or illness;
- Exams given to a person confined in a hospital or other facility for medical care;
- Services not given by a doctor or under his or her direction;
- Medicines, drugs, appliances, equipment, or supplies;
- Psychiatric, psychological, personality, or emotional testing or exams;
- Exams in any way related to employment;

■ Premarital exams;

- Vision, hearing, or dental exams;
- Doctor's office visits in connection with immunization or testing for tuberculosis.


## Routine Hearing

 ExamsCovered Medical Expenses include charges for an audiometric exam. The services must be performed by a Horizon network doctor who is certified as an otolaryngologist or otologist, or by an audiologist who:

- Is legally qualified in audiology or holds a certificate of Clinical Competence in Audiology from the American Speech and Hearing Association in the absence of any applicable licensing requirements, and
- Performs the exam at the written direction of a legally qualified otolaryngologist or otologist.


## Covered Medical Expenses do not include charges for:

- Ear or hearing exams to diagnose or treat an illness or injury;
- Drugs or medicines;
- Hearing care services or supplies covered to any extent under any other part of this Plan or any other group plan sponsored by American Water;

Hearing care services or supplies for which benefits are provided under any Workers' Compensation law or any other law of similar purpose, whether benefits are payable for all or only part of the charges;

- Hearing care services or supplies which do not meet professionally accepted standards;
- Services or supplies received while the person is not covered;
- Exams given while the person is confined in a hospital or other facility for medical care;
- Exam required by an employer as a condition of employment, or that an employer is required to provide under a labor agreement or required by law;
- Services or supplies furnished by a non-network provider.


## Routine Pap Smear

Routine Mammogram

Benefits Related to Breast Reconstruction

Covered Medical Expenses include charges for one routine Pap smear and related laboratory expenses each calendar year. Services must be furnished by EPO network providers.

Covered Medical Expenses include charges incurred by a female for routine mammograms as follows:

- One baseline mammogram for women at least age 35 but less than age 40 ,
- One mammogram each calendar year for women age 40 or over. Services must be furnished by EPO network providers.

The Plan provides benefits related to breast reconstruction in compliance with the Women's Health and Cancer Rights Act of 1998. This federal law states that group health plans that provide medical and surgical benefits for mastectomy must provide certain additional benefits related to breast reconstruction.

If you (or a covered dependent) are receiving mastectomy benefits, you are entitled to coverage for:

- Reconstruction of the breast on which the mastectomy has been performed,
- Surgery and reconstruction of the other breast to produce a symmetrical appearance,
- Prostheses and treatment for physical complications for all stages of a mastectomy, including lymphedemas (swelling associated with the removal of lymph nodes).


## Annual Gynecological Exam

## Maternity

Benefits are payable for pregnancy-related expenses of female employees and dependents on the same basis as for an illness.

The Plan will determine the manner of coverage in consultation with you and your attending doctor. Coverage for breast reconstruction and related services will be subject to the same annual deductibles and coinsurance provisions that apply for the mastectomy.

The charges made by a Horizon network doctor or hospital for a vasectomy or tubal ligation for voluntary sterilization, even though not incurred in connection with the diagnosis or treatment of an illness or injury, are Covered Medical Expenses. Charges for the reversal of a sterilization procedure are not covered.

Expenses incurred for one routine gynecological exam per calendar year, performed by a Horizon network doctor, will be considered a Covered Medical Expense. The routine gynecological exam, including one Pap smear and related laboratory expenses, is considered Office Care. No coverage is provided if the exam is performed by an out-ofnetwork provider.

Pregnancy expenses must be incurred while the person is covered under this Plan and services furnished by network providers. If expenses are incurred after the coverage ceases, they will be considered for benefits only if satisfactory evidence is furnished to Horizon that the person has been totally disabled since her coverage terminated.

Any pregnancy benefits payable by previous group health coverage will be subtracted from health benefits payable for the same expenses under this Plan.

The Plan does not restrict benefits for any hospital length of stay in connection with childbirth for the mother or newborn child to less than 48 hours following a normal vaginal delivery, or less than 96 hours following a caesarean section, or require that a provider obtain authorization from the Plan for prescribing a length of stay not in excess of the above periods.

The attending provider, after consulting with the mother, may discharge the mother and newborn earlier than 48 hours following a vaginal delivery or 96 hours following a caesarean section.

## Mouth, Jaws, and Teeth

The Medical Plan covers certain treatments of the mouth, jaws, and teeth only in the event of injury. Treatment must be of, or related to, the teeth, mouth, jaws, jaw joints, or supporting tissues (these include bones, muscles, and nerves).

The Medical Plan will cover certain dental expenses when services are furnished by network providers, but only in the event of injury. Charges for root canal therapy; routine tooth removal (which does not involve cutting of the bone); and in-mouth appliances, crowns, bridgework, dentures, tooth restorations, and any related fitting or adjustment services (whether or not their purpose is to relieve pain) are covered if they are required as the result of injury to the mouth, jaw, or teeth.

The Medical Plan does not cover charges to remove, repair, replace, restore, or reposition teeth which are lost or damaged in the course of biting or chewing. Charges to repair, replace, or restore fillings, crowns, dentures, or bridgework are not covered by the Medical Plan. Non-surgical periodontal treatment is excluded, as are charges for dental cleaning; in-mouth scaling, planing, or scraping; and myofunctional therapy (muscle training therapy to correct or control harmful habits).

The following services and supplies furnished by a network provider for the treatment of the mouth, jaws, jaw joints, teeth, and supporting tissues (including bones, muscles, and nerves) are Covered Medical Expenses and not part of the Dental Plan. For these expenses, "doctor" includes a dentist.

- Surgery needed to treat a fracture, dislocation, or wound or to cut out teeth partly or completely impacted in the jawbone. Covered surgery may cut out teeth that will not erupt through the gum, as well as other teeth that cannot be removed without cutting into bone.
- Also covered are surgeries that cut out the roots of a tooth without removing the entire tooth, as well as removing cysts, tumors, or other diseased tissues while cutting into the gums and tissues of the mouth. This is covered only when not done in connection with the removal, replacement, or repair of teeth. Covered surgery may also alter the jaw, jaw joints, or bite relationships by a cutting procedure when appliance therapy alone cannot result in functional improvement.
- Non-surgical treatment of infections or illnesses of the mouth, jaws, jaw joints, and supporting tissues (including bones, muscles, and nerves). This does not include those of, or related to, the teeth.
- Dental work, surgery, and orthodontic treatment needed to remove, repair, replace, restore, or reposition natural teeth damaged, lost, or removed, and other body tissues of the mouth fractured or cut due to injury. The accident causing the injury must occur while the person is covered under the Medical Plan.


## Skilled Nursing Services

Coverage for private duty nursing is payable at $100 \%$ with no limit on days.

Any such teeth must have been free from decay or in good repair and firmly attached to the jawbone at the time of the injury.

If crowns (caps), dentures (false teeth), bridgework, or in-mouth appliances are installed due to such injury, Covered Medical Expenses include only charges for the following:

- the first denture or fixed bridgework to replace lost teeth,
- the first crown needed to repair each damaged tooth, and
- an in-mouth appliance used in the first course of orthodontic treatment after the injury.
Except as provided for injury, the Medical Plan does not cover charges for in-mouth appliances, crowns, bridgework, dentures, tooth restorations, or any related fitting or adjustment services, whether or not the purpose of such services or supplies is to relieve pain. In addition, the Medical Plan does not cover root canal therapy or routine tooth removal (not needing cutting of the bone).

Charges made by a Horizon network RN or LPN or nursing agency for "skilled nursing services" are included as Covered Medical Expenses. No other charges made by an RN or LPN or a nursing agency are covered. As used here, "skilled nursing services" means these services:

- Visiting nursing care by an RN or LPN. Visiting nursing care means a visit for the purpose of performing specific skilled nursing tasks.
- Private duty nursing by an RN or LPN if the person's condition requires skilled nursing care and visiting nursing care is not adequate.
"Skilled nursing care" does not include:
- The part (or all) of any nursing care that does not require the education, training, and technical skills of an RN or LPN, such as transportation, meal preparation, charting of vital signs, and companionship activities.
- Private duty nursing care given while the person is an inpatient in a hospital or other health care facility.
- Care provided to help a person in the activities of daily life, such as bathing, feeding, personal grooming, dressing, getting in and out of a bed or chair, or toileting.


## Hospice Care

The Plan covers inpatient or outpatient hospice care for an individual who has been diagnosed as having six months or less to live.

Inpatient hospice care must be precertified to be covered at the highest level payable under the EPO.

- Care provided solely for skilled observation, excluding one period per day of up to 4 hours for no more than 10 consecutive days following the occurrence of:
- a change in patient medication,
- the need for urgent or emergency medical services provided by a doctor or the onset of symptoms indicating the likely need for such services,
- surgery, or
- release from inpatient confinement.
- Any service provided solely to administer oral medicines, except where applicable law requires that such medicines be administered by an RN or LPN.

Charges made for the following inpatient services furnished by a Horizon network provider to a person for hospice care when given as a part of a Hospice Care Program are included as Covered Medical Expenses.

## Inpatient Care

Room and board and other services and supplies furnished to a fulltime inpatient for pain control and other acute and chronic symptom management. Charges for daily room and board for a semi-private room over the Private Room Limit are not included.

## Facility and Doctor Expenses

The Plan covers charges made on its own behalf by a Horizon network:

- Hospice Care Facility
- Hospital
- Skilled Nursing/Convalescent Facility, or
- Doctor


## Outpatient Care

The Plan covers charges made by a Hospice Care Agency for the following outpatient services and supplies (if precertified and furnished by EPO network providers).

- Part-time or intermittent nursing care by an RN or LPN.
- Medical social services under the direction of a doctor, including:
- assessment of the person's social, emotional, and medical needs, and the home and family situation;
- identification of available community resources;
- assisting the person to obtain resources needed to meet the person's assessed needs.
- Psychological and dietary counseling.
- Consultation or case management services by a doctor.
- Physical and occupational therapy.
- Part-time or intermittent home health aide services (consisting mainly of caring for the person).
- Medical supplies, drugs, and medicines prescribed by a doctor.

Charges made by EPO network providers as listed below for Outpatient Care, but only if the provider is not an Employee of a Hospice Care Agency and the agency retains responsibility for the care of the person:

- A doctor for consultant or case management services;
- A physical or occupational therapist;
- A Home Health Care Agency for:
- physical or occupational therapy,
- part-time or intermittent home health aide services consisting mainly of caring for the person),
- medical supplies, drugs, and medicines prescribed by a doctor,
- psychological and dietary counseling.


## Charges for the following services are not included:

■ Bereavement counseling.

- Funeral arrangements.
- Pastoral counseling.
- Financial or legal counseling, including estate planning or the drafting of a will.
- Homemaker or caretaker services. These are services which are not solely related to care of the person, including sitter or companion services for either the person who is ill or to other members of the family, transportation, housecleaning, and maintenance of the house.
- Respite care. This is care furnished during a period of time when the person's family or usual caretaker is unable or unwilling to attend to the person's needs.


## Short-Term Rehabilitation

Charges made by a network doctor, or an in-network licensed or certified physical, occupational, or speech therapist for Short-Term

You and your covered dependents are covered for a maximum of 60 days of Short-Term Rehabilitation services during a calendar year, as long as the treatment is certified by Horizon.

Rehabilitation services to treat acute conditions are Covered Medical Expenses.

Short-term rehabilitation services consist of:

- Physical therapy,
- Occupational therapy, or
- Speech therapy
furnished to a person who is not confined as an inpatient in a hospital or other facility for medical care. This therapy shall be expected to result in significant improvement of the person's condition within 60 days from the date the therapy begins.
Charges for Short-Term Rehabilitation services are covered for a maximum of 60 days per calendar year, as long as the treatment is certified by the patient's doctor.


## Charges for the following services are not covered:

- Services covered to any extent under any other part of this Plan or any other group plan sponsored by American Water.
- Services received while the person is confined in a hospital or other facility for medical care.
- Services not performed by a doctor or not under his or her direct supervision.
- Services rendered by a physical, occupational, or speech therapist who lives in the person's home, or who is a part of the family of either the person or the person's spouse.
- Services rendered for the treatment of delays in speech development, unless resulting from:
- illness,
- injury, or
- congenital defect.
- Special education, including lessons in sign language, to instruct a person whose ability to speak has been lost or impaired, to function without that ability.
- Any services not provided in accordance with a specific treatment plan that:
- Details the treatment to be rendered and the frequency and duration of the treatment.
- Provides for ongoing reviews and is renewed only if therapy is still necessary.


## Emergency Care

In the event of a medical emergency, the Plan
covers treatment in a
hospital emergency
room.

If emergency care is received in a hospital emergency room (in- or out-of-network) while a person is not a full-time inpatient, the hospital's charges will be Covered Medical Expenses and paid at the Payment Percentage after a $\$ 35$ copayment (waived if admitted).
"Emergency care" means the first treatment given in a hospital emergency room right after the sudden and (at that time) unexpected onset of a change in a person's physical or mental condition that requires hospital level care because:

- The care could not safely and adequately have been provided other than in a hospital or adequate care was not available elsewhere in the area at the time and place it was needed, and
- If the hospital level care were not given, the emergency described above could, as determined by Horizon, reasonably be expected to result in:
- loss of life, limb or
- significant impairment to bodily function, or
- permanent dysfunction of a body part.

If non-emergency care treatment is received in a hospital emergency room (whether in- or out-of-network) while a person is not a full-time inpatient, no benefits will be paid.

Other Covered Medical Expenses include the following, when furnished by network providers:

Other Covered Medical Expenses

Doctor's charges.

- Diagnostic lab work and X-rays.
- X-ray, radium, and radioactive isotope therapy.
- Anesthetics and oxygen.
- Rental of durable medical or surgical equipment. Not included are charges for more than one item of equipment for the same or similar purpose.
- "Durable Medical and Surgical Equipment" is equipment made to withstand prolonged use and used mainly in the treatment of an illness or injury. It must be suited for use in the home, not normally of use to persons without an illness or injury, and not used to alter quality or temperature, or for exercise or training.
- The purchase, repair, or replacement of durable medical and surgical equipment and accessories needed to operate it.
- The initial purchase is covered only if Horizon agrees that long-term use is planned and the equipment cannot be rented, or it is likely to cost less to buy it than to rent it.
- Replacement is covered only if Horizon agrees that it is needed because of a change in the person's physical condition, or it is likely to cost less to buy a replacement than to repair the existing equipment or to rent similar equipment.
- Artificial limbs and eyes. Eyeglasses, hearing aids, orthopedic shoes, or other devices to support the feet are not included.
- Professional ambulance service to transport a person from the place of the injury or onset of illness to the first hospital where treatment is given.


## Pre-Existing Conditions

Pre-Existing Conditions do not apply under any Horizon Plan.

## Certification for Hospital Admissions

Inpatient hospital confinements must be precertified.

Inpatient hospital confinements must be precertified to qualify for the highest level of benefits paid by the Plan.

No benefits will be paid by the Plan for inpatient hospital charges at non-network hospitals.

## Hospital Expenses Incurred During the Confinement

If certification has been requested and denied for part of the confinement, no benefits will be paid for Hospital Expenses incurred for room and board for that day(s). Benefits for all other Hospital Expenses will be paid at $100 \%$ after a $\$ 100$ copay per admission.
If certification has not been obtained, you will have to pay a $\$ 150$ penalty charge before benefits are paid for covered services.

Call the precertification number on your ID card or Horizon Member Services at (800) 355BLUE (2583) to obtain certification of a hospital inpatient admission. Written notice of the number of days certified will be sent promptly to the hospital. A copy will be sent to you and the doctor.

## Other Covered Medical Expenses

Whether or not a day of confinement is certified, no benefit will be paid for expenses incurred on any day of confinement as a full-time inpatient if excluded by any other terms of this Plan, except that if certification has been given for a day of confinement, excluding services and supplies because they are not necessary will not be applied to expenses for hospital room and board.

In the event of an urgent admission, you, the person's doctor, or the hospital must call Horizon Member Services for certification before the person is confined as a full-time inpatient.

An urgent admission is one required as the result of an injury caused by an accident; the diagnosis of an illness; or the onset of, or change in, an illness. The person's condition does not require emergency medical care, but is severe enough to require confinement in a hospital within two weeks of the date the doctor determines that confinement is required.

A "non-urgent admission" is one which is not an emergency admission or an urgent admission.
When a covered person is confined as a full-time inpatient as the result of an emergency admission, you, the person's doctor, or the hospital must call Horizon Member Services to request certification within 48 hours of the start of the confinement. If the call cannot be made within 48 hours, the call must be made as soon as reasonably possible. The 48 -hour requirement is extended to 72 hours when the confinement starts on a Friday or Saturday.

An admission is considered to be an emergency when the doctor admits the person to the hospital right after the sudden and (at that time) unexpected onset of a change in the person's physical or mental condition which could be life-threatening or result in significant impairment or permanent dysfunction if the person is not immediately confined as a full-time hospital inpatient.

If, in your doctor's opinion, it is necessary for you to be confined for a longer time than already certified, you, the doctor, or the hospital may request that more days be certified by calling the precertification number on your ID card or Horizon Member Services at (800) 355-
BLUE (2583). This must be done on or before the last day that has already been certified.
Written notice of the number of days certified will be sent promptly to the hospital. A copy will be sent to you and the doctor.

## Certification for Skilled Nursing/Convalescent Facility Care, Home Health Care, and Hospice

Precertification is required for confinements in a skilled nursing/convalescent facility or hospice, and for home health care and outpatient hospice care. If precertification is not obtained, benefits may be reduced.

## Facility Expenses

## Expenses for

Services or
Supplies

Covered Medical Expenses will be paid as shown below if incurred:

- While a person is confined in a skilled nursing/convalescent facility or hospice; or
- For services or supplies for home health care, hospice care, or skilled nursing care when a person is not confined as an inpatient; and
- It has been certified that such confinement or care is necessary; and
- The confinement or care has been ordered and prescribed by your doctor.

If certification has been requested and denied, no benefits will be paid for Skilled Nursing/Convalescent Facility Expenses or Hospice Care Facility Expenses incurred for room and board. Benefits for all other Skilled Nursing/Convalescent Facility Expenses or Hospice Care Facility Expenses incurred during the confinement will be paid at the Payment Percentage.
If certification has not been requested and the confinement (or any day of the confinement) is not necessary, no benefits will be paid for Skilled Nursing/Convalescent Facility Expenses or Hospice Care Facility Expenses incurred for room and board. Benefits for all other Skilled Nursing/Convalescent Facility Expenses or Hospice Care Facility Expenses incurred during the confinement will be paid at the Payment Percentage.

If certification has not been requested and the confinement (or any day of the confinement) is necessary, skilled nursing/convalescent Facility Expenses or Hospice Care Facility Expenses incurred during the confinement will not be deemed to be Covered Medical Expenses. Benefits for all other such expenses incurred during the confinement will be paid at the Payment Percentage. As to all other Covered Medical Expenses incurred during the confinement, benefits will be paid at the Payment Percentage.

If certification for a service or supply has been requested and denied, or if certification has not been requested and the service or supply is not necessary, no benefits will be paid for the denied or unnecessary service or supply.

To get certification you must call the precertification number on your ID card or Horizon Member Services at (800) 355BLUE (2583). Such certification must be obtained before an expense is incurred. Prompt written notice will be provided to you of the days of confinement and services or supplies which have been certified.

If certification has not been requested for a service or supply and the service or supply is necessary, benefits for the necessary service or supply will be paid at the Payment Percentage.
Whether or not a day of confinement or a service or supply has been certified, no benefit will be paid if the charges for the confinement or service or supply are excluded by any other terms of this Plan, except that, to the extent a day of confinement has been certified, excluding services and supplies because they are not necessary will not apply to:

- Skilled nursing/convalescent Facility Expenses for room and board, or
- Hospice Care Facility Expenses for room and board.

To the extent that such service or supply has been certified for home health care, hospice care, or skilled nursing care, excluding services or supplies because they are not necessary will not apply to the service or supply.

If a person's doctor believes that the person needs more days of confinement or services or supplies beyond those which have been already certified, a call must be made to the precertification number on your ID card or Horizon Member Services at (800) 355-BLUE (2583) to certify more days of confinement or services or supplies.

Prompt written notice will be provided to you of the days of confinement and services or supplies which have been certified.

If services and supplies for hospice care have been certified and the person later requires hospital confinement for pain control or acute symptom management, any other certification requirement in this Plan will be waived for any such day of hospital confinement.

## Certification for Certain Procedures and

 TreatmentsCertification for certain procedures and treatments is required:

- Before the procedure is performed, or
- Before the treatment starts, unless the procedure or treatment has been ordered and prescribed by your doctor.
When any of the procedures or treatments shown below will be performed on an inpatient or outpatient basis, Covered Medical Expenses for the procedure or treatment will be payable as follows:

Certification for certain procedures and treatment is required when they are performed on either an inpatient or outpatient basis.

- If the procedure or treatment is not necessary, no benefits will be payable whether or not certification has been requested.
- If certification has been requested and the procedure or treatment is necessary, benefits will be payable at $100 \%$.
- If certification has not been requested and the procedure or treatment is necessary, expenses in excess of the copayment (if applicable) will be considered Covered Medical Expenses and will be payable at $100 \%$.
Certain procedures or treatments require precertification before they are performed, regardless of whether done on an inpatient or outpatient basis. Call Horizon to determine if your procedure requires precertification.
You or the provider performing the procedure or treatment must call the precertification number on your ID card or Horizon Member Services at (800) 355-BLUE (2583) to request certification.

If the procedure or treatment is performed due to an Emergency Condition, the call must be made:

- Before the procedure or treatment is performed, or
- Not later than 48 hours after the procedure or treatment is performed, unless the call cannot be made within that time. In that case, the call must be made as soon as it is reasonably possible. In the event the procedure or treatment is performed on a Friday or Saturday, the 48 -hour requirement will be extended to 72 hours.
If the procedure or treatment is performed for any condition other than an Emergency Condition, the call must be made at least 14 days before the date of the procedure or the date treatment begins. If it is not possible to make the call during the specified time, it must be made as soon as reasonably possible before the date of the procedure or the date treatment begins.
Written notice of the certification decision will be sent promptly to you and the provider performing the procedure or treatment. This decision will be valid for 60 days from the date you receive the notice. If the procedure or treatment is to be performed after this 60-day period, certification must again be requested, as described above.


## Certification for Hospital and Treatment Facility Admissions for Alcoholism, Drug Abuse, or Mental Disorders

Precertification is required for inpatient admissions to treat alcoholism, drug abuse, and mental disorders. Benefits may be reduced if certification is not obtained.

Facility Room and Board Expenses

Other Facility
Expenses Incurred for the Services of a Doctor

Covered Medical Expenses furnished by a Horizon network provider for the effective treatment of alcoholism, drug abuse, or mental or nervous disorders will be paid at $100 \%$ as described below if incurred:

- While a person is confined in a network hospital or treatment facility,
- It has been certified that such confinement is necessary, and
- The confinement has been ordered and prescribed by your doctor.

If certification has been requested and denied, or if certification has not been requested and the confinement (or any day of it) is not necessary, no benefits will be paid.
If certification has not been requested and the confinement is necessary, you will have to pay a $\$ 150$ penalty charge before benefits are paid for covered services.

If certification has been requested and denied, or if certification has not been requested and the confinement is necessary, only expenses after the $\$ 150$ precertification penalty will be considered Covered Medical Expenses.

If certification has not been requested and the confinement is not necessary, no benefits will be paid.

Whether or not a day of confinement is certified, no benefits will be payable for Covered Medical Expenses incurred on any day of confinement as a full-time inpatient if excluded by any other terms of this Plan, except that if certification has been given for any day of confinement, services and supplies applicable to hospital and treatment facility room and board will not be excluded as "unnecessary."

To request certification, you must call the precertification number on your ID card or Horizon Member Services at (800) 355BLUE (2583). Such certification must be obtained before confinement as a fulltime inpatient, or in the case of Emergency Care, within 48 hours after the start of a confinement as a full-time inpatient or as soon as reasonably possible.
"Emergency Care" means the first treatment given in a hospital's emergency room for the sudden and unexpected onset of a change in a person's physical or mental condition which:

- Requires hospital level care because the care could not safely and adequately have been provided other than in a hospital; or
- Adequate care was not available elsewhere in the area at the time and place it was needed; and
- If hospital level care were not given could, as determined by Horizon, reasonably be expected to result in:
- loss of life or limb, or
- significant impairment to bodily function, or
- permanent dysfunction of a body part.

If the person's doctor believes that the person needs more days of confinement beyond those which have already been certified, additional days of confinement must be certified on or before the last day that has already been certified.

## Treatment of Alcoholism, Drug Abuse, or Mental Disorders

Inpatient Treatment

If a person is a full-time inpatient in a Horizon network hospital or treatment facility, expenses for the following are covered:

- Treatment of the medical complications of alcoholism or drug abuse, such as cirrhosis of the liver, delirium tremens, or hepatitis.
- Effective treatment of alcoholism or drug abuse.
- Treatment of a mental disorder.
- Room and Board. Charges for daily room and board in a private room over the Private Room Limit are not covered.
- Other necessary services and supplies.

The above expenses are covered only if they are incurred during the first 30 days of all such confinements during any one calendar year.

For alcoholism and drug abuse, benefits will be paid for only 90 days during your lifetime.
Benefits will be paid at $100 \%$.

## Outpatient

Treatment

Expenses incurred in a Horizon network hospital or facility for the effective treatment of alcoholism or drug abuse, or the treatment of mental disorders, while the person is not confined as a full-time inpatient, will be considered Covered Medical Expenses.
Benefits will be paid at $100 \%$ after a $\$ 25$ copayment, up to a maximum of 20 visits per calendar year for mental/nervous conditions.

For alcohol/drug treatment, benefits will be paid at $100 \%$ for the first treatment and at the lesser of a $\$ 25$ copayment or $50 \%$ of the covered charges for the second and subsequent courses of treatment.
There is a 60 -visit maximum per calendar year and a 120 -visit lifetime maximum.

## Submitting Claims

You should file your claim(s) during the calendar year in which the service or treatment was provided.

All claims must be filed within two years from the date of the incurred expense. Your claims must be in writing and you must give proof of the nature and extent of the expense. You may obtain Medical Plan Benefits Request forms from the Benefits Service Center; directly from Horizon's website (www.horizonblue.com/nationalaccounts); or by contacting Horizon Member Services at (800) 355-BLUE (2583).

## How Your Benefits Are Paid

American Water has contracted with Horizon to assist in administering benefits under the EPO Plan as the Claims Administrator. Your claims will be paid as soon as Horizon receives the necessary written proof supporting your claim. In order to speed claims processing, Horizon will pay medical benefits directly to the provider.

With the exception of the copayment for doctor's office visits, you should never pay a provider directly until you receive an Explanation of Benefits (EOB).

## Filing Medical Claims

Because the EPO Plan provides in-network benefits only and all claims are paid directly to the provider, you will not have to file any Medical Plan Benefits Request forms.

If you have other group coverage (or Medicare coverage) that pays benefits before the American Water Plan, you will need to provide Horizon with a copy of the other carrier's Explanation of Benefits (EOB) reflecting the benefits paid under the other coverage for the expenses being submitted for payment to this plan.

## Provisions That Apply To All Horizon Medical Plans

## Provisions That Apply to All Horizon Plans

## This section describes General Exclusions that apply under all Horizon Plans.

## Coverage is not provided for the following charges:

- Those for services and supplies not necessary, as determined by Horizon, for the diagnosis, care, or treatment of the illness or injury involved. This applies even if they are prescribed, recommended, or approved by the person's attending doctor or dentist.
- Those for care, treatment, services, or supplies that are not prescribed, recommended, and approved by the person's attending doctor or dentist.
- Those for, or in connection with, services or supplies that are, as determined by Horizon, considered to be experimental or investigational. A drug, device, procedure, or treatment will be determined to be experimental or investigational:
- if there are insufficient outcomes data available from controlled clinical trials published in the peer reviewed literature to substantiate its safety and effectiveness for the illness or injury involved; or
- if required by the FDA, approval has not been granted for marketing; or
- if a recognized national medical or dental society or regulatory agency has determined, in writing, that it is experimental, investigational, or for research purposes; or
- if the written protocol or protocols used by the treating facility or the protocol or protocols of any other facility studying substantially the same drug, device, procedure, or treatment or the written informed consent used by the treating facility studying the same drug, device, procedure, or treatment states that it is experimental, investigational, or for research purposes.

However, this exclusion will not apply with respect to services or supplies (other than drugs) received in connection with an illness, if Horizon determines that:

- the illness can be expected to cause death within one year, in the absence of effective treatment; and
- the care or treatment is effective for that illness or shows promise of being effective for that illness as demonstrated by scientific data. In making this determination Horizon will take into account the results of a review by a panel of independent medical professionals. They will be selected by Horizon. This
panel will include professionals who treat the type of illness involved.

Also, if Horizon determines that available scientific evidence demonstrates that the drug is effective or shows promise of being effective for the illness, this exclusion will not apply with respect to drugs that:

- have been granted approval as an investigational new drug with treatment status, or
- have been granted approval as an investigational new drug with cancer treatment status.
- Those for or related to services, treatment, education, testing, or training related to learning disabilities or developmental delays.
- Those for care furnished mainly to provide a surrounding free from exposure that can worsen the person's illness or injury.
- Those for, or related to, the following types of treatment:
- primal therapy
- rolfing
- psychodrama
- megavitamin therapy
- bioenergetic therapy
- vision perception training
- carbon dioxide therapy
- Those for treatment of covered health care providers who specialize in the mental health care field and who receive treatment as a part of their training in that field.
- Those for services of a resident doctor or intern rendered in that capacity.
- Those to the extent they are not reasonable charges, as determined by Horizon.
- Those that are made only because there is health coverage.
- Those that a covered person is not legally obliged to pay.
- Those, as determined by Horizon to be for custodial care.
- Those for services and supplies:
- furnished, paid for, or for which benefits are provided or required by reason of the past or present service of any person in the armed forces of a government.
- furnished, paid for, or for which benefits are provided or required under any law of a government. (This does not include a plan established by a government for its own employees or their dependents or Medicaid.)
- Those for or related to any eye surgery mainly to correct refractive errors.
- Those for education, special education, or job training, whether or not given in a facility that also provides medical or psychiatric treatment.
- Those for plastic surgery, reconstructive surgery, cosmetic surgery, or other services and supplies that improve, alter, or enhance appearance, whether or not for psychological or emotional reasons, except to the extent needed to:
- improve the function of a part of the body that is not a tooth or structure that supports the teeth; or
- is malformed as a result of a severe birth defect (this includes harelip or webbed fingers or toes), or a direct result of surgery performed to treat an illness or injury; or
- repair an injury that occurs while the person is covered under this Plan.
- Those that are for therapy or for supplies or for counseling for sexual dysfunctions or inadequacies that do not have a physiological or organic basis.
- Those for or related to sex change surgery or to any treatment of gender identity disorders.
- Those for or related to artificial insemination, in vitro fertilization, or embryo transfer procedures.
- Those for the reversal of a sterilization procedure.
- Those for routine physical exams, routine vision exams, routine hearing exams, routine dental exams, immunizations, or other preventive services and supplies.
- Those for or in connection with marriage, family, child, career, social adjustment, pastoral, or financial counseling.

■ Those for acupuncture therapy. Not excluded is acupuncture when it is:

- performed by a doctor, and
- as a form of anesthesia in connection with surgery that is covered under this Plan.
- Those for or in connection with speech therapy. This exclusion does not apply to charges for speech therapy that is expected to restore speech to a person who has lost existing speech function (the ability to express thoughts, speak words, and form sentences) as the result of an illness or injury.
Any exclusion above will not apply to the extent that:

If you have other group coverage, the benefits from those plans will be taken into account when you have a claim.

- Coverage is specifically provided by name in this Summary Plan Description booklet, or
- Coverage of the charges is required under any law that applies to the coverage.
These excluded charges will not be used when calculating benefits.
The law of the jurisdiction where a person lives when a claim occurs may prohibit some benefits. If so, they will not be paid.

Any charge for a service or supply furnished by a Network Provider in excess of such provider's Negotiated Charge for that service or supply will not be a covered expense under the Plan of benefits. This rule will not apply to any service or supply for which a benefit is provided under Medicare before the benefits of the group contract are paid.

## Coordination of Your Benefits With Other Plans, Not Including Medicare

Today, in many situations, both husbands and wives work. Therefore, it is common for individual members of a family to be eligible for benefits under more than one group medical or dental plan. In such situations the benefits of the various plans are "coordinated" to determine how covered expense will be paid by your American Water Plan and the other plans. This may mean a reduction in benefits under this Plan. The combined benefits will not be more than the expenses recognized under these American Water Plans.
"Other plans" means:

- Any group medical or dental plan for which an employer pays all or part of the costs or makes payroll deductions;
- Any plan that you purchase through a group such as AARP; or
- Any government program, coverage required or provided by any law, or vehicle insurance (uninsured/underinsured motorist and casualty/liability).

If the American Water Plan is determined to be the primary plan (the plan that pays its benefits first), it will pay its regular benefits in full without regard to any payment that may be made under any other plan.

If the American Water Plan is determined to be the secondary plan (the plan that pays its benefits after the primary plan pays benefits), it will pay a reduced amount of benefits that will in no event cause the total benefit from all plans to exceed the benefit that would have been paid
by the American Water Plan if it had been the primary plan. However, if benefits under the primary plan are reduced because a covered person does not comply with the plan provisions (such as penalties resulting from the failure to comply with cost management provisions of the plan), the amount of the reduction will not be considered for payment under the American Water Plan.

For example, if you have Standard PPO coverage the primary plan pays $70 \%$ of eligible charges to an in-network provider, the American Water Plan will pay an additional $10 \%$ of covered charges for a total benefit equal to $80 \%$ of covered charges which is the benefit the American Water Plan would have paid as the primary plan.

When other coverage exists in addition to your American Water coverage, the following rules will be used to determine which medical or dental plan is primary and pays first, and which medical or dental plan is secondary and pays second:

- A plan with no rules for coordination with other benefits will pay its benefits before a plan which contains such rules.
- A plan that covers a person as an employee pays before the plan that covers the person as a dependent. However, there may be situations where the person is a Medicare beneficiary and has a working spouse. In such a situation,
- The spouse's plan which covers the person as a dependent pays first,
- Medicare pays second, and
- The plan covering the person as an employee pays third.
- Except in the case of a dependent child whose parents are divorced or separated, the plan which covers the person as a dependent of a person whose birthday comes first in a calendar year will be primary to the plan which covers the person as a dependent of a person whose birthday comes later in that calendar year. If both parents have the same birthday, the benefits of a plan which covered one parent longer are determined before those of a plan which covered the other parent for a shorter period of time.
- If the other plan does not have the rule described in the above provision and, as a result, the plans do not agree on the order of benefits, the rule in the other plan will determine the order of benefits.
- In the case of a dependent child whose parents are divorced or separated:
- If there is a court decree which states that the parents shall share joint custody of a dependent child, without stating that one of the parents is responsible for the health care expenses of
the child, the order of benefit determination rules specified in the above provision will apply.
- If there is a court decree which makes one parent financially responsible for the medical, dental, or other health care expenses of such child, the benefits of a plan which covers the child as a dependent of such parent will be determined before the benefits of any other plan which covers the child as a dependent child.
- If there is not such a court decree:

If the parent with custody of the child has not remarried, the benefits of a plan which covers the child as a dependent of the parent with custody of the child will be determined before the benefits of a plan which covers the child as a dependent of the parent without custody.

If the parent with custody of the child has remarried, the benefits of a plan which covers the child as a dependent of the parent with custody shall be determined before the benefits of a plan which covers that child as a dependent of the stepparent. The benefits of a plan which covers that child as a dependent of the stepparent will be determined before the benefits of a plan which covers that child as a dependent of the parent without custody.

- If the above rules do not establish an order of payment, the plan under which the person has been covered for the longest will be deemed to pay its benefits first, except that the benefits of a plan which covers the person as a:
- laid-off or retired employee, or
- the dependent of such person,
shall be determined after the benefits of any other plan which covers such person as:
- an employee who is not laid-off or retired, or
- a dependent of such person.
- If the other plan does not have a provision regarding laid-off or retired employees and, as a result, each plan determines its benefits after the other, then the previous paragraph will not apply.
- The benefits of a plan which covers the person under a right of continuation pursuant to federal or state law shall be determined after the benefits of any other plan which covers the person other than under such right of continuation.
- If the other plan does not have a provision regarding right of continuation pursuant to federal or state law, and as a result, each plan determines its benefits after the other, then the above paragraph will not apply.

Horizon has the right to release or obtain any information and to make or recover any payment it considers necessary in order to administer this provision.
When this provision operates to reduce the total amount of benefits otherwise payable to you under this Plan during a calendar year, each benefit that would be payable in the absence of this provision will be reduced proportionately. Such reduced amount will be charged against any applicable benefit limit of your American Water Plan.

## Automobile Personal Injury Protection (PIP)

If you are injured in an automobile accident and become eligible for benefits under the personal injury protection (PIP) provision of an automobile insurance policy, benefits under the American Water Medical Plan are payable after the automobile insurance policy benefits have been paid, even if you have designated the American Water Medical Plan as primary to your automobile insurance coverage in exchange for reduced automobile insurance premiums.

## Third Party Liability and Subrogation

## General Principle

When you or your dependent receive benefits under the Plan which are related to medical expenses that are also payable under Workers' Compensation, any statute, any uninsured or underinsured motorist program, any no fault or school insurance program, any other insurance policy or any other plan of benefits, or when related medical expenses that arise through an act or omission of another person are paid by a third party, whether through legal action, settlement or for any other reason, you or your dependent shall reimburse the Plan for the related benefits received out of any funds or monies you or your dependent recovers from any third party.

## Specific Requirements and Plan Rights

Because the Plan is entitled to reimbursement, the Plan shall be fully subrogated to any and all rights, recovery or causes of actions or claims that you or your dependent may have against any third party. The Plan is granted a specific and first right of reimbursement from any payment, amount or recovery from a third party. This right to
reimbursement is regardless of the manner in which the recovery is structured or worded, and even if you or your dependent has not been paid or fully reimbursed for all of their damages or expenses.
The Plan's share of the recovery shall not be reduced because the full damages or expenses claimed have not been reimbursed unless the Plan agrees in writing to such reduction. Further, the Plan's right to subrogation or reimbursement will not be affected or reduced by the "make whole" doctrine, the "fund" doctrine, the "common fund" doctrine, comparative/contributory negligence, "collateral source" rule, "attorney's fund" doctrine, regulatory diligence or any other equitable defenses that may affect the Plan's right to subrogation or reimbursement.

The Plan may enforce its subrogation or reimbursement rights by requiring you or your dependent to assert a claim to any of the benefits to which you or your dependent may be entitled. The Plan will not pay attorneys fees or costs associated with the claim or lawsuit without express written authorization from the Employer.
If the Plan should become aware that you or your dependent has received a third party payment, amount or recovery and not reported such amount, the Plan, in its sole discretion, may suspend all further benefits payments related to you or any of your dependents until the reimbursable portion is returned to the Plan or offset against amounts that would otherwise be paid to or on behalf of you or your dependents.

## Participant Duties and Actions

By participating in the Plan you and your dependents consent and agree that a constructive trust, lien or an equitable lien by agreement in favor of the Plan exists with regard to any settlement or recovery from a third person or party. In accordance with that constructive trust, lien or equitable lien by agreement, you and your dependents agree to cooperate with the Plan in reimbursing it for Plan costs and expenses.

Once you or your dependent has any reason to believe that you or they may be entitled to recovery from any third party, you or your dependent must notify the Plan. And, at that time, the you and your dependent (and your or their attorney, if applicable) must sign a subrogation/reimbursement agreement that confirms the prior acceptance of the Plan's subrogation rights and the Plan's right to be reimbursed for expenses arising from circumstances that entitle you or your dependent to any payment, amount or recovery from a third party.

If you or your dependent fails or refuses to execute the required subrogation/reimbursement agreement, the Plan may deny payment of any benefits to you and any of your dependents until the agreement is
signed. Alternatively, if you or your dependent fails or refuses to execute the required subrogation/reimbursement agreement and the Plan nevertheless pays benefits to or on behalf of you or your dependent, your or your dependent's acceptance of such benefits shall constitute agreement to the Plan's right to subrogation or reimbursement.

You and your dependent consent and agree that you or they shall not assign your or their rights to settlement or recovery against a third person or party to any other party, including their attorneys, without the Plan's consent. As such, the Plan's reimbursement will not be reduced by attorneys' fees and expenses without express written authorization from the Employer.

## Recoupment

The Plan has the right to recover any mistaken payment, any overpayment, any payment that is made to any individual who was not eligible for that payment or any payment that was required to have been made to the Plan under the "Third Party Liability and Subrogation" section above. The Plan, or its designee, may withhold or offset future benefit payments, sue to recover such amounts, or may use any other lawful remedy to recoup any such amounts.

## No Assignment of Benefits

You cannot assign, pledge, encumber or otherwise alienate any legal or beneficial interest in benefits under the Plan, and any attempt to do so will be void. The payment of benefits directly to a health care provider, if any, shall be done as a convenience to the covered person and shall not constitute an assignment of benefits under the Plan.

## When an Active Employee Is Eligible for Medicare

If an active employee or covered dependent is eligible for Medicare, the American Water Medical Plan will be primary and Medicare will coordinate with it.
A person is "eligible for Medicare" if he or she:

- Is covered under it,
- Is not covered under it because of:
- having refused it,
- having dropped it, or
- having failed to make proper request for it.

Any rule for coordinating "other plan" benefits with those under this Plan will be applied.

## When Coverage Is Terminated

Coverage under either Plan terminates when the first of these events happens:

- The day your employment ends;
- When the group contract terminates as to the coverage;
- When you are no longer in an Eligible Class. (This may apply to all or part of your coverage.);
- When you fail to make any required contribution.

Under certain circumstances, American Water may continue your coverage when you are not actively at work. If you are not at work due to illness or injury, American Water medical coverage will be continued for the length of your approved leave of absence, not to exceed 24 months from the date you are disabled as long as appropriate contributions are made.
A dependent's coverage will terminate at the first to occur of:

- The termination of all dependents' coverage under the group contract;

■ When a dependent becomes covered as an employee;

## If American Water

 receives a QMCSO affecting one of your children, you and your child will be notified. Once American Water has determined that the medical child support order is qualified, you and your child will be advised. American Water will enroll the child and instruct Horizon to make all claim payments to either the health care provider, the alternate recipient, or his or her legal representative.representative may receive, without charge, a copy of the Plan's QMCSO procedures.

To be "qualified," a medical child support order must:

- Be issued by a court of competent jurisdiction,
- Include the name and last mailing address of both the employee and the affected child,
- Identify the health benefit plan subject to the order, and also the applicable time period,
- Provide a reasonable description of the type of benefits that must be provided for the child, and
- Not impose any benefits requirements that do not apply to other Plan participants.

If a child meets the definition of an eligible dependent and you are required to provide health care benefits for that child as the result of a QMCSO, his or her initial participation in an American Water Medical Plan will not be affected by any provision that:

- Requires evidence of good health as a condition of participation,
- Delays participation due to a confinement, or
- Limits participation due to a pre-existing condition.

Coverage for the child will become effective on the date of such court order.

If you are the non-custodial parent, proof of claim for such child may be given by the custodial parent. Benefits for such claim will be paid to the custodial parent.

## Adjustment Rule

If, for any reason, a person is entitled to a different amount of coverage, coverage will be adjusted. Any increase is subject to any active work rule. Benefits for claims incurred after the date the adjustment becomes effective are payable in accordance with the revised Plan provisions. In other words, there are no vested rights to benefits based upon provisions of this Plan in effect before the date of any adjustment.

## Conversion to a Personal Policy if Your Employment or COBRA Continuation Ends

If your medical coverage ceases under a PPO or the EPO Plan, you may be able to convert your group coverage to a personal medical policy.

If your medical coverage ends under a PPO or the EPO Plan, you may be able to convert your group coverage to a personal medical policy underwritten by Horizon. No evidence of insurability is required. You and your family members may convert when all coverage ceases because your employment or COBRA continuation ceases or you cease to be in an eligible class. You may not convert if American Water discontinues these Plans.

The personal policy may cover:

- You only, or
- You and all of your family members who are covered under this Plan when your coverage ceases, or
- If you die before you retire, all your family members, or your spouse only, who are covered under either Plan when your coverage ceases.

In addition, if your own coverage continues, your dependents can apply if they cease to be a dependent as defined in this Plan.
You may convert when you become a retired employee. However, if you are eligible and you elect to participate in the American Water Retiree Medical Plan, this conversion privilege will not again be available to you.

You must apply for a personal policy within 31 days after coverage ends or would otherwise end without a provision to continue coverage for retired employees. The 31 days start on the date coverage actually ends, even if the person is still eligible for benefits because of a total disability.

Horizon will insure and administer the converted personal policy and may decline to issue the personal policy if:

- It is applied for in a jurisdiction in which Horizon cannot issue or deliver the policy.
- On the date of conversion, a person is covered, eligible, or has benefits available under one of the following:
- any other hospital or surgical expense insurance policy,
- any hospital service or medical expense indemnity corporation subscriber contract,
- any other group contract,
- any statute, welfare plan, or program,
and which, with the converted policy, would result in overinsurance or match benefits.

You do not have the right to convert if you have been covered under this Plan for less than three months. In addition, no person has the right to convert if:

- He or she has used up the maximum benefit, or
- He or she becomes eligible for any other Medical Expense Coverage under this Plan.

The personal policy, and its terms, will be of a type for group conversion purposes:

- As required by law or regulation, or
- As then offered by Horizon according to American Water conversion plan.

It will not provide coverage which is the same as coverage under this Plan. The level of coverage may be lower and an overall Lifetime Maximum Benefit will apply.

The personal policy may contain either or both:

- A statement that benefits under it will be cut back by any like benefits payable under this Plan after your coverage ceases.
- A statement that Horizon may ask for data about your coverage under any other plan. This may be asked for on any premium due date of the personal policy. If you do not give the data, expenses covered under the personal policy may be reduced by expenses which are covered or provided under those plans.
- The personal policy will state that Horizon has the right to refuse renewal under some conditions. These will be shown in that policy.

If you or your dependent want to convert, you should contact Horizon at (800) 355-BLUE (2583) to obtain the telephone number of your local Blue Cross-Blue Shield office. When you reach the local office, ask to speak with a representative in the Consumer Individual Sales Department and request that a package on converting your coverage be mailed to you.

If a person is eligible to convert, information will be sent about the personal policy for which he or she may apply.
The first premium for the personal policy must be paid at the time the person applies for that policy. The premium due will be Horizon's normal rate for the person's class and age, and the form and amount of coverage.

The personal policy will take effect on the day after coverage terminates under the American Water Plan.

## Disease Management Program

Horizon's Disease Management Program provides educational materials and, in some cases, individualized case management for members, with an emphasis on health education and behavior modification for modifiable risks. Members are encouraged to work closely with their doctor(s) to remain personally involved in their care. Employees with one of the conditions listed below may be identified as eligible for program participation.

- asthma
- congestive heart failure
- coronary artery disease
- diabetes, and
- low back pain

A "participant" in this program is a covered person:
■ who has identified himself or herself; or
■ who has been identified by his or her attending doctor or other health care provider, Horizon; or his or her Employer; and

- who is approved by Horizon as a participant.

For additional information or to take part in this program, call Horizon at (800) 355-BLUE (2583).

## The Prescription Drug Benefit Program

## Prescription Drug Benefit Program

Horizon's Prescription Drug Benefit program is administered by Caremark. You are automatically covered by the Prescription Drug Benefit if you enroll in an American Water Medical Plan.

Note: Prescription Drug Benefits for Hawaii employees are covered under the HMSA plan.
The program offers you two ways to receive medications - at a retail pharmacy or by mail-order.

- For your short-term and immediate prescription drug needs, you may use local participating pharmacies that have agreed to charge discounted prices.
- For medications you use on an extended or maintenance basis, you may purchase up to a 90-day supply through Caremark, the administrator of the mail-order program. They will be delivered by mail directly to your home.

Coverage under the Prescription Drug Program ends when your American Water Medical Plan terminates.

## What You Pay for Prescription Drugs

Your coinsurance and copays are the same under both PPO options and the EPO option.

| Retail Pharmacy - Up to a 34-Day Supply |  |  |
| :--- | :---: | :---: |
|  | Standard or Premium PPO | EPO |
| Generic | You pay $10 \%$ | You pay $10 \%$ |
| Preferred Brand | You pay $20 \%$ | You pay $20 \%$ |
| Non- Preferred Brand | You pay $20 \%$ | You pay $20 \%$ |
| Mail-Order Program - Up to a 90-Day Supply |  |  |
|  | Standard or Premium PPO | EPO |
| Generic | You pay $\$ 14$ | You pay $\$ 14$ |
| Preferred Brand | You pay $\$ 30$ | You pay $\$ 30$ |
| Non- Preferred Brand | You pay $\$ 70$ | You pay $\$ 70$ |

Note: Coinsurance and copayments may not be applied to Medical or Dental Plan deductibles or maximums. In addition, certain controlled substances and other prescription medications may be subject to dispensing limitations and to the professional judgment of the pharmacist.

## Preferred Drug List

Your Prescription Drug coverage levels are based on the plan's Preferred Drug List - also called a "formulary." When your prescription medication is on the Preferred Drug List, you pay a lower cost than when the drug is not on the Preferred Drug List. If you receive a prescription for a drug that is not on the list, you should ask your doctor if there is another drug on the Preferred Drug List for your specific condition.
As part of our commitment to provide the best Prescription Drug program possible, we continue to seek ways to help control the rising costs of health care without compromising quality. As a result, the Horizon's Prescription Drug Guide is continually reviewed to help ensure that the list of preferred medications remains responsive to the needs of the member and the prescriber.

In general, medications are moved to non-preferred status for one or more of the following reasons:

- A generic equivalent product becomes available,
- New safety or clinical effectiveness information supports the move to non-preferred status, or
- Drug use information shows that preferred alternatives with better patient compliance rates are available.

To find out if your prescription is on the Preferred Drug List, call Horizon Member Services at (800) 355-BLUE (2583) or log on to www.horizonblue.com/nationalaccounts. Click on "Pharmacy Services" in the lower right and then on "Preferred Drug Guide."

## Save With Generics

When using your Prescription Drug plan, you will pay less if you receive a prescription for a generic drug. The Food and Drug

Administration (FDA) regulates generic drugs and requires that they contain the same active ingredients, strength, and dosage as the original brand-name drug. Although generic and brand-name drugs work the same way in the body and have the same risks and benefits, generic drugs cost significantly less than their brand-name counterparts.

When you receive a prescription from your doctor, ask him or her to prescribe a generic or to allow for generic substitution.

## Covered Drugs

The Prescription Drug Program covers drugs that require a doctor's written prescription and are medically necessary for the treatment of illness or injury. Covered drugs include, but are not limited to:

- Federal legend drugs,
- State restricted drugs,
- Compounded medications,
- Injectable drugs, including insulin, needles, and syringes, and
- Oral contraceptives


## Specialty Drugs

Specialty Drugs (also called Specialty Pharmaceuticals) are a class of medications typically produced through biotechnology (sometimes known as biologicals), administered by injection, and/or requiring special patient monitoring and handling.

Horizon members who are required to take a specialty pharmaceutical must obtain their medication from a specialty pharmacy contracted by Horizon. These pharmacies will provide members with a high level of prescription delivery service along with the following:

- Drug/disease-specific education and support;
- Convenient home or doctor office delivery;
- Claims assistance;
- Easy ordering with a dedicated toll-free number;
- Helpful follow-up care calls to remind members when it is time to refill a prescription, check on therapy progress, and answer questions.

If you have any questions, experience any difficulty in filling your specialty pharmaceutical prescription, or would like to obtain a listing of specialty pharmacies or pharmaceuticals, please call Caremark Member Services at (866) 881-5603. In most cases your doctor will advise you if your medication is a specialty drug.

## How to Use the Prescription Drug Program

If you use a participating pharmacy, you will receive discounted prices and will not need to complete a claim form. Otherwise, you will pay more and must complete a claim form to receive reimbursement. You can locate participating pharmacies by calling Horizon Member Services at (800) 355- BLUE (2583) or by logging on to www.horizonblue.com/nationalaccounts. Click on "Pharmacy Services" in the lower right and then on "Choosing a Pharmacy" to access the Pharmacy Locator.

Using a Participating Pharmacy

When you need medication immediately, simply present your ID card at a participating pharmacy and pay a percent of the discounted prescription cost for a 34-day supply of medication. You will pay $20 \%$ for brand names and $10 \%$ for generic drugs. There is no deductible to meet. You will have no claim forms to complete and no waiting for reimbursement.

Using an Out-ofNetwork
Pharmacy

When you have a prescription filled at non-participating pharmacy, you must pay the regular charge. To receive reimbursement, submit a claim form to Horizon at the address printed on the back of the Prescription Benefits claim form.

The Plan will pay $80 \%$ or $90 \%$ of the retail (non-discounted) cost of your prescription. If your claim is approved, your reimbursement check should arrive about two weeks after you mail the claim form.

## How the Mail Order Drug Program Works

The Mail Order Drug Program is designed to save you money on medications that you use on a long-term or maintenance basis. The program allows you to receive up to a 90 -day supply of medication as follows: $\$ 14$ for generic, $\$ 30$ for preferred brand, and $\$ 70$ for nonpreferred brand.

# Mail-Order Service Option 

Ordering for the<br>First Time

The mail order service option gives you the convenience of ordering medication for direct delivery by mail to your home, office, or other location. Your doctor may call in your new prescription to Caremark, or you can simply fill out the mail service order form and send it in with your prescription(s).

For your first mail service prescription, complete the Participant Profile/Order Form in your Welcome Package. You can also print an order form from www.caremark.com. Log in with your login ID and password, click on the "Prescriptions and Coverage" tab, and select "Print Forms" from the menu on the left.

Attach your 90-day supply prescription and mail it along with the appropriate co-payment to:

Caremark
P.O. Box 830070

Birmingham, AL 35283-0070
Your prescription should arrive within 10 to 14 days from the date Caremark receives your order.

## Ordering Refills

You can order refills online, by mail, or over the phone.
To place a refill order online:

- Go to www.caremark.com and log in with your login ID and password. Click on the "Prescriptions and Coverage" tab, select Refill Prescriptions, and choose the prescription(s) that you want to refill. Because the system retains your information, you do not need to complete an order form for each refill.

To place a refill order by mail:
■ Use the computerized pre-printed Participant Profile/Order Form and pre-addressed envelope that comes with each Caremark prescription mailed to you. If your address, doctor, or health condition information changes, please note them on the form and be sure to make the same changes to your account on www.caremark.com.

To place a refill order over the phone:
Call Caremark toll-free at (800) 213-0879 using a touch-tone phone. This service is available 24 hours a day, seven days a week. Enter the patient's Identification number and year of birth. For payment of your share, enter your credit card number and expiration date.

## Drugs and Supplies Not Covered

- The following drugs and supplies are not covered under the Prescription Drug Benefit Program.
- Bandages
- Braces
- Cosmetics
- Dietary supplements
- Drugs intended for use in a doctor's office or other setting that is not the participant's home
- Certain experimental or investigational drugs
- Fertility drugs
- Health and beauty aids
- Heat lamps
- Non-legend drugs
- Norplant
- Injectable drugs (other than insulin) and specialty drugs
- Prescriptions that a participant is entitled to receive without charge under any Worker's Compensation or municipal, state, or federal program
- Retin-A
- Splints and artificial appliances
- Appetite suppressants that are not medically necessary
- Any prescription medication that is also available over the counter
- Devices and equipment
- In addition, certain controlled substances and other prescription medications may be subject to dispensing limitations and to the professional judgment of the pharmacist.


## Termination of Coverage

Your prescription drug coverage ends when your Medical Plan terminates.

## Prescription Drug Plan Administrator

Caremark Rx, Inc. (www.caremark.com) administers the program, with a national retail pharmacy network of over 60,000 participating pharmacies and seven mail service pharmacies. Their online tools and other communications provide you with convenient service, personal care and attention, and up-to-date information.

## No Assignment of Benefits

You cannot assign, pledge, encumber or otherwise alienate any legal or beneficial interest in benefits under the Plan, and any attempt to do so will be void. The payment of benefits directly to a health care provider, if any, shall be done as a convenience to the covered person and shall not constitute an assignment of benefits under the Plan.

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## The Dental Plans

## Dental Benefits

To help you take good care of your teeth, American Water Dental Plan covers preventive, restorative, major, and orthodontic dental services.

Your dental health is an important aspect of your overall health and well-being. All employees and their dependents who enroll in any of American Water Medical Plans are also enrolled in a Dental Plan. This valuable benefit is self-insured by American Water, and Aetna provides certain administrative services under this Plan. The provisions of the Plan will remain effective only while you are covered under the group contract.

There are two dental plans - Standard and Premium. The dental plan you receive depends on the medical plan you select, since dental benefits are bundled with the medical plan. The Standard PPO medical plan includes Standard PPO Dental, and the Premium PPO and EPO medical plans include Premium PPO Dental. If you opt out of medical and select dental/vision coverage you will be enrolled in the Dental Premium PPO Plan. Note: If you are a Hawaii employee enrolled in the HMSA medical plan, you will be enrolled in the Premium PPO Dental Plan.

The Plan pays benefits for charges for dental services and supplies incurred for treatment of dental disease or injury. These benefits apply separately to each covered person.
The dental plans offer both in-network and out-of-network benefits, but your benefit levels are higher (and your out-of-pocket costs lower) when you use Aetna in-network dentists. To find a dentist or see if your dentist participates in Aetna's provider network, visit www.aetna.com or contact Member Services at (800) 292-4366.
If you choose an out of network dentist you will be responsible for any provider charges in excess of what the Plan pays in addition to any deductible and coinsurance amount. Plan benefits will be based on reasonable and customary charges.

## Dental Plan Summary Chart

The following chart provides a summary of your dental benefit levels and coverages:

|  | Standard PPO Dental | Premium PPO Dental |
| :--- | :---: | :---: |
| Deductible (single / family) | $\$ 100 / \$ 200$ | $\$ 50 / \$ 100$ |
| Preventive Care | $80 \%$ of covered expenses <br> after deductible | $100 \%$ of covered expenses with <br> no deductible |
| Basic and Major Services | $50 \%$ of covered expenses after <br> deductible | $80 \%$ of covered expenses <br> after deductible |
| Calendar Year Maximum | $\$ 1,000$ | $\$ 1,000$ |
| Orthodontia | Not covered | $50 \%$ of covered expenses <br> after deductible <br> $\$ 1,500$ lifetime maximum <br> (covers employees and eligible dependents) |

## Covered Dental Expenses

Expenses that exceed the necessary and appropriate level, as determined by Aetna, will not be covered by the Plan.

Note: You are responsible for any amounts billed by providers that are in excess of the amount paid by the Plan.

The Premium PPO Dental Plan pays the following benefits for Covered Dental Expenses up to the payment percentage:

- $100 \%$ of Preventive (Type A) expenses with no deductible.
- $80 \%$ of Restorative and Major Services (Type B) expenses after the deductible.
- $50 \%$ of Orthodontia (Type C) expenses after the deductible, up to a lifetime maximum of $\$ 1,500$.

The Standard PPO Dental Plan pays the following benefits for Covered Dental Expenses up to the payment percentage:

- $80 \%$ of Preventive (Type A) expenses after the deductible.
- $50 \%$ of Restorative and Major Services (Type B) expenses after the deductible.
- There is no coverage for Orthodontia (Type C) expenses.

Both Dental plans pay the dentist's charges for the services and supplies listed below which, for the condition being treated, are in Aetna's sole determination:

- Necessary,
- Customarily used nationwide, and

■ Deemed by the profession to be appropriate. They must meet broadly accepted national standards of dental practice.

## Type A Expenses - Preventive Services

- Oral exams once every six months. This includes prophylaxis, scaling, and cleaning of teeth.
- X-rays for diagnosis.
- Other X-rays (up to one full mouth series in a 36-month period and one set of bitewings in a 6 -month period).


## Type B Expenses - Restorative and Major Services

- Topical application of sodium or stannous fluoride for persons under 15 years of age.
- Space maintainers.
- Non-surgical extractions.
- Fillings.
- General anesthetics given in connection with covered dental services.
- Non-surgical treatment of diseased periodontal structures.
- Non-surgical endodontic treatment. This includes root canal therapy.
- Injection of antibiotic drugs.
- Repair or recementing of crowns, inlays, bridgework, or dentures.
- Relining of dentures.
- First installation of removable dentures to replace one or more natural teeth extracted while the person is covered. This includes adjustments for the 6-month period following the date they were installed.
- Replacement of an existing removable denture or fixed bridgework by a new denture, or the adding of teeth to a partial removable denture. Note: the "Prosthesis Replacement Rule" below must be met.
- Inlays, gold fillings, or crowns. This includes precision attachments for dentures.
- First installation of fixed bridgework to replace one or more natural teeth extracted while the person is covered. This includes inlays and crowns as abutments.
- Replacement of an existing removable denture or fixed bridgework by new fixed bridgework, or the adding of teeth to existing fixed bridgework. Note: the "Prosthesis Replacement Rule" below must be met.


## Type C Expenses - Orthodontic Treatment (Premium PPO Dental Plan Only)

A dentist's charges for services and supplies for Orthodontic Treatment are included as Covered Dental Expenses under the Premium PPO Dental Plan. In addition to all other terms of this dental benefit:

- The Plan pays $50 \%$ of Covered Dental Expenses after the deductible, up to a $\$ 1,500$ lifetime maximum, for employees and eligible dependents.
- Benefits will not exceed the Orthodontic Maximum for all expenses incurred by a family member in his or her lifetime, even if there is a break in coverage.
- Please note: All claims for dental benefits must be submitted within 24 months from the start of treatment.


## Advance Claim Review

You should request an Advance Claim Review of any dental program that will cost $\$ 150$ or more. The review will tell you and your dentist what the Plan will cover and how much you must pay out of your own pocket.

Before starting a course of treatment for which the dentist's charges are expected to be $\$ 150$ or more, details of the proposed course of treatment and charges to be made should be filed with Aetna. Please contact Aetna Member Services at (800) 292-4366 for additional details and to obtain forms. Aetna will then estimate the benefits and notify you and your dentist before treatment starts. Advance review is not required as a condition of receiving benefits, but it will let you know what to expect as far as Plan benefits if you obtain more expensive treatment.

Some services may be given before an Advance Claim Review is made (emergency treatments and oral exams, including prophylaxis and X-rays).

A course of treatment is a planned program of one or more services or supplies to treat a dental condition. The condition must be diagnosed by the attending dentist as a result of an oral exam. The treatment may be given by one or more dentists. The course of treatment starts on the date a dentist first gives a service to correct or treat such dental condition.

Note: As a part of the Advance Claim Review and as part of proof of any claim, Aetna has the right to require an oral exam of the person at its own expense. You must give Aetna all diagnostic and evaluative
material which it may require. These include: X-rays, models, charts, and written reports.

The benefits for a course of treatment may be for a less than you expect if an Advance Claim Review is not made or if any required verifying material is not furnished. Benefits will be reduced by the amount of expenses that Aetna cannot verify.

## Alternate Treatment

If alternate services or supplies may be used to treat a dental condition, Covered Dental Expenses will be limited to those services and supplies which, as determined by Aetna:

- Are customarily used nationwide for treatment, and
- Are deemed by the profession to be appropriate for treatment.

They must meet broadly accepted national standards of dental practice. The person's total current oral condition will be taken into account.

- The Limitations section has some examples of how this works. Please refer to page 104 for more information.


## Prosthesis Replacement Rule

Certain replacements or additions to existing dentures or bridgework will be covered under this Plan. Aetna must receive satisfactory proof that:

- The replacement or addition of teeth is required to replace teeth extracted after the present denture or bridgework was installed. The person must have been covered when the tooth was extracted.
- The present denture or bridgework cannot be made serviceable, and it must be at least five years old.
- The present denture is an immediate temporary one to replace one or more natural teeth extracted while the person is covered and cannot be made permanent. Replacement by a permanent denture is needed and takes place within 12 months from the date the immediate temporary denture was first installed.


## Explanation of Some Important Plan Provisions

## Calendar Year Deductible

The Calendar Year Deductible is the amount of Covered Dental Expenses you must pay each calendar year before the Plan pays benefits.

## Family Deductible Limit

The Family Deductible Limit is the amount of Covered Dental Expenses your family must pay before the Plan pays benefits. When these expenses exceed the Family Deductible Limit, the Plan pays benefits at the percentage listed on the Dental Chart on page 98. The family deductible limit must be met by more than one person.

## Coinsurance

Coinsurance is the amount you must pay out of your own pocket for Covered Dental Expenses after you meet the calendar year deductible.

## Calendar Year Maximum Benefit

The Calendar Year Maximum Benefit is the most the Plan will pay for all dental expenses incurred by a covered person in a calendar year. It applies even if there is a break in coverage.

## Coordination of Benefits

In many families, both husbands and wives work and may be eligible for benefits under more than one group medical or dental plan. In such situations, the various plans "coordinate" benefits to determine how covered expense will be paid by the American Water Plan and the other plans. This may mean a reduction in benefits under this Plan. The combined benefits will not be more than the expenses recognized under the American Water Plans.

If the American Water Plan is determined to be the primary plan (the plan that pays its benefits first), it will pay its regular benefits in full without regard to any payment that may be made under any other plan.

If the American Water Plan is determined to be the secondary plan (the plan that pays its benefits after the primary plan pays benefits), it will pay a reduced amount of benefits that will in no event cause the total benefit from all plans to exceed the benefit that would have been paid by the American Water Plan if it had been the primary plan. However, if benefits under the primary plan are reduced because a covered person does not comply with the plan provisions (such as penalties resulting from the failure to comply with cost management provisions

Covered services and supplies must meet broadly accepted standards of dental practice. When your dentist uses an alternate method of treatment, the benefits paid by American Water Plan will be limited.
of the plan), the amount of the reduction will not be considered for payment under the American Water Plan.
For example, if you have Standard PPO Dental coverage and receive Preventive Care Services, the primary plan pays $70 \%$ of eligible charges to an in-network provider, the American Water Plan will pay an additional $10 \%$ of covered charges for a total benefit equal to $80 \%$ of covered charges which is the benefit the American Water Plan would have paid as the primary plan.

## Limitations

When the Alternate Treatment part of this Plan applies, benefits will be limited. Here are some examples:

## Restorative and Reconstructive Services

- Gold, Baked Porcelain, Crowns, and Jackets

Covered Dental Expenses will be limited to the charges for the procedure using amalgam or like material, if it would restore a tooth. This limit applies even if you and the dentist choose some other type of restoration.

## - Reconstruction

Covered Dental Expenses will be limited to the charges for the procedure needed to eliminate oral disease and replace missing teeth. Appliances or restorations needed to increase vertical dimension or restore the occlusion are deemed to be optional and are not covered.

## Prosthodontic Services

- Partial Dentures

Covered Dental Expenses will be limited to the charges for a cast chrome or acrylic denture if this would satisfactorily restore an arch. This limit applies even if you and the dentist choose a more elaborate or precision appliance.

- Complete Dentures

Covered Dental Expenses will be limited to the charges for a standard procedure. This limit applies even if you and the dentist choose personalized or specialized treatment.

Replacement of Existing Dentures will be covered only if the existing denture cannot be used or repaired. If it can be used or repaired, Covered Dental Expenses will be limited to the charges for the services needed to make the denture usable.

## When Coverage Is Terminated

Coverage under any section of this Plan will be in exchange for all privileges and benefits provided under any like prior coverage. Any benefits provided under such prior coverage may reduce benefits payable under this Plan.
Coverage under either Plan terminates when the first of these events happens:

■ The day your employment ends;

- When the group contract terminates as to the coverage;
- When you are no longer in an Eligible Class. (This may apply to all or part of your coverage.);
- When you fail to make any required contribution.

Under certain circumstances, American Water may continue your coverage when you are not actively at work. If you are not at work due to illness or injury, American Water dental coverage will be continued for the length of your approved leave of absence, not to exceed 24 months from the date you are disabled as long as appropriate contributions are made.
A dependent's coverage will terminate at the first to occur of:

- The termination of all dependents' coverage under the group contract;
- When a dependent becomes covered as an employee;
- When such person is no longer an Eligible Dependent;
- When your coverage terminates.

You may be entitled to continue your dental coverage (see "Continuation of Health Coverage" on page 189).

## Benefits After Termination of Coverage

If your dental coverage ends while you are not totally disabled, charges for dentures, fixed bridgework, and crowns may be covered for a period of 60 days following the date coverage terminated if they were ordered before that date.

Expenses incurred for the following after the person's dental coverage ends because medical coverage ends will be deemed to be incurred when ordered:

- Dentures
- Fixed bridgework
- Crowns

This applies only if the item is finally installed or delivered no more than 60 days after coverage ends.
"Ordered" means:

- Impressions have been taken from which the dentures, crowns, or fixed bridgework will be made, and

For fixed bridgework and crowns, the teeth must have been fully prepared if they will serve as retainers or support or if they are being restored.

## General Exclusions

Coverage is not provided for the following expenses:

- Services and supplies not necessary, as determined by Aetna, for the diagnosis, care, or treatment of disease or injury. This applies even if they are prescribed, recommended, or approved by the person's attending dentist.
- Care, treatment, services, or supplies that are not prescribed, recommended, and approved by the person's attending dentist.
- Treatment by someone other than a licensed dentist. (The Plan will cover some treatments by a licensed dental hygienist if supervised by a dentist, including scaling of teeth, cleaning of teeth, and topical application of fluoride.)
- Services or supplies determined by Aetna to be experimental or investigational. A drug, device, procedure, or treatment will be determined to be experimental or investigational if:
- there are insufficient outcomes data available from controlled clinical trials published in the peer reviewed literature to
substantiate its safety and effectiveness for the disease or injury involved;
- as required by the FDA, approval has not been granted for marketing;
- a recognized national medical or dental society or regulatory agency has determined, in writing, that it is experimental, investigational, or for research purposes; or
- the written protocol or protocols used by the treating facility or the protocol or protocols of any other facility studying substantially the same drug, device, procedure, or treatment or the written informed consent used by the treating facility or by another facility studying the same drug, device, procedure, or treatment states that it is experimental, investigational, or for research purposes.
- Services of a resident doctor, dentist, or intern rendered in that capacity.
- Charges which Aetna determines not to be reasonable.
- Charges for services and supplies which are covered in whole or in part under any other part of this Plan, or under any other group benefits plan provided by American Water.
- Charges that are made only because there is health coverage.
- Charges that a covered person is not legally obliged to pay.
- Charges for services and supplies:
- furnished, paid for, or for which benefits are provided or required by reason of the past or present service of any person in the armed forces of a government;
- furnished, paid for, or for which benefits are provided or required under any law of a government. (This does not include a plan established by a government for its own employees or their dependents or Medicaid.) An example is benefits provided, to the extent required by law, under "nofault" auto insurance.
- Charges for plastic surgery, reconstructive surgery, cosmetic surgery, or other services and supplies which improve, alter, or enhance appearance, whether or not for psychological or emotional reasons, including but not limited to charges for personalization or characterization of dentures, except to the extent needed to repair an injury which occurs while the person is covered under this Plan.
- Charges for routine dental exams or other preventive services and supplies.
- Charges for acupuncture therapy, unless performed by a doctor as a form of anesthesia in connection with surgery covered under the Plan.
- Charges for sealants.
- Charges for the replacement of a prosthetic device that is lost, missing, or stolen.
- Charges for services or supplies for orthodontic treatment, except as specifically provided.
- Charges for services or supplies to increase vertical dimension, such as dentures, crowns, inlays and onlays, bridgework, or any other appliance or service.
Any exclusion above will not apply to the extent that:
- Coverage is specifically provided by name in this Summary Plan Description, or
- Coverage of the charges is required under any law that applies to the coverage.

These excluded charges will not be used when calculating benefits.
The law of the jurisdiction where a person lives when a claim occurs may prohibit some benefits. If so, they will not be paid.

## Submitting Claims

You should file your claim(s) during the calendar year in which the service or treatment was provided.

All claims must be filed within two years from the date of the incurred expense. (See page 101 for information on filing
Orthodontic Claims) Claims must be in writing and must include proof of the nature and extent of the expense. To obtain Dental Benefits Request forms, call Aetna Member Services at (800) 2924366 or visit their website at www.aetna.com.

How Your
Benefits Are Paid

The Dental Plan is administered by Aetna. Claims will be paid as soon as Aetna receives the necessary written proof supporting your claim.

## How to File a Dental Claim

Attach the original of each itemized bill to the Dentist's Statement form. Be sure to keep a copy of all bills and claim forms for your records.

Fast processing of your claim depends on complete, accurate information. When filing a claim under the Dental Plan, please remember to:

- Complete all items under applicable sections of the claim form. Unanswered questions will cause delay in processing your claim.
- Be sure to include your Identification number on all claims, including claims for your dependent(s), and be sure to sign the form.
- Attach the itemized bill to the form. An itemized bill must contain the following information:
- the patient's full name,
- the patient's relationship to you,
- the date service was provided,
- the name of the Dentist or other licensed health care professional providing service,
- the provider's taxpayer identification number,
- the type of service provided,
- the nature of the condition being treated, and
- the charges for the service or treatment (multiple expenses should be itemized).

If any of this information is missing, write it on the bill yourself and sign your name. Your dental provider should complete the provider section of the Benefits Request form if he or she has not given you an itemized statement.

If you have other group coverage that pays benefits before this Plan, you must provide Aetna with a copy of the other carrier's Explanation of Benefits (EOB) reflecting the benefits paid under the other coverage when you submit expenses for payment under this Plan.
Send the completed claim form and itemized bill(s) to:

## Aetna

P.O. Box 14094

Lexington, KY 40512-4094
If you have any questions about the status of your claim, call Aetna Member Services at (800) 292-4366.

## No Assignment of Benefits

You cannot assign, pledge, encumber or otherwise alienate any legal or beneficial interest in benefits under the Plan, and any attempt to do so will be void. The payment of benefits directly to a health care provider, if any, shall be done as a convenience to the covered person and shall not constitute an assignment of benefits under the Plan.

## Your Contributions

You pay your share of the cost for your benefits each pay cycle through convenient pre-tax payroll deductions. Pre-tax means that your contributions are withheld before federal (and in most cases, state (other than New Jersey) and local) income and FICA (Social Security) taxes are withheld. This reduces your taxable income and the amount of tax you pay. As a result, you have more take-home pay. Because your pre-tax contributions are not subject to FICA taxes, your Social Security benefit at retirement may be slightly reduced if your earnings are under the Social Security Taxable Wage Base (\$94,200 for 2006; $\$ 97,500$ for 2007). However, the loss in future retirement benefits should be more than offset by the current tax savings under the Plan.

## The Vision Plan

## Vision Benefits

Healthy eyes and good vision are important to your overall well-being and quality of life. All employees and their dependents who enroll in any of American Water Medical Plans are also enrolled in the Vision Plan, since both vision and dental benefits are bundled with the medical plan. Employees may enroll in dental/vision coverage if they opt out of medical.

The Vision Plan is administered by EyeMed. EyeMed provides certain administrative and claim payment services under the Plan, but does not guarantee benefit payments. You can receive routine eye exams, corrective lenses, frames, and contacts through EyeMed's nationwide network of over 16,000 participating providers optometrists, ophthalmologists, and optical retail locations.

The Vision Plan offers both in-network and out-of-network benefits, but your benefit levels are higher (and your out-of-pocket costs lower) when you use in-network providers.

To find a provider or to make sure your provider participates in the EyeMed network:

■ Before you enroll: visit www.enrollwitheyemed.com/access.

- Once you are enrolled: visit www.eyemedvisioncare.com.

There are no ID cards with the EyeMed plan. Just call an EyeMed provider to make an appointment and furnish your Identification number.

## Vision Benefits Summary Chart

The following chart provides a summary of your vision benefits. Keep in mind that the Network Providers column shows what you pay and the Out-of-Network Provider column shows what the Plan pays.

| Vision Care Service | Member Cost at a <br> Network Provider | Reimbursement at an <br> Out-of-Network Provider |
| :--- | :---: | :---: |
| Vision Exam | \$15 copay | U\&C less \$15 copay |

## Visiting an Out-of-Network Provider

All vision care services received from an out-of-network provider are paid up to a scheduled amount. You are responsible for paying any amount the provider charges in excess of that amount.

## Services Not Covered

The Vision Plan does not cover:

- Orthoptics or vision training;
- Subnormal vision aids and associated supplemental testing;
- Aniseikonic lenses;
- Medical and/or surgical treatment of the eyes;
- Corrective eyewear required by an employer as a condition of employment, and safety eyewear unless specifically covered under the plan;
- Services provided as a result of Workers' Compensation Law;

■ Non-prescription lenses (plano lenses) and non-prescription sunglasses (except for the 20\% EyeMed discount);

- Two pair of glasses in lieu of bifocals;
- Services or materials provided by any other group benefit providing for vision;
- Benefit allowances provide no remaining balance for future use within same benefit period;
- Lost or broken lenses, frames, glasses, or contact lenses will not be replaced except in the next benefit period.


## When Coverage Is Terminated

Coverage under any section of this Plan will be in exchange for all privileges and benefits provided under any like prior coverage. Any benefits provided under such prior coverage may reduce benefits payable under this Plan.

Coverage under either Plan terminates when the first of these events happens:

- The day your employment ends;
- When the group contract terminates as to the coverage;
- When you are no longer in an Eligible Class. (This may apply to all or part of your coverage.);
- When you fail to make any required contribution

Under certain circumstances, American Water may continue your coverage when you are not actively at work. If you are not at work due to illness or injury, American Water vision coverage will be continued for the length of your approved leave of absence, not to exceed 24 months from the date you are disabled as long as appropriate contributions are made.

A dependent's coverage will terminate at the first to occur of:

- The termination of all dependents' coverage under the group contract;
- When a dependent becomes covered as an employee;

■ When such person is no longer an Eligible Dependent;
■ When your coverage terminates.
You may be entitled to continue your vision coverage (see "Continuation of Health Coverage" on page 189).

## Filing a Claim

When you visit an EyeMed network provider, you must present the provider with your Identification number. Your provider will submit the benefit form for you.

If you visit an out-of-network provider, you must pay the provider at the time you receive vision care services. You must then submit an EyeMed claim form and an itemized paid receipt to receive reimbursement. Your itemized receipt must include:

- Patient's name
- Date service began
- The services and materials received
- Amount paid

Claim forms and receipts should be mailed to:

EyeMed Vision Care<br>Attention OON Claims<br>P.O. Box 8504<br>Mason, OH 45040-7111

You can fax the form and receipts to: (866) 293-7373. You can also e-mail the form and receipts to: oonclaims@eyemedvisioncare.com. Claim forms are available on EyeMed's website at www.eyemedvisioncare.com. You can also obtain forms by contacting EyeMed Member Services at (866) 939-3633.

## EyeMed will not process claims submitted more than 12 months after the date of service or purchase.

## No Assignment of Benefits

You cannot assign, pledge, encumber or otherwise alienate any legal or beneficial interest in benefits under the Plan, and any attempt to do so will be void. The payment of benefits directly to a health care provider, if any, shall be done as a convenience to the covered person and shall not constitute an assignment of benefits under the Plan.

Your Contributions

You pay your share of the cost for your benefits each pay cycle through convenient pre-tax payroll deductions. Pre-tax means that your contributions are withheld before federal (and in most cases, state (other than New Jersey) and local) income and FICA (Social Security) taxes are withheld. This reduces your taxable income and the amount of tax you pay. As a result, you have more take-home pay. Because your pre-tax contributions are not subject to FICA taxes, your Social Security benefit at retirement may be slightly reduced if your earnings are under the Social Security Taxable Wage Base (\$94,200 for 2006; $\$ 97,500$ for 2007). However, the loss in future retirement benefits should be more than offset by the current tax savings under the Plan.

## Flexible Spending Accounts

## Flexible Spending Accounts

Participation in the Health Care Spending
Account and the Dependent Care Spending Account allows you to reduce your taxable income by paying for certain expenses with pre-tax dollars.

Horizon administers the Flexible Spending Accounts on behalf of American Water.

To help you meet the high costs of health and dependent care in the most cost-efficient manner, American Water offers two programs which allow you to pay for qualifying expenses using pre-tax dollars. You pay fewer taxes because those amounts are not subject to federal income or Social Security taxes. You keep more of what you earn, increasing your spendable income.

You make voluntary contributions on a pre-tax basis to spending accounts, from which you receive tax-free reimbursement to cover the cost of your qualifying medical and dependent care expenses.

The Health Care Spending Account reimburses you for most healthrelated expenses for yourself or your eligible dependents that are not reimbursable through any health benefit plans.

The Dependent Care Spending Account reimburses you for most dependent day care expenses for your qualifying dependents.

Reimbursements that you receive from your Health Care and/or Dependent Care Spending Accounts are tax-free to you.

Your contributions to your Health Care and/or Dependent Care Spending Accounts are deducted each pay cycle through convenient pretax payroll deductions. Pre-tax means that your contributions are withheld before federal (and in most cases, state and local) income and FICA (Social Security) taxes are withheld. (Note: If you are a resident of Pennsylvania, your contributions to the Dependent Care Spending Account will be subject to state income taxes. If you are a resident of New Jersey, your contributions to both the Health Care Spending Account and the Dependent Care Flexible Spending Account will be subject to New Jersey state income taxes.) Pre-tax contributions reduce your taxable income and the amount of tax you pay. As a result, you have more take-home pay. Because your pre-tax contributions are not subject to FICA taxes, your Social Security benefit at retirement may be slightly reduced if your earnings are under the Social Security Taxable Wage Base ( $\$ 94,200$ for 2006; $\$ 97,500$ for 2007). However, the loss in future retirement benefits should be more than offset by the current tax savings under the Plan.

## The Health Care Spending Account

You can use your Health Care Spending Account to pay for medical, dental, vision, and hearing care expenses that are not otherwise covered by any health care plan.

The Health Care Spending Account allows you to contribute money on a pre-tax basis to an account set up for you. If you (or your eligible dependents) incur qualifying health care expenses which are not covered, or are only partially covered, by insurance or any other source, you will be reimbursed from the spending account for these expenses.

Here is an example of the potential tax savings with a Health Care Spending Account:

|  | With Account | Without Account |
| :--- | :---: | :---: |
| Annual Family Income | $\$ 50,000$ | $\$ 50,000$ |
| Pre-Tax Contributions to Account | $\$ 2,400$ | None |
| Taxable Income | $\$ 47,600$ | $\$ 50,000$ |
| Federal, State, and Social Security Taxes | $\$ 12,685$ | $\$ 13,325$ |
| After-Tax Health Care Expenses | None | $\$ 2,400$ |
| Net Spendable Income | $\$ 34,915$ | $\$ 34,275$ |
| Tax Savings (Extra Take-Home Pay) | $\$ \mathbf{6 4 0}$ |  |

Example uses tax rates of 15\% federal, 4\% state, and 7.65\% Social Security

## Eligibility

To participate in the Health Care Spending Account, you must complete and submit an enrollment form within the 31-day enrollment period. If a signed form is not received within this period, American Water will assume that you have decided not to participate in the Plan, and you will not be eligible to participate until the following Plan Year.

## Eligible <br> Dependents

Health Care expenses incurred by your eligible dependents can be reimbursed if the expenses are not covered by any medical, dental, vision, or prescription drug plan.

If you are a regular full-time eligible employee (see "Eligibility" above), you are eligible to participate in the Health Care Spending Accounts as of the first day of the month following completion of one full month of continuous employment. You may enroll by completing and signing the appropriate Flexible Spending Account section on your Enrollment Form. If you are newly hired, you must enroll and make your contribution election within the 31-day enrollment period. You will have the opportunity to change your elections in the fall of every year, effective for the upcoming plan year. You are not permitted to make changes to your election amount during the Plan Year, except under certain circumstances (see page 123).

In addition to your own expenses, you can also be reimbursed from the Health Care Spending Account for qualifying expenses incurred by an eligible dependent. For you to include these expenses, the person must have been your dependent either at the time the medical services were provided or at the time you paid the expenses.

In general, an eligible dependent is your spouse or any person whom you could claim as a dependent on your federal income tax return (without regard to that individual's gross income). As of January 1, 2006, the definition of "dependent child" for this purpose changed. A person generally qualifies as your dependent if he or she is a "qualifying child" or a "qualifying relative."

A qualifying child is your son, daughter, stepchild, foster child, brother, sister, stepbrother, stepsister, or a descendant of any of them who is:

■ Under age 19, under age 23 and a full-time student, or permanently and totally disabled;

- Lived with you for more than half of the year; and
- Did not provide over half of his or her own support for year.

A legally adopted child (or a child lawfully placed with you for legal adoption) is treated as your own child. Special rules apply to expenses paid before and after the adoption or placement. A child of divorced

A qualifying relative is your:

- Son, daughter, stepchild, foster child, or a descendant of any of them (for example, your grandchild);
- Brother, sister, or a child of either of them;
- Father, mother, or an ancestor or sibling of either of them (for example, your grandmother, grandfather, aunt, or uncle);
- Stepbrother, stepsister, stepfather, stepmother, son-in-law, daughter-in-law, father-in-law, mother-in-law, brother-in-law, or sister-in-law; or
- Any other person (other than your spouse) who lived with you all year as a member of your household if your relationship does not violate local law.

You should consult your own tax advisor to determine whether your child or other relative is eligible to be your dependent.

## How the Account Works

## Claim Documentation

The spending account does not replace your medical benefits. It is a separate plan that reimburses you for qualifying expenses that are not covered, or only partially covered, by your Medical, Dental, or Vision Plan or by any other source (such as a spouse's plan).

When you have an eligible medical expense, you pay the bill. You can be reimbursed for these expenses from your account by filing a claim form. (See page 128.)

For additional convenience, you will be issued a debit card. Use the card to pay for eligible medical expenses just as you would use your bank debit card. The money is automatically debited from your Health Care Spending Account. You should keep copies of all receipts for any expenses you pay for from your Health Care Spending Account in case further substantiation is required.

Your debit card will permit all transactions to be made in the pharmacy at the point of sale. This includes prescription and over-thecounter items. Internal Revenue Service (IRS) regulations require documentation to verify that claims are legitimate. Therefore, any transaction that does not match a copayment from the American Water Medical Plan or Prescription Drug Plan or is not otherwise clearly a medical expense based on the information obtained from the vendor's inventory system at the point of sale, will be audited by Horizon.

If you are audited for a transaction, you (the member) are required to provide documentation to validate the expense. Return the letter to

Horizon along with a receipt or Explanation of Benefits (EOB) which includes the following:

- Provider
- Service(s) received or item(s) purchased
- Date of service
- Amount of expenses incurred

Horizon's Customer Service area will review the transaction. If it is eligible under IRS regulations and the supporting documentation is approved, no further action will be required. If any portion of the transaction is deemed ineligible according to IRS regulations, you (the member) will be responsible for returning those funds.

## How Much Can I Contribute?

You may elect to contribute up to \$3,000 per year to your Health Care Spending Account.

## Use All the

Money In Your

## Account

You must request reimbursement by April 30 of the following year for health care expenses incurred during the Plan Year and the grace period (the following January 1 - March 15).

During open enrollment (or your 31-day enrollment period), you should estimate what you will spend during the next Plan Year (or the balance of the current Plan Year) (January 1 to December 31, plus the $21 / 2$ month grace period, see below) on unreimbursed medical expenses. We will deduct from your paycheck the amount of money you choose to set aside, in equal amounts over the course of the calendar year.

You may elect to contribute up to $\$ 3,000$ per year to the Health Care Spending Account. There is a minimum contribution of $\$ 120$ per calendar year. If your spouse also has a health care spending account, whether through the Company or another employer, this will not affect the maximum amount of your contribution. You may each contribute the maximum amount.

The amount available to you for reimbursement for qualifying expenses incurred during the Plan Year (plus the $21 / 2$ month grace period) is the annual amount you have elected to contribute to the spending account, even if the full amount has not yet been deducted from your pay. For example, if you elect to contribute $\$ 1,200$ to the spending account, the entire $\$ 1,200$ will be available to you for reimbursement of your eligible expenses beginning January 1. Note that there is a different rule for reimbursements from the Dependent Care Spending Account.

According to IRS rules, any amounts remaining in your spending account after the deadline for submitting claims incurred during the Plan Year (plus the $2^{1 / 2}$ month grace period) will be forfeited. You may not carry forward unused amounts to the next Plan Year, and you may not transfer unused amounts from the Health Care Spending Account to another employee or to another plan or account (such as the Dependent Care Spending Account). Therefore, you should plan carefully before you make your annual contribution election. Any
forfeited amounts are used by American Water to reduce future administrative expenses.
The claims accumulation period for the Health Care Spending Account is $14 \frac{1}{2}$ months - the current 12 -month Plan Year (January 1 December 31) plus the period January 1 through March 15 of the following calendar year. The deadline to submit claims for reimbursement from your Health Care FSA is April 30 of the following year. You must be an active participant or COBRA participant as of December 31 in order to take advantage of the grace period. Expenses incurred during the grace period that are not applied against Health Care Spending Account balance for the prior Plan Year can be applied against the Health Care Spending Account for the current Plan Year. For example, if you establish a Health Care Spending Account for 2007, eligible expenses incurred during the period January 1, 2008 - March 15, 2008, can be applied against your 2007 account balance. If you have exhausted your 2007 account balance or you do not submit the grace period expenses by April 30, 2008, you can apply those expenses against your 2008 Health Care Spending Account, if any. If you do not have a 2008 Health Care Spending Account, you would not be able to be reimbursed for those grace period expenses.

Can I Change the Amount of My Contributions?

## Expenses Eligible for

Reimbursement

You can start, stop, or change the automatic deductions from your paycheck during the calendar year only if you have a change in status (as listed below). The change in status must be on account of, and correspond with, a change in status affecting eligibility. The following events are changes in status:

- Change in employee's legal marital status (marriage, death of spouse, divorce, legal separation, or annulment).
- Change in the number of employee's dependents (gain a child through birth, adoption, placement for adoption, or newly-eligible dependent; loss of dependent through death).
- Change in dependent's eligibility status (dependent qualifies or no longer qualifies because of age, student status, or marriage).

Only "qualifying" expenses can be reimbursed through the Health Care Spending Account. These include:

- Medical, dental, and vision care expenses incurred by you or an eligible dependent in the diagnosis, treatment, or prevention of disease, including prescription drug expenses and transportation or lodging expenses incurred in receiving treatment.
- Certain other medical expenses not covered by your medical insurance.

Remember, the following lists of eligible and ineligible expenses are not complete. If you have a question as to whether or not an expense is eligible, please call Horizon FSA at (800) 224-4426.

- Deductibles or copayments you have paid under any type of health care plan.
- Over-the-counter medicines and drugs purchased without a prescription, provided they are for the diagnosis, cure, mitigation, treatment, or prevention of disease or for the purpose of affecting any structure or function of the body. The over-the-counter drug must be more than just beneficial to general health and not "cosmetic" in nature.

Some over-the-counter drugs have a dual purpose, serving a personal/cosmetic or general health purpose as well as a medical purpose. These drugs will require a letter from a doctor stating the medical condition or disease that is being treated.

Keep in mind that the expenses you submit for reimbursement may not be covered or reimbursed by other insurance or another source, including a plan sponsored by your spouse's employer, Medicare, Workers' Compensation, automobile insurance, or any recovery or settlement from a lawsuit.
Below is a list of some of the health care expenses eligible for reimbursement from your spending account. Only healthcare expenses not reimbursed by insurance can be claimed.

For additional information, call Horizon FSA at (800) 224-4426. You can also refer to IRS Publication 502 ("Medical and Dental Expenses"). You can request a copy of Publication 502 from your local IRS office or go online at www.irs.gov/publications/p502. But keep in mind, not all expenses listed in Publication 502 are eligible (like insurance premiums) and some expenses not listed in the publication are eligible (such as some over-the-counter drugs and medicines).

- Acupuncture (excluding remedies)
- Adoption
- Adult diapers
- Alcoholism treatment
- Ambulance
- Artificial insemination
- Artificial limbs/teeth
- Birth control
- Braille books/magazines
- Chiropractic treatment
- Christian Science practitioners
- Coinsurance/deductibles
- Contact lenses/saline solution
- Copayments
- Cosmetic Surgery:
- to treat illness/disease
- to improve a congenital abnormality
- to treat injury from accident/trauma
- to improve a disfiguring deformity
- Crutches
- Deductibles
- Dental treatment and oral surgery (non-cosmetic only)
- Dentures
- Diagnostic fees
- Dietary supplements and vitamins with doctor's letter of medical necessity
- Doctor fees (cosmetic procedures not eligible)
- Drug addiction treatments

■ Drug and medical supplies (i.e. syringes, needles, etc.)

- Excess of reasonable and customary charges scheduled, annual, or lifetime maximums
- Eye care/exams
- Eye surgery (cataracts, LASIK, etc.)
- Eyeglasses (prescription only)
- Guide dogs
- Hearing aids/exams
- Hearing devices and batteries
- Home health care
- Hospital bills
- Insulin
- In-vitro fertilization
- Laboratory fees
- Nursing home costs
- Orthodontia (non-cosmetic only)
- Orthopedic devices
- Over-the-counter drugs that are medically necessary like allergy medications, aspirin, or antacids (see list below)
- Oxygen
- Prescribed medicines
- Psychiatric treatment
- Psychologist's fees
- Routine physicals and other non-diagnostic services or treatments
- Smoking-cessation over-the-counter drugs
- Smoking cessation programs
- Specialized car equipment for disabled persons
- Speech therapy
- Sterilization
- Surgical fees
- Transplants (except hair)
- Vaccinations and immunizations
- Vitamins, with doctor's letter of medical necessity
- Weight loss programs
- Weight-loss over-the-counter drugs with doctor's letter of medical necessity
- Well-baby care
- Wheelchairs
- X-ray fees

Over-TheCounter Items

Dual Use Items

The following over-the-counter items qualify for reimbursement under the Health Care FSA Plan:

- Antiseptics
- Asthma medications
- Cold, flu, and allergy medications
- Diabetic supplies
- Ear/eye care
- Health aids
- Pain relief
- Personal test kits
- Skin care
- Stomach care

The following dual use items qualify for reimbursement under the Health Care Spending Account with a letter of medical necessity from the patient's doctor:

- Adhesive or elastic bandages
- Blood pressure meter
- Cold or hot compresses
- Eye drops
- Foot spa
- Gauze and tape
- Gloves and masks
- Herbs
- Leg or arm braces
- Massagers
- Minerals
- Multivitamins
- Saline nose drops
- Special supplements
- Special teeth cleaning system

■ Thermometers

Expenses Not Eligible for Reimbursement

The following are not considered qualifying healthcare expenses and cannot be reimbursed from the Health Care Spending Account:

- Bleaching/bonding of teeth
- Contact lens insurance
- Cosmetic surgery, unless necessary to correct a deformity which is congenital or which resulted from a disfiguring illness or an injury resulting from an accident or trauma
- Dancing lessons
- Diaper services for children
- Electrolysis
- Expenses for general health purposes, such as fitness, exercise, or health club dues unless recommended by a doctor for a particular medical condition
- Expenses for weight loss programs unless recommended by a doctor to treat obesity
- Expenses in excess of the amount you have elected to contribute to the Health Care Spending Account
- Expenses of someone who is not an eligible dependent
- Funeral expenses
- Hair restoration (procedures, drugs, or medications)
- Hair transplants
- Health club or gym memberships for general health
- Household help
- Insurance premiums (including COBRA premiums)
- Liposuction
- Marriage and family counseling
- Maternity clothes
- Over-the-counter items, drugs, or medications that are not medically necessary or are not prescribed by your doctor
- Premiums you or your spouse pay for insurance coverage
- Rogaine, when used for cosmetic purposes; that is, to stimulate growth, and not for a specific medical condition
- School tuition
- Swimming lessons
- Transportation costs of a disabled person to and from work
- Vacation or travel costs to improve health
- YMCA/YWCA memberships

This list is intended to give you a general description of expenses not eligible for reimbursement through the spending account. There may be other expenses, in addition to those listed above, which are not eligible.

Over-the-
Counter
Expenses Not Eligible for Reimbursement

The following over-the-counter items do not qualify for reimbursement from the Health Care FSA:

- Aromatherapy
- Baby bottles and cups
- Baby oil
- Baby wipes
- Breast enhancement system
- Cosmetics
- Cotton swabs
- Dental floss
- Deodorants
- Facial care
- Feminine care
- Fragrances
- Hair regrowth

■ Low "carb" foods

- Low calorie foods
- Oral care
- Petroleum jelly
- Shampoo and conditioner
- Skin care
- Spa salts
- Sun tanning products
- Toothbrushes


## Submitting Claims

You may be reimbursed from your Health Care Spending Account by completing a Claim for Reimbursement form, which can be downloaded from www.horizon-healthcare.com/fsa.

Any itemized bills that you submit should contain, at a minimum, the following information:

- The name of the patient and the employee,
- The date(s) the services were provided,
- A description of the service or item provided,
- The name and address of the provider,
- The cost of the service or item.

Sign and date the claim form. Attach copies of bills, invoices, or other written statements from a third party that support each reimbursement request and mail or fax to:

Healthcare
3 Penn Plaza East PP-05S
Newark, NJ 07105-2200
Fax: (973) 466-6499 or (973) 274-2215
You will receive an Explanation of Payment (EOP) statement from Horizon detailing the status of your account with each reimbursement.

## Family and Medical Leaves of Absence

## Termination of Employment

If you take a Family and Medical Leave of Absence (FMLA Leave) from American Water, your pre-tax payroll deductions to the Health Care Spending Account will stop. You may continue to make contributions on an after-tax basis only by sending a monthly check to American Water.

If you terminate or retire from American Water, your pre-tax payroll deductions to the Health Care Spending Account will stop. Under certain circumstances, you may continue participating under COBRA and make contributions on an after-tax basis by sending a monthly check to American Water.

You may still continue to submit claims for reimbursement of expenses incurred before your date of termination.

## The Dependent Care Spending Account

The cost of caring for your dependents while you work can be more affordable when you participate in the American Water Dependent Care Spending Account.

The Dependent Care Spending Account allows you to contribute money on a pre-tax basis to an account set up for you. These amounts can be used to reimburse you for most daycare or eldercare expenses you might incur for your qualifying dependents.

Here is an example of the potential tax savings with a Dependent Care Spending Account:

|  | With Account | Without Account |
| :--- | :---: | :---: |
| Annual Family Income | $\$ 50,000$ | $\$ 50,000$ |
| Pre-Tax Contributions to Account | $\$ 5,000$ | None |
| Taxable Income | $\$ 45,000$ | $\$ 50,000$ |
| Federal, State, and Social Security Taxes | $\$ 11,993$ | $\$ 13,325$ |
| After-Tax Dependent Care Expenses | None | $\$ 5,000$ |
| Net Spendable Income | $\$ 33,007$ | $\$ 31,675$ |
| Tax Savings (Extra Take-Home Pay) | $\$ \mathbf{1 , 3 3 2}$ |  |

Example uses tax rates of $15 \%$ federal, $4 \%$ state, and $7.65 \%$ Social Security

## Eligibility

If you are a regular full-time eligible employee (see "Eligibility" above), you are eligible to participate in the Dependent Care Spending Accounts as of the first day of the month following completion of one full month of continuous employment. You may enroll by completing and signing the appropriate Flexible Spending Account section on your Enrollment Form. If you are newly hired, you must enroll and make your contribution election within the 31-day enrollment period. You can enroll by completing and signing the Flexible Spending Account section on your Enrollment Form. You will have the opportunity to change your elections in the fall of every year, effective for the upcoming plan year. You are not permitted to make changes to your election amount during the Plan Year, except under certain circumstances (see page 135).

## Qualifying Dependents

Expenses are reimbursable for care of the following qualifying dependents:

- your child, grandchild, brother or sister who is under age 13, who resides in your household for more than one-half of the year and who does not provide more than one-half of his or her own support for the year;
- a disabled spouse who resides in your household for more than one-half of the year; and
- a disabled relative or household member who is principally dependent on you for support and who resides in your household for more than one-half of the year.

In the case of a child who receives over one-half of his or her support during the calendar year from his or her parents (i) who are divorced or legally separated under a decree of divorce or separate maintenance, (ii) who are separated under a written separation agreement, (iii) who live apart at all times during the last six months of the year, (iv) who have agreed that the custodial parent will not claim the child as an income tax exemption, and (v) where such child is in the custody of one or both parents for more than one-half of the year, such child will be considered the dependent of both parents, regardless of the child's place of residence of the amount of support provided by either parent. Contact your tax advisor or refer to IRS Publication 503 (Child and Dependent Care Expenses) for more information.

## How the Account Works

When you have eligible dependent care expenses, you pay the bill and submit a reimbursement claim to Horizon, along with a copy of the bill. You can be reimbursed for these expenses from your account by filing a claim form, assuming that you have enough money in your account. If not, you will be reimbursed up to the amount in your account and the remainder of the claim will be held until the balance in your Dependent Care Spending Account is sufficient to cover the bill.
Keep in mind, however, that because you are contributing to the spending account through payroll deductions, you will have a period of increased expenses. You will have to pay your dependent care provider, as well as have payroll deductions, before receiving reimbursement from your account.

## How Much Can I <br> Contribute?

You may contribute up to a maximum of $\$ 5,000$ per year, regardless of the actual number of qualifying dependents you have. Normally, amounts reimbursed from your Dependent Care Spending Account are tax-free to you. However, federal law states that the amount excluded from your gross income cannot exceed, in any calendar year (under all

You may elect to contribute up to \$5,000 per year (or your or your spouse's earned wages, whichever is less) to your Dependent Care Spending Account.
dependent care plans in which you or your spouse may participate) the lesser of:

- $\$ 5,000(\$ 2,500$ if you are married and filing separate federal income tax returns);
- Your annual income; or
- Your spouse's annual income.

If your spouse is (1) a full-time student for at least five months during the year or (2) physically and/or mentally disabled, there is a special rule to determine his or her annual income. To calculate the income, determine your spouse's actual taxable income (if any) earned each month that he or she is a full-time student or disabled. Then, for each month, compare this amount to either $\$ 250$ (if you claim expenses for one dependent) or $\$ 500$ (if you claim expenses for two or more dependents). The amount you use to determine your spouse's annual income is the greater of the actual earned income or 12 times the assumed monthly income amounts of either $\$ 250$ or $\$ 500$.

If you are married and filing separate federal income tax returns, the $\$ 2,500$ limit described above will not apply if you are (1) legally separated or (2) separated for more than six (6) months and pay for more than half of the household expenses.

By making an election under the Plan, you are representing to the Company that your contributions to the Plan are not expected to exceed these limits.

To qualify for tax-free treatment, you are required to list on your federal income tax return the names and taxpayer identification numbers of any person who provided you with dependent care services during the calendar year for which you have claimed a tax-free reimbursement. The identification number of a care provider who is an individual and not a care center is that individual's Social Security number. You should make your care provider aware of this reporting requirement.

In addition, your Dependent Care Spending Account contribution can never be more than your earned wages or your spouse's earned wages, whichever is less. If your spouse is a full-time student, the IRS considers him or her to be gainfully employed, with earned income of $\$ 250$ per month (if you have one qualifying dependent) or $\$ 500$ per month (if you have two or more qualifying dependents) for each month the spouse is a student. To be considered a "full-time student" as defined by the IRS, your spouse must maintain full-time status at a college or university during at least five months of the year.

Determining How Much to Contribute

The amount you elect to contribute will depend upon the amount you anticipate you will need to cover your dependent care expenses for the Plan Year (January 1 - December 31). You should compare the tax benefit you would receive with the Dependent Care Spending Account to the benefit that you would receive with the Federal child and dependent care tax credit (see below), and then choose between them. For additional details about the Federal tax credit, see IRS Publication 503 ("Child and Dependent Care Expenses") and IRS Tax Topic 602 (www.irs.gov/taxtopics/tc602.html). You can request a copy of Publication 503 from your local IRS office or go online at www.irs.gov/publications/p503.

Federal Earned Income Credit. A tax credit available under current tax law is the earned income credit. This credit also reduces the federal tax you have to pay on a dollar-for-dollar basis, but is calculated somewhat differently from the child care credit described above. The credit is available to individuals with a child who is under age 19 (under age 24 if a student) or who is totally and permanently disabled. An additional credit is available to individuals with a child who is under one year old. The credit does not depend on the amount you pay in child care expenses. The earned income credit has no effect on the amount you can contribute under the Dependent Care Spending Account for dependent care expenses, and the earned income credit cannot be claimed for any individual for whom you claim the child care credit described above. Moreover, the use of the Dependent Care Spending Account may result in a reduction in your taxable income thus qualifying you for the earned income credit where you would not otherwise have qualified.

You must request reimbursement by March 31 of the following year for dependent care expenses incurred on or before December 31 of each Plan Year.

According to IRS rules, any amounts remaining in your spending account after the deadline for submitting claims for the Plan Year will be forfeited. You may not carry forward unused amounts to the next Plan Year, and you may not transfer unused amounts from the Dependent Care Spending Account to another employee or to another plan or account (such as the Health Care Spending Account).
Therefore, you should plan carefully before you make your annual contribution election. Any forfeited amounts are used by American Water to reduce future administrative expenses.

## Expenses Eligible for

Reimbursement

You may receive reimbursement from your account for expenses that have been incurred for services rendered during the Plan Year. In order to be reimbursed for these expenses, the tax ID number or Identification number of the provider must be submitted.

The following expenses may be reimbursed so that you, the employee (and your spouse, if you are married), can work or look for work. There is an exception to this rule if you or your spouse work part-time and the payment for care must be made on a periodic (for example, weekly or monthly) basis, In this case, expenses for both work and non-work days are eligible. If payment is made on a daily basis, expenses must be allocated between work and non-work days. Similarly, if you or your spouse are not working due to illness, and you must pay for care on a periodic basis, expenses for nonwork days are eligible if the absence is considered short and temporary.
Expenses may also be reimbursed so that your spouse can attend school full-time or if your spouse is physically or mentally unable to care for himself or herself.

- Qualified child or adult day care center expenses (if the center provides care for more than six non-resident persons, the center must meet state or local regulations and receives a fee for such services, whether or not for profit).
- Before-school care, after-school care, or extended day programs (supervised activities for children after the regular school program) if used to enable the employee and spouse to work.
- A babysitter or companion inside or outside the home.
- A housekeeper, nanny, or au pair to the extent the expenses are for the care of a qualifying individual.
- A relative (who is not your dependent nor your child under age 19) who cares for a dependent.
- Someone who cares for an elderly or disabled dependent in your home.
- Nursery school or pre-kindergarten.
- Agency, application, deposit, or other registration fees if necessary to obtain the related care. Fees should not be reimbursed until care is provided, and fees that are forfeited (for example, because the employee selects a different provider) do not qualify.
- Custodial expenses for a dependent over age 13, not attributable to medical services, provided the qualifying individual spends at least eight hours each day in your home.
- Summer day camp tuition (including specialty camp) or a similar program to care for a qualifying individual. Separate equipment or similar charges (e.g., a laptop rental fee) do not qualify.


## Expenses Not Eligible for Reimbursement

## Can I Change the Amount of My Contributions?

- FICA and FUTA taxes of day care provider, as long as the overall expenses of the care provider qualify.
- Late fees charged to care for the child because the child was picked up late. Late fees charged because the childcare bill was paid late do not qualify.
- Sick-child facility expenses (care to enable the employee to go to work when the child is ill).
- Transportation costs to and from the location where the care or program is provided, if the expense is part of the cost of the program.
Expenses ineligible for reimbursement include the following:
- Payments for babysitters when you are not working, such as in the evening or on weekends.
- Private school tuition (except before-school and after-school care).
- Educational expenses for children in kindergarten or higher.
- Boarding school tuition.
- Overnight camp expenses.

■ 24-hour-a-day nursing home expenses.

- Transportation costs to and from the location where the care or program is provided, unless the expense is part of the cost of the program.
- Expenses for food, clothing, education, or entertainment incurred for the normal care of an eligible dependent, unless these expenses are incidental and cannot be separated from the cost of care.
- Cost for care that enables your spouse to do volunteer work.

This list is intended to give you a general description of expenses not eligible for reimbursement through the spending account. There may be other expenses in addition to those listed above which are not eligible.

You can start, stop, or change the automatic deductions from your paycheck during the calendar year if there is a change in your dependent care provider, if there is a change in the cost of dependent or if your dependent no longer meets the definition of qualifying individual. Here are some examples of situations in which you can change your election:

- Change from one childcare center to another and the new center charges a different rate.

Submitting<br>Claims

- Change in a home childcare provider, including a change in a nanny-sharing arrangement.
- A qualifying child reaches age 13 and is no longer an eligible dependent under the Dependent Care Spending Account.
- The employee marries and the new spouse has dependent children, increasing dependent care costs.
- Child of divorced parents switches residence between parents.

You may be reimbursed from your Dependent Care Spending Account by completing a Claim for Reimbursement form, which can be downloaded from www.horizon-healthcare.com/fsa. You must submit the form along with proof of payment for the services (such as receipts, statements, canceled checks, etc.).

Any itemized bills that you submit should contain, at a minimum, the following information

- The dependent's name and age,
- The nature of the care provided,
- The date(s) the care was provided,
- The amount paid for the care,
- The dependent's relationship to you, and
- The name and taxpayer identification number (or Social Security number) of the care provider.

Sign and date the claim form. Attach copies of bills, invoices, or other written statements from a third party that support each reimbursement request and mail or fax to:

Horizon Healthcare
3 Penn Plaza East PP-05S
Newark, NJ 07105-2200
Fax: (973) 466-6499 or (973) 274-2215
Remember that you are entitled to reimbursement only after the care has been provided, even if you pay for dependent care in advance.

You will receive an Explanation of Payment (EOP) statement from Horizon detailing the status of your account with each reimbursement.

Family and Medical Leaves of Absence

If you take a Family and Medical Leave of Absence (FMLA Leave) from American Water, your pre-tax payroll deductions to the Dependent Care Spending Account will stop. You may submit claims for reimbursement for care provided through your last day of work before your leave began.

Termination of Employment

If you terminate or retire from American Water, your pre-tax payroll deductions to the Dependent Care Spending Account will stop. You may still continue to submit claims for reimbursement of expenses incurred before your date of termination. Expenses for care provided after your date of termination are not eligible for reimbursement. COBRA continuation coverage does not apply to the Dependent Care Spending Account.

## Disability Coverage (Sick Leave, STD, and LTD)

## Disability Benefits

Disability benefits provide income protection when you are unable to work because of an extended illness or injury. American Water provides you with paid sick leave, short-term disability (STD), and long-term disability (LTD) benefits - at no cost to you.

You are eligible for disability benefits (sick leave, STD, and LTD) if you area full-time eligible employee (see "Eligibility" above). Part time employees and temporary employees are not eligible, unless specified by state laws.

Your eligibility date is first day of the month following completion of one full month of continuous service, provided you are then actively working or would have been able to work had you been scheduled to work that day. If you are on a layoff, on disability, or on leave of absence on your eligibility date, coverage or an increase in coverage will begin on the day you return to active full-time work for one full day.

The table below summarizes the Plan's disability benefits.

## Sick Leave Policy

Effective July 1, 2001, all then-current employees were eligible to bank their sick leave under the existing policy effective June 30, 2001. Every employee is eligible for 2 weeks of sick leave per calendar year. Employees must use their two weeks of annual sick leave before having to access sick time in their bank. The sick leave bank (which pays $100 \%$ of pay) must be used before receiving short-term disability (which pays only $75 \%$ of pay). However, the sick time and short-term disability run concurrently; therefore, if you have used 15 weeks of sick time, only 11 weeks of short-term disability remain. Once the bank has been exhausted, it will not be reinstated. Unused sick days cannot be carried over into the next calendar year. Unused sick leave will not be paid out upon termination of severance.

## Short Term Disability Insurance Benefits

If you are still disabled after your 2 weeks of paid sick leave and sick bank, STD coverage will start paying benefits. You will receive 75\% of your base pay each week for 24 weeks (unless superseded by state law), for a combined duration of 26 weeks of payments.
A "disability absence" is time lost from work because of a nonoccupational injury or illness which started while you were covered under this Plan.

Note: Short Term Disability does not begin until you have used your 2 weeks of sick leave and all accumulated banked sick time.

Example: Tony has completed 10 years of service as of June 30, 2001. This entitles him to 10 weeks of banked sick leave. On June 30, 2006, he suffers an illness that lasts 15 weeks.

- For the first 2 weeks, Tony will use his 2 weeks of sick leave at $100 \%$ of base pay.
- For the next 10 weeks, Tony will use his sick leave bank at $100 \%$ of base pay.
- For the next 3 weeks, Tony will receive $75 \%$ of his base pay under the STD plan.
- If Tony's disability lasts more than 26 weeks, he would start to receive LTD benefits of $60 \%$ of his base pay for as long as he remained disabled.

| Sick Leave | 2 weeks at $100 \%$ of pay each year |
| :--- | :--- |
| Sick Bank (if available) | $100 \%$ of pay if you have banked sick leave <br> remaining |
| Short-Term Disability (STD) | 75\% of base pay, which ends when Sick Leave, Sick <br> Bank, and STD equal 26 weeks combined |
|  | - 100\% of pay for any unused banked sick leave in <br> excess of 24 weeks |
| Long-Term Disability (LTD) <br> BEGINS AFTER 26 WEEKS <br> 100\% of pay for unused eligible vacation time <br> 60\% of base pay (up to \$15,000 benefit per <br> month), with offsets, to age 65, as long as you <br> remain disabled |  |

If your banked sick leave exceeds 26 weeks, you will continue to receive $100 \%$ of base pay until your sick leave is exhausted. Even though LTD benefits begin after 26 weeks, they are offset by your banked sick leave. Since you will already be receiving $100 \%$ of pay
from American Water, you will not receive an additional check for LTD benefits (but your period of disability will be running). When your banked sick leave is exhausted, you have the option of taking any unused eligible vacation time, which will extend your $100 \%$ of pay.
Your benefit amount will be reduced by any weekly amount for which you are eligible under any Workers' Compensation or similar law that pays you for time lost from work.
Benefits start on Day 8 of a disability due to illness, including pregnancy, and on Day 1 of a disability due to injury. You must report your case to Aetna Managed Disability at (800) 804-5329 if you are (or expect to be) absent from work for more than 5 consecutive workdays. Even if you are receiving $100 \%$ of pay, you must register your disability with Aetna. You will not be eligible for STD benefits for any period of time in which you are eligible to receive paid sick leave, and the combination of paid sick leave, vacation, and STD benefits will not exceed 26 weeks.

You must provide a doctor's certification that you are disabled because of the specific condition. Aetna may request any additional evidence it believes is necessary before deciding that benefits are payable.
More than one disability absence will be part of the same period of disability:

- If it is due to the same or a related cause, and
- If it is separated by less than 2 consecutive weeks of full-time work.

Your Maximum Period of Payment starts over if:

- A new disability absence is due to a cause different from that of any prior disability, and
- It is separated from the prior disability by at least one day of fulltime active work.


## STD Benefit Limitations

No benefits are payable for:

- Days on which you do work for pay or profit.
- Any period of time you are not under a doctor's care. You must have been seen in person and treated by a doctor to be deemed under his or her care.


## Coverage for Occupational Illness or Injury

This Plan pays a weekly benefit if you are absent from work, while covered, because of an illness or injury resulting from employment with American Water. However, the Weekly Benefit amount will be reduced by the weekly amount for which you are eligible for time lost under any Workers' Compensation law or any other similar law or doctrine. This benefit runs concurrently with sick leave

## Submitting STD Claims

To apply for benefits under the Short Term Disability Plan, contact Aetna Managed Disability at (800) 804-5329.

To receive disability benefits, you must file a claim within 31 days of your disability. Even if you are using sick time, you must register your disability with Aetna. Benefits will begin as soon as Aetna receives the information to verify your disability.

While you are receiving STD benefits, you may be required to periodically provide Aetna with additional medical information from your doctor documenting your continued disability. Aetna may also require that an appointed doctor examine you in order to verify your disability.

It is your responsibility to provide Aetna with the requested documentation supporting your claim. Otherwise, your benefits will stop.

## Long Term Disability (LTD) Benefits

If you remain disabled after exhausting your paid sick leave and STD benefits, you are eligible to receive LTD benefits. You will receive a scheduled monthly benefit equal to a percentage of your pre-disability earnings.

The Waiting Period before LTD benefits begin is the greater of:

Waiting Period

Scheduled<br>Monthly Benefit

The first 26 weeks of a period of disability; and

- The period of time when disability benefits are payable from any short-term disability benefits or salary continuation program sponsored by your Employer. This could occur if banked sick time exceeds 26 weeks.

If you are unable to earn more than $80 \%$ of your adjusted predisability earnings solely due to disease or injury, you will not be deemed to have performed the material duties of your own occupation on that day.
The monthly LTD benefit is $60 \%$ of your monthly predisability earnings. Benefits will be reduced by "other income benefits," as described on page 145.

The maximum monthly LTD benefit is $\$ 15,000$.

## Total Disability

For purposes of receiving LTD benefits, you are deemed to be totally disabled while either of the following applies to you:

- In the first 24 months of a period of disability:

You are unable, solely because of injury or disease, to perform the material duties of your own occupation. If you start work at a reasonable occupation, you will no longer be deemed totally disabled.

- After the first 24 months of a period of disability:

You are unable, solely because of injury or disease, to work at any reasonable occupation.
You will not be deemed to be performing the material duties of your own occupation or working at a reasonable occupation on any day if:

- You are performing at least one (but not all) of the material duties of your own occupation or you are working at any occupation (full-time or part-time); and
- Solely due to disease or injury, your income from either your own occupation or any occupation is $80 \%$ or less of your adjusted predisability earnings.
"Reasonable occupation" is any gainful activity for which you are, or may reasonably become, suited because of your education, training, or experience. It does not include work under an Approved

Rehabilitation Program. This determination will be made by Aetna in its sole discretion.

When Disability Period Begins

When Disability Period Ends

A period of "total disability" begins on the first day you are totally disabled as a direct result of a significant change in your physical or mental condition that happens while you are covered under this Plan.

You must be under the care of a doctor. (You will not be deemed to be under the care of a doctor on any given day unless your doctor has seen and treated you in person for the disease or injury that caused the total disability in the prior 31-day period.)

Your period of total disability ends on the first to occur of:

- The date you are not totally disabled.
- The date you start work at a reasonable occupation.
- The date you fail to give proof that you are still totally disabled.
- The date you refuse to be examined.
- The date you cease to be under a doctor's care.
- The expiration date of the Maximum Benefit Duration shown on the Summary of Coverage.
- The date you are not undergoing effective treatment for alcoholism or drug abuse, if your disability is caused to any extent by alcoholism or drug abuse.
- The date you have income from any employer or from any occupation for compensation or profit equal to more than $80 \%$ of your adjusted predisability earnings.
- The date you fail to give proof that you are unable to perform the duties of any occupation for compensation or profit equal to more than $80 \%$ of your adjusted predisability earnings.
- The date of your death.
- The day after Aetna determines you are able to participate in an Approved Rehabilitation Program and you refuse to do so.

Also, a period of total disability will end after 24 monthly benefits are payable if it is determined that the disability is, at that time, caused to any extent by a mental condition (including conditions related to alcoholism or drug abuse) described in the most current edition of the Diagnostic and Statistical Manual of Mental Disorders (called "DSM"), published by the American Psychiatric Association.

Two exceptions to this rule apply if you are confined as an inpatient in a hospital or treatment facility (see "Types of Facility" on page 156) for that condition at the end of the 24 months.

- If the inpatient confinement lasts less than 30 days, the period of total disability will cease when you are no longer confined.
- If the inpatient confinement lasts 30 days or more, the period of total disability may continue until the date you have not been confined for that condition for a total of 90 days during any 12month period.

The Separate Periods of Total Disability section below does not apply beyond 24 months to periods of disability that are subject to the above paragraph.

## Separate Periods of Disability

Once a period of total disability has ended, any new period of disability will be treated separately.
However, 2 or more separate periods of total disability, due to the same or related causes and separated by less than 6 months, will be deemed to be one period of total disability. Only one waiting period will apply.
Any day on which, solely due to disease or injury, your income is less than or equal to $80 \%$ of your adjusted predisability earnings, you will not, on that day, be deemed to be working at:

- your own occupation; or
- any reasonable occupation.

The first period will not be included if it began while you were not covered under this LTD Plan.

## Other Income Benefits

Other Income
Benefits Which
Reduce Your
Monthly LTD
Benefit

Other income benefits are:

- $50 \%$ of any award provided under The Jones Act or The Maritime Doctrine of Maintenance, Wages and Cure.
- Disability, retirement, or unemployment benefits required or provided for under any law of a government. Examples are:
- Unemployment compensation benefits.
- Temporary or permanent, partial or total disability benefits under any state or federal workers' compensation law or any similar law, which are meant to compensate the worker for any one or more of the following: loss of past and future wages; impaired earning capacity; lessened ability to compete in the open labor market; any degree of permanent impairment; and any degree of loss of bodily function or capacity.
- Automobile no-fault wage replacement benefits to the extent required by law.
- Statutory disability benefits.
- Benefits under the Federal Social Security Act, the Railroad Retirement Act, the Canada Pension Plan, and the Quebec Pension Plan.
- Veterans' benefits.

Disability or unemployment benefits under:

- any group insurance plan.
- any other type of coverage for persons in a group. This includes both plans that are insured and those that are not.
- Full retirement benefits for which you are or may become eligible under a group pension plan at the later of age 62 and the plan's normal retirement date, but only to the extent that such benefits were paid for by an employer.
- Retirement benefits received under any group pension plan, but only to the extent that such benefits were paid for by an employer.
- Disability payments that result from the act or omission of any person whose action caused your disability. These payments may be from insurance or other sources.
- Disability benefits under any group mortgage or group credit disability plan.

Other income benefits include those payable to you, your spouse, your children, or your dependents, due to your disability or retirement.

Increases in the level of "other income benefits" due to the following will reduce your monthly LTD benefits:

- a change in the number of your family members;
- a recomputation or recalculation to correct or adjust your benefit level as first established for the period of total disability; or
- a change in the severity of your disability.

Effect of Cost-ofLiving Increases

Increases in
Other Income Benefits Which Do Not Reduce Your Monthly Benefit

Cost-of-living increases in the level of other income benefits received from a governmental source during a period of total disability will not reduce your monthly LTD benefits.

Cost-of-living or general increases in the level of other income benefits from a non-governmental source during a period of total disability will not reduce your monthly LTD benefits to the extent they are based on the annual average increase in the Consumer Price Index.

The amount of any retirement or disability benefits you were receiving from the following sources before the date you become disabled under this LTD Plan will not reduce your monthly benefits:

- a military and other government service pensions;
- retirement benefits from a prior employer; and
- veterans' benefits for service related disabilities.

The amount of any income or other benefits you receive from the following sources will not reduce your monthly benefits:

- profit-sharing plans,
- thrift plans,
- 401(k) plans,
- Keogh plans,
- employee stock option plans, or
- tax sheltered annuity plans.


## Predisability Earnings

This is the amount of salary or wages you were receiving from American Water on the day before a period of disability started, calculated on a monthly basis.

It will be figured from whichever rule below applies to you:

- If you are paid on an annual basis, your monthly salary is $1 / 12$ th of your annual salary.
- If you are paid on an hourly basis, the calculation of your monthly wages is based on your hourly pay rate multiplied by the number of hours you are regularly scheduled to work per month; but not more than 173 hours per month.
- If you do not have regular work hours, the calculation of your monthly salary or wages is based on the average number of hours you worked per month during the last 12 calendar months (or
during your period of employment if fewer than 12 months); but not more that 173 hours per month.

What's Included
in Salary or Wages

What's Not
Included in
Salary or Wages

Included in salary or wages are:

- Pre-tax contributions you make under the Medical Plan, Dental Plan, Vision Plan, Health Care Spending Account or Dependent Care Spending Account
- Salary deferrals you make under an American Water 401(k) Plan
- Salary deferrals you make under an executive nonqualified deferred compensation agreement
Not included in salary or wages are:
- Awards and bonuses
- Overtime pay
- Contributions made by the Company to any deferred compensation arrangement or pension plan

A retroactive change in your rate of earnings will not result in a retroactive change in coverage.

## Benefit Adjustment During Return to Work

If, while monthly benefits are payable, you have income from:

- any employer, or
- any occupation for compensation or profit,
which is more than $20 \%$ of your adjusted predisability earnings; the monthly benefit as figured above will be adjusted as follows:
- During the first 12 months that you have such income, the monthly benefit will be reduced only to the extent the amount of that income and the monthly benefit payable, as figured above, exceeds $100 \%$ of your adjusted predisability earnings.
- Thereafter, the monthly benefit will be the product of the following:
(A divided by B) x C where:
$\mathrm{A}=$ Your adjusted predisability earnings minus such income.
B = Your adjusted predisability earnings.
$\mathrm{C}=$ The monthly benefit figured without regard to this paragraph.

In figuring the monthly benefit, other income benefits do not include income from any employer or income from any occupation for compensation or profit.

## Maximum Benefit Duration

Your period of disability will end as follows (unless it ends earlier for one or more of the reasons stated elsewhere in this booklet):

- If your period of total disability starts before your $62^{\text {nd }}$ birthday, it will end with the calendar month in which you reach age 65.
- If your period of total disability starts on or after your $62^{\text {nd }}$ birthday, it will end when the number of months of total disability expire (after the waiting period is met) as figured from the following schedule:


## Maximum Benefit Duration Schedule

| Age When Period of Total <br> Disability Starts | Months of Total Disability |
| :---: | :---: |
| 62 but less than 63 | 42 months |
| 63 but less than 64 | 36 months |
| 64 but less than 65 | 30 months |
| 65 but less than 66 | 24 months |
| 66 but less than 67 | 21 months |
| 67 but less than 68 | 18 months |
| 68 but less than 69 | 15 months |
| 69 and over | 12 months |

## Pregnancy Coverage

Benefits are payable on the same basis as for a disease if a female employee, while covered under this Plan, is absent from active work
because of a totally disabling pregnancy-related condition. A doctor must certify in writing that the employee is totally disabled because of the condition. Further, Aetna may request additional evidence before deciding that benefits are payable.

If, during the 3 months before coverage began, services are provided or supplies are received in connection with a pregnancy or a pregnancy is confirmed, the pregnancy is a preexisting condition whether or not the pregnancy commenced during that 3-month period.

## Adjustment Rule

If, for any reason, a person is entitled to a different amount of coverage, coverage will be adjusted as provided elsewhere in the plan document on file with your Employer. Any increase is subject to any Active Work Rule described in Effective Date of Coverage section of this Summary of Coverage.

Benefits for claims incurred after the date the adjustment becomes effective are payable in accordance with the revised plan provisions. In other words, there are no vested rights to benefits based upon provisions of this Plan in effect prior to the date of any adjustment.

## Limitations That Apply to Long Term Disability Coverage

Long Term Disability Coverage does not cover any disability that:

- Is due to intentionally self-inflicted injury (while sane or insane).
- Results from your commission of, or attempting to commit, an assault, battery, or felony.
- Is due to war or any act of war (declared or not declared).
- Is due to: insurrection; rebellion; or taking part in a riot or civil commotion.
- Starts during the first 12 months of your current Long Term Disability Coverage, if it is caused or contributed to by a "preexisting condition." A disease or injury is a preexisting
condition if, during the 3 months before the date you last became covered:
- it was diagnosed or treated; or
- services were received for the disease or injury; or
- you took drugs or medicines prescribed or recommended by a doctor for that condition.

In the case of pregnancy, see "Pregnancy Coverage" above for rules.

On any day during a period of disability that a person is confined in a penal or correctional institution for conviction of a criminal or other public offense, the person will not be deemed to be totally disabled; and no benefits will be payable.

## When LTD Coverage Ends

LTD coverage ends at the first to occur of:

- When employment ceases,
- When the group contract terminates as to the coverage,

■ When you are no longer an eligible employee. (See "Eligibility" above.)

Ceasing active work will be deemed to be cessation of employment. If you are not at work due to one of the following, employment may be deemed to continue up to the limits shown below.

- If you are not at work due to disease or injury, your employment may be continued until stopped by your Employer, but not beyond 12 months from the start of the absence.

■ If you are not at work due to temporary lay-off or leave of absence, your employment will be deemed to cease on your last full day of active work before the start of the lay-off or leave of absence.

Coverage After Termination

If your coverage ends during a period of total disability which began while you had coverage, benefits will be available as long as your period of total disability continues.

## Survivor Benefit

If you die while totally disabled, the LTD plan will pay a single, lump sum benefit if there is an Eligible Survivor as defined below.

The benefit amount will be:

- 3 times the Monthly Benefit, not reduced by other income benefits, for which you were eligible in the full month just before the month in which you die.

If you die before you are eligible for one full Monthly Benefit, however, the benefit will be:

- 3 times the Monthly Benefit, not reduced by other income benefits, for which you would have been eligible if you had not died, for the first full month after the month in which you die.


## Eligible Survivor

Payment of Survivor Benefits

An Eligible Survivor is:

- Your legally married spouse at the date of your death.
- If there is no such spouse, your biological or legally adopted child who, when you die:
- is not married; and
- is depending mainly on you for support; and
- is under age 25 . This age limit will not apply if the child is not capable of self-sustaining employment because of mental or physical handicap which existed before age 25 .

The benefit will be paid as soon as the necessary written proof of your death and total disability status is received.

- The benefit will be paid to your eligible surviving spouse, if any. Otherwise, it will be paid in equal shares to your eligible surviving children.

Aetna, in its capacity as the provider of administrative services to this Plan, may pay the benefit to anyone who, in Aetna's opinion, is caring for and supporting the eligible survivor; or, if proper claim is made, to an eligible survivor's legally appointed guardian or committee.

## Assignment of Insurance

Coverage may be assigned only with the consent of Aetna.

## How and When To Report Your LTD Claim

- You are required to submit a claim to Aetna. If Aetna requires that claim forms be submitted, they may be obtained from Aetna. Your claim must give proof of the nature and extent of the loss. Aetna may require copies of documents to support your claim, including data about any other income benefits. You must also provide Aetna with authorizations to allow it to investigate your claim and your eligibility for and the amount of other income benefits.
- You must furnish such true and correct information as Aetna may reasonably request.
- The deadline for filing a claim for benefits is 90 days after the end of the waiting period. If, through no fault of your own, you are unable to meet the deadline for filing a claim, your claim will be accepted if you file as soon as possible; but not later than 1 year after the deadline unless you are legally incapacitated. Otherwise, late claims will not be covered.

Aetna has the right to require proof that:

- you, your spouse, child, or dependent has made application for all other income benefits which you or they are, or may be, eligible to receive relative to your disability and has made a timely appeal of any denial through the highest Administrative level. Timely appeal means making such an appeal as required, but in no case later than 60 days from the latest denial;
- the person has furnished proofs needed to obtain other income benefits;
- the person has not waived any other income benefits without Aetna's written consent; and
- the person has sent copies of documents to Aetna showing the effective dates and the amounts of other income benefits.

Aetna also requires proof:

- of income you receive from any occupation for compensation or profit; and

■ if your income from any such occupation is $80 \%$ or less of your adjusted predisability earnings, proof that you are unable, due to disease or injury, to earn more than $80 \%$ of your adjusted predisability earnings.
In addition to the above, for purposes of Federal Social Security, when a timely application for benefits has been made and denied, a request for reconsideration must be made within 60 days after the denial, unless Aetna states, in writing, that it does not require you to do so. Also, if the reconsideration is denied, an application for a hearing before an Administrative Law Judge must be made within 60 days of that denial unless Aetna relieves you of that obligation.

You do not have to apply for:

- retirement benefits paid only on a reduced basis; or
- disability benefits under group life insurance if they would reduce the amount of group life insurance;
but, if you do apply for and receive these benefits, they will be deemed to be other income benefits for which proof is required.
- If you do not furnish proof of other income benefits, your benefits may be suspended or adjusted by the estimated amount of such other income benefits.


## How Benefits Will Be Paid

- Benefits will be paid to you at the end of each calendar month during the period for which benefits are payable. If a monthly benefit would be less than $\$ 10$, Aetna may make payments less often. They may be made on a quarterly, semi-annual, or annual basis. Benefits for a period less than a month will be prorated. This will be done on the basis of the ratio, to 30 days, of the days of eligibility for benefits during the month.
- Aetna, in its capacity as the provider of administrative services to this Plan, may pay up to $\$ 1,000$ of any benefit to any of your relatives whom it believes fairly entitled to it. This can be done if the benefit is payable to you and you are a minor or unable to give a valid release. It can also be done if a benefit is payable to your estate.


## Examinations and Evaluations

Aetna will have the right and opportunity to examine and evaluate any person who is the basis of any claim at all reasonable times while that claim is pending or payable. This will be done at the Plan's expense.

## Legal Action

- No legal action can be brought to recover under any benefit after 3 years from the deadline for filing claims.
- Aetna will not try to reduce or deny a benefit payment on the grounds that a condition existed before a person's coverage went into effect, if the loss occurs more than 2 years from the date coverage commenced. This will not apply to conditions excluded from coverage on the date of the loss.


## Recovery of Overpayments

If payments are made in amounts greater than the benefits that you are entitled to receive, Aetna, in its capacity as the provider of administrative services to this Plan, has the right to do any one or all of the following:

■ to require you to return the overpayment on request;

- to stop payment of benefits until the overpayment is recovered;
- to take any legal action needed to recover the overpayment; and
- to place a lien, if not prohibited by law, in the amount of the overpayment on the proceeds of any other income, whether on a periodic or lump sum basis.


## Types of Facility

## Hospital

This is an institution that:

- mainly provides, on an inpatient basis, diagnostic and therapeutic facilities for surgical and medical diagnosis, treatment, and care of injured and sick persons; and
- is supervised by a staff of doctors; and
- provides 24 hour a day registered nursing (RN) service; and
- is not mainly a place for rest, for the aged, for drug addicts, for alcoholics, or a nursing home.

An institution which does not provide complete surgical services, but which meets all the other tests listed above, will also be deemed a hospital if:

- it provides services chiefly to patients all of whom have conditions related either by a medical specialty field or a specific disease category; and
- while confined, the patient is under regular therapeutic treatment by a doctor for the injury or disease.


## Treatment Facility

This is an institution (or distinct part thereof) that is for the treatment of alcoholism or drug abuse and which meets fully every one of the following tests:

- It is primarily engaged in providing on a full-time inpatient basis, a program for diagnosis, evaluation, and treatment of alcoholism or drug abuse.
- It provides all medical detoxification services on the premises, 24 hours a day.
- It provides all normal infirmary-level medical services required during the treatment period, whether or not related to the alcoholism or drug abuse, on a 24 -hour daily basis. Also, it provides, or has an agreement with a hospital in the area to provide, any other medical services that may be required during the treatment period.
- On a continuous 24-hour daily basis, it is under the supervision of a staff of doctors, and provides skilled nursing services by licensed nursing personnel under the direction of a full-time registered graduate nurse.
- It prepares and maintains a written individual plan of treatment for each patient based on a diagnostic assessment of the patient's medical, psychological, and social needs with documentation that the plan is under the supervision of a doctor.
- It meets any applicable licensing standards established by the jurisdiction in which it is located.


## Third Party Liability and Subrogation

## General Principle

When you receive disability benefits under the Plan which are related to disabilities for which benefits are payable under Workers' Compensation, any statute, any uninsured or underinsured motorist program, any no fault or school insurance program, any other insurance policy or any other plan of benefits, or when related expenses that arise through an act or omission of another person are paid by a third party, whether through legal action, settlement or for any other reason, you or your dependent shall reimburse the Plan for the related benefits received out of any funds or monies you recover from any third party.

## Specific Requirements and Plan Rights

Because the Plan is entitled to reimbursement, the Plan shall be fully subrogated to any and all rights, recovery or causes of actions or claims that you may have against any third party. The Plan is granted a specific and first right of reimbursement from any payment, amount or recovery from a third party. This right to reimbursement is regardless of the manner in which the recovery is structured or worded, and even if you have not been paid or fully reimbursed for all damages or expenses.
The Plan's share of the recovery shall not be reduced because the full damages or expenses claimed have not been reimbursed unless the Plan agrees in writing to such reduction. Further, the Plan's right to subrogation or reimbursement will not be affected or reduced by the "make whole" doctrine, the "fund" doctrine, the "common fund" doctrine, comparative/contributory negligence, "collateral source" rule, "attorney's fund" doctrine, regulatory diligence or any other equitable defenses that may affect the Plan's right to subrogation or reimbursement.

The Plan may enforce its subrogation or reimbursement rights by requiring you to assert a claim to any of the benefits to which you may
be entitled. The Plan will not pay attorneys fees or costs associated with the claim or lawsuit without express written authorization from the Employer.

If the Plan should become aware that you have received a third party payment, amount or recovery and not reported such amount, the Plan, in its sole discretion, may suspend all further benefits payments related to you or any of your dependents until the reimbursable portion is returned to the Plan or offset against amounts that would otherwise be paid to or on behalf of you.

## Participant Duties and Actions

By participating in the Plan you consent and agree that a constructive trust, lien or an equitable lien by agreement in favor of the Plan exists with regard to any settlement or recovery from a third person or party. In accordance with that constructive trust, lien or equitable lien by agreement, you agree to cooperate with the Plan in reimbursing it for Plan costs and expenses.

Once you have any reason to believe that you may be entitled to recovery from any third party, you must notify the Plan. And, at that time, the you (and your attorney, if applicable) must sign a subrogation/reimbursement agreement that confirms the prior acceptance of the Plan's subrogation rights and the Plan's right to be reimbursed for expenses arising from circumstances that entitle you to any payment, amount or recovery from a third party.
If you fail or refuse to execute the required subrogation/reimbursement agreement, the Plan may deny payment of any benefits to you and any of your dependents until the agreement is signed. Alternatively, if you fail or refuse to execute the required subrogation/reimbursement agreement and the Plan nevertheless pays benefits to or on behalf of you, your acceptance of such benefits shall constitute agreement to the Plan's right to subrogation or reimbursement.

You consent and agree that you shall not assign your rights to settlement or recovery against a third person or party to any other party, including their attorneys, without the Plan's consent. As such, the Plan's reimbursement will not be reduced by attorneys' fees and expenses without express written authorization from the Employer.

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## Life Insurance

## Life Insurance Benefits

American Water helps you provide financial security for your family in the event of your death. You also have coverage in case of a specific accidental injury, or if you die as the result of an accident.
In addition to the coverage provided to you at no cost by American Water, you also have the option of buying supplemental life insurance coverage for you or your eligible dependents.
The following table summarizes the Plan's life insurance benefits:

| Basic | 1.5 times your base pay <br> (maximum benefit $\$ 200,000$ ) |
| :--- | :--- |
| Accidental Death and <br> Dismemberment | 1.5 times your base pay <br> (maximum benefit $\$ 200,000$ ) |
| Voluntary | 1,2, or 3 times your base pay <br> (maximum benefit $\$ 1,000,000)$ |
| Voluntary Dependent | $\$ 20,000$ (spouse) and <br> $\$ 10,000$ per dependent child |

## Eligibility

If you area full-time eligible employee (see "Eligibility" above), you are eligible to participate in American Water Life Insurance Benefit Plans. Your eligibility participation date is the first day of the month, following completion of one full month of continuous service with the Company, provided you are then actively working or would have been able to work had you been scheduled to work that day. If you are on a layoff, on disability, or on leave of absence on your eligibility date, coverage or an increase in coverage will begin on the day you return to active work.

## Basic Life Insurance

Your Company-paid life insurance amount is equal to 1.5 times your base pay, rounded to the next higher $\$ 1,000$. The maximum benefit is $\$ 200,000$.

Your life insurance amount will increase automatically with salary increases. If you are an hourly-paid employee, your life insurance benefit is calculated based on your normally scheduled hours, excluding overtime.

This is an insured plan underwritten by MetLife. The provisions of the Plan will remain effective only while you are covered under the group contract.

## Imputed Income

Federal law requires you to pay income taxes on the value of Company-provided group term life insurance coverage on your life (but not voluntary life insurance) that exceeds $\$ 50,000$. Therefore, you have additional income called "imputed income," and that is included in your annual compensation for income tax withholding and Social Security purposes. You do not actually receive additional income in your paycheck. The imputed income amount is determined by the IRS using age-related rates.

## Accelerated Death Benefits

If you (or your spouse, if enrolled in voluntary dependent coverage) become terminally ill while covered under the Life Insurance program, you may request that MetLife pay an Accelerated Death Benefit.
"Terminally ill" is defined as a person who:

- suffers from an incurable, progressive, and medically recognized disease or condition; and
- to a reasonable medical probability and based on generally accepted protocols, will not survive longer than six (6) months.

You may request an Accelerated Death Benefit on your own behalf or on behalf of your spouse (if enrolled in voluntary dependent coverage) at any time by completing a MetLife Request for Accelerated Death Benefit Form and submitting it to MetLife. The request must include
the statement of a currently licensed United States doctor that you or your spouse is terminally ill.

The doctor's statement must include:

- all medical test results,
- laboratory reports, and
- any other information on which the statement is based, including the generally accepted protocols used by the doctor to determine the person's expected remaining life span.

Your request for an Accelerated Death Benefit must state the amount of the benefit requested. The Plan includes an Accelerated Death Benefit of $50 \%$ of your normal death benefit to you or your spouse in the event of a terminal illness. The Accelerated Death Benefit Minimum is $\$ 5,000$ and the Accelerated Death Benefit Maximum is $\$ 100,000$ of Basic Life Insurance and $\$ 300,000$ of Voluntary Life Insurance.

This benefit can be requested only once on your own behalf and once for your spouse. If someone other than you owns the Life Insurance coverage for you and your spouse, the Accelerated Death Benefit will not be available under this Plan for or on behalf of such person.

Age Reduction Rule

Life Insurance After<br>Termination

Conversion of Your Life
Insurance

Your Life Insurance amount in force on the day before the month of your $70^{\text {th }}$ birthday will be reduced by $35 \%$ at age $70 ; 60 \%$ at age 75 ; and $75 \%$ at age 80 .

If you become insured during or after the month in which you reach the above ages ( 70,75 , or 80 ), your Life Insurance amount will be the applicable percentage of the amount shown for your classification.

In most cases, you may apply for an individual policy under the Conversion Privilege within 31 days after your American Water Life Insurance ceases. If you die during this 31-day period and before the individual policy goes into effect, the amount payable under the group policy is limited to the maximum that could have been converted. The limit applies even if you have not applied for, or paid the first premium on, the individual policy. This applies to Basic and Voluntary life insurance.

If any of your life insurance ceases because your employment ends or you are no longer in a class eligible for that insurance, or because of age, pension, or retirement, you may convert the amount of insurance which ends (or a lesser amount, if desired) to an individual policy. This applies to Basic and Voluntary life insurance.

Your converted policy may be any kind of individual policy then customarily being issued by MetLife for the amount being converted and for your age (nearest birthday) on the date it will be issued, except a term policy or one with disability or other supplementary benefits.

When life insurance ends because that part of the group contract discontinues as to your employee class, and your insurance has been in force under the group contract for at least five years in a row before it was discontinued, you may convert the amount that ends (minus the amount of any group life insurance for which you become eligible within 31 days of discontinuance) to an individual policy. The maximum amount that can be converted by each person in any event is $\$ 10,000$.

## Applying for an Individual Policy

Effect of Prior
Coverage

In order to convert, you must make written application for an individual policy and pay the first premium within 31 days after insurance ends for any of the above reasons. No evidence of insurability (that is, proof of good health) will be required. The individual policy will become effective at the end of the 31-day period during which conversion is possible.
The premiums for the converted policy will be at MetLife's then customary rates for the same policy issued to any other person of the same class of risk and age at the time the converted policy is to become effective.

After an individual policy becomes effective for any person, that policy will be in exchange for all benefits and privileges under the group contract as regards the person involved and the amount that could have been converted.

In most cases, you may apply for an individual policy under the Conversion Privilege within 31 days after your American Water life insurance ceases. If you die during this 31-day period and before the individual policy goes into effect, the amount payable under the group policy is limited to the maximum that could have been converted. The limit applies even if you have not applied for, or paid the first premium on, the individual policy.

If the coverage of any person under any part of this Plan replaces any of the person's prior coverage, the rules below apply to that part.
"Prior coverage" is any plan of group insurance sponsored by American Water that has been replaced by coverage under part or all of this Plan. The replacement can be complete or in part for the Eligible Class to which you belong. Any such plan is prior coverage if provided by another group contract or any benefit section of this Plan.

A person's life insurance under this Plan replaces and supersedes any prior life insurance. It will be in exchange for everything under the prior life insurance. If you or your beneficiary become entitled to a claim under the prior life insurance, your Life Insurance under this Plan will be canceled as of its effective date and any premiums paid for your life insurance under this Plan will be returned to American Water

The mode of settlement you chose and the beneficiary you named under a prior MetLife plan will apply to this Plan. This can be changed according to the terms of this Plan.

## Voluntary Life Insurance

## Voluntary Coverage for You

## Voluntary <br> Coverage for Your Dependents

In addition to Company-paid life insurance, you can buy supplemental life insurance coverage for you or your eligible dependents on an aftertax basis.

You can buy life insurance of one, two, or three times your base pay, up to a maximum benefit of $\$ 1,000,000$. You must be actively at work in order for coverage to take effect.

If you want to buy coverage over $\$ 300,000$ at this initial offering, you will be required to show proof of good health. You will be enrolled in the level that does not exceed $\$ 300,000$ until proof of good health is approved by MetLife. If you do not elect supplemental coverage at the initial offering, proof of good health will be required for any amount of coverage.

Note: You will be required to show proof of good health if you:

- Did not enroll previously for coverage,
- Elect coverage over $\$ 300,000$,
- Elect more than one times your current voluntary supplemental life insurance coverage amount.

If proof of good health is required, your election will be pended until you receive approval from MetLife.

You can also buy supplemental life insurance coverage of $\$ 20,000$ for your spouse and $\$ 10,000$ for each dependent. Eligible dependents include children age 14 days to age 19, or to age 23 if a full-time student.

## Cost

The following table shows the premiums for voluntary supplemental life insurance:

| Voluntary Supplemental Life Insurance Premiums |  |  |  |
| :---: | :---: | :---: | :---: |
| (per $\$ 1,000$ of base pay) |  |  |  |
| Age | Monthly Cost | Age | Monthly Cost |
| Under 30 | $\$ 0.06$ | $50-54$ | $\$ 0.32$ |
| $30-34$ | $\$ 0.08$ | $55-59$ | $\$ 0.59$ |
| $35-39$ | $\$ 0.10$ | $60-64$ | $\$ 0.75$ |
| $40-44$ | $\$ 0.12$ | $65-69$ | $\$ 1.37$ |
| $45-49$ | $\$ 0.19$ | 70 and over | $\$ 2.21$ |

The following table shows the premiums for voluntary spouse and dependent life insurance:

Voluntary Spouse and Dependent Life Insurance Premiums

| Spouse | $\$ 5.00$ per month |
| :--- | :--- |
| Dependent Child(ren) | $\$ 1.20$ per month per family |

## Optional Employee Group Term Life

## Insurance

## Participation

Frozen as of
December 31, 1995

Participation in the current Optional Employee Group Term Life Insurance program was frozen as of December 31, 1995. If you are currently enrolled in either of the two options of this plan, your participation will continue while you remain actively employed. Participants' life insurance amounts will increase as their salary increases, according to the following plan options:

## Option A

$100 \%$ of your Salary Scheduled Amount, up to $\$ 40,000$ of coverage.

## Option B

$50 \%$ of your Salary Scheduled Amount, up to $\$ 20,000$ of coverage.
Employees enrolled in this plan have coverage as indicated in the following chart.

The Basic and Optional Plan will pay a life insurance benefit equal to the amount of life insurance in force for you if you die from any cause while insured. This benefit will end upon retirement or termination, but can be converted to an individual policy.

| Annual Basic Earnings | Insurance |  |
| :---: | :---: | :---: |
|  | Option A <br> $\mathbf{( 1 0 0 \% )}$ | Option B <br> (50\%) |
| $\$ 38,000$ or more | $\$ 40,000$ | $\$ 20,000$ |
| $\$ 35,000$ but less than $\$ 38,000$ | $\$ 38,000$ | $\$ 19,000$ |
| $\$ 32,000$ but less than $\$ 35,000$ | $\$ 35,000$ | $\$ 17,500$ |
| $\$ 29,000$ but less than $\$ 32,000$ | $\$ 32,000$ | $\$ 16,000$ |
| $\$ 26,000$ but less than $\$ 29,000$ | $\$ 29,000$ | $\$ 14,500$ |
| $\$ 22,500$ but less than $\$ 26,000$ | $\$ 26,000$ | $\$ 13,000$ |
| $\$ 19,500$ but less than $\$ 22,500$ | $\$ 23,000$ | $\$ 11,500$ |
| $\$ 16,500$ but less than $\$ 19,500$ | $\$ 20,000$ | $\$ 10,000$ |
| $\$ 13,500$ but less than $\$ 16,500$ | $\$ 17,000$ | $\$ 8,500$ |
| $\$ 10,400$ but less than $\$ 13,500$ | $\$ 14,000$ | $\$ 7,000$ |
| $\$ 7,280$ but less than $\$ 10,400$ | $\$ 10,000$ | $\$ 5,000$ |
| $\$ 5,200$ but less than $\$ 7,280$ | $\$ 7,000$ | $\$ 3,500$ |
| Less than $\$ 5,200$ | $\$ 5,000$ | $\$ 2,500$ |

## Beneficiaries

When you elect to participate in any of these Plans, you need to designate a Beneficiary (or beneficiaries) to receive life insurance benefits if you die.

You may name or change your beneficiary by submitting a Beneficiary Designation Form, which is available from the Benefits Service Center. The naming or any change will take effect on the date the Benefits Center receives your completed Beneficiary Designation Form.

Any amount payable to a beneficiary will be paid to those you name. Unless you state otherwise, if more than one beneficiary is named, they will share on equal terms.

If a named beneficiary dies before you, his or her share will be payable in equal shares to any other named beneficiaries who survive you.

If no named beneficiary survives you or if no beneficiary has been named, payment will be made as follows to those who survive you:

- Your spouse, if any.
- If you have no spouse, in equal shares to your children.
- If you have no spouse or child, to your parents, equally or to the survivor.
- If you have no spouse, child, or parent, in equal shares to your brothers and sisters.
- If none of the above survives, to your executors or administrators.


## Permanent and Total Disability Benefits

For the purposes of a Permanent and Total Disability benefit, you are considered permanently and totally disabled only if:

- An illness or injury stops you from working at:
- your own job, or
- any other job for pay or profit,
and it must continue to prevent you, for life, from working at any reasonable job. A "reasonable job" is any job for pay or profit,
which you are, or may reasonably become, fitted for by education, training, or experience, or

You lose one of these functions:

- the sight of both eyes,
- the use of both hands,
- the use of both feet,
- the use of one hand and one foot.

You must meet all of the following to be eligible for a Permanent and Total Disability benefit:

- Your Life Insurance must be in force when you become permanently and totally disabled.
- You must be under age 60 when you first become permanently and totally disabled.
- You must furnish all proof when requested. MetLife has the right to examine you, at its expense, before approving the proof.

Waiver
If you are under age 60 and you are permanently and totally disabled while insured under the Plan (meaning you can do no work for pay or profit) and you furnish all information, notices, and proof when required, the amount of your life insurance in force on your last day actively at work may be extended during the disability, without payment of premiums and contributions. The duration, nature, and extent of disability determine eligibility for this extension. This insurance benefit reduces to $\$ 10,000$ when you reach age 70.

Any total disability should be reported immediately to American Water for help in determining whether you qualify for this extended insurance and the amount of insurance that may be continued. Refer to the Age Reduction Rule and Conversion Privilege, which may apply to this life insurance amount.
Application for Waiver of Premium should be filed after your $8^{\text {th }}$ month of disability but before the end of the $12^{\text {th }}$ full month of disability. For example, if your first day of absence from work due to disability was February 15, 2006, the application should be filed after October 15, 2006 but before February 14, 2007. Your local HR representative will initiate the process by sending you the application and instructions. You will then be required to forward the completed application and any required documentation to MetLife. Please contact your HR representative if you have any questions or concerns.

## Extended Death

 BenefitIf MetLife receives proof, at its Home Office, that all of the following apply, it will pay your beneficiary, as a Permanent and Total Disability benefit, the amount of life insurance in force on your life when the total disability began:

- Premium payments for your life insurance stop while you are totally disabled by illness or injury, which stops you from working in any reasonable job.
- You die during the uninterrupted continuance of the total disability. Death occurs no later than 12 months after premium payments from American Water cease.
- You would have qualified for the Permanent and Total Disability benefit except that:
- your total disability did not last at least six months, or
- the required proof was not yet received or approved by MetLife.

Written notice of your death must be given to MetLife at its Home Office within 12 months of your death. If it is not given, MetLife will not have to pay this benefit.

When MetLife approves a claim for any benefit under this feature, the benefit will be in full settlement and satisfaction of MetLife's obligations.

If any individual policy has been issued to you under the Conversion Privilege, your rights under this section may be restored. In order to restore those rights, you must give up all such policies without claim, except for the return of the premiums you paid.

## Accidental Death and Dismemberment Coverage (AD\&D)

This plan is an insured plan underwritten by MetLife. The provisions of the Plan will remain effective only while you are covered under the group contract.

Your Company-paid AD\&D Insurance pays 1.5 times your base pay, rounded to the next higher $\$ 1,000$, up to a maximum benefit of $\$ 200,000$ (called the "Principal Sum"). The following must occur for benefits to become payable: while insured, you suffer a bodily injury in an accident and, within 90 days after the accident and as a direct result of the injury:

- You die.
- You lose a hand, at or above the wrist joint.
- You lose a foot, at or above the ankle joint.
- You suffer the irrecoverable and complete loss of sight in the eye.
- Your full Principal Sum is payable if you die. Half your Principal Sum is payable if you lose a hand, foot, or eye. No more than the Principal Sum is payable for all losses which result from one accident. Benefits are paid for losses caused by accidents only.


## No benefits are payable for a loss caused or contributed to by:

- Bodily or mental infirmity.
- Disease, ptomaines, or bacterial infections.
- Medical or surgical treatment.
- Suicide or attempted suicide (sane or insane).

■ Intentionally self-inflicted injury.

- War or any act of war (declared or undeclared).
- Participation in a riot or an attempt or commission of a felony.

These limitations do not apply if the loss is caused by:

- An infection, which results directly from the injury.
- Surgery needed because of the injury.


## Submitting Claims

## For Survivor's Benefits

## For AD\&D

 BenefitsTo receive survivor's benefits under Basic Life Insurance Plan, Optional Employee Group Term Life Plan, or Voluntary Life Insurance Plan, your beneficiary must complete and submit the appropriate Statement of Claim form and provide a certified death certificate to the Benefits Service Center within one year of the death.
If you were totally disabled at the time of your death and American Water was continuing your coverages at no cost to you, your beneficiary may be required to submit proof that total disability was continuous up to the date of your death.

To receive $\mathrm{AD} \& \mathrm{D}$ benefits, you must complete and submit the appropriate Statement of Claim form and provide proof documenting your loss to the Benefits Service Center within 30 days after the loss

occurs. In some cases, you may be requested to undergo an independent medical examination before benefits can be paid.<br>How Benefits Are Paid<br>Approved survivors' and AD\&D benefits are paid in a lump sum.<br>However, other payment options may be available from MetLife. The Benefits Service Center will provide information about optional payment methods when you or your beneficiary are eligible to receive benefits.

## Employee Assistance Program (EAP)

## Employee Assistance Program

The Employee Assistance Program (EAP), run by Carebridge, provides the support you need to deal with the variety of challenges you may face - financial, legal, family, emotional, etc. All EAP services are free and confidential for you and your dependents.

Carebridge also provides a Website www.myliferesource.com, which puts a wealth of resources right at your fingertips. The Universal LifeHelps Library is one of the most extensive resources on the Web with over 1,474 Resource Centers centered on the five major areas of modern life: Myself, My Relationships, My Daily Life Concerns, My Wellness and My Work. In addition, you will have access to legal documents and help finding service providers (e.g., childcare locations). You can visit the new, improved Carebridge Web site at www.myliferesource.com. When visiting for the first time, enter the American Water organization code (HXSBJ) to register for your account.

You don't have to access the Internet to benefit from Carebridge services. You can contact an EAP counselor by phone 24 hours a day, seven days a week at 1-800-437-0911.

## Additional Plan Information

## Additional Plan Information

- Plan Sponsor

American Water Works Company, Inc.
1025 Laurel Oak Road
Voorhees, NJ 08043

- Plan Name - Group Insurance Plan of American Water Works Company, Inc. and Designated Subsidiaries and Affiliates

■ Employer Identification Number - 51-0063696
■ Plan Number - 501

- Effective Date of this Summary Plan Description

January 1, 2006

- Plan Year

January 1 through December 31st

- Type of Plan

Health and Welfare Benefit Plan, providing the following benefits: medical, dental, prescription, vision, disability, life and accident insurance and flexible spending accounts. The medical, dental, prescription, vision and health care spending account are provided under a "group health plan" within the meaning of federal law.

## - Type of Administration

Self-Insured/Administrative Services Contract/Fully Insured

- Plan Administrator

Senior Vice President, Human Resources
American Water
1025 Laurel Oak Road
Voorhees, NJ 08043
(856) 346-8200

- Agent for Service of Legal Process

The Secretary
American Water
1025 Laurel Oak Road
Voorhees, NJ 08043
(856) 346-8200

## - Source of Contributions

Employer and Employee

## - Appeals Administrator

Retirement / Benefits Committee
American Water
1025 Laurel Oak Road
Voorhees, NJ 08043
(856) 346-8200

## Plan Notices

Medicare Part D If you are actively at work at age 65 or older and then you retire and Notice become Medicare-eligible, you must call the Benefits Service Center to request a Notice of Creditable Coverage to avoid the Medicare Part D late enrollment fee.

Medicare Part B The following information comes from http://questions.medicare.gov, Enrollment The Official U.S. Government Site for People with Medicare.
Can I delay Medicare Part B enrollment without paying higher premiums?
Yes. In certain cases, you can delay your Medicare Part B enrollment without having to pay higher premiums. If you didn't take Medicare Part B when you were first eligible because you or your spouse were working and had group health plan coverage through your or your spouse's employer or union, you can sign up for Medicare Part B during a Special Enrollment Period. You can sign up:

- Anytime you are still covered by the employer or union group health plan through your or your spouse's current or active employment, or
- During the 8 months following the month the employer or union group health plan coverage ends or when the employment ends (whichever is first).

If you are disabled and working (or you have coverage from a working family member), the Special Enrollment Period rules also apply.

## Effective date if you sign up during a Special Enrollment Period

If you enroll in Medicare Part B while covered by the group health plan or during the first full month after coverage ends, your Medicare Part B coverage starts on the first day of the month you enroll. You also can delay the start date for Medicare Part B coverage until the first day of any of the following 3 months.

If you enroll during any of the 7 remaining months of the Special Enrollment Period, your Medicare Part B coverage begins the month after you enroll.
Remember: If you do not enroll in Medicare Part B during your Special Enrollment Period, you'll have to wait until the next General Enrollment Period, which is January 1 through March 31 of each year. You may then have to pay a higher Medicare Part B premium because you could have had Medicare Part B and did not take it. Call the Social Security Administration at (800) 772-1213 for more information or to enroll in Medicare. You can visit the Social Security web site at www.socialsecurity.gov.

## Amendment or Termination of the Plan

The Right to
Amend or
Terminate the Plan

American Water reserves the right to amend all or any of our employee benefit plans at any time, without prior notice to participants, including the right to change eligibility criteria or program costs and the right to restrict or eliminate benefits provided. The decision to change or end the plans may be caused by changes in federal or state laws governing benefits, the requirements of the Internal Revenue Code or ERISA, or any other reason.

The authority to make any such changes to the Plan generally rests with the Board of Directors of American Water or its designee, although the Plan Administrator may also change the Plan as required by law or in a manner which will not result in a material cost.

You will be notified if any material changes are made to the Plan or if it is terminated. No amendment, termination, or partial termination of the Plan will affect claims incurred for which items or services have been provided before the date of amendment, termination, or partial termination

## Filing a Claim

The claim-filing procedures for each type of benefit are outlined in the individual sections describing the benefits. In general, you and your eligible dependents or designated beneficiary (when applicable) must file a written claim on the proper form. You can obtain the necessary claim forms from your Benefits Service Center.

## Claim Determination and Appeals Process

The contracts, booklets, and other materials that describe a particular benefit under the Plan will generally contain a specific set of claims and appeals procedures that you must follow to make a claim to receive that particular benefit and/or to appeal a denied claim for that particular benefit. Although these separate claims and appeals procedures will be very similar in most respects, there may be important differences. Because of this, you should follow the specific claims and appeals procedures for a particular benefit very carefully. If the booklets and other materials that describe a particular benefit do not contain a specific set of claims and appeals procedures, the Plan's default procedures as described below will apply. If you have any questions about which set of claims and appeals procedures to follow or any other questions about making a claim, you should contact the Plan Administrator immediately.

For purposes of this section of the SPD describing the Plan's default claims and appeals procedures, the third parties to whom the Plan Administrator has delegated the authority to review and evaluate claims (in the case of the self-insured plans) and the insurance carriers (in the case of the insured plans) shall be referred to as the "Claims Administrator" at the initial claim level and the "Appeals Administrator" at the appeal level.
A request for benefits is a "claim" subject to these procedures only if you or your authorized representative file it in accordance with the Plan's claim filing guidelines. In general, claims must be filed in writing (except urgent care claims, which may be made orally) with the applicable provider. Any claim that does not relate to a specific benefit under the Plan (for example, a general eligibility claim) must be filed with the Plan Administrator at the address set forth in the "Additional Information" section on page 175. A request for prior approval of a benefit or service where prior approval is not required
under the Plan is not a "claim" under these rules. Similarly, a casual inquiry about benefits or the circumstances under which benefits might be paid under the Plan is not a "claim" under these rules, unless it is determined that your inquiry is an attempt to file a claim. If a claim is received but there is not enough information to allow the Claims Administrator to process the claim, you will be given an opportunity to provide the missing information.

If you want to bring a claim for benefits under the Plan, you may designate an authorized representative to act on your behalf as long as you provide written notice of such designation to the Claims Administrator and/or the Appeals Administrator identifying such authorized representative. In the case of a claim for medical benefits involving urgent care, a health care professional with knowledge of your medical condition may act as your authorized representative with or without prior notice.

Claims Not Involving Health Benefits

In the case of a claim not involving health benefits (e.g., Life, AD\&D, LTD, STD and Dependent Care Spending Account), initial claims for benefits under the Plan should be made by you in writing to the Claims Administrator.

## Time Periods for Responding to Initial Claims

If you bring a claim for benefits under the Plan, the Claims
Administrator will respond to you within 90 days ( 45 days for a claim involving disability benefits) after receipt of the claim. For claims not involving disability benefits, if the Claims Administrator determines that an extension is necessary due to matters beyond the control of the Plan, the Claims Administrator will notify you within the initial 90day period that up to an additional 90 days is needed to review your claim. In the case of a claim involving disability benefits, the Claims Administrator will notify you within the initial 45-day period that up to an additional 30 days is needed to review your claim. If the Claims Administrator determines that additional time is necessary to review your claim for disability benefits, the Claims Administrator may notify you of an additional 30-day extension.
Notice and Information Contained in Notice Denying Initial Claim If the Claims Administrator denies your claim (in whole or in part), the Claims Administrator will provide you with written notice of the denial. This notice will include the following:

- Reason for the denial - the specific reason or reasons for the denial;
- Reference to Plan provisions - reference to the specific Plan provisions on which the denial is based;
- Description of additional material - a description of any additional material or information necessary for you to perfect your claim and an explanation as to why such information is necessary;
- Description of any internal rules - in the case of any claim involving disability benefits, a copy of any internal rule, guideline, protocol, or other similar criterion relied upon in making the initial determination or a statement that such a rule, guideline, protocol, or other criterion was relied upon in making the determination and that a copy of such rule will be provided to you free of charge at your request; and
- Description of claims appeals procedures - a description of the Plan's appeals procedures and the time limits applicable for such procedures, including a statement that you are eligible to bring a civil action in Federal court under Section 502 of ERISA to appeal any adverse decision on appeal.


## Appealing a Denied Claim for Benefits

If the Claims Administrator denies your initial claim for benefits, you may appeal the denial by filing a written request with the Appeals Administrator within 60 days ( 180 days in the case of a claim involving disability benefits) after you receive the notice denying your initial claim for benefits. If you decide to appeal a denied claim for benefits, you will be able to submit written comments, documents, records, and other information relating to your claim for benefits (regardless of whether such information was considered in your initial claim for benefits) to the Appeals Administrator for review and consideration. You will also be entitled to receive, upon request and free of charge, access to, and copies of all documents, records, and other information relevant to your appeal.

## Time Periods for Responding to Appealed Claims

If you appeal a denied claim for benefits under the Plan, the Appeals Administrator will respond to you within 60 days ( 45 days in the case of a claim involving disability benefits) after receipt of the claim. If the Appeals Administrator determines that an extension is necessary due to matters beyond the control of the Plan, the Appeals Administrator will notify you within the initial 60-day period (the initial 45-day period in the case of a claim involving disability benefits) that up to an additional 60 days ( 45 days in the case of a claim involving disability benefits) is needed to review your claim.

## Notice and Information Contained in Notice Denying Appeal

If the Appeals Administrator denies your claim (in whole or in part), the Appeals Administrator will provide you with written notice of the denial. This notice will include the following:

- Reason for the denial - the specific reason or reasons for the denial;
- Reference to Plan provisions - reference to the specific Plan provisions on which the denial is based;
- Statement of entitlement to documents - a statement that you are entitled to receive, upon request and free of charge, access to and copies of, all documents, records and other information that is relevant to your claim and/or appeal for benefits;
- Description of any internal rules - in the case of a claim involving disability benefits, a copy of any internal rule, guideline, protocol, or other similar criterion relied upon in making the appeal determination or a statement that such a rule, guideline, protocol, or other criterion was relied upon in making the appeal determination and that a copy of such rule will be provided to you free of charge at your request; and
- Statement of right to bring action - a statement that you are entitled to bring a civil action in Federal court under Section 502 of ERISA to pursue your claim for benefits.

The decision of the Appeals Administrator shall be final and conclusive on all persons claiming benefits under the Plan, subject to applicable law. If you challenge the decision of the Appeals Administrator, a review by a court of law will be limited to the facts, evidence and issues presented during the claims procedure set forth above. The appeal process described herein must be exhausted before you can pursue the claim in Federal court. Facts and evidence that become known to you after having exhausted the appeals procedure may be submitted for reconsideration of the appeal in accordance with the time limits established above. Issues not raised during the appeal will be deemed waived.

Claims Involving Health Benefits

In the case of a claim involving health benefits (e.g., Medical, Dental, Vision, Prescription Drug, Employee Assistance Program, and Health Care Spending Account), initial claims for benefits under the Plan should be made by you in writing to the Claims Administrator.

## Types of Claims

There are several different types of claims that you may bring under the Plan. The Plan's procedures for evaluating claims (for example, the time limits for responding to claims and appeals) depend upon the particular type of claim. The types of claims that you generally may bring under the Plan are as follows:

- Pre-Service Claim - A "pre-service claim" is a claim for a particular benefit under the Plan that is conditioned upon you receiving prior approval in advance of receiving the benefit. A pre-service claim must contain, at a minimum, the name of the individual for whom benefits are being claimed, a specific medical
condition or symptom, and a specific treatment, service or product for which approval is being requested.
- Post-Service Claim - A "post-service claim" is a claim for payment for a particular benefit or for a particular service after the benefit or service has been provided. A post-service claim must contain the information requested on a claim form provided by the applicable provider. Note: Claims under the Health Care Spending Account are always post-service claims.
- Urgent Care Claim - An "urgent care claim" is a claim for benefits or services involving a sudden and urgent need for such benefits or services. A claim will be considered to involve urgent care if the Claims Administrator or a doctor with knowledge of your condition determines that the application of the claims review procedures for non-urgent claims (i) could seriously jeopardize your life or your health, or your ability to regain maximum function, or (ii) in your doctor's opinion, would subject you to severe pain that cannot adequately be managed without the care or treatment that is the subject of the claim.
- Concurrent Care Review Claim - A "concurrent care review claim" is a claim relating to the continuation/reduction of an ongoing course of treatment.


## Time Periods for Responding to Initial Claims

If you bring a claim for benefits under the Plan, the Claims Administrator will respond to your claim within the following time periods:

- Post-Service Claim - In the case of a post-service claim, the Claims Administrator shall respond to you within 30 days after receipt of the claim. If the Claims Administrator determines that an extension is necessary due to matters beyond the control of the Plan, the Claims Administrator will notify you within the initial 30-day period that the Claims Administrator needs up to an additional 15 days to review your claim. If such an extension is necessary because you failed to provide the information necessary to evaluate your claim, the notice of extension will describe the information that you need to provide to the Claims Administrator. You will have no less than 45 days from the date you receive the notice to provide the requested information.
- Pre-Service Claim - In the case of a pre-service claim, the Claims Administrator shall respond to you within 15 days after receipt of the claim. If the Claims Administrator determines that an extension is necessary due to matters beyond the control of the Plan, the Claims Administrator will notify you within the initial 15-day period that the Claims Administrator needs up to an
additional 15 days to review your claim. If such an extension is because you failed to provide the information necessary to evaluate your claim, the notice of extension will describe the information that you need to provide to the Claims Administrator. You will have no less than 45 days from the date you receive the notice to provide the requested information.
■ Urgent Care Claim - In the case of an urgent care claim, the Claims Administrator shall respond to you within 72 hours after receipt of the claim. If the Claims Administrator determines that it needs additional information to review your claim, the Claims Administrator will notify you within 24 hours after receipt of the claim and provide you with a description of the additional information that it needs to evaluate your claim. You will have no less than 48 hours from the time you receive this notice to provide the requested information. Once you provide the requested information, the Claims Administrator will evaluate your claim within 48 hours after the earlier of the Claims Administrator's receipt of the requested information, or the end of the extension period given to you to provide the requested information. There is a special time period for responding to a request to extend an ongoing course of treatment if the request is an urgent care claim. For these types of claims, the Claims Administrator must respond to you within 24 hours after receipt of the claim by the Plan (provided, that you make the claim at least 24 hours prior to the expiration of the ongoing course of treatment).
- Concurrent Care Review Claim - If the Plan has already approved an ongoing course of treatment for you and contemplates reducing or terminating the treatment, the Claims Administrator will notify you sufficiently in advance of the reduction or termination of treatment to allow you to appeal the Claims Administrator's decision and obtain a determination on review before the treatment is reduced or terminated.

Notice and Information Contained in Notice Denying Initial Claim If the Claims Administrator denies your claim (in whole or in part), the Claims Administrator will provide you with written notice of the denial (although initial notice of a denied urgent care claim may be provided to you orally). This notice will include the following:

- Reason for the denial - the specific reason or reasons for the denial;
- Reference to Plan provisions - reference to the specific Plan provisions on which the denial is based;
- Description of additional material - a description of any additional material or information necessary for you to perfect your claim and an explanation as to why such information is necessary;
- Description of any internal rules - a copy of any internal rule, guideline, protocol, or other similar criterion relied upon in making the initial determination or a statement that such a rule, guideline, protocol, or other criterion was relied upon in making the appeal determination and that a copy of such rule will be provided to you free of charge at your request; and
- Description of claims appeals procedures - a description of the Plan's appeals procedures and the time limits applicable for such procedures (such description will include a statement that you are eligible to bring a civil action in Federal court under Section 502 of ERISA to appeal any adverse decision on appeal and a description of any expedited review process for urgent care claims).


## Appealing a Denied Claim for Benefits

If the Claims Administrator denies your initial claim for benefits, you may appeal the denial by filing a written request (or an oral request in the case of an urgent care claim) with the Appeals Administrator within 180 days after you receive the notice denying your initial claim for benefits. If you decide to appeal a denied claim for benefits, you will be able to submit written comments, documents, records, and other information relating to your claim for benefits (regardless of whether such information was considered in your initial claim for benefits) to the Appeals Administrator for review and consideration. You will also be entitled to receive, upon request and free of charge, access to, and copies of, all documents, records, and other information that is relevant to your appeal.

## Time Periods for Responding to Appealed Claims

If you appeal a denied claim for benefits, the Appeals Administrator will respond to your claim within the following time periods:

- Post-Service Claim - In the case of an appeal of a denied postservice claim, the Appeals Administrator shall respond to you within 60 days after receipt of the appeal.
- Pre-Service Claim - In the case of an appeal of a denied pre-service claim, the Appeals Administrator shall respond to you within 30 days after receipt of the appeal.
- Urgent Care Claim - In the case of an appeal of a denied urgent care claim, the Appeals Administrator shall respond to you within 72 hours after receipt of the appeal.
- Concurrent Care Review Claim - In the case of an appeal of a denied concurrent care review claim, the Appeals Administrator shall respond to you before the concurrent or ongoing treatment in question is reduced or terminated.


## Notice and Information Contained in Notice Denying Appeal

If the Appeals Administrator denies your claim (in whole or in part), the Appeals Administrator will provide you with written notice of the denial (although initial notice of a denied urgent care claim may be provided to you orally or via facsimile or other similarly expeditious means of communication). This notice will include the following:

- Reason for the denial - the specific reason or reasons for the denial;
- Reference to Plan provisions - reference to the specific Plan provisions on which the denial is based;
- Statement of entitlement to documents - a statement that you are entitled to receive, upon request and free of charge, access to and copies of, all documents, records and other information that is relevant to your claim and/or appeal for benefits;
- Description of any internal rules - a copy of any internal rule, guideline, protocol, or other similar criterion relied upon in making the appeal determination or a statement that such a rule, guideline, protocol, or other criterion was relied upon in making the appeal determination and that a copy of such rule will be provided to you free of charge at your request; and
- Statement of right to bring action - a statement that you are entitled to bring a civil action in Federal court under Section 502 of ERISA to pursue your claim for benefits.

If the time limitations set forth have not been exceeded, no person may bring an action in a court of law unless the claims review procedure is exhausted and a final determination has been made. The decision of the Appeals Administrator shall be final and conclusive on all persons claiming benefits under the Plan, subject to applicable law. If you challenge the decision of the Appeals Administrator, a review by a court of law will be limited to the facts, evidence and issues presented during the claims procedure set forth above. The appeal process described herein must be exhausted before you can pursue the claim in federal court. Facts and evidence that become known to you after having exhausted the appeals procedure may be submitted for reconsideration of the appeal in accordance with the time limits established above. Issues not raised during the appeal will be deemed waived.

## Your Rights Under ERISA

What Are Your
Rights?

Receive
Information
About Your Plan and Benefits

## Continue Group

Health Plan
Coverage

Prudent Actions by Plan<br>Fiduciaries

The intent of this book is to meet the Summary Plan Description requirements of the Employee Retirement Income Security Act of 1974, as amended (ERISA). However, if there is a conflict between the information contained in the official Plan documents and the information contained in this book, the information in the Plan documents will take precedence.

Under ERISA, you are entitled to:

- Examine, without charge, at the plan administrator's office and at other specified locations, such as worksites and union halls, all documents governing the plan, including insurance contracts and collective bargaining agreements, and a copy of the latest annual report (Form 5500 Series) filed by the plan with the U.S. Department of Labor and available at the Public Disclosure Room of the Employee Benefits Security Administration.
- Obtain, upon written request to the plan administrator, copies of documents governing the operation of the plan, including insurance contracts and collective bargaining agreements, and copies of the latest annual report (Form 5500 Series) and updated summary plan description. The administrator may make a reasonable charge for the copies.
- Receive a summary of the plan's annual financial report. The plan administrator is required by law to furnish each participant with a copy of this summary annual report.
- Continue health care coverage for yourself, spouse, or dependents if there is a loss of coverage under the plan as a result of a qualifying event. You or your dependents may have to pay for such coverage. Review this summary plan description and the documents governing the plan on the rules governing your COBRA continuation coverage rights.

In addition to creating rights for plan participants ERISA imposes duties upon the people who are responsible for the operation of the employee benefit plan. The people who operate your plan, called "fiduciaries" of the plan, have a duty to do so prudently and in the interest of you and other plan participants and beneficiaries. No one, including your employer, or any other person, may fire you or otherwise discriminate against you in any way to prevent you from obtaining a welfare benefit or exercising your rights under ERISA.

Enforce Your
Rights

If your claim for a benefit is denied or ignored, in whole or in part, you have a right to know why this was done, to obtain copies of documents relating to the decision without charge, and to appeal any denial, all within certain time schedules. Under ERISA, there are steps you can take to enforce the above rights. For instance, if you request a copy of plan documents or the latest annual report from the plan and do not receive them within 30 days, you may file suit in a Federal court. In such a case, the court may require the plan administrator to provide the materials and pay you up to $\$ 110$ a day until you receive the materials, unless the materials were not sent because of reasons beyond the control of the administrator.

If you have a claim for benefits that is denied or ignored, in whole or in part, you may file suit in a state or Federal court. In addition, if you disagree with the plan's decision or lack thereof concerning the qualified status of a medical child support order, you may file suit in Federal court. If it should happen that plan fiduciaries misuse the plan's money, or if you are discriminated against for asserting your rights, you may seek assistance from the U.S. Department of Labor, or you may file suit in a Federal court. The court will decide who should pay court costs and legal fees. If you are successful the court may order the person you have sued to pay these costs and fees. If you lose, the court may order you to pay these costs and fees, for example, if it finds your claim is frivolous.

If you have any questions about your plan, you should contact the plan administrator. If you have any questions about this statement or about your rights under ERISA, or if you need assistance in obtaining documents from the plan administrator, you should contact the nearest office of the Employee Benefits Security Administration, U.S. Department of Labor, listed in your telephone directory or the Division of Technical Assistance and Inquiries, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue NW, Washington, D.C. 20210. You may also obtain certain publications about your rights and responsibilities under ERISA by calling the publications hotline of the Employee Benefits Security Administration.

For the purposes of ERISA, all third party administrators and insurance carriers are fiduciaries, with complete authority to review all denied claims for benefits under this program. This includes, but is not limited to, the denial of certification of the medical necessity of hospital or medical treatment.

In exercising its fiduciary responsibility, the American Water Retirement / Benefits Committee shall have discretionary authority to
determine whether and to what extent employees and beneficiaries are entitled to benefits, and to interpret any disputed or doubtful terms of the Plan. American Water Retirement / Benefits committee shall be deemed to have properly exercised such authority unless it acts arbitrarily or capriciously.

## Plan Benefits

These benefits are provided by American Water. The following plans are self-insured benefits that are paid for directly by American Water:

- Standard Preferred Provider Organization (PPO) Plan
- Premium Preferred Provider Organization (PPO) Plan
- Exclusive Provider Organization (EPO) Plan
- Dental Plans
- Vision Plan
- Prescription Drug Program
- Short-Term Disability Plan
- Long-Term Disability Plan
- Health Care Spending Account
- Dependent Care Spending Account

Horizon provides certain administrative services for the Preferred Provider Organization and Flexible Spending Account Plans. Caremark administers the Prescription Drug Program. Aetna provides certain administrative services for the Dental Plans, Short-Term Disability, and Long-Term Disability Plans.
American Water, Horizon, Caremark, Aetna and EyeMed reserve the right to interpret all Plan provisions as necessary and to make all determinations regarding benefits payable under these American Water Employee Benefit Plans.

The following plan is fully insured:

- Life Insurance Plan


## Plan Documents

In preparing this Summary Plan Description, American Water has attempted to avoid complex language and legal terms whenever possible. If a question should ever arise concerning the nature and extent of benefits under any aspect of American Water Group Insurance Plan, the actual legal Plan documents and not this Summary Plan Description, will govern.

## Continuation of Health Coverage

## Introduction This section contains important information about your right to

 COBRA continuation coverage, which is a temporary extension of coverage under the Plan. The right to COBRA continuation coverage was created by a federal law, the Consolidated Omnibus Budget Reconciliation Act of 1985 (COBRA). COBRA continuation coverage can become available to you and to other members of your family who are covered under the Plan when you would otherwise lose your group health coverage. This section generally explains COBRA continuation coverage, when it may become available to you and your family, and what you need to do to protect the right to receive it. For more information about your rights and obligations under the Plan and under federal law, you should contact the Plan Administrator.The Plan Administrator is Senior Vice President Human Resources, American Water, 1025 Laurel Oak Road, Voorhees, NJ 08043, (856) 346-8200. The Plan Administrator is responsible for administering COBRA continuation coverage.

What is COBRA
Continuation
Coverage?

COBRA continuation coverage is a continuation of Plan coverage when coverage would otherwise end because of a life event known as a "qualifying event." Specific qualifying events are listed later in this notice. COBRA continuation coverage must be offered to each person who is a "qualified beneficiary." A qualified beneficiary is someone who will lose coverage under the Plan because of a qualifying event. Depending on the type of qualifying event, employees, spouses of employees, and dependent children of employees may be qualified beneficiaries. Under the Plan, qualified beneficiaries who elect COBRA continuation coverage must pay for COBRA continuation coverage.

If you are an employee, you will become a qualified beneficiary if you will lose your coverage under the Plan because either one of the following qualifying events happens:

- Your hours of employment are reduced, or
- Your employment ends for any reason other than your gross misconduct.

If you are the spouse of an employee, you will become a qualified beneficiary if you will lose your coverage under the Plan because any of the following qualifying events happens:

- Your spouse dies;
- Your spouse's hours of employment are reduced;
- Your spouse's employment ends for any reason other than his or her gross misconduct;

■ Your spouse becomes enrolled in Medicare benefits (Part A, Part B, or both); or

- You become divorced or legally separated from your spouse.

Your dependent children will become qualified beneficiaries if they will lose coverage under the Plan because any of the following qualifying events happens:

- The parent-employee dies;
- The parent-employee's hours of employment are reduced;
- The parent-employee's employment ends for any reason other than his or her gross misconduct;
- The parent-employee becomes enrolled in Medicare benefits (Part A, Part B, or both);
- The parents become divorced or legally separated; or
- The child stops being eligible for coverage under the plan as a "dependent child."

When is COBRA Coverage Available?

The Plan will offer COBRA continuation coverage to qualified beneficiaries only after the Plan Administrator has been notified that a qualifying event has occurred. When the qualifying event is the end of employment or reduction of hours of employment, death of the employee, or the employee's becoming entitled to Medicare benefits (Part A, Part B, or both), the employer must notify the Plan Administrator of the qualifying event.

You Must Give Notice of Some Qualifying Events

How Long Does COBRA

Coverage Last?

For the other qualifying events (divorce or legal separation of the employee and spouse or a dependent child's losing eligibility for coverage as a dependent child), you must notify the Plan Administrator in writing within 60 days after the qualifying event occurs. You must send this notice to the Benefits Service Center, American Water, 131 Woodcrest Road, Cherry Hill, NJ 08003, along with documentation of the event.

COBRA continuation coverage is a temporary extension of coverage. When the qualifying event is the death of the employee, the employee's becoming entitled to Medicare benefits (under Part A, Part B, or both), your divorce or legal separation, or a dependent child's losing eligibility as a dependent child, COBRA continuation coverage lasts for up to a total of 36 months. When the qualifying event is the end of employment or reduction of the employee's hours of employment, and the employee became entitled to Medicare benefits less than 18 months before the qualifying event, COBRA continuation coverage for qualified beneficiaries other than the employee lasts until 36 months after the date of Medicare entitlement. For example, if a covered employee becomes entitled to Medicare 8 months before the date on which his or her employment terminates, COBRA continuation coverage for the spouse and children can last up to 36 months after the date of Medicare entitlement, which is equal to 28 months after the date of the qualifying event ( 36 months minus 8 months). Otherwise, when the qualifying event is the end of employment or reduction of the employee's hours of employment, COBRA continuation coverage generally lasts for only up to a total of 18 months.

There are two ways in which this 18 -month period of COBRA continuation coverage can be extended.

Disability extension of 18 -month period of continuation coverage. If you or anyone in your family covered under the Plan is determined by the Social Security Administration to be disabled and you notify the Plan Administrator in a timely fashion, you and your entire family may be entitled to receive up to an additional 11 months of COBRA continuation coverage, for a total maximum of 29 months. The disability would have to have started at some time before the $60^{\text {th }}$ day of COBRA continuation coverage and must last at least until the end of the 18 -month period of continuation coverage. You must provide the Plan Administrator with notice of the Social Security Administration's determination within 60 days of the latest of (1) the date of the SSA's disability determination; (2) the date of the qualifying event; (3) the date on which the qualified beneficiary would lose coverage under the Plan; or (4) the date you are provided notice of
your COBRA continuation coverage rights. Notice should be sent to the Benefits Service Center, American Water, 131 Woodcrest Road, Cherry Hill, NJ 08003, along with a copy of the determination received from the Social Security Administration.

## Second qualifying event extension of 18 -month period of

continuation coverage. If your spouse or dependent children experience another qualifying event while receiving 18 or 29 months of COBRA continuation coverage, the spouse and dependent children can get up to 36 total months of COBRA continuation coverage, if written notice of the second qualifying event is properly given to the Plan Administrator. This extension is available if the employee or former employee dies, becomes entitled to Medicare benefits (under Part A, Part B, or both), or gets divorced or legally separated, or if the dependent child stops being eligible under the Plan as a dependent child, but only if the event would have caused the spouse or dependent child to lose coverage under the Plan had the first qualifying event not occurred. If the second qualifying event is divorce or legal separation or the dependent child ceasing to be eligible under the Plan, written notice must be sent to the Benefits Service Center, American Water, 1025 Laurel Oak Road, Voorhees, NJ 08043, along with documentation of the second qualifying event.

## How Do You Elect COBRA

 Coverage?How Much Does<br>COBRA

Coverage Cost?

To elect continuation coverage, you must complete an election form supplied by the Plan Administrator within 60 days of the date you receive notice of your COBRA continuation coverage rights. Each qualified beneficiary has a separate right to elect continuation coverage. For example, the employee's spouse may elect continuation coverage even if the employee does not. Continuation coverage may be elected for only one, several, or for all dependent children who are qualified beneficiaries. A parent may elect to continue coverage on behalf of any dependent children. The employee or the employee's spouse can elect continuation coverage on behalf of all of the qualified beneficiaries.

Generally, each qualified beneficiary may be required to pay the entire cost of continuation coverage. The amount a qualified beneficiary may be required to pay may not exceed $102 \%$ (or, in the case of an extension of continuation coverage due to a disability, $150 \%$ ) of the cost to the group health plan (including both employer and employee contributions) for coverage of a similarly situated plan participant or beneficiary who is not receiving continuation coverage. The required payment for each continuation coverage period for each option is described in this notice.

Special Rules for the Health Care Spending Account

COBRA coverage will consist of the Health Care Spending Account coverage in force at the time of the qualifying event (i.e., the elected annual limit reduced by expenses reimbursed up to the time of the qualifying event). The use-it-or-lose-it rule will continue to apply, so any unused amounts will be forfeited at the end of the Plan Year, and COBRA coverage will terminate at the end of the Plan Year. Under the special grace period rule described on page 123, if you make all required COBRA premium payments through December 31, expenses incurred for the period January 1 - March 15 of the following calendar year can be applied against any remaining balance in your Health Care Spending Account. Expenses must be submitted by April 30 of the year following the year in which COBRA coverage commenced.

Unless otherwise elected, all qualified beneficiaries who were covered under the Health Care Spending Account will be covered together for Health Care Spending Account COBRA coverage. However, each qualified beneficiary could alternatively elect separate COBRA coverage to cover that beneficiary only, with a separate Health Care Spending Account annual limit and a separate premium. Informed of Address Changes

## If You Have Questions

Keep Your Plan In order to protect your family's rights, you should keep the Plan Administrator informed of any changes in the addresses of family members. You should also keep a copy, for your records, of any notices you send to the Plan Administrator.

If you have questions about your COBRA continuation coverage, you should contact the Benefits Service Center, 131 Woodcrest Road, Cherry Hill, NJ 08003, (866) 888-8269, or you may contact the nearest Regional or District Office of the U.S. Department of Labor's Employee Benefits Security Administration (EBSA). Addresses and phone numbers of Regional and District EBSA Offices are available through EBSA's website at www.dol.gov/ebsa.

## Conversion

If any coverage (other than Health Care Spending Account coverage) being continued under COBRA terminates because the end of the maximum continuation period has been reached, any Conversion Privilege will be available at the end of that period on the same terms as upon termination of employment or ceasing to be in an Eligible Class.

## Continuation of Coverage During an Approved Leave of Absence Granted to Comply With Federal Law

This continuation of coverage section applies only for the period of any approved family or medical leave (approved FMLA leave) required by the Family and Medical Leave Act of 1993 (FMLA). If American Water grants you an approved FMLA leave for a period in excess of the period required by FMLA, any continuation of coverage during that excess period will be subject to prior written agreement between the appropriate carriers and American Water.

If American Water grants you an approved FMLA leave in accordance with FMLA, you may, during the continuance of such approved FMLA leave, continue any coverage you and your eligible dependents have under the American Water Plan at the time the leave commences.

Non-FMLA leaves, and benefits during such leaves, will be administered in accordance with specific leave policies established by American Water.

At the time you request the leave, you must agree to make any contributions required by American Water to continue coverage. At the time your leave begins, you will be advised on how to make payments. American Water will continue to make its contributions toward such coverage.

If any coverage you are allowed to continue has reduction rules applicable by reason of age or retirement, the coverage will be subject to such rules while you are on FMLA leave.

If you acquire a new dependent while your coverage is continued during an approved FMLA leave, the dependent will be eligible for the continued coverage on the same terms as would be applicable if you were actively at work, not on an approved FMLA leave.

Maximum
Length of Coverage

Coverage will not be continued beyond the first to occur of:

- The date you are required to make any contribution and you fail to do so;
- The date American Water determines your approved FMLA leave is terminated;
- The date the coverage involved discontinues as to your Eligible Class.


# When FMLA <br> Leave Terminates 

## If You Return to Work

Any coverage being continued for a dependent will not be continued beyond the date it would otherwise terminate.

If health care coverage terminates because your approved FMLA leave is deemed terminated by American Water, you may, on the date of such termination, be eligible for Continuation Under Federal Law on the same terms as though your employment terminated, other than for gross misconduct, on such date.

If you return to work for American Water following the date American Water determines the approved FMLA leave is terminated, your coverage under the group contract will be in force as though you had continued in active employment rather than going on an approved FMLA leave, provided you make request for such coverage within 31 days of the date American Water determines the approved FMLA leave to be terminated. If you do not make such request within 31 days, you will not have a chance to re-enroll before the next Open Enrollment period.

## Confidentiality of Protected Health Information

Title II of the Health Insurance Portability and Accountability Act of 1996 and the privacy regulations issued thereunder (collectively called "HIPAA") requires group health plans to protect the confidentiality of your private health information. This Plan will not use or disclose information that is protected by HIPAA ("Protected Health Information") except as necessary for treatment, payment, health care operations, and plan administration functions, or as otherwise permitted or required by law, without your written authorization. According to the law, the Plan has required all of its Business Associates to comply with the HIPAA privacy rules.

Before this Plan may disclose, or permit one of its agents or contractors to disclose, Protected Health Information ("PHI") to the Company, the Plan will require the Company to:

- certify that the information is necessary in connection with plan administration functions or other permitted functions performed or to be performed by the Company;
- amend the Plan documents and provide certification of amendment to give assurances that the Company will use and disclose the
information solely in connection with such plan administration or other permitted functions; and
- not use or further disclose PHI for employment-related actions or decisions or in connection with any other benefit or employee benefit plan of the Company without your authorization.

Under HIPAA, you have certain rights with respect to your PHI, including the right to see and copy the information, to receive an accounting of certain disclosures of the information and, under certain circumstances, to amend the information. You also have the right to file a complaint with the Plan or with the Secretary of the Department of Health and Human Services if you believe your rights under HIPAA have been violated.

## List of Contacts

| American Water Benefit Contacts |  |  |
| :--- | :--- | :---: |
| Carrier | Claims Administrator | Phone |
| Medical | Horizon Blue Cross Blue Shield of New Jersey <br> PO Box 820 <br> Newark, NJ 07101 <br> www.horizonblue.com/nationalaccounts | (800) 355-BLUE (2583) |
| Herizon | Aetna * <br> 1425 Union Meeting Rd. <br> Blue Bell, PA 19422 <br> www.aetna.com |  |
| Aetna | Before enrollment: www.eyemedvisioncare.com |  |
| Vision | After enrollment: www.enrollwitheyemed.com/access | (866) 939-3633 |

## Glossary

## Glossary

The following definitions of certain words and phrases will help you understand the benefits to which the definitions apply. Some definitions which apply only to a specific benefit appear in the benefit section. If a definition appears in a benefit section and also appears in the Glossary, the definition in the benefit section will apply in lieu of the definition in the Glossary.

## Room and Board Charges

Charges made by an institution for room and board and other necessary services and supplies. They must be made regularly at a daily or weekly rate.

## Skilled Nursing/Convalescent Facility

An institution that:

- Is licensed to provide, and does provide, the following on an inpatient basis for persons convalescing from illness or injury:
- professional nursing care by an RN , or by an LPN directed by a full-time RN, and
- physical restoration services to help patients to meet a goal of self-care in daily living activities.
- Provides 24-hour-a-day nursing care by licensed nurses directed by a full-time RN.
- Is supervised full-time by a doctor or RN.
- Keeps a complete medical record on each patient.
- Has a utilization review plan.
- Is not mainly a place for rest, for the aged, for drug addicts, for alcoholics, for mentally retarded persons, for custodial or educational care, or for care of mental disorders.
- Makes charges for services rendered.


## Copay

A fee charged to a person for Covered Medical Expenses, as specified in the applicable Summary of Coverage.

## Course of Treatment

A planned program of services or supplies furnished by a health care provider. The program must be:

- In connection with the diagnosis and treatment of an injury or illness, and


## - Of definite duration.

## Custodial Care

Services and supplies furnished to a person mainly to help him or her in the activities of daily life, including room and board and other institutional care. The person does not have to be disabled. These services and supplies are custodial care without regard to:

- By whom they are prescribed, or
- By whom they are recommended, or
- By whom they are performed.


## Dentist

A legally qualified dentist, or a doctor who is licensed to do the dental work he or she performs.

## Directory

A listing of Network Providers in the Service Area covered under this Plan that is available to all employees covered under the Medical Plans.

## Doctor

A legally qualified, licensed doctor.

## Emergency Care

The first care given in a hospital's emergency room after a sudden and, at the time, unexpected change in a person's physical or mental condition such that:

- Care cannot safely and adequately be provided other than in a hospital, or
- Adequate care is not available at the time and place it is needed.


## Emergency Condition

The sudden and, at that time, unexpected onset of a change in a person's physical or mental condition which, if the procedure or treatment were not performed right away could reasonably be expected to result in:

- Loss of life or limb, or
- Significant impairment to bodily function, or
- Permanent dysfunction of a body part.


## Home Health Care Agency

An agency that:

- Mainly provides skilled nursing and other therapeutic services,
- Is associated with a professional group which makes policy (this group must have at least one doctor and one RN),
- Has full-time supervision by a doctor or RN,
- Keeps complete medical records on each person,
- Has a full-time administrator, and
- Meets licensing standards.


## Home Health Care Plan

A plan that provides for care and treatment of an illness or injury. The care and treatment must be:

- Prescribed in writing by the attending doctor, and
- An alternative to confinement in a hospital or skilled nursing/convalescent facility.


## Hospice Care

Care given to a terminally ill person by or under arrangements with a Hospice Care Agency as part of a Hospice Care Program.

## Hospice Care Agency

An agency or organization which:

- Has Hospice Care available 24 hours a day.
- Meets any licensing or certification standards set forth by the jurisdiction where it is.
- Provides:
- skilled nursing services,
- medical social services,
- psychological and dietary counseling, and
- bereavement counseling for the immediate family.

■ Provides or arranges for other services which include:

- services of a doctor,
- physical or occupational therapy,
- part-time home health aide services which mainly consist of caring for terminally ill persons, and
- inpatient care in a facility when needed for pain control and acute and chronic symptom management.
- Has personnel which include at least:
- one doctor,
- one RN,
- one licensed or certified social worker employed by the Agency, and
- one pastoral or other counselor.
- Establishes policies governing the provision of Hospice Care.
- Assesses the patient's medical and social needs.
- Develops a Hospice Care Program to meet those needs.
- Provides an ongoing quality assurance program. This includes reviews by doctors, other than those who own or direct the Agency.
- Permits all area medical personnel to utilize its services for their patients.
- Keeps a medical record on each patient.
- Utilizes volunteers trained in providing services for non-medical needs.
- Has a full-time administrator.


## Hospice Care Facility

A facility, or a distinct part of one, which:

- Mainly provides inpatient Hospice Care to terminally ill persons.
- Charges its patients.
- Meets any licensing or certification standards set forth by the jurisdiction where it is.
- Keeps a medical record on each patient.
- Provides an ongoing quality assurance program; this includes reviews by doctors other than those who own or direct the facility.
- Is run by a staff of doctors; at least one such doctor must be on call at all times.
- Provides 24-hour-a-day nursing services under the direction of an RN
- Has a full-time administrator.


## Hospice Care Program

A written plan of Hospice Care, which:

- Is established by and reviewed from time to time by:
- a doctor attending the person, and
- appropriate personnel of a Hospice Care Agency.
- Is designed to provide palliative and supportive care to terminally ill persons, and supportive care to their families.
- Includes an assessment of the person's medical and social needs, and a description of the care to be given to meet those needs.


## Hospital

A place that:

- Provides mainly inpatient facilities for the surgical and medical diagnosis, treatment, and care of injured and sick persons.
- Is supervised by a staff of doctors.
- Provides 24 -hour-a-day RN services.
- Is not mainly a place for rest, for the aged, for drug addicts, for alcoholics, or a nursing home
- Makes charges for services rendered.


## In-Network Care

A health care service or supply furnished by a Network Provider.

## LPN

A licensed practical nurse.

## Mental Disorder

An illness commonly understood to be a mental disorder whether or not it has a physiological or organic basis and for which treatment is generally provided by or under the direction of a mental health professional such as a psychiatrist, a psychologist, or a psychiatric social worker. A mental or nervous disorder includes, but is not limited to:

- Alcoholism and drug abuse
- Schizophrenia
- Bipolar disorder
- Pervasive mental developmental disorder (Autism)
- Panic disorder
- Major depressive disorder.
- Psychotic depression

■ Obsessive compulsive disorder

- Mental disorders will not include alcoholism and drug abuse if a separate benefit applies to treatment of alcoholism and drug abuse.


## Necessary

A service or supply furnished by a particular provider is necessary if Horizon determines that it is appropriate for the diagnosis, care, or treatment of the illness or injury involved.

To be appropriate, the service or supply must:

- Be care or treatment, as likely to produce a significant positive outcome as, and no more likely to produce a negative outcome than, any alternative service or supply, both as to the illness or injury involved and the person's overall health condition,
- Be a diagnostic procedure, indicated by the health status of the person and be as likely to result in information that could affect the course of treatment as, and no more likely to produce a negative outcome than, any alternative service or supply, both as to the illness or injury involved and the person's overall health condition, and
- As to diagnosis, care, and treatment be no more costly (taking into account all health expenses incurred in connection with the service or supply) than any alternative service or supply that meets the above tests

In determining whether a service or supply is appropriate under the circumstances, Horizon will take into consideration:

- Information provided on the affected person's health status;
- Reports in peer reviewed medical literature;
- Reports and guidelines published by nationally recognized health care organizations that include supporting scientific data;
- Generally recognized professional standards of safety and effectiveness in the United States for diagnosis, care, or treatment;
- The opinion of health professionals in the generally recognized health specialty involved; and
- Any other relevant information brought to Horizon's attention.

In no event will the following services or supplies be considered to be necessary:

- Those that do not require the technical skills of a medical, mental health, or dental professional;
- Those furnished mainly for the personal comfort or convenience of the person, any person who cares for him or her, any person who is part of his or her family, any health care provider or health care facility;
- Those furnished solely because the person is an inpatient on any day on which the person's illness or injury could safely and adequately be diagnosed or treated while not confined; or
- Those furnished solely because of the setting if the service or supply could safely and adequately be furnished in a doctor's or a dentist's office or other less costly setting.


## Negotiated Charge

The maximum charge a Network Provider has agreed to make as to any service or supply for the purpose of the benefits under this Plan.

## Network Provider

A health care provider that has contracted to furnish services or supplies for a Negotiated Charge, but only if the provider is, with Horizon's consent, included in the Directory as a Network Provider for:

- The service or supply involved, and
- The class of employees of which you are a member.


## Non-Occupational Illness

A non-occupational illness is an illness that does not:

- arise out of (or in the course of) any work for pay or profit, or
- result in any way from an illness that does.

An illness will be deemed to be non-occupational regardless of cause if proof is furnished that the person:

- is covered under any type of Workers' Compensation law, and

■ is not covered for that illness under such law.

## Non-Occupational Injury

A non-occupational injury is an accidental bodily injury that does not:

- Arise out of (or in the course of) any work for pay or profit, or
- Result in any way from an injury, which does.


## Orthodontic Treatment

Any:

- Medical service or supply, or
- Dental service or supply, furnished to prevent or to diagnose or to correct a misalignment:
- Of the teeth, or
- Of the bite, or
- Of the jaws or jaw joint relationship, whether or not for the purpose of relieving pain.

Not included is:

- The installation of a space maintainer, or
- A surgical procedure to correct malocclusion.


## Out-of-Network

A health care service or supply furnished by a health care provider that is not Network.

## Out-of-Network Provider

A health care provider that has not contracted to furnish services or supplies at a Negotiated Charge.

## Reasonable and Customary Charge

Only that part of a charge considered "reasonable" is covered. The reasonable charge for a service or supply is the lower of:

- The provider's usual charge for furnishing it, or
- The charge Horizon determines to be the prevailing charge level made for it in the geographic area where it is furnished.

In determining the reasonable charge for a service or supply that is unusual, not often provided in the area, or provided by only a small number of providers in the area, Horizon may take into account such factors as:

- The complexity of the service or supply,
- The degree of skill needed,
- The type of specialty of the provider,
- The range of services or supplies provided by a facility, and
- The prevailing charge in other areas.


## RN

A registered nurse.

## Semi-Private Rate

The charge for room and board, which an institution applies to the most beds in its semi-private rooms with two or more beds. If there are no such rooms, Horizon will figure the rate. It will be the rate most commonly charged by similar institutions in the same geographic area.

## Service Area

The geographic area in which Network Providers for this Plan are located, as determined by Horizon.

## Terminally III

A medical prognosis of six months or less to live.

## Totally Disabled

"Totally disabled" mean that because of injury or illness:
■ You are unable to engage in your customary occupation and are not working for pay or profit.

- Your dependent is unable to engage in most of the normal activities of a person of like age and sex in good health.
Americar Water
Group Insurawne Plan
Sumunary Plaw Descuiption
For Unuon Employees
Ire Effect as of
Jownuly 1,2006
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## Hatroduchon

Just as American Water provides a comprehensive range of products and services which can be tailored for our customers' individual needs, we provide a flexible, comprehensive benefits package which allows our employees to select the benefins that best meet their needs.
This Summary Plan Description ("SPD") of the Group Insurance Plan of American Water Works Co., Inc. and Its Designared Subsidiaries and Affiliates (the "Plan") supplements the booklets and certificates provided by the various insurance carriers and provides a general description, written in non-lechnical language, of the important provisions of the Plan. There may be other materials (such as an insurance policy or other contractual agreement with a health care or other scrvice provider) that contain more detailed information about Plan benefits. Every effort has been made to ensure that all of these materials contain a consistent description of the Plan's benefits. However, if there is any conflict or inconsistency between these materials, it is the Plan Administrator's responsibility to interpret the conflicting provisions and determine what benefits will be provided under the Plan.

American Water provides this SPD to comply with certain laws and to give you the information you need to use your benefits. Nothing in this booklet is meant to interpret, extend, or change in any way the provisions of this Plan. No one speaking on behalf of the Plan or the Company can alter the terms of the Plan.

## About This Booket

The benefits described in this booklet may vary depending on the terms of your union contract. Please refer to your union contract for details. The benefits described are provided by American Water Works Company, Inc., referred to as American Water throughout this Summary Plan Description.
Please read this Summary Plan Description carefully and refer to it whenever you have questions about the American Water benefits program or the specific coverages that apply to you. If you have questions about these plans, please contact the Benefits Service Center al (866) 888-8269 or email Benefits_Service_Center@amwater.com.
American Water reserves the right to amend or terminate the benefit plans described in this summary at any time. Some of the employees
who participate in this Plan do so under the terms of collective bargaining agreements. The Company takes its obligations under those agreements very seriously and will, as required either by the Company's contractual agreements or by law, negotiate changes to the Plan affecting union members with those unions whose members participate in the Plan.

If a question should ever arise concerning the nature and exteot of benefits under any aspect of these plans, the actual legal plan documents - and not this Summary Plan Description - will govern.

## The Bentefit Prograns

Your American Water benefits have been designed to reward your commitment to provide excellent service and drive business performance. It can add up to a significant part of your toral compensation, giving you added security and peace of mind,
This SPD describes the following employee benefil programs:

- Medical
(Standard and Premium PPOs, EPO, and Opt Out of Coverage)
- Prescription Drug
- Vision
- Dental
- Flexible Spending Accounts
(Health Care and Dependent Care)
- Disability
(STD)
- Life Insurance
(Basic, AD\&D, Supplemental, Spouse and Dependent)
- Employee Assistance Program


## Elgibily

You and your dependents are eligible to participate in the benefits described in this Summary Plan Description if you are an American Water union employee and you are a full-time employee (working not less than 35 hours each week).

You are ineligible to participare in the Plan if you (1) are a part-time employee (working less than 35 hours cach week), (2) are classified as a temporary employee in accordance with the Company's persomel policies and practices, (3) perform services for the Company pursuant to an arrangement with a leasing organization or any other third-party, including but not limited to a "leased employec" within the meaning of section $414(n)$ of the Code, (4) person who is classified as an independent contractor or otherwise as a person who is not treated as an employee for purposes of withholding federal employment taxes, regardless of any contrary govermmental or judicial determination relating to such employment status or tax withholding obligation, or (5) an employee of the Electrical Workers Union, Local 51, Sterling, Illinois. If a leased employee or independent contractor described in the preceding sentence is subsequently reclassified as, or determined to be, an employee by the Internal Revenue Service, any other governmental agency or authority, or a court, or if the Company is required to reclassify such an individual as an employee as a result of such reclassification or determination (including any reclassification by the Company in settlement of any claim or action relating to such individual's employment status), such individual shall not become eligible to become a participant in the Plan by reason of such reclassification or determination.

Your eligibility and participation date depends upon the terms of your union contract. If you are on a layoff, on disability, or on leave of absence on your eligibility date, coverage will begin on the day you return to active work.

Your cligible dependents include:

- Your wife or husband
- Your unmarried children from birth to age 19 who are:
- Fully dependent on you for support
- Not employed full-time and
- Not in the military service

The phrase "live with you in a parent-child relationship" means that the child resides in your home on a permanent basis as the
place of his or her legal residence - even though the child may be away from your home during certain periods of the year (e.g., to attend school).

Adopted children are eligible to participale in an American Water medical plan on the date they are placed for adoption. A child is considered "placed" when you assume and intend to retain a legal obligation for the child's support, in anticipation of adopting the child - regardless of where the child resides.

- Your unmarried children ages 19 to 23, while:
- Fully dependent on you for support
-. Full-time students (attending high school or attending an accredited learning instifurion with at least 12 credits)
- Not employed full-time and
- Not in the military service

The word "clsildren" includes adopted children, foster children, grandeliildren, and stepchildren who meet all of the above criteria, live with you in a parent-child relationship, and must be chaimed as dependents for federal income tax purposes

Dependents camot participate unless you, the employee, also participate. An individual is not eligible as both an employee and a dependent, nor as a dependent of more than one employec.

## Wealth Pun Coveroge for Handicapped Dependent Children

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Coverage for your fully handicapped child may be continued past the maximum age for a dependent child if the child has not been issued a personal medical conversion policy.

Your child is fully handicapped if:

- He or she is unable to earn his or her own living because of mental retardation or a physical handicap which started before the date he or she reaches the maximum age for dependent children, and
- He or she depends chiefly on you for support and maintenance.

Proof that your child is fully handicapped must be submitted to Horizon no later tham 31 days after the date your child reaches the maximum age of 19 , or up to age 23 if attending school full-time.

Coverage will cease on the first to occur of:

- Cessation of the handicap,
- Failure to give proof that the handicap continues,
a Failure to have any required exam,
- Termination of Dependent Coverage for your child for any reason other than reaching the maximum age.
Horizon will have the right to require proof of the continuation of the handicap. Horizon also has the right to examine your child, at its own expense, as often as needed while the handicap continues. An exam will not be required more often than once each year after two years from the date your child reaches the maximum age.


## Special Rules Than Apply to an Alopted Chita


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## An Overview of Kour Options

Eligible employees and their dependents may participate in the Standard Preferred Provider Organization (Standard PPO) Plan, the Premium Preferred Provider Organization (Premium PPO) Plan, or the Exclusive Provider Organization (EPO) Plan.
Medical (or dental/vision) coverage for an adopted child will become effective on the date the child is placed with you for adoption, if you make a written request for coverage within 31 days of his or her placement with your family

Horizon Blue Cross Blue Shicld (Horizon) provides the PPO and EPO plans. Horizon has negotiated special rates with in-network health care providers in the plans to offer you competitive health care. To locate participating network providers, call (800) 810-BLUE (2583) or use the Provider Finder at www.horizonblue.com/nationalaccounts.


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## Standard PPO Plan and Premium PPO Plan

With the Standard PPO and the Premium PPO, you have a choice to make each time you use the plan: whether to receive care from a doctor, hospital, or health care provider that is part of the plan's network, or from any provider outside the network. You will receive a higher level of coverage (i.e., the plan will pay a higher percentage of the cost of service) when you receive carc through the network and your out-of-pocket costs will be lower compared to receiving care outside of the network.
You do not have to select a primary care doctor to coordinate your care (e.g., when you need specialty services). However, it is always a good idea to maintain a relationship with a doctor who knows you and your medical history and who can help you make the right choices about your care.

## What's the Difference?

The Standard PPO and the Premium PPO operate identically. The Standard PPO and Premium PPO differ by the deductible and coinsurance amounts, and by the amounts you pay out of your paycheck for coverage. Detailed descriptions of these plans begin on page 16.

## Exclusive Provider Organization (EPO)

In contras to the PPO plans, the EPO plan offers no out-of-network benefits. What does that mean? In order to receive plan benefits, you must receive care from a doctor, hospital, or health care provider that is part of the plan's network. The EPO includes comprehensive benefits -- you pay a copay and then the plan covers $100 \%$ of the remaining costs --- so at the time of service, you pay a set, flat amount. Similar to the PPO, you do not have to select a primary care doctor to coordinate your care (for example, when you necd specialty services).

## Hawaii

Your medical plan will continue to be administered by HMSA. Please contact the Benefits Service Center for information.

## Listings of Nctwork Providers

To locate providers that participate in the Horizon network, you can call (800) 810-BLUE (2583) or use the Provider Finder at www.horizonblue.com/nationalaccounts.

## Medical Opt-Out of Coverage *

The medical opt-out provisions give you the opportunity not to elect medical coverage.

You have two options for opting out of coverage:

- You may choose not to enroll in medical coverage and receive only dental/vision coverage.
- Dental/vision coverages are bundled and you can elect to purchase this coverage even if you do not enroll in medical. If you elect to receive dental/vision coverage only, you will receive premium dental and your monthly contributions will be deducted from your paycheck on a pre-tax basis.
- You may choose not to enroll in any medical, dental or vision plans at all.
If you choose to opt out of medical, dental and vision coverage for yourself and your dependents, the Company will credit you $\$ 100 \mathrm{per}$ month.


## Please note, to receive the cash credit:

- You must make an election not to enroll in medical/dental/vision to receive the full credit.
- You must have equivalent medical coverage under another medical plan if you elect the Medical Opt-Out Option. Be sure to review the other medical plan's provisions to confirm that this decision is right for you and your famity.
- During the year, if you experience a Change in Status that would allow you to drop your medical coverage, you must provide documentation that you have medical coverage elsewhere. A signed affidavit obtained from the Benctits Service Center can be used as proof. This is not required during open enrollment or if you are a new hire.

If a husband and wife are American Water employees, the Medical Opt-Out Option and Cash Credit is not available.

[^1]
## Plan Comparison Cham

Below is a comparison of benefits for the Standard PPO, the Premium PPO, and the EPO.

| Horizon Medical Plans |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Plan Feature | Standard PPO |  | Premium PPO |  | EPO |
|  | In-nerwork | Ou-of-nenwok | In-nerwork | Otr-of-network | Jn-nemork beneftis only |
| Dcductible (single/family) | \$1.000/\$3,000 | \$1.500/\$4,500 | None | \$200/\$600 | None |
| Coinsurance | 80\% | 60\% | 90\% | 70\% | 100\% |
| Out-of-pocket maximum (singlefamily) | \$3,500/\$10,500 | \$4,000/812,000 | \$1,000/\$3,000 | $\$ 3.000$ per person | None |
| Lifetime maximum benefit | Unlimited |  | Unlimited |  | Unlimited |
| Preventive Care |  |  |  |  |  |
| Routine physical exam | $100 \%$ (up to 5250 per 24 months), well baby to 6 yrs | Nol Covered | $100 \%$ after $\$ 15$ copaly (one every 24 montis). well baby to 6 yrs | Not Covered | $100 \%$ after $\$ 1.5$ copay |
| Immunizations | 100\% | Not Covered | $100 \%$ after $\$ 15$ copay | Not Covered | $100 \%$ after $\$ 15$ copay |
| Routine hearing exam | $100 \%$ (one every 24 months) | Not Covered | $100 \%$ after $\$ 15$ copay | Not Covered | $100 \%$ after S15 copay |
| Routine OB/GYN exam | $100 \%$ (one per calendar year) | Nol Covered | $100 \%$ after $\$ 15$ copay (one per calendar year) | Not Covered | 100\% after $\$ 15$ copay |
| Mammography | $100 \%$ <br> (one baseline between agc 35.39, annual screening age 40 and above) | Nol Covered | $\begin{gathered} 100 \% \text { after } \$ 15 \\ \text { copay } \\ \text { (one baseline } \\ \text { between age } \\ 35-39 \text { annual } \\ \text { screening age } \\ 40 \text { and above) } \\ \hline \end{gathered}$ | Not Covered | $100 \%$ (one baseline between age 35-39, ammal screening age 40 and above) |
| Doctor and Hospital Services |  |  |  |  |  |
| Office visits (primary care and specialist) | $\begin{gathered} 80 \% \\ \text { afler deductible } \end{gathered}$ | $\begin{gathered} 60 \% \\ \text { after deductible } \end{gathered}$ | $100 \%$ aller $\$ 15$ copay | $70 \%$ <br> after deductible | $100 \%$ after $\$ 15$ copay |
| Allergy testing and treatment centers | $\begin{gathered} 80 \% \\ \text { after deductible } \end{gathered}$ | $\begin{gathered} 60 \% \\ \text { after derluctible } \end{gathered}$ | 100\% after $\$ 15$ copay | $\begin{gathered} 70 \% \\ \text { after deductible } \end{gathered}$ | 100\% |


| Horizon Medical Plans |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Plan Feature | Standard PPO |  | Premium PPO |  | EPO |
|  | In-nework | Orr-ofnerwork | In-nerwork | Ont-of-network | m-nemork benefits only |
| Diagnostic x-ray and lab | $80 \%$ <br> after deduclible | $60 \%$ <br> afler deductible | Independent Lab: 100\% Doctur's Office: 100\% after $\$ 15$ copay | $70 \%$ <br> after deductible | 100\% |
| Hospital inpatient services | $80 \%$ after deductible | 60\% after deductible | 90\% | $70 \%$ atter deductible and $\$ 250$ copay per admit | $\begin{gathered} 100 \% \text { after } \\ \$ 100 \text { copay per } \\ \text { admit } \end{gathered}$ |
| Outpatient surgery | $\begin{gathered} 80 \% \\ \text { anter deductible } \end{gathered}$ | after deductible | 100\% | $70 \%$ <br> after deductible | 100\% |
| Outpatient preadmission testing | $80 \%$ <br> after deductible | $60 \%$ <br> after deductible | 100\% | $70 \%$ <br> after deductible | $100 \%$ |
| Ambulance (if medically necessary) | $80 \%$ <br> afler deducible | $\begin{gathered} 80 \% \\ \text { after deduetible } \end{gathered}$ | 90\% | 90\% | 100\% |
| Emergency room | $80 \%$ <br> after deductible | $60 \%$ <br> after deductible | $100 \%$ after $\$ 25$ copay (waived if admitted) | $100 \%$ after $\$ 25$ copay (wajved if adouitred) | $\begin{gathered} 100 \% \text { a fter } \$ 35 \\ \text { copay (waived } \\ \text { if admitted) } \end{gathered}$ |
| Hospital Alternatives |  |  |  |  |  |
| Home health care | $80 \%$ alter deductible (120-visil maximumper calendar year: | 60\% afier deductible (120-visit maximum per calendar year) | 90\% (120-visit maximum per calendar year) | $70 \%$ after derductible ( 120 -visir maximum per calendar year) | 100\% |
| Private duty nursing | $80 \%$ after deductible ( 70 -shift maximum per calendar year) | $80 \%$ after deductible ( 70 -shifi maximum per calendar year) | 90\% <br> (70-shif maximum per calendar year) | $90 \%$ after deductible ( 70 -shift maximum per calendar year) | 100\% |
| Skilled nursing facility | $80 \%$ after deductible (120-day maximum) | 60\% after deductible (120-day maximum) | $90 \%$ (120-day maximum) | $70 \%$ atter deductible (120-day maximuni) | $100 \%$ ( 100 -day maximun! per calendar year) |
| Hospice inpatient | $80 \%$ after deductible (90-day lifelime maximum) | $60 \%$ after deductible $(90$ day lifetime maximum) | 90\% <br> (90-day <br> lifetime maximum) | $70 \%$ <br> after deductible (90-day lifetime maximum) | 100\% |
| Hospice outpatient | $80 \%$ after deduclible $(\$ 5,000$ lifetime maximum) | $60 \%$ <br> after deductible <br> ( $\$ 5,000$ <br> lifetime <br> maximum) | $\begin{gathered} 90 \% \\ (85.000 \\ \text { lifecime } \\ \text { inaximum }) \end{gathered}$ | $70 \%$ <br> after deductible <br> ( $\$ 5.000$ <br> lifetime <br> maximum) | 100\% |
| Durable medical equipment | $\begin{gathered} 80 \% \\ \text { after deductible } \end{gathered}$ | $80 \%$ after deductible | 90\% | 90\% | 100\% |


| Horizon Medical Plans |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Plan Feature | Standard PPO |  | Premium PPO |  | EPO |
|  | In-network | Oli-of-nerwork | In-network | Oll-of-network | In-memork benefits only |
| Short-term rehabilitation (for acute conditions only) | 80\% after deductible (60day maximum per calendar ycar) | 60\% after deductible (60day maximum per calendar ycar) | 90\% (60-day maximum per calendar ycar) | $70 \%$ after deductible (60)day maximum per calendar year) | $100 \%$ <br> (60-day maximumper culendar year) |
| Mental Healih and Chemical Deperdency |  |  |  |  |  |
| Inpatient treatment of mental/nervous conditions | $80 \%$ after deductible (45-day maximum per calendar year) | 60\% after deduclible <br> (45-day maximum per calendar year) | ```90% (45-day maximum per calendar year)``` | $70 \%$ after deductible <br> (45-day maximum per calcudar year). $\$ 250$ copay per confinement | $100 \%$ (30-day <br> maximum per calendar year) |
| Outpatient treatment of mental/nervous conditions | $80 \%$ after deductible (20-visit maximumper calcndar year) | $50 \%$ after deductible <br> (20)-visit maximum per calendar ycar) | $\begin{gathered} 100 \% \text { afier } \$ 20 \\ \text { copay } \\ \text { (20-visit } \\ \text { maximum per } \\ \text { calcodar year) } \end{gathered}$ | $50 \%$ after deductible (20)-visit maximum per calendar ycar) | $100 \%$ afier $\$ 25$ copay (20)-visit maximum per calendar year) |
| Inpatient alcohoVdrug treatment | $80 \%$ after deductible (45day maximum per calendar year 2 courses of treatiment per lifelime) | 60\% after deductible (45day maximum per calendar year. 2 courses of ireatiment per lifelime) | ```90% (45-day maximumper calendar year. 2 courses of treament per lifetime)``` | $70 \%$ afler deductible (45day maximum per calendar year. 2 courses of treament per lifetine), $\$ 250$ copay/ confinement | $\begin{gathered} 100 \% \\ (30 \text {-day } \\ \text { maximum per } \\ \text { calendar year; } \\ 90 \text {-day } \\ \text { lifetime }) \end{gathered}$ |
| Outpatient alcohol/drag treatment | $80^{1 \%}$ after deductible (20-visit maximum per calendar year) | $50 \%$ afier deducrible (20)-visil maximum per calendar ycar) | $100 \%$ after $\$ 20$ <br> copay <br> (20)-visit <br> maximury per <br> calendar year) | $50 \%$ after deductible (20-visit maximum por calendar year) | $100 \%$ for first rrament; the lesser of $\$ 25$ copay or $50 \%$ covered second and subsequent ircaunent courses (60-visil maximum per calendar year: 120 -visil lifctime maximun) |


| Horizon Medical Plans |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Plan Feature | Standard PPO |  | Premiam PPO |  | EPO |
|  | In-nemort | Oll-of-nerwork | In-network | Ollr-of-network | In-network benejits only: |
| Prescription drugs (participant coinsurance or copay) |  |  |  |  |  |
| Retail: <br> - Generic <br> - Preferred brand <br> - Non-preferred brand |  |  |  |  | $\begin{aligned} & 10 \% \\ & 20 \% \\ & 20 \% \end{aligned}$ |
| Mail order: <br> - Gencric <br> - Preferred brand <br> - Non-preferred brand |  | opay |  | $\begin{aligned} & \text { opay } \\ & \text { opay } \\ & \text { opay } \end{aligned}$ | $\$ 14$ copay <br> $\$ 30$ copay <br> $\$ 70$ copay |

This chan is only a highlight of the medical option features, and cernin limiss may apply io some features Out of network benetits may be subject to Reasonable and Customary ( $R \& C$ ) limils and you may be responsible for nonnetwork provider charges in excess of R\&C Simits in addition to a coinsurance. All maximums ure combined for mental health and chemical dependency expenses. Menal health and chemical dependency amounts do not apply 10 your out-offpocket maximum Official Plan doeuments govern in the event of any inconsistency between the provisions shown here and in de Plan documents.

## Eavolling For Medical Coverage

Whan mut cmoll nt a Hxituat plait wat ane
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The Benefits Service Center will conduct a benefits orientation with newly hired employees to review benefits and explain the enrollment process.

When enrolling in medical coverage, you will need to complete an American Water Benefit Enrollment Form if you want to participate in either:

- The Standard Preferred Provider Organization Plan
n The Premium Preferred Provider Organization Plan
a The Exclusive Provider Organization Plan
- Premium Dental/Vision Only
- The Medical Opt-Out Option and Cash Credii (if applicable)

If you are a newly hired eligible employee (see "Eligibility" above) and you want to emroll you and your dependent(s) in a medical plan, you must retum your completed enrollment form to the Benefits Service Center before your Benefits Eligibility Date. Your Benefits Eligibility Date will be in accordance with the terms of your union contract.

Unless you are taking the Opt-Out Option, you must include the following documentation along with your enrollment form:

- a copy of your birth certificate and your dependent(s) birth certificate(s); and
- a copy of your marriage certificate, if applicable.

If you do not submit the completed form and required documentation, you will not be enrolled in Medical and Dental/Vision Plans or the Opt-Out Option, if applicable; and you will not receive the $\$ 100$ optout credit per month. In addition, you will not be able to enroll in a medical plan until the next Open Enrollment period unless you have a Change in Status or a Special Enrollment Period.

The annual Open Enrollment Period is an important opportunity to review your coverage levels and make changes to meet your benefit needs for the next Plan Year.
Coverage levels are defined as "Single" or "Family." Family is defined as yourself, your spouse, and any eligible dependents.

All plans provide reasonable access to primary care, specialists, and network hospitals. The standard for distance from an Employee's home to a provider who is accepting new patients is set forth in the following chart, although the actual distance may be greater in some cases:

|  | Urban Area | Rural Area |
| :--- | :---: | :---: |
| Adult Doctor <br> (inchudes Family Practice and <br> General Internal Medicine) | 3 doctors in 8 miles | 2 doctors in 12 miles |
| Pediatrician | 2 doctors in 8 miles | 2 doctors in 12 miles |
| OB/GYN | 2 doctors in 8 miles | 2 doctors in 12 miles |
| Hospital | 1 hospital <br> within 10 miles | 1 hospital <br> within 15 miles |

## Changes in Status

You may enroll in a Plan as a new bire or during the annual Open Eurollment period. However, if you or your family experience a Change in Status (as described below), you may enroll or add or drop dependents during the Plan Year on account of, and consistent with, the Change in Status. You must contact the Benefits Service Center to notify them of your Change in Status within 31 days after the change has occurred. A new benefit form must be completed.
Note: A Change in Status does nor allow you to change your current medical plan option (for example, switch from the Standard PPO to the Premium PPO) unless the change also entitles you to a special enrollment period described below.
The following events are changes in status:
tw Marriage, death of spouse, divorce, legal separation, or amulment;
a A child qualifies as a dependent;

- Birth, adoption, placement for adoption, or death of a dependent;
- Termination or commencement of employment by you, your spouse or dependent;
- Reduction or increase in hours of cmployment by you, your spouse or dependent, including a switch between part-time and full-time, strike or lockout, or taking or retuming from an unpaid leave:
- Dependent no longer qualifies because of age, student status, or marniage;
- Change in residence or worksite of you, your spouse or dependent:
- If your spouse's employer holds open enrollment at a time other Ihan American Water;
- You became disabled;
- Coverage changes, such as a change in coverage under a spouse's plan.
You can also enroll or add or drop dependents during the Plan Year if a judgment, decree, or order resulting from divorce, legal separation, annulment or change in custody requires health coverage for your dependent or dependent foster child or if you or a dependent become entitled (or cease to be entitled) to Medicare or Medicaid.


## Special Enrollment Rights

If you decline enrollment for yourself or your dependents (including your spouse) because of other health insurance or group health plan coverage, you may be able to enroll yourself and your dependents in this Plan if you or your dependents lose eligibility for that other coverage (or if the employcr stops contributing towards your or your dependents' other coverage). However, you must tequest enrollment within 31 days after your or your dependents' other coverage ends (or after the employer stops contributing toward the other coverage).

A newborn child, an adopted child, or a child placed with you for adoption is automatically covered for the first 31 days of life, the date the child was adopted, or the date the child was placed for adoption. To conlinue coverage for a newborn beyond 31 days, you must enroll within 31 days of the birth. To continue coverage for an adopted child or a child placed with you for adoption beyond 31 days, you must enroll within 3I days of the adoption or placement.
In addition, if you have a new dependent as a result of martiage, you may be able to enroll yourself and your dependents. Howcver, you must request enrollment within 31 days after the marriage.
To request special enrollment or obtain more information, contact the Benefits Service Center.
Note: Certain events could result in an immediate loss of eligibility for dependents: if you get divorced or legally separated; if your dependent child marries; or if your dependent child reaches age 19 (age 23, if a full-time student) or graduates from college beforc age 23.

## The Preferred Provider Drganawation Plaws <br> (Shandorland Premimon)

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The Preferred Provider Organization (PPO) Plans are self-insured by American Water. A plan is considered to be "self-insured" when a company uses its own funds to pay claims. Horizon provides certain administrative and claim payment services under the Plans, but does not guarantee benefit payments. The PPO Plans emphasize preventive care and protects you from the cost of illness and serious injury while providing you with access to a high level of benefits.

If you want to receive the advantages of the PPO Plans, you should select a doctor within Horizon's network. As you may know, Horizon maintains a nationally recognized health care provider network. In fact, most providers and hospitals cuirently used by our employees are members of the Horizon network. If you cover any college-age dependents, we anticipate that they will have access to network doctors when they are away at school. To learn which doctors are in the network, call Horizon at (800) 810-BLUE (2583) or use the Provider Finder at www.horizonblue.com/nationalaccounts.

You do not have to coordinate your care through a primary care physician ( PCP ) to receive a high level of benefits. In addition, you do not need to obtain a refertal from your PCP in order to see a specialist. However, it's a good idea to see a PCP first to make sure you are getting appropriate care.

If you obtain care from an out-of-network doctor, the Plan may pay a lower level of benefits and some services (such as preventive care services) are not covered at all.

## How the Preferred Provider Organtantion Plozes Work

With the PPO Plans, you do not need to select a PCP before you receive medical care, nor do you need to obtain refertals to see a specialist. However, when you need care, you should choose a doctor from a "network" of health care providers to receive the highest level of benefits under the Plan.

You can select a network provider from among those listed on Horizon's website at www.horizonblue.com/national accounts or by calling Horizon at (800) 810 -BLUE (2583).

IF YOU CHOOSE A PROVIDER IN THE NETWORK, you receive a higher level of reimbursement for your medical expenses than you would receive if you chose a provider outside the network

- You do not have to meet an annual deductible with the Premium PPO if you use an in-network provider (the Standard PPO does have an annual deductible for in-network providers).
- Your in-network healthcare providers file all your claims.
- Your in-network doctor initiates all required precertification.
- You will not experience any reduction in benefits under the "reasonable and customary" rule because health care providers in the network are allowed to charge only the special rates that Horizon has negotiated with them. (See the Glossary for a definition of "reasonable and customary charge.")
Under the PPOs, you may receive care from any provider you choose. IF THE PROVIDER IS OUTSIDE THE NETWORK:
- You will have to meet an annual deductible with both the Sandard and Premium PPOs,
- Your level of benefits reimbursable will be lower.
- You will have to file your own claims,
- You will need to initiate precertification for inpatient hospitalization and certain outpatient procedures, and
- You will have to pay any expenses in excess of the "reasonable and customary charges" on which Plan payment is based, in addition to the applicable coinsurance amount.


## Wher Wou Noed a Specialist

If you need specialized care, you do not need a referral. Renember, in order to receive the highest level of bencfits, you must use a specialist who belongs to the network.
If you need medical services or treatment that is not available within the PPO network, your doctor may recommend a specialist who does not belong to the network. In this case, your doctor nust obtain
precertification from Horizon and you will receive the higher level of benelits.

## Coverage for Dependents tho Live Ontside the Nework Area


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The PPO options have special provisions to meet the needs of your covered dependents who live outside the network area. In general, when selecting doctors for your out-of-area children, consider these guidelines:

- If your child is away at school, you should select a doctor from the area where you live and arrange for routine care during school breaks. If your child needs medical care during the school year, he or she should visit the school infirmary and find in-metwork doctors or hospitals on the website. Benefits will be paid at the innetwork level.
- If your child lives permanently outside the network area (with another parent or stepparent, for example) your child may visit any doctor in the local area and benefits will be paid at the out-ofnetwork level. If you are enrolled in a PPO and a PPO network is available in that area, your child may select a doctor from the local network and receive the higher level of benefits. To locate providers in the Horizon network, call (800) 810-BLUE (2583) or use the Provider Finder at www.horizonblue.com/nationalaccounts.
- There is no coverage for Routine Physical Exams, Routine Eye Exams, and Routine Hearing Exams.


## Coveruge When Won Are Traveling

You should call Horizon Member Services at (800) 355 BLUE (2583) for a list of participating doctors and hospitals to receive the highest level of benefits.


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Procedures
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## In Case of Envergency

Lu case of emergency, get the care you need from the nearest health care facility or doctor. A medical emergency is defined as "a sudden and unexpected life-threatening medical condition that requires immediate medical or surgical care in order to prevent death or a severe hcalth crisis." Examples include convulsions, excessive bleeding, serious burns, and suspected heart attack.

You will be paid at the Plan's higher benefil level for emergency care - 24 hours a day, 365 days a year - whether you are at home or away. When you need emergency care, it's important to seek immediate care at the nearest appropriate facility.

When a covered person is confined as a full-time inpatient as the result of an emergency admission, you, the person's doctor, or the hospital must call Horizon Member Services to request certification within 48 hours of the statt of the confinement. If the call cannot be made within 48 hours, the call must be made as soon as reasonably possible. The 48 -lour requirement is extended to 72 hours when the confinement starts on a Friday or Sarurday.

## Precentincathon

Precertification is an important feature of the PPO Plans. In order for you to receive the highest level of benefits available, you, the network hospital, or your doctor must notify Horizon to precertify any hospital admission and certain outpatient surgical procedures, treatments, and tests. The purpose of this process is to review the medical necessity of a procedure and to approve an appropriate length of stay.

If you elect to get care from an out-of-network provider you will have to initiate the precertification process yourself.

Precertification is required for:

- All hospital and skilled nursing/convalescent facility admissions;
- Home health care, hospice care, and skilled nursing care;
- Inpatient treatment for substance abuse and mental disorders.

Call Horizon for all other procedures.

How to Request Precertification for a Medical Procedure or Admission

To request precertification of an admission or procedure, call the precertification relephone number listed on your ID card, or call Horizon Member Services, toll-free, at (800) 355-BLUE (2583) to be directed to the Patient Managernent sitc for your area.

To request precertification of an out-of-network admission or procedure, just call the precertification telephone number listed on your ID card or Horizon Member Services, toll-free, at (800) 355BLUE (2583). You should call at least 14 days before any scheduled admission or ouppatient procedure, or as soon as you are aware you need medical care. In case of emergency, you or a family member should contact Horizon Member Services within 48 hours after the admission or procedure.

When you call, you will speak to a Medical Consultanı who will ask you:

- Your name and Identification number,
- The relationship of the patient to you,
- The type of surgical procedure or test you need,
a. The name and telephone number of your doctor, and

When the procedure is scheduled.
The Medical Consultant will review the medical necessity of the proposed inpatiem admission, the proposed surgical procedures and treatments, or the proposed inpatient treatment for substance abuse and mental disorders. He or she will compare information about your case with generally accepted medical standards.

Mental Health and Substance Abuse admissions are precertified by Magcllan at (800) 224-1233.

If the proposed inpatient admission or treatment is medically necessary in accordance with such standards, it will be certified by the Medical Consultant. On the other hand, if other treatment is more appropriate. alternative treatment settings may be suggested. See page 37 for more information regarding precertification.

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If you do not call to precertify a hospital admission or any of the procedures or tests listed, you will have to pay a separate $\$ 150$ penally charge, in addjtion to your deductible, before benefits are paid for covered services. This penalty charge will not be applied toward your deductible or your out-of-pocket limit.

If your hospital stay is longer than the approved period, you must notify Horizon Member Services as soon as you are aware your stay must be extended. The Medical Consultant can then work with your doctor to extend the certification of your hospital stay.

## Your Share of Medical Expenses

American Water Medical Plans have been carefully designed to provide quality care and the most value for each dollar spent by you and the Company. Here is how we share the costs of these valuable benctits.

A deductible is the amount you must pay before the Plan begins to pay benefits for covered expenses. All deductibles are calculated on an annual basis and must be met every year. Copayments do not count toward meeting the annual deductibles.

## - Single Deductible Limit (per calendar year)

- \$1,000 (Standard PPO, in-network)
- $\$ 1,500$ (Standard PPO, out-of-network)
- $\$ 200$ (Premium PPO, out-of network only; no deductible for in-network)
This Calendar Year Deductible applies to all expenses incurred for Out-of-Network and for care for dependents who live permanently outside the Network.


## - Family Deductible Limit (per calendar year) must be met by expenses of more than one family member

- \$3,000 (Standard PPO, in-network)
- $\$ 4,500$ (Standard PPO, out-of-network)
- $\$ 600$ (Premium PPO, out-of network only; no deductible for in-network)

This Calendar Year Deductible applies to all expenses incurred for Out-of-Network and for care for dependents who live permanently outside the Network,

In Network and Out of Network deductibles are separate deductibles.
Under the Premium PPO, there is a separate $\$ 250$ copayment for each confinement in an out-of-network hospital. This is a separate amount you pay for each hospital confinement. The Inpatient Hospital Copay will be applied only once to ench hospital confinement, regardless of cause, which is separated by less than 10 days from another confinement.

Expenses used to meer the Inpatient Hospiral Copay cannot be used to meet any other applicable deductible. Expenses used to meet any other applicable deductible cannot be used to meet the Inpatient Hospital Copay.

## - Inpatient Hospital Copay

- $\$ 250$ per confinement (Premium PPO, out-of network only)

This Inpatient Hospital Copay applies to Inpatient Hospital Confinements, including Inpatient Alcoholism, Drug Abuse, and Mental Disorder confinements incurted for Out-of-Network and for care for dependents who live permanently outside the Network.
However, for a confinement of a well newborn child thar starts on the day of birth, the Inpatient Ilospital Copay will not exceed the hospital's actual charge for room and board for the first day of confinement on which the child's coverage is in force. To maintain continuous coverage on the newborn, you must add him or her to the Plan as a dependent within 3) days of bixth.

## - Emergency Room Copay

- $\$ 25$ (Premium PPO, in- network and out-of network; waived if admitted)

This separate Emergency Room Copay must be paid for cach visit to a hospital's emergency room for emergency care. This copay will be waived if the person is admitted to the hospital as an inpatient immediately following the emergency room visit.

The Emergency Room Copay also applics to Hospital Expenses incurred for emergency care provided by an Out-of-Network Provider and for care for dependents who live permanently outside the Network.

Note: Standard PPO benefits are different than the PPO Benefits (see the chart which begins on page 8 ).

## Coinsurance

Out-6h-Pocket limiss

After you meet the applicable annual deductible, you and American Water share the remaining expenses through coinsurance.
If you use network doctors, hospitals or hospital alternatives, the plan generally pays as follows (although there may be other limits, such as limits on the number of treatments or visits):

|  | Plan Pay's | You Pay | Up to Annual Out-of-Pocket Limit <br> (singl/family) |
| :--- | :---: | :---: | :---: |
| Standard PPO | $\$ 0 \%$ | $\frac{20 \%}{10 \%}$ | $\$ 3.500 / \$ 10,500$ |
| Premium PPO | $90 \%$ | $\$ 1,000 / \$ 3,000$ |  |

If you use out-of-network doctors, hospitals or hospital alematives, the plan generally pays as follows (although there may be other limits. such as limits on the number of treatments or visits):

|  | PIan Pays | You Pay | Up to Annual Out-of-Pocket Limit <br> (single/family) |
| :--- | :---: | :---: | :---: |
| Standard PPO | $60 \%$ | $40 \%$ | $\$ 4,000 / \$ 12,000$ |
| Premium PPO | $70 \%$ | $30 \%$ | $\$ 3,000$ per person |

Your in-network coinsurance amounts do not count toward your out-of-network deductible and coinsurance limits.

There is a limit to your share of medical expenses each calendar year, called the "out-of-pocket" limit. Your coinsurance amounts count toward these out-of-pocket limits, but copayments, deductibles and amounts you are required to pay to out-of-network providers in excess of the reasonable and customary charge do not count.

- Out-of-Pocket Limits (single/family)
- $\$ 3,500 / \$ 10,500$ (Standard PPO, in-network)
- \$4,000/\$12.000 (Standard PPO, out-of-network)
- $\$ 1,000 / \$ 3,000$ (Premium PPO, in-network)
- $\$ 3,000$ per person (Premium PPO, out-of-network)

If you reach your out-of-pocket limit during a calendar year, your covered expenses will be paid at $100 \%$ for the remainder of that year (in-network) and at $100 \%$ of reasonable and customary charges (out-of-network). If you do nor reach your out-of-pocket limit, you must start accumulating expenses again in Jamuary.

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| Masmum Bemefit | Lifetime Maximum Benefit for you and each covered member of your family. |
| EOHE <br> Contributions | You pay your share of the cost for your benefits each pay cycle through convenient pre-tox payroll deductions. Pre-tax means that your contributions are withheld before federal (and in most cases, state (other than New Jersey) and local) income and FICA (Social Security) taxes are withheld. This reduces your taxable income and the amount of tax you pay. As a result, you have more take-home pay. Because your pre-tax contributions are not subject to FICA taxes, your Social Security benetit at retirement may be slighty reduced if your earnings are under the Social Security Taxable Wage Base ( $\$ 94,200$ for 2006; $\$ 97,500$ for 2007). However, the loss in future retirement benefits should be more than offset by the current tax savings under the Plan. |

## Benefis Pryable

However, any expense not determined to be a covered expense, as well as mental health and chemical dependency charges and precertification penalties, do not count toward your out-of-pocket limit.

Both the Standard and Premium PPO Plans provide an unlimited Lifetime Maximum Benefit for you and each covered member of your family.

You pay your share of the cost for your benefits each pay cycle through convenient pre-tox payroll deductions. Pre-tax means that your contributions are withheld before federal (and in most cases, state (other than New Jersey) and local) income and FICA (Social Security) taxes are withheld. This reduces your taxable incorne and the amount of tax you pay. As a result, you have more take-home pay. Because your pre-tax contributions are not subject to FICA taxes, your Social Security benefit at refirement may be slighty reduced if your earnings are under the Social Sccurity Taxable Wage Base ( $\$ 94,200$ for 2006; should be more than offset by the current tax savings under the Plan.

After any applicable deductible or copay amount, the Plan pays benefits at the Payment Percentage which applies to the type of Covered Medical Expense, except for any different benefil levels described elsewhere in this Summary Plan Description. If an expense is covered as one type of Covered Medical Expense, it cannot be covered as any other type.

## Benefit Maxmmens

All maximums included in this Plan are combined maximums herween Network and Out-of-Network, where applicable, unless specifically stated otherwise.
The following limitations apply to some of the benefits under the PPO Plans:

- Private Duty Nursing Care

70 shifts per calendar year

- Home Health Care

120 visits per calendar year
(a "visit" is considered to be four hours or less in duration)

- Skilled Nursing/Convalescent Facility

120 days per calendar year

- Hospice Care

Inpatient- 90-day lifetime maximum
Outpatient- $\$ 5,000$ lifetime maximum

- Short-Term Rehabilitation

60 days per calendar year

## - Private Room Limit

The institution`s semi-private rate

## Covered Expenses

Inpatent Hospital Care
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## Ouppatient

Hospital Care

## Shilled Nursing

Combatesem Facility

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The Plan covers charges made by a hospital for room (semi-private only), board, and other hospital services and supplies for a person who is confined as a full-time inpatient for the treatment of an injury or illness.

The Plan covers charges made by a hospital for services and supplies for a person who is not confined as a full-time inpatient.

The Plan covers charges made by a skilled nursing/convalescent facility for the following services and supplies furnished to a person while confined to convalesce fiom an illness or injury.

- Room aod Board. This includes charges for services such as general nursing care made in connection with room occupancy. Charges for daily room and board in a private room over the Private Room Limit are not covered.
- Use of special treatment rooms

Home Meallh Care



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- X-ray and lab work
- Physical, occupational, or speech therapy
- Oxygen and other gas therapy
if Other medical services usually given by a skilled vursing/coovalescont facility, excluding private or special nursing, or doctors' services
- Medical supplies

The Plan does not cover skilled nursing/convalescent facility charges made for treatment of:

- Drug addiction
- Chronic brain syndrome

4 Alcoholism

- Senility
a Mental reiardation
(1) Any other mental disorder

Home health care expenses are covered if:

- The charge is made by a home health care agency;
- The care is given under a home healih care plan; and
- The care is given to a person in his or her bome.

Home health care expenses are charges for:

- Part-time or intermittent care by an RN , or by an LPN if an RN is not available;
- Part-time or intermittent home health aide services for patient care;
* Physical, occupational, and speech therapy;
- Expenses covered to the extent they would have been covered under this Plan if the person had been confined in a hospital or skilled nursing/convalescent facility:
- medical supplies, drugs, and medicines prescribed by a doctor, and
- lab services provided by or for a home healih care agency.

The Plan covers a maximum of 120 home health care visits in a calendar year. Each visit by a nurse or therapist is one visit. Each visit of up to 4 hours by a home health aide is one visit.

## The Plan does not cover charges made for:

- Services or supplies that are not a part of the home health care plan,
- Services of a person who usually lives with you or is a member of your or your spouse's family,
- Services of a social worker,
- Transportation.


## Routine Physical Exams

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Covered Medical Expenses include charges made by your doctor for a routine physical exam given to you, your spouse, or your dependent child.

A routine physical exam is a medical exam given by a doctor for a reason other than to diagnose or treat a suspected or identified injury or illness. Included are:

- X-rays and laboratory and other tests given in connection with the exam, and
- Materials for the administration of immunizations for infectious illness and testing for tuberculosis.
To qualify as a covered physical exam, the doctor's exam must include at least:
- A review and written record of the patient's complete medical history,
- A check of all body systems, and
- A review and discussion of the exam results with the patient or the parent or guardian.

For a child under age six, Covered Medical Expenses include charges for:

- Up to six exams in the first year of the child's life,
- Up to two exams in the second year of the child's life, and
- One exam per year during the next four years of the child's life.

For a child age six and over, Covered Mcdical Expenses do not include charges for more than one exam in a perind of 24 consecutive months.

For you or your spouse, Covered Medical Expenses do not include charges for more than one exam in a period of 24 consecutive months.

## Charges for routine physical exams do not include:

- Services and supplies furnished by an out-of-network Provider;
- Services covered to any extent under any other part of this Plan or any other group plan sponsored by American Water;
- Services to diagnose or treat a suspected or identified injury or illness;
- Exams given to a person confined in a hospital or other facility for medical care;
- Services not given by a doctor or under his or her direction;
- Medicines, drugs, appliances, equipment, or supplies;
- Psychiatric, psychological, personality, or emotional resting or exams:
- Exams in any way related to employment;
- Premarital exams;
, Vision, hearing, or dental exams;
- Doctor's office visits in connection with immunization or testing for tuberculosis.


## Rowine Hearing

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Covered Medical Expenses include charges for an audiometric exam. The services must be performed by a network doctor who is certified as an otolaryngologist or otologist, or by an audiologist who:

- Is legally qualitied in audiology or holds a certificate of Clinical Competence in Audiology from the American Speech and Hearing Association in the absence of any applicable licensing requirements, and
- Performs the exam at the written direction of a legally qualified otolaryngologist or otologist.

Covered Medical Expenses will not include charges for more than one hearing exam in a period of 24 consecutive months under the Standard PPO Plan.

## Covered Medical Expenses do not include charges for:

- Ear or hearing exams to diagnose or treat an illness or injury;
- Drugs or medicines;
- Hearing care services or supplies covered to any extent under any other part of this Plan or any other group plan sponsored by American Water;
- Hearing care services or supplies for which benefits are provided under any Workers' Compensation law or any other law of similar purpose, whether benefits are payable for all or only part of the charges;

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Nammogram

Benefits Related to Breast
Reconstruction

- Hearing care services or supplies which do not meet professionally accepted standards;
- Services or supplies received while the person is not covered;
- Exams given while the person is confined in a hospital or other facility for medical care;
- Exam required by an employer as a condition of employment, or that an employer is required to provide under a labor agreement or required by law;
- Services or supplies furnished by an out-of-network Provider.

Covered Medical Expenses include charges for one routine Pap smear and related laboratory expenses each calendar year.

Covered Medical Expenses include charges incurred by a female for routine mammograms as follows:

- One baseline mammogram for women at least age 35 but less than age 40 ,
- One mammogram each calendar ycar for women age 40 or over.

The Plan provides benefits related to breast reconstruction in compliance with the Women's Health and Cancer Rights Act of 1998. This federal law states thar group health plans that provide medical and surgical benefits for mastectomy must provide certain additional benefins related to breasi reconstruction.

If you (or a covered dependent) are receiving mastectomy benefits, you are entilled to coverage for:

- Reconstruction of the breast on which the mastectomy has been performed;
- Surgery and reconstruction of the other breast to produce a symmetrical appearance;
- Prostheses and treatment for physical complications for all stages of a mastectomy, including lymphedemas (swelling associated with the removal of lymph nodes).

The Plan will detemmine the manner of coverage in consultation with you and your attending doctor. Coverage for breast reconstruction and related services will be subject to the same annual deductibles and coinsurance provisions that apply for the mastectomy.

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The charges made by a doctor or hospital for a vasectomy or tubal ligation for voluntary sterilization, even though not incurred in connection with the diagnosis or treatment of an illness or injury, are Covered Medical Expenses. Charges for the reversal of a sterilization procedure are not covered.

Expenses incurred for one routine self-referred gynecological exam per calendar year, performed by a network doctor, will be considered a Covered Medical Expense. The routine gynecological exam, including one Pap smear and related laboratory expenses, is considered Office Care. No coverage is provided if the exam is performed by an oul-ofnetwork Provider.

Pregnancy expenses must be incurred while the person is covered under this Plan. If expenses are incurred after the coverage ceases, they will be considered for benefits only if satisfactory evidence is fumished to Horizon that the person has been totally disabled since her coverage terminated.

Any pregnancy benefits payable by previous group health coverage will be subtracted from health benefits payable for the same expenses under this Plan.

The Plan does not testrict benefits for any hospital length of stay in connection with childbirth for the mother or newborn child to less than 48 hours following a normal vaginal delivery, or less than 96 hours following a caesarean section, or require that a provider obtain authorization from the Plan for prescribing a length of stay not in excess of the above periods.

The amending provider, afier consulting with the mother, may discharge the mother and newborn earlier thav 48 hours following a vaginal delivery or 96 hours following a caesarean section.

Month, laws, and Teeth


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The Medical Plan will cover certain dental expenses, but only in the event of injury. Charges for rool canal therapy; routine tooth removal (which does not involve cutting of the bone); and in-mouth appliances, crowns, bridgework, dentures, tooth restorations, and any related fulting or adjustment services (whether or not their purpose is to relieve pain) are covered if they are required as the result of injury to the mouth, jaw, or teeth.

The Medical Plan does not cover charges to remove, repair, replace, restore, or reposition teeth which are lost or damaged in the course of biting or chewing. Charges to repair, replace, or restore fillings, crowns, dentures, or bridgework are not covered by the Medical Plan. Non-surgical periodontal treatment is excluded, as are charges for dental cleaning; in-mouth scaling, planing, or scraping; and myofunctional therapy (muscle training therapy to correct or control hannful habits).

The following services and supplies fumished for the treatment of the mouth, jaws, jaw joints. teeth, and supporting tissues (including bones, muscles, and nerves) are Covered Medical Expenses and not part of the Dental Plan. For these expenses, "doctor" includes a dentist.

- Surgery needed to treat a fracture, dislocation, or wound or to cul out reeth partly or completely impacted in the jawbone. Covered surgery may cut out teeth that will not erupt through the gum, as well as other teeth that cannot be removed without cutting into bone.
- Also covered are surgeries that cut oul the roots of a tooth without removing the entire tooth, as well as removing cysts, tumors, or other discased tissucs while cutting into the gums and tissues of the mouth. This is covered only when not done in connection with the removal, replacement, or repair of teeth. Covered surgery may also alter the jaw, jaw joints, or bite relationships by a cutting procedure when appliance therapy alone cannot result in functional improvement.
- Non-surgical treatment of infections or illnesses of the mouth, jaws, jaw joints, and supporting tissues (including bones, muscles, and nerves). This does not include those of, or related to, the teeth.
- Dental work, surgery, and orthodontic treatment needed to remove, repair, replace, restore, or reposition natural teeth damaged, lost, or removed, and other body tissues of the mouth fractured or cut due to injury. The accident causing the injury must occur while the person is covered under the Medical Plan.

Any such teeth must have been free from decay or in good repair and firmly attached to the jawbone at the time of the injury.

## Shilled Nursing

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If crowns (caps), denfures (false teeth), bridgework, or in-mouth appliances are installed due to such injury, Covered Medical Expenses include only charges for the following:

- the first denture or fixed bridgework to replace lost teeth,
- the first crown needed to repair each damaged tooth, and
- an in-mouth appliance used in the first course of orthodontic treatment after the injury.

Except as provided for injury, the Medical Plan does not cover charges for in-mouth appliances, crowns, bridgework, dentures, tooth restorations, or any related lilling or adjustment services, whether or not the purpose of such services or supplies is to relieve pain. In addition. the Medical Plan does not cover root canal therapy or routine tooth removal (not needing culting of the bone).

Charges made by an RN or LPN or nursing agency for "skilled nursing services" are included as Covered Medical Expenses. No other charges made by an RN or LPN or a nursing agency are covered. As used here, "skilled nursing services" means these services:

- Visiting nursing care by an RN or LPN. Visiting nursing care means a visit of up to 4 hours for the purpose of performing specific skilled nursing tasks.
- Private duty nursing by an RN or LPN if the person's condition requires skilled nursing care and visiting nursing care is not adequate. Benefits will not be paid during a calendar year for private duty nursing for any shifts in excess of the Private Duty Nursing Care Maximum Shifts. Each period of private duty nursing of up to eight hours will be considered one private duly nursing shift.
"Skilled nursing care" does not include:
- The part (or all) of any nursing care that does not reguire the education, training, and technical skills of an RN or LPN, such as transportation, meal preparation, charting of vital signs, and companionship activities.
- Private duty nursing care given while the person is an inpatient in a hospital or other health care facility.
- Care provided to help a person in the activities of daily life, such as bathing, feeding, personal grooming, dressing, getting in and out of a bed or chair, or toileting.
- Care provided solely for skilled observation, excluding one period per day of up to 4 hours for no more than 10 consecutive days following the occurrence of:
- a change in patient medication;
- the need for urgent or emergency medical services provided by a doctor or the onset of symptoms indicating the likely nced for such services;
- surgery; or
- release from impatient confinement.

Any service provided solely to administer oral medicines, except where applicable law requires that such medicines be administered by an RN or LPN.

## Hospice Care

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Charges made for the following inpatient services furnished to a person for hospice care when given as a part of a Hospice Care Program are included as Covered Medical Expenses.

## Inpatient Care

Room and board and other services and supplies furnished to a fulllime inpatient for pain control and other acute and chronic symptom management.
Charges lor daily room and board in a semi-private room over the Private Room Limit are not included. Inpatient hospice care is limited to a total of 90 days for all confinements.

## Facility and doctor Expenses

The Plan covers charges made on its own behalf by a:

- Hospice Care Facility
- Hospital
- Skilled Nursing/Convalescent Facility, or
- Doctor


## Outpatient Care

The Plan covers charges made by a Hospice Care Agency for the following outpatient services and supplies (if precertified), up to a lifetime maximum of $\$ 5,000$.

- Part-time or intermittent nursing care by an RN or LPN for up to eight hours per day.
- Medical social services under the direction of a doctor, including:
- assessment of the person's social, emotional, and medical nceds, and the home and family situation;
- identification of available community resources;
- assisting the person to obtain resources needed to meet the person's assessed needs.
- Psychological and dictary counscling.
- Consultation or case management services by a doctor.
- Physical and occupational therapy
- Parr-time or intermittent home health aide services (consisting mainly of caring for the person) for up to eight hours per day.
- Medical supplies, drugs. and medicines prescribed by a doctor.

Charges made by the Providers below for Outpatient Care, but only if the provider is not an Employee of a Hospice Care Agency and the agency retains responsibility for the care of the person:

- A doctor for consultant or case management services.
- A physical or occupational therapist.
- A Home Health Care Agency for:
- physical or occupational therapy;
- part-time or intermittent home health aide services consisting mainly of caring for the person) for up to eight hours per day:
-- medical supplies, drugs, and medicines prescribed by a doctor;
- psychological and dietary counseling.


## Charges for the following services are not included:

- Bereavement counscling.
- Funeral arrangements.
- Pastoral counseling.
* Financial or legal counseling, including estate planning or the drafting of a will.
- Homemaker or caretaker services. These are services which are not solely related to care of the person, including sitter or companion services for either the person who is ill or to other members of the family, transportation, housecleaning, and maintenance of the house.
- Respite care. This is care fumished during a period of time when the person's family or usual caretaker is unable or unwilling to attend to the person's needs.

Charges made by a doctor, or a licensed or certified physical, occupational, or speech therapist for Short-Term Rehabilitation services to treal acute conditions are Covered Medical Expenses.

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Short-term relabilitation services consist of:

- Physical therapy,
or Occupational therapy, or
speech therapy,
furnjshed to a person who is not confined as an inpatient in a hospital or other facility for medical care. This therapy shall be expected to result in significant improvement of the person's condition within 60 days from the date the therapy begins.

Charges for Short-Term Rehabilitation services are covered for a maximum of 60 days per calendar year, as long as the treatment is precertified.

## Charges for the following services are not covered:

- Services covered to any extent under any other part of this Plan or any other group plan sponsored by American Water.
- Services received while the person is confined in a hospital or other facility for medical care.
* Services not performed by a doctor or not under his or her direct supervision.
- Services rendered by a physical, occupational, or speech therapist who lives in the person's home, or who is a part of the family of either the person or the person's spouse.
- Services rendered for the treatment of delays in speech development, unless resulting from:
- illness,
- injury, or
- congenital defect.
- Special education, including lessons in sign language, to instruct a person whose ability to speak has been lost or impaired, to function without that ability.
- Any services not provided in accordance with a specific treatment plan that:
- Details the treatment to be rendered and the freguency and duration of the treatment,
- Provides for ongoing reviews and is renewed only if therapy is still necessary.


## Emergency Care

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Non-Emergency
Care inan Emergeney ${ }^{\text {Poom }}$

Oher Covered Medical Expenses

If emergency care is received in a hospital emergency room while a person is not a full-time inpatient, the hospital's charges will be Covered Medical Expenses and paid at the Payment Percentage.
"Emergency care" means the first treatment given in a hospital emergency room right after the sudden and (at that time) unexpected onset of a change in a person's physical or mental condition that requires hospital level care because:

- The care could not safely and adequately have been provided other than in a hospital or adequate care was not available elsewhere in the area at the time and place it was needed, and
- If the hospital level care were not given, the emergency described above could, as determined by Horizon, reasonably be expected to result in:
- loss of life, limb, or
- significart impairment to bodily function, or
- permanent dysfunction of a body part.

If non-emergency care treatment is received in a hospital emergency room while a person is not a full-time inpatient, no benefits will be paid.

Other Covered Medical Expenses include:

- Doctor's charges.
- Diagnostic lab work and X-rays.
- X-ray, radium, and radioactive isotope therapy.
- Anesthetics and oxygen.
- Rental of durable medical or surgical equipment. Not included are charges for more than one item of equipment for the same or similar purpose.
- "Durable Medical and Surgical Equipment" is equipment made to withstand prolonged use and used mainly in the treatment of an illness or injury. It must be suited for use in the home, not normally of use to persons without an ilhess or injury, and not used to alter quality or temperature, or for exercise or training.
- The purchase, repair, or replacement of durable medical and surgical equipment and accessorjes needed to operate it.
- The initial purchase is covered only if Horizon agrees that long-term use is planned and the equipment cannot be rented, or it is likely to cost less to buy it than to rent it.
- Replacement is covered only if Horizon agrees that it is needed because of a change in the person's physical condition, or it is likely to cost less to buy a replacement than to repair the existing equipment or to rent similar equipment.
- Artificial limbs and eyes. Eyeglasses, hearing aids, orthopedic shoes, or other devices to support the feet are not included.
- Professional ambulance service to transport a person from the place of the injury or onsel of illness to the first hospital where treatment is given.


## Pre-Existing Condinons

Pre-Existing Condilion exclusions do not apply under any Horizon Plan.

## Certification for Hospital Admissions

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Inpatient hospital confinements must be precertified to qualify for the highest level of benefits paid by the Plan. Covered Medical Expenses incurred on any day not centified during the confinement will be paid as shown below if:

- A person becomes confined in a hospital as a full-fime inpatient, and
- It has not been certified that the confinement (or any day of the confinement) is necessary, and
- The confinement has not been ordered and prescribed by your doctor.


## Hospital Expenses Incurred During the Confinement

If certification has been requested and denied for part of the confinement, no benefirs will be paid for Hospital Expenses incurred for room and board for that day(s). Benefits for all other Hospisal Expenses will be paid at the Payment Percentage.
If certification has not been obtained, you will have to pay a $\$ 150$ penally charge before benefits are paid for covered services.




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Benefits for expenses in excess of the Excluded Amount will be paid at the Payment Porcentage.

If certification has not been requested and the confinement (or any day of the confinement) is necessary, Hospital Expenses up to the Excluded Amount will not be deemed to be Covered Medical Expenses. Benetits for all other Hospital Expenses will be payable at the Payment Percentage.

## Other Covered Medical Expenses

Benefits will be paid at the Payment Percentage.
Whether or not a day of confinement is certified, no benefit will be paid for expenses incurred on any day of comfinement as a full-time inpatient if excluded by any other terms of this Plan, except that if certification has been given for a day of confinement, excluding services and supplies because they are not necessary will not be applied to expenses for hospital room and board.
In the event of an urgent admission, yout, the person's doctor, or the hospital must call Horizon Member Services for certification before the person is confined as a full-time inpatient.
An urgent admission is one required as the result of an injury caused by an accident; the diagnosis of an illness; or the onset of, or change in, an illness. The person's condition does not require emergency medical care, but is severe enough to require confinement in a bospital within two weeks of the date the doctor determines that confinement is required.

A "non-urgent admission" is one which is not an emergency admission or an urgent admission.

When a covered person is confined as a full-time inpatient as the result of an emergency admission, you, the person's doctor, or the hospital must call Horizon Member Services to reguest certification within 48 hours of the start of the confinement. If the call cannot be made within 48 hours, the call must be made as soon as reasonably possible. The 48 -hour requirement is extended to 72 hours when the confinement starts on a Friday or Saturday.

An admission is considered to be an emergency when the doctor admits the person to the hospital right after the sudden and (at that lime) unexpected onset of a change in the person's physical or mental condition which could be life-threatening or result in significant impaiment or permanent dysfunction if the person is not immediately contined as a full-time hospital inpatient.
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## Facilty Expenses

If, in your doctor's opinion, it is necessary for you to be confined for a longer time than already certified, you, the doctor, or the hospital may request that more days be certified by calling the precemification number on your ID card or Horizon Member Services at (800) 355BLUE (2583). This must be done on or before the last day that has already been certified.

Written notice of the number of days centified will be sent promptly to the hospital. A copy will be sent to you and the doctor.

## Certificution for Shilled <br> Nuringg/Convalescent Facility Care, Home Health Care, and Hospice Care

Covered Medical Expenses will be paid as shown below if incurred:

- While a person is confined in a skilled nursing/convalescent facility or hospice; or
- For services or supplies for home health care. hospice care, or skilled nursing care when a person is not confined as an inpatient; and
- It has been certified that such confinement or care is necessary; and
- The confinement or care has been ordered and prescribed by your doctor

If certification has been requested and denied, no benefits will be paid for Skilled Nursing/Convalescent Facility Expenses or Hospice Care Facility Expenses incurred for room and board. Benefits for all other Skilled Nursing/Convalescent Facility Expenses or Hospice Care Facility Expenses incurred during the confinement will be paid at the Payment Percentage.
If certification has not been requested and the confinement (or any day of the confinement) is not necessary, no benefits will be paid for Skilled Nursing/Convalescent Facility Expenses or Hospice Care Facility Expenses incurred for room and board. For all other Skilled Nursing/Convalescent Facility Expenses or Hospice Care Facility Expenses incurred during the confinement:

- Expenses up to the Excluded Amount will not he deemed to be Covered Medical Expenses.

Repenses for Services or Supplies
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- Benefits for all other such expenses will be paid at the Payment Percentage.
If certification has not been requested and the confinement (or any day of the confinement) is necessary, Skilled Nursing/Convalescent Facility Expenses or Hospice Care Facility Expenses incurred during the confinement, up to the Excluded Amount, will not be deemed to be Covered Medical Expenses. Benefits for all other such expenses incurred during the confinement will be paid at the Payment Percentage. As to all other Covered Medical Expenses incurred during the confinement, benefits will be paid at the Payment Percentage.

If certification for a service or supply has been requested and denied, or if certification has not been requested and the service or supply is not necessary, no benefits will be paid for the denied or unnecessary service or supply.

If cerlification has not been requested for a service or supply and the service or supply is necessary, benefits for the necessary service or supply will be paid as follows:

- Expenses incurred for the service or supply, up to the Excluded Amount, will not be deemed to be Covered Medical Expenses:
- Benefits for all other Covered Medical Expenses incurred for the service or supply will be paid at the Payment Percentage.
Whether or not a day of confinement or a service or supply has been certified, no benefit will be paid if the charges for the confinement or service or supply are excluded by any other terms of this Plan, except that, to the extent a day of confinement has been cerlified, excluding services and supplies because they are not necessary will not apply to:
- Skilled Nursing/Convalescent Facility Expenses for room and board, or

Hospice Care Facility Expenses for room and board
To the extent that such service or supply has been certified for home health care, hospice care, or skilled nursing care, exchuding services or supplies because they are not necessary will not apply to the service or supply.

If a person's doctor beljeves that the person needs more days of confinement or services or supplies beyond those which have been already certified, a call must be made to the precertification number on your ID card or Horizon Member Services al (800) 355-BLUE (2583) to certify more days of confinement or services or supplies.

Prompt written notice will be provided to you of the days of' confinement and services or supplies which have been certified.




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If services and supplies for hospice care have been certified and the person later requires hospital confinement for pain control or acute symptom management, any otber certification requirement in this Plan will be waived for any such day of hospital confinement.

## Comblation for Commernecedures and Treammends

Certification for certain procedures and treatments is required:

- Before the procedure is performed, or
- Before the treatment starts, unless the procedure or treatment has been ordered and prescribed by your doctor,

When any of the procedures or treatments shown below will be performed on an inpatient or outpatient basis, Covered Medical Expenses for the procedure or treatment will be payable as follows:

- If the procedure or treatment is not necessary. no bene tits will be payable whether or not certification has been requested.
- If certification has been requested and the procedure or treatment is necessary, benefits will be payable at the Payment Percentage.
- If certification has not been requested and the procedure or treatment is necessary, expenses up to the Excluded Amount will not be considered to be Covered Medical Expenses. Benefits for Covered Medical Expenses in excess of the Excluded Amount will be payable at the Payment Percentage.

Certain procedures or treatments require precertification before they are performed, regardless of whether done on an inpatient or outpatient basis. Call Horizon to determine if your procedure requires precertification.
You or the provider performing the procedure or treatment must call the precertification number on your ID card or Horizon Member Services at (800) 355-BLUE (2583) to request certification
If the procedure or treatnent is performed due to an Emergency Condition, the call must be made:

- Before the procedure or treatment is performed. or
- Not later than 48 hours after the procedure or treatment is performed, unless the call cannot be made within that lime. In that case, the call must be made as soon as it is reasonably possible. In the event the procedure or treatment is performed on a Friday or Saturday, the 48 -hour requirement will be extended to 72 hours.

If the procedure or treatment is performed for any condition other than an Emergency Condition, the call must be made at least 14 days before the date of the procedure or the date treatment begins. If it is not possible to make the call during the specified time, it must be made as soon as reasonably possible before the date of the procedure or the date treatment begins.

Written notice of the certification decision will be sent promptly to you and the provider performing the procedure or treatment. This decision will be valid for 60 days from the date you reccive the notice If the procedure or treatment is to be performed after this 60 -day period, certification must again be requested, as described above.

## Cemfleation for Hospital and Treament  Abawe, or Mremal Divarders

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Facility Room and Board Expenses

## Other Faciliy

Expenses
Incurred for the
Services of a
Doctor

Covered Medical Expenses for the effective treatment of alcoholism, drug abuse, or mental or nervous disorders will be paid as described below if incurred:

- While a person is confined in a hospital or treatment facility, and
- It bas not been certified that such confinement is necessary, and
- The confmement has not been ordered and prescribed by your doctor.

If certification has been requested and denied, or if certification has not been requested and the confinement (or any day of it) is not necessary, no benefits will be paid.

If certification has not been requested and the confinement is necessary, expenses up to the Excluded Amount will not be considered Covered Medical Expenses.

If certification has been requested and denied, or if certification has not been requested and the confinement is necessary, only expenses after the $\$ 150$ precertification penalty will be considered Covered Medical Expenses.

If certification has not been requested and the confinement is not necessary, uo benefits will be paid.

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Whether or not a day of confinement is certified, no benefits will be payable for Covered Medical Expenses incurred on any day of confinement as a full-time inpatient if exchuded by any other terms of this Plan, except that if certification has been given for any day of confinement, services and supplies applicable to hospital and treatment facility room and board will not be excluded as "unnecessary."
"Emergency Care" means the first treatment given in a hospital's emergency room for the sudden and unexpected onset of a change in a person's physical or mental condition which:

- Requires hospital level care because the care could not safely and adequately have been provided other than in a hospital; or
- Adequate care was not available elsewhere in the area at the time and place it was needed; and
- If hospital level care were not given could, as determined by Horizon, reasonably be expected to result in:
- loss of life or limb, or
- significant impairment to bodily function, or
- permanent dysfunction of a body part.

If the person's doctor believes that the person needs more days of confinement beyond those which have already been certified, additional days of confinement must be certified on or before the last day that has already been certified.

## Treamont of Acoholism, Dregs Abuse, or

 Mental DisordersIf a person is a full-timse inpatient in cither a hospital or treatment facility, expenses for the following are covered:

- Treatment of the medical complications of alcoholism or drug abuse, such as cirrhosis of the liver, delirium tremens, or hepatitis.
- Effective treatment of alcoholism or drug abuse
- Treatment of a mental disorder.
- Room and Board. Charges for daily room and board in a private room over the Private Room Limit are not covered.
- Other necessary services and supplies.

The above expenses are covered only if they are incurred during the first 45 days of all such confinements during any one calendar year.

For alcoholism and diug abuse, benefits will be paid for only two courses of treatment during your lifetime.
Benefits will be paid at the Payment Percentage.

## Outpatient

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Expenses incurred for the effective treatment of alcoholism or drug abuse, or the treatment of mental disorders while the person is not confined as a full-time inpatient in a hospital or treatment facility, will be considered Covered Medical Expenses.
Benefits will be paid al the Payment Percentage. Benefits will not be paid for more than the Special Outpatient Calendar Year Maximum Visits in any one calendar year.

## Submitting Clams

All clains must be filed within two years from the date of the incurred expense. Your claims must be in writing and you must give proof of the nature and extent of the expense. You may obtain Medical Plan Benefits Request forms from the Benefits Service Center; directly from Horizon's website (www.horizonblue.com/nationalaccounts); or by contacting Horizon Member Services at (800) 355-BLUE (2583).

## How Four Benefits Are Paid

American Water has contracted with Horizon to assist in administering benefits under the PPO Plans as the Claims Administrator. Your claims will be paid as soon as Horizon receives the necessary written proof supporting your claim. In order to speed claims processing, Horizon will pay medical benefits directly to the provider unless you specify that you want the benefits paid to you. If you are a minor or otherwise legally unable to give a valid relcase, Horizon may make payment to any of your relatives whom it determines to be fairly entitled to the payment.

With the exception of the copayment for doctor office visits, you should never pay a provider directly until you receive an Explanation of Benefits (EOB).
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## Filing Modical Chims

Fast processing of your out-of-uetwork claim depends on complete, accurate information on your Benefits Request form). When filing a claim, please remember 10:

- Complete all applicable sections of your Benefits Request form. Any unanswered questions will cause delay in processing your claim.
- Include your Identification number on all claims, including claims for your dependent(s), and be sure to sign the form.
- Attach the itemized bill to the form. An itemized bill must include the following information:
- the patient's full name,
- the patient's relationship to you,
- the date the service was provided,
- the name of the health care professional providing the service,
- the provider's taxpayer identification number,
-- the type of service provided,
- the nature of the illness or injury, and
- the charges for the service or treatment (multiple expenses should be itemized).
If any of this information is missing, write it on the bill yourself and sign your name. Your health care provider should complete the doctor/supplier section of the claim form if he or she has not given you an itemized statement.

If you have other group coverage (or Medicare coverage) that pays benefits before the American Water Plan, you will need to provide Horizon with a copy of the other carrier's Explanation of Benefits (EOB) reflecting the benefits paid under the other coverage for the expenses being submitted for payment to this Plan.
Once you have completed the Medical Plan Benefits Request form and attached the itemized bills, send everything to:

## Horizon Blue Cross Blue Shield of New Jersey P.O. Box 1219 <br> Newark, NJ 07101-1219

If you have any questions about the status of your claim, call Horizon Member Services at (800) 355-BLUE (2583).

# The Exclusive Providler <br> Organiuation (EPO) Plaw 

## The Enchusve Prowilar Organazatove (EPO)

## P/an

Like the PPOs, the Exclusive Provider Organization (EPO) Plan is self-insured by American Water, with certain administrative services provided by Horizon. However, it offers no out-of-network benefits.

If you want to receive benefits under the EPO Plan, you must receive care from a doctor, hospital, or health care provider within the Horizon network. As you may know, Horizon maintains a nationally recognized health care provider network. Jn fact, most providers and hospitals currently used by our employces are members of the Horizon network. If you cover any college-age dependents or any of your dependents live permanently outside the network area, you should consider carefully before enrolling in the EPO option.
To locate participating network providers, call (800) 810-BLUE (2583) or use the Provider Finder at:
www.horizonblue.com/national accounts.
With the EPO Plan, you do not need to select a Primary Care Physician before you receive medical care, nor do you need to obtain referrals to see a specialist. However, when you need care, you must use a provider within the Horizon network in order to receive benefits.

## EPOPlat Adventuges

Because you are using a provider within the Horizon network:

- Your healthcare providers file all your claims;
- Your doctor initiates all required precertification;
- You will nor experience any reduction in benefits under the "reasonable and customary" rule because health care providers in the network are allowed to charge only the special rates that Horizon has negotiated with them. (See the Glossary for a definition of "reasonable and cusromary charge"),


# Coverage for Dependenty Who Live Omtide the Network Area 

Because the EPO Plan offers no out-of-network benefits, expenses incurred by your dependents who live outside the network area will not be covered. Therefore, if your child is away at school or lives permanently outside the network area (with another parent or stepparent, for example), you should consider carefully before enrolling in the EPO option.

## Coverger When Yow Are Thavinge

If you are traveling (and out of a Horizon network area) and you need medical care in a ron-emergency situation, the EPO Plan offers no out-of-network bencfits.

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In case of emergency, get the care you need from the nearest health care facility or doctor. A medical emergency is defined as "a sudden and unexpected life-threatening medical condition that requires immediate medical or surgical care in order to prevent death or a severe health crisis." Examples include convulsions, excessive bleeding, serious burns, and suspected heart attack.

You will be paid at the Plan's bencfit level for emergency care - 24 hours a day, 365 days a year - whether you are at home or away, in- or out-of-network. When you need emergency care, it is important to seek immediate care at the nearest appropriate facility.
When a covered person is confined as a full-time inpatient as the result of an emergency admission, you, the person's doctor, or the hospital must call Horizon Member Services to request certification within 48 hours of the start of the confinement. If the call cannot be made within 48 hours, the call must be made as soon as reasonably possible. The 48 -hour requirement is extended to 72 hours when the confinement starts on a Friday or Saturday.

## Precertifuction

Precertification is an important feature of the EPO Plan. In order for you to receive the highest level of benefits available, Horizon must be notified to precertify any hospital admission and certain outpatient surgical procedures, treatments. and tests. The purpose of this process is to review the medical necessity of a procedure and to approve an appropriate length of stay.

You, the nerwork hospital, or your network doctor will initiate all required precertification.

Procedures
 precemined

How to Request Precertheation for a Medical Procedure or Admission

- All hospital and skilled nursing/convalescent facility admissions
- Home health care, hospice care, and skilled nursing care
- Inpatient trcatment for substance abuse and mental disorders

Call Horizon for all other procedures.

Certain procedures or treatments require precertification before they are performed, regardless of whether dove on an inpatient or outpatient basis. Call Horizon to determine if your procedure requires precertification.
You or the provider performing the procedure or treatment must call the precertification number on your ID card or Horizon Member Services at (800) 355-BLUE (2583) to request certification.

The hospital or doctor should call at least 14 days before any scheduled admission or oulpatient procedure, or as soon as the need for medical care is evident. In case of emergency, you or a family member should contact Horizon Member Services within 48 hours after the admission or procedure.

At Member Services, a Medical Consultant will ask:

- The patient's name and Identification number,
- The type of surgical procedure or test,
- Jhe doctor's name and telephone number, and
- When the procedure is scheduled.

The Medical Consultant will review the medical necessity of the proposed inpatient admission, the proposed surgical procedures and treatments, or the proposed inpatient treatment for substance abuse and

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If Your hospital Stay Is Longer Than Rxpected
mental disorders. He or she will compare information about your case with generally accepted medical standards.

## Mental Health and Substance Abuse admissions are precertified by Magellan at (800) 224-1233

If the proposed inpatient admission or treatment is medically necessary in accordance with such standards, it will be certified by the Medical Consultant. On the other hand, if other treatment is more appropriate. alternative treatment settings may be suggested. See page 63 for more information regarding precertification.

If a hospital admission or any of the procedures or tests listed is not precertified, you will have to pay a $\$ 150$ penalty charge before benefits are paid for covered services.

If your hospital stay is longer than the approved period, you must notify Horizon Member Services as soon as you are aware your stay must be extended. The Medical Consultant can then work with your doctor to extend the certification of your hospital stay.

## Won Share of Madicul Expenses

American Water Medical Plans have been carefully designed to provide quality care and the most value for each dollar spent by you and the Company. Here is how we share the costs of these valuable benefits.

The EPO Plan has no deductibles.

Copayments You pay your share of expenses through copays.
When you visit your network provider, you pay a flat fee for certain network services. This fee is called a "copayment" or "copay." If you are admitted to a network hospital or hospital alternative, you will generally be covered at $100 \%$ after a $\$ 100$ copay per admission.

A separate Hospital Emergency Room copay of $\$ 35$ must be paid for each visit to a hospital's emergency room for emergency care. This copay will be waived if the person is admitted to the hospital as an inpatient immediately following the emergency room visit.

## No Mut－of－Pocket Limit

Lifetime
Maximum

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your
Contributions
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The EPO Plan has no＂out－of－pocket＂limit．You are responsible for paying all of your copayments for the entire calendar year．

The EPO Plan provides an unlimited Lifetime Maximum Benefit for you and each covered member of your family．

You pay your slare of the cost for your benefits each pay cycle through convenient pre－tax payroll deductions．Pre－tax means that your contributions are with held before federal（and in most cases，state （other than New Jersey）and local）income and FICA（Social Security） taxes are withheld．This reduces your taxable income and the amount of tax you pay．As a result，you have more take－home pay．Because your pre－tax contributions are not subject to FICA taxes，your Social Security benefil at retirement may be slightly reduced if your eamings are under the Social Security Taxable Wage Base（ $\$ 94,200$ for 2006； $\$ 97,500$ for 2007）．However，the loss in future retirement benefits should be more than offset by the current tax savings under the Plan．

## Benchits Prowble

Alter any applicable copay amount，the EPO Plan generally pays $100 \%$ of Covered Medical Experses，except for any different benefit levels described elsewhere in this Summary Plan Description．If an expense is covered as one type of Covered Medical Expense，it cannot be covered as any other type．

## Benchi Mondnumbs

The following limitations apply to some of the benefits under the Plan：

## －Skilled nursing facility

100 days per calendar year
－Short－Term Rehabilitation（for acute conditions only）
60 days per calendar year if certified by your doctor

## －Private Room Limit

The institution＇s semi－private rate

## Covered Expenses

Inpatient
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## Oupationt

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The Plan covers charges made by a Horizon network hospital for room, board, and other hospital services and supplies for a person who is confined as a full-time inpatient for the treatment of an injury or illness.

The Plan covers charges made by a Horizon network hospital for services and supplies for a person who is not confined as a full-time inpatient.

The Plan covers charges made by a Horizon network skilled nursing/convalescent facility for the following services and supplies furnished to a person while confined to convalesce from an illness or injury.

- Room and Board. This includes charges for services such as general nursing care made in connection with room occupancy. Charges for daily room and board in a private room over the Private Room Limit are not covered.
- Use of special treatment rooms
- X-ray and lab work
- Physical, occupational, or speech therapy
a Oxygen and other gas therapy
- Other medical services usually given by a skilled nursing/convalescent facility, excluding private or special nursing, or doctors' scrvices
- Medical supplies

The Plan does not cover skilled nursing/convalescent facility charges made for treatment of:

- Drug addiction
a Chronic brain syndrome
- Alcoholism
- Senility
- Mental retardation
- Any other mental disorder

Home Health Care

Home health care expenses from a Horizon network provider are covered it:

- The charge is made by a home health care agency,
- The care is given to a person in his or her home.

Home health care expenses are charges for:

- Part-lime or intermillent care by an RN, or by an LPN if an RN is not available;
- Part-fime or intermittent home health aide services for patient care;
- Physical, occupational, and speech therapy;
- Expenses covered to the extent they would have been covered under this Plan if the person had been confined in a hospital or skilled nursing/convalescent facility:
- medical supplies, drugs, and medicines prescribed by a doctor, and
- lab services provided by or for a home health care agency.

The Plan does not cover charges made for:

- Services or supplies that are not a part of the home health care plan,
- Services of a person who usually lives with you or is a member of your or your spouse's family,
- Services of a social worker,
- Transportation.


## Routine Plyysal Exams

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Covered Medical Expenses include charges made by a Horizon network doctor for a routine physical exam given to you, your spouse, or your dependent child.

A routine physical exam is a medical exam given by a network doctor for a reason other than to diagnose or treat a suspected or identified injury or illness. Included are:

- X-rays and laboratory and other tests given in connection with the exam, and
- Materials for the administration of immunizations for infectious illness and testing for tuberculosis.

To qualify as a covered physical exam, the doctor's exam must include at least:

- A review and written record of the patient's complete medical history,
- A check of all body systems, and
- A review and discussion of the exam results with the patient or the parent or guardian.


## Charges for routine physical exams do not include:

- Services and supplies furnished by a non-network provider;
- Services covered to any extent under any other part of this Plan or any other group plan sponsored by American Warer;
- Services to diagnose or treat a suspected or identified injury or illness;
- Exams given to a person confined in a hospital or other facility for medical care;
- Services not given by a doctor or under his or her direction;
- Medicines, drugs, appliances, equipment, or supplies;
- Psychiatric, psychological, personality, or emotional testing or cxams:
- Exams in any way related to employment;
- Premarital exams:
- Vision, hearing, or dental exams;
- Doctor's office visits in connection with immunization or testing for tuberculosis.

Covered Medical Expenses include charges for an audiometric exam. The services must be performed by a Horizon network doctor who is certificed as an orolaryngologist or otologist, or by an audiologist who:

- Is legally qualified in audiology or holds a certificate of Clinical Competence in Audiology from the American Speech and Hearing Association in the absence of any applicable licensing requirements, and
- Performs the exam at the written direction of a legally qualified otolaryngologist or otologist.


## Covered Medical Expenses do not include charges for:

- Ear or hearing exams to diagnose or treat an illness or injury;
- Drugs or medicines;
- Hearing care services or supplies covered to any extent under any other part of this Plan or any other group plan sponsored by American Water;

Hearing care services or supplies for which benefits are provided under any Workers' Compensation law or any orher law of similar purpose, whether benefits are payable for all or only part of the charges;

- Hearing care services or supplies which do not meet professionally accepted standards;
- Services or supplies received while the person is not covered.
- Exams given while the person is confined in a hospital or other facility for medical care,
- Exam required by an employer as a condition of employment, or that an employer is required to provide under a labor agreement or required by law:
- Services or supplies furrished by a non-network provider.

Routine Pap
Smear

Routine Manmegram

## Renefis Related <br> to Dreast <br> Reconstruction

Covered Medical Expenses include charges for one routine Pap smear and related laboratory expenses each calendar year. Services must be furnished by EPO network providers.

Covered Medical Expenses include charges incured by a female for routine mammograms as follows:

- One baseline mammogram for women at least age 35 but less than age 40 ,

One mammogram each catendar year for women age 40 or over.
Services must be furmished by EPO network providers.

The Plan provides benefits related to breast reconstruction in compliance with the Women's Health and Cancer Rights Act of 1998. This federal law states that group health plans that provide medical and surgical benefits for mastectomy must provide certain additional benefits related to breast reconstruction.

If you (or a covered dependent) are receiving maslectomy benefits, you are entitled to coverage for:
-i. Reconstruction of the breast on which the mastectomy has been performed,

- Surgery and reconstruction of the other breast to produce a symmetrical appearance.
- Prostheses and treatment for physical complications for all stages of a mastectomy, including lymphedemas (swelling associated with the removal of lymph nodes).

The Plan will determine the manner of coverage in consultation with you and your aftending doctor. Coverage for breast reconstruction and related services will be subject to the same annual deductibles and coinsurance provisions that apply for the mastectony.

The charges made by a Horizon network doctor or hospital for a vasectomy or tubal ligation for voluntary sterilization, even though not incurred in connection with the diagnosis or treatment of an illness or injury, are Covered Medical Expenses. Charges for the reversal of a sterilization procedure are not covered.

## Annual Gynecological Lxama

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Expenses incurred for one routine gynecological exam per calendar year, performed by a Horizon network doctor, will be considered a Covered Medical Expense. The routine gynecological exam, including one Pap smear and related laboratory expenses, is considered Office Care. No coverage is provided if the exam is performed by an out-ofnetwork provider.

Pregnancy expenses must be incurred while the person is covered under this Plan and services furnished by network providers. If expenses are incurred after the coverage ceases, they will be considered for benefits only if satisfactory evidence is furnished to Horizon that the person bas been totally disabled since her coverage terminated.

Any pregnancy benefits payable by previous group health coverage will be subtracted from health benefits payable for the same expenses under this Plan.

The Plan does not restrict benefits for any hospital length of stay in connection with childbith for the mother or newborn child to less than 48 hours following a normal vaginal delivery, or less than 96 hours following a caesarean section, or require that a provider obtain authorization from the Plan for prescribing a length of stay not in excess of the above periods.

The attending provider, after consulting with the mother, may discharge the mother and newborn earlier than 48 hours following a vaginal delivery or 96 hours following a caesarean section.

Mowth, Jaws. and Teeth

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The Medical Plan will cover certain dental expenses when services are furnished by network providers, but only in the event of injury. Charges for root canal therapy; routine tooth removal (which does not involve cutting of the bone); and in-mouth appliances, crowns, bridgework, dentures, looth restorations, and any related fitting or adjustment services (whether or not heir purpose is to relieve pain) are covered if they are required as the result of injury to the mouth, jaw, or teetb.

The Medical Plan does not cover charges to remove, repair, replace, restore, or reposition teeth which are lost or damaged in the course of biting or chewing. Charges to repair, replace, or restore fillings, crowns, dentures, or bridgework are nol covered by the Medical Plan. Non-surgical periodontal treatment is excluded, as are clarges for dental cleaning; in-mouth scaling, planing, or scraping; and myofunctional therapy (muscle training therapy to correct or control harmful habits).
The following services and supplies furnished by a network provider for the treatment of the mouth, jaws, jaw joints, teeth, and supporting tissues (including bones, muscles, and nerves) are Covered Medical Expenses and not part of the Dental Plan. For these expenses, "doctor" includes a dentist.

- Surgery needed to treat a fracture, dislocation, or wound or to cut out teeth partly or completely impacted in the jawbone. Covered surgery may cut out reeth that will not erupt through the gurn, as well as other teeth that cannot be removed without cutting into bone.
- Also covered are surgeries that cut out the roots of a tooth without removing the entire tooth, as well as removing cysts, tumors, or other diseased lissues while cutting into the gums and tissues of the mouth. This is covered only when not done in coonection with the removal, replacement, or repair of teeth. Covered surgery may also alter the jaw, jaw joints, or bite relationships by a cutting procedure when appliance therapy alone camot result in functional improvement.
- Non-surgical treatment of infections or illnesses of the mouth, jaws, jaw joints, and supporting tissues (including bones, muscles, and nerves). This does not include those of, or rejated to, the teeth.
- Dental work, surgery, and orthodontic treatment needed to remove, repair, replace, restore, or reposition natural tecth damaged, lost, or removed, and other body tissues of the mouth fractured or cut due to injury. The accident causing the injury must occur while the person is covered under the Medical Plan.


## Skilled Nursing

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Any such teeth must have been free from decay or in good repair and firmly attached to the jawbone at the time of the injury.

If crowns (caps), dentures (false teeth), bridgework, or in-mouth appliances are installed due to such injury, Covered Medical Expenses include only charges for the following:

- the first denture or fixed bridgework to replace lost teeth,
- the first crown needed to repair each damaged tooth, and
- an in-mouth appliance used in the first course of orthodontic treatment after the injury.
Except as provided for injury, the Medical Plan does not cover charges for in-mouth appliances, crowns, bridgework, dentures, tooth restorations, or any related fitting or adjustment services, whether or not the purpose of such services or supplies is to relieve pain. In addition, the Medical Plan does not cover root canal therapy or routine tooth removal (not needing cutting of the bone).

Charges made by a Horizon network RN or LPN or nursing agency for "skilled nursing services" are included as Covered Medical Expenses. No other charges made by an RN or L.PN or a nursing agency are covered. As used here, "skilled nursing services" means these services:

- Visiting nursing care by an RN or LPN. Visiting nursing care means a visit for the purpose of performing specific skilled nursing lasks.
- Private duty nursing by an RN or LPN if the person's condition requires skilled nursing care and visiting nursing care is not adequate.
"Skilled nursing care" does not include:
- The part (or all) of any nursing care that does not require the education, training, and technical skills of an RN or LPN, such as transportation, meal preparation, charling of vital signs, and companinnship activities.
- Prjvate duty nursing care given while the persou is an inpatient in a hospital or other health care facility.
- Care provided to help a person in the activities of daily life, such as bathing, feeding, personal grooming, dressing, getting in and out of a bed or chair, or toileting.
- Care provided solely for skilled observation, excluding one period per day of up to 4 hours for no more than 10 consecutive days following the occurrence of:
- a change in patient medication,
- the need for urgent or emergency medical services provided by a doctor or the onset of symptoms indicating the likely need for such services,
- surgery, or
- release from inpatient confinement.

Any service provided solely to administer oral medicines, except where applicable law requires that such medicines be administered by an RN or LPN.

Hospice Care


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Charges made for the following inpatient services furnished by a Horizon network provider to a person for hospice care when given as a part of a Hospicc Care Program are included as Covered Medical Expenses.

## Inpatient Care

Room and board and other services and supplies furnished to a fulltime inpatient for pain control and other acute and chronic symptom management. Charges for daily room and board for a semi-private room over the Private Room Limit are not included.

## Facility and Doctor Expenses

The Plan covers charges made on its own behalf by a Horizon network:

- Hospice Care Facility
- Hospital
- Skilled Nursing/Convalescent Facility, or
- Doctor


## Outpatient Care

The Plan covers charges made by a Hospice Care Agency for the following outpatient services and supplies (if precertified and furnished by F.PO network providers).

- Part-time or intermittent nursing care by an RN or LPN.
- Medical social services under the direction of a doctor, including:
- assessment of the person's social, emotional, and medical needs, and the home and family situation;
- identification of available community resources;
- assisting the person to obtain resources needed to meet the person's assessed needs.
- Psychological and dictary counseling.
- Cunsultation or case management services by a doctor.
- Physical and occupational therapy.
- Part-time or intermittent home health aide services consisting mainly of caring for the person.
- Medical supplies, drugs, and medicines prescribed by a doctor.

Charges made by EPO network providers as listed below for Outpatient Care, but only if the provider is not an Employee of a Hospice Care Agency and the agency retains responsibility for the care of the person:

- A doctor for consultant or case management services;
- A physical or occupational therapist;
- A Home Health Care Agency for:
- physical or occupational therapy,
- part-lime or intermittent home health aide services consisting mainly of caring for the person,
- medical supplics, drugs, and medicines preseribed by a doctor,
-- psychological and dictary counseling.


## Charges for the following services are not included:

- Bereavement counseling.
- Funeral arrangements
- Pastoral counseling
- Financial or legal counseling, including estate planning or the drafting of a will.
- Hornemaker or caretaker services. These are services which are not solely related to care of the person, including sitter or companion services for either the person who is ill or to other members of the family, transportation, housecleaning, and maintenance of the house.
- Respite care. This is care furnished during a period of time when the person's farmily or usual caretaker is unable or unwilling to attend to the person's nceds.

Charges made by a network doctor, or an in-network licensed or

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Rehabilitation services to treat acute conditions are Covered Medical Expenses.

Short-term rehabilitation services consist of:

- Physical therapy,
- Occupational therapy, or
- Speech therapy
furnished to a person who is not confined as an inpatient in a hospital or other facility for medical care. This therapy shall be expected to result in significant improvement of the person's condition within 60 days from the date the therapy begins.

Charges for Shori-Term Rebabilitation services are covered for a maximum of 60 days per calendar year, as long as the treatment is certified by the patient's doctor.

## Charges for the following services are not covered:

- Services covered to any extent under any other part of this Plan or any other group plan sponsored by American Water.
- Services received while the person is confined in a hospital or other facility for medical care.
- Services not performed by a doctor or not under his or her direct supervision.
- Services rendered by a physical, occupational, or speech therapist who lives in the person's home, or who is a part of the family of either the person or the person's spouse.
- Services rendered for the treatment of delays in speech development, unless resulting from:
- illness,
- injury, or
- congenital defect.
- Special education, including lessons in sign language, to instruct a person whose ability to speak has been lost or impaired, to function withoul that ability.
- Any services not provided in accordance with a specific treatment plan that:
- Details the treatment to be rendered and the frequency and duration of the treatment.
- Provides for ongoing reviews and is renewed only if therapy is still necessary.


## Energency Care




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If emergency care is received in a hospital emergency room (in- or out-of-network) while a person is not a full-time inpatient, the hospital's charges will be Covered Medical Expenses and paid at the Payment Percentage after a $\$ 35$ copayment (waived if admitted)
"Emergency care" means the first treatment given in a hospital emergency room right after the sudden and (at that time) unexpected onset of a change in a person's physical or mental condition that requires hospital level care because:

- The care could not safely and adequately have been provided other than in a hospital or adequate care was not available elsewhere in the area at the time and place it was needed, and
- If the hospital level care were not given, the emergency described above could, as determined by Horizon, reasonably be expected to result in:
- loss of life, limb or
- significant impairment to bodily function, or
- permanent dysfunction of a body part.

If non-emergency care treatment is received in a hospital emergency room (whether in- or out-of-network) while a person is not a full-time inpatient, no benefits will be paid.

Oher Covered

Other Covered Medical Expenses include the following, when furmished by network providers:

- Doctor's charges.

E Diagnostic lab work and X-rays.

- X-ray, radium, and radioactive isotope therapy.
- Anesthetics and oxygen.
- Rental of durable medical or surgical equipment. Not included are charges for more than one item of equipment for the same or similar purpose.
- "Durable Medical and Surgical Equipment" is equipment made to withstand prolonged use and used mainly in the treatment of an illness or injury. It must be suited for use in the home, nol nomally of use to persons without an ilmess or injury, and not used to alter quality or temperature, or for exercise or training.
- The purchase, repair, or replacement of durable medical and surgical equipment and accessorjes needed to operate it.
- The initial purchase is covered only if Horizon agrees that long-tem use is planned and the equipment cannot be rented, or it is likely to cost less to buy it than to rent it.
- Replacement is covered only if Horizon agrees that it is needed because of a change in the person's physical condition, or it is likely to cost less to buy a replacement than to repair the existing equipment or to rent similar equipnent.
- Artificial limbs and eyes. Eyeglasses, hearing aids, orthopedic shoes, or other devices to support the feet are not included.
a Professional ambulance service to transport a person from the place of the injury or onset of illness to the first hospital where treatment is given.


## Pre-Existing Conditions

Pre-Existing Condition exclusions do not apply under any Horizon Plan.

## Certhcation for Hospital Adwissions

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Inpatient hospital confinements must be precertified to qualify for the highest level of benefits paid by the Plan.

No benefits will be paid by the Plan for inpatient hospital charges at non-network hospitals.

## Hospital Expenses Incurred During the Confinement

If certificatjon has been requested and denied for part of the confinement, no benefits will be paid for Hospital Expenses incurred for room and board for that day(s). Benefits for all other Hospital Expenses will be paid at $100 \%$ after a $\$ 100$ copay per admission.
If certification has not been obtained, you will have to pay a $\$ 150$ penally charge before benetits are paid for covered services.
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## Otber Covered Medical Expenses

Whether or not a day of confinement is certified, no benefit will be paid for expenses incurred on any day of confinement as a full-time impatient if excluded by any other terms of this Plan, except that if certification has been given for a day of confinement, excluding services and supplies because they are not necessary will not be applied to expenses for hospital room and board

In the event of an urgent admission, you, the person's doctor, or the hospital must call Horizon Member Services for certification before the person is confined as a full-time inpatient.

An urgent admission is one required as the result of an injury caused by an accident; the diagnosis of an illness; or the onsel of, or change in, an illness. The person's condition does not require emergency medical care, but is severe enough to require confinement in a hospital within two weeks of the date the doctor determines that confinement is required.
A "non-urgent admission" is one which is not an emergency admission or an urgent admission.

When a covered person is confined as a full-time inpatient as the result of an emergency admission, you, the person's doctor, or the hospital must call Horizon Member Services to request certification within 48 hours of the start of the confinement. If the call cannot be made within 48 hours, the call must be made as soon as reasonably possible. The 48-hour requirement is extended to 72 hours when the continement starts on a Friday or Saturday.

An admission is considered to be an emergency when the doctor admits the person to the hospital right after the sudden and (at that time) unexpected onset of a change in the person's physical or mental condition which could be life-threatening or result in significant impaiment or permanent dysfunction if the person is not immediately confined as a full-time hospital inpatient.
If, in your doctor's opinion, it is necessary for you to be confined for a longer time than already certified, you, the doctor, or the hospital may request that more days be certified by calling the precertification number on your ID card or Horizon Member Services at (800) 355BLUE (2583). This musi be done on or before the last day that has already been certified.
Written notice of the number of days certified will be sent promptly to the hospital. A copy will be sent to you and the doctor.

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## Pacilly Expenses

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Howh Care, wnd Hospice Cure

Covered Medical Expenses will be paid as shown below if incurred:

- While a person is confined in a skilled nursing/convalescent facility or hospice; or
- For services or supplies for home health care, hospice care, or skilled nursing care when a person is not confined as an inpatient; and
- It has been certified that such confinement or care is necessary; and
- The confinement or care has been ordered and prescribed by your doctor.

If certification has been requested and denied, no benefits will be paid for Skilled Nursing/Convalescent Facility Expenses or Hospice Care Facility Expenses incurred for room and board. Benefits for all other Skilled Nursing/Convalescent Facility Expenses or Hospice Care Facility Expenses incurted during the confinement will be paid at the Payment Percentage.
If certification has not beed requested and the confinement (or any day of the confinement) is not necessary, no benefits will be paid for Skilled Nursing/Convalescent Facility Expenses or Hospice Care Facility Expenses incurred for room and board. Benefits for all other Skilled Nusing/Convalescent Facility Expenses or Hospice Care Facility Expenses incurred during the confinement will be paid at the Payment Percentage.

If certification has not been requested and the confinement (or any day of the confmement) is necessary, skilled nursing/convalescent Facility Expenses or Hospice Care Facility Expenses incurred during the continement will not be deemed to be Covered Medical Expenses. Benefits for all other such expenses incurred during the confinement will be paid at the Payment Percentage. As to all other Covered Medical Expenses incurred during the confinement, benefits will be paid at the Payment Percentage.

Cupenses for
Services or
supplies

If certification for a service or supply has been requested and denied, or if certification has not been requested and the service or supply is not necessary, no benefits will be paid for the denied or unnecessary service or supply.

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If certification has not been requested for a service or supply and the service or supply is necessary, benclits for the necessary service or supply will be paid at the Payment Percentage.

Whether or not a day of confinement or a service or supply has been certified, no benefit will be paid if the charges for the confinement or service or supply are cxcluded by any other terms of this Plan, except that, to the extent a day of confinement has been certified, excluding services and supplies because they are not necessary will not apply to:

- Skilled Nursing/Convalescent Facility Expenses for room and board, or
- Hospice Care Facility Expenses for room and board.

To the extent that sucla service or supply has been certified for home health care, hospice care, or skilled nursing care, excluding services or supplies because they are not necessary will not apply to the service or supply.
If a person's doctor believes that the person needs more days of confinement or services or supplies beyond those which have been already certified, a call must be made to the precertification number on your ID card or Horizon Member Services at (800) 355 -BLUE (2583) to certify more days of confinement or services or supplies.
Prompt written notice will be provided to you of the days of confinement and services or supplies which have been certified.
If services and supplies for hospice care have been certified and the person later requires hospital confinement for pain control or acute symptom management, any other certification requirement in this Plan will be waived for any such day of hospital confinement.

## Cerlifathon for Centain Procedures and

## Tresthaevas

Certification for certain procedures and treatments is required:

- Before the procedure is performed, or
- Before the treatment starts, unless the procedure or treatment has been ordered and prescribed by your doctor
When any of the procedures or treatments shown below will be performed on an inpatient or outpatient basis, Covered Medical Expenses for the procedure or treatment will be payable as follows:






- If the procedure or treatment is not necessary, no benefits will be payable whether or nol certification has been requested.
- If certification has been requested and the procedure or treatment is necessary, benefits will be payable at $100 \%$.
- Ir certification has not been requested and the procedure or treatment is necessary, expenses in excess of the copayment (if applicable) will be considered Covered Medical Expenses and will be payable at $100 \%$.

Certain procedures or treatments require precertification before they are performed, regardless of whether done on an inpatient or outpatient basis. Call Horizon to detemmine if your procedure requires precertification.

You or the provider perfonning the procedure or treatment must call the precertification number on your ID card or Horizon Member Services at (800) 355-BLUE (2583) to request certification.

If the procedure or reatment is performed due to an Emergency Condition, the call must be made:

* Before the procedure or treatment is performed, or
- Not later than 48 hours atter the procedure or treatment is performed, unless the call cannot be made within that time. In that case, the call must be made as soon as it is reasonably possible. In the event the procedure or treatment is perfommed on a Friday or Saturday, the 48 -hour requirement will be extended to 72 hours.

If the procedure or treatment is performed for any condition other than an Emergency Condition, the call must be made at least I 4 days before the date of the procedure or the date treatnent begins. If it is not possible to make the call during the specificd time, it must be made as soon as reasonably possible before the date of the procedure or the date treatment begins.

Written notice of the certification decision will be sent promptly to you and the provider performing the procedure or treatment. This decision will be valid for 60 days from the date you receive the notice. If the procedure or treatment is to be performed after this 60-day period, certification must again be requested, as described above.

# Cerificatom for Hospinal and Treawnent Fucilty Admasions for Alcohohswn Dreg Abuse, or Mental Disorders 

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## Other Facility

Expenses
Incurred tor the
Services of a
Doctor:

Covered Medical Expenses furnished by a Horizon network provider for the effective trealment of alcoholism, drug abuse. or mental or nervous disorders will be paid at $100 \%$ as described below if incurred:

- While a person is confined in a network hospital or treatment facility,
- It has been certified that such confinement is necessary, and
- The continement has been ordered and prescribed by your doctor.

If certification has been requested and denied, or if certification has not been requested and the confinement (or any day of it) is not necessary, no benefits will be paid.
If certification has not been requested and the confinement is necessary, you will have to pay a $\$ 150$ penally charge before benefits are paid for covered services.

If certification has been requested and denied, or if certification has not been requested and the confinement is necessary, only expenses after the $\$ 150$ precertification penalty will be considered Covered Medical Expenses.
If certification has not been requested and the confinement is not necessary, no benefits will be paid.
Whether or not a day of confinement is certified, no benefits will be payable for Covered Medical Expenses incurred on any day of confinemenr as a full-rime inpatient if excluded by any other terms of this Plan, except that if certification has been given for any day of confinement, services and supplies applicable to hospital and treatment facility room and board will not be excluded as "unnecessary."


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"Emergency Care" means the first treatment given in a hospital's emergency room for the sudden and unexpected onset of a change in a person's physical or mental condition which:

- Requires hospital level care because the care could not safely and adequately have been provided other than in a hospital; or
- Adequate care was not available elsewhere in the area at the time and place it was needed; and
- Ir hospital level care were not given could, as determined by Horizon, reasonably be expected to result in:
- loss of life or limb, or
- significant impairment to bodily function, or
- permanent dysfunction of a body part.

If the person's doctor believes that the person needs more days of confinement beyond those which have already been ecrtified. additional days of confinement must be certified on or before the last day that has already been certified.

## Trentment of Acololisna, Dnag Abuse, ar Mental Disorders

If a person is a full-time inpatient in a Florizon network hospital or treatment facility, expenses for the following are covered:

- Treatment of the medical complications of alcoholism or drug abuse, such as cirrhosis of the liver, delirium tremens, or hepatitis.
- Effective treatment of alcoholism or drug abuse.
- Treament of a mental disorder.
- Room and Board. Charges for daily room and board in a private room over the Private Room Limit are not covered.
- Other necessary services and supplies.

The above expenses are covered only if they are incurred during the first 30 days of all such confunements during any one calendar year.

For alcoholism and drug abuse, benefits will be paid for only 90 days during your lifetime.

Benefits will be paid at $100 \%$.

Outpatient Treament

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Expenses incurred in a Horizon network hospital or facility for the effective treatment of alcoholism or drug abuse, or the treatment of mental disorders, while the person is not confined as a full-time inpatient, will be considered Covered Medical Expenses.

Benefits will be paid at $100 \%$ after a $\$ 25$ copayment, up to a maximum of 20 visits per calendar year for mental/nervous conditions.

For alcohol/drug treatmen, benefits will be paid at $100 \%$ for the first treatment and at the lesser of a $\$ 25$ copayment or $50 \%$ of the covered charges for the second and subsequent courses of treatment.
There is a 60 -visit maximum per calendar year and a 120 -visit lifetime maximum.

## Subwithag Clains

All clams must be filed within two years from the date of the incurred expense. Your claims must be in writing and you must give proof of the nature and extent of the expense. You may obtain Medical Plan Benefits Request forms from the Benefits Service Center; directly from Horizon's website (www.horizonbluc.com/nationalaccounts); or by contacting Horizon Member Services at (800) 355-BLUE (2583).

## How Four Benefits Are Paid

American Water has contracted with Horizon to assist in administering benefits under the EPO Plan as the Claims Administrator. Your claims will be paid as soon as Horizon receives the necessary written proof supporting your claim. In order to speed claims processing, Horizon will pay medical benefits directly to the provider.
With the exception of the copayment for doctor's office visits, you should never pay a provider directly until you receive an Explanation of Benefits (EOB).

## Filing Medtcal Channs

Because the EPO Plan provides in-network benefits only and all claims are paid directly to the provider, you will not have to file any Medical Plan Benefits Request forms.

If you have other group coverage (or Medicare coverage) that pays benefits before the American Water Plan, you will need to provide Horizon with a copy of the other carrier's Explanation of Benefits (EOB) reflecting the benefits paid under the other coverage for the expenses being submitted for payment to this plan.

## Provisions That Apply To All Medical Plans

## Provisions That Apply to All Medical

Plows

## This section describes General Exclusions that apply under all Medical Plans.

## Coverage is not provided for the following charges:

- Those for services and supplies not necessary, as determined by Horizon, for the diagnosis, care, or treatment of the illness or injury involved. This applies even if they are prescribed. recommended, or approved by the person`s attending doctor or dentist.
- Those for care, treatment, services, or supplies that are not prescribed, recommended, and approved by the person's attending doctor or dentist.
- Those for, or in connection with, services or supplies that are, as determined by Horizon, considered to be experionental or investigational. A drug, device, procedure, or treatment will be determined to be experimental or investigational:
- if there are insufficient outcomes data available from controlled clinical trials published in the peer reviewed literature to substantiate its safety and effectivencess for the illness or injury involved; or
- if required by the FDA, approval has not been granted for marketing; or
- if a recognized national medical or dental society or regulatory agency lias determined, in writing, that it is experimental, investigational, or for research purposes; or
- if the written protocol or protocols used by the treating facility or the protocol or protocols of any other facility studying substantially the same drug, device, procedure, or treatment or the written informed consent used by the treating facility studying the same drug, device, procedure, or treatment states that it is experimental, investigational, or for research purposes.

However, this exclusion will not apply with respect to services or supplies (other than drugs) received in connection with an illness, if Horizon determines that:

- the illness can be cxpected to cause death within one year, in the absence of effective treatment; and
- the care or treatment is effective for that illness or shows promise of being effective for that illness as demonstrated by scientific data. In making this determination Horizon will take into account the results of a review by a panel of independent medical professionals. They will be selected by Horizon. This
panel will include professionals who treat the type of illness involved.

Also, if Horizon deternines that available scientific evidence demonstrates that the drug is effective or shows promise of being effective for the illness, this exclusion will not apply with respect to drugs that:

- have been granted approval as an investigational new dnug with treatment status, or
- have been granted approval as an investigational new drug with cancer treatment status.
- Those for or related to services, treatment, education, testing, or training related to leatning disabilities or developmental delays.
- Those for care furnished mainly to provide a surrounding free from exposure that can worsen the person's illness or injury.
- Those for, or related to, the following types of treatment:
- primal therapy
- rolfing
- psychodrama
- megavitamin therapy
- bioenergetic therapy
- vision perception training
- carbon dioxide therapy
- Those for treatment of covered healch care providers who specialize in the mental health care field and who receive treament as a part of their training in that field.
- Those for services of a resident doctor or intern rendered in that capacity.
- Those to the extent they are not reasonable charges, as determined by Horizon.
- Those that are made only because there is health coverage.
- Those that a covered person is not legally obliged to pay.
- Those, as determined by Horizon to be for custodial care.
- Those for services and supplies:
- furnished, paid for, or for which benefits are provided or required by reason of the past or present service of any person in the armed forces of a government.
- funnished, paid for, or for which benefits are provided or reguired under any law of a government. (This does not include a plan established by a government for its own employees or their dependents or Medicaid.)
- Those for or related to any eye surgery mainly to comect refractive eirors.
- Those for education, special education, or job training, whether or not given in a facility that also provides medical or psychiatric treatment.
- Those for plastic surgery, reconstuctive surgery, cosmetic surgery. or other services and supplies that improve, alter, or enhance appearance, whether or not for psychological or emotional reasons, except to the extent needed to:
- improve the function of a part of the body that is not a tooth or structure that supports the teeth; or
- is malformed as a result of a severe bisth defect (this includes harelip or webbed fingers or toes), or a direct result of surgery perfonned to treat an illness or injury; or
- repair an injury that occurs while the person is covered under this Plan.
- Those that are for therapy or for supplies or for counseling for sexual dysfunctions or inadecuacies that do not have a physiological or organic basis.
- Those for or related to sex change surgery or to any treatment of gender identity disorders.
- Those for or related to artificial insemination, in vilro fertilization, or embryo trabsfer procedures.
- Those for the reversal of a sterilization procedure
- Those for routine physical exams, routiue vision exams, routine hearing exams, routine dental exams, immunizations, or other preventive services and supplies.
- Those for or in connection with marriage, family, child, career, social adjustment, pastoral, or financial counseling.
- Those for acupuncture therapy. Not excluded is acupuncture when it is:
- performed by a doctor, and
- as a form of anesthesia in connection with surgery that is covered under this Plan.
- Those for or in connection with speech therapy. This exclusion does not apply to charges for speech therapy that is expected to restore speech to a person who has lost existing speech function (the ability to express thoughts, speak words, and form sentences) as the result of an illness or injury.

Any exclusion above will not apply to the extent that:

- Coverage is specifically provided by name in this Summary Plan Description booklet, or
- Coverage of the charges is required under any law that applies to the coverage.

These excluded charges will not be used when calculating benefits.
The law of the jurisdiction where a person lives when a cłaim occurs may prohibit some benefits. If so, they will not be paid.

Any charge for a service or supply furnished by a Network Provider in excess of such provider's Negotiated Charge for that service or supply will not be a covered expense under the Plan of benefits. This rule will not apply to any service or supply for which a benefit is provided under Medicare before the benefits of the group contract are paid.

## Coordinahon of Your Benefis <br> Whis Other Plans, Not Including Medicare

Today, in many situations, both husbands and wives work. Therefore, is is common for individual members of a family to be eligible for benefits under more than one group medical or dental plan. In such situations the benefits of the various plans are "coordinated" to determine how covered expense will be paid by your American Water Plan and the other plans. This may mean a reduction in benefits under this Plan. The combined benefits will not be more than the expenses recognized under chese American Water Plans.
"Other plans" means:

- Any group medical or dental plan for which an employer pays all or part of the costs or makes payroll deductions;
- Any plan that you purchase through a group such as AARP; or
- Any government program, coverage required or provided by any law, or vehicle insurance (uninsured/underinsured motorist and casualty/liability).
If the American Water Plan is determined to be the primary plan (the plan that pays its benefits first), it will pay its regular benefits in full without regard to any payment that may be made under any other plan.
If the American Water Plan is detemined to be the secondary plan (the plan that pays its benefits after the primary plan pays benefits), it will pay a reduced amount of benefits that will in no event cause the total
benefit from all plans to exceed the benefit that would have been paid by the American Water Plan if it had been the primary plan. However, if benefits under the primary plan are reduced because a covered person does not comply with the plan provisions (such as penalties resulting from the failure to comply with cost management provisions of the plan), the amount of the reduction will not be considered for paymeor under the American Water Plan.

For example, if you have Standard PPO coverage and the primary plan pays $70 \%$ of eligible charges to an in-uctwork provider, the American Water Plan will pay an additional $10 \%$ of covered charges for a total benefit equal to $80 \%$ of covered charges which is the benefil the American Water Plan would have paid as the primary plan.

When other coverage exists in addition to you American Water coverage, the following rules will be used to determine which medical or dental plan is primary and pays first, and which medical or dental plan is secondary and pays second:

- A plan with no rules for coordination with other benefits will pay its benefits before a plan which contains such rules.
- A plan that covers a person as an employce pays before the plan that covers the person as a dependent. However, there may be situations where the person is a Medicare beneficiary and has a working spouse. ln such a situation,
- The spouse's plan which covers the person as a dependent pays first,
- Medicare pays second, and
- The plan covering the person as an employee pays third.
- Except in the case of a dependent child whose parents are divorced or separated, the plan which covers the person as a dependent of a person whose birthday comes first in a calendar year will be primary to the plan which covers the person as a dependent of a person whose birthday comes later in that calendar year. If both parents have the same birthday, the benefits of a plan which covered one parent longer are detenmined before those of a plan which covered the other parent for a shorter period of time.
- If the other plan does not have the rule described in the above provision and, as a result, the plans do not agree on the order of benefits, the rule in the other plan will determine the order of ${ }^{\circ}$ benefits.
- In the case of a dependent child whose parents are divorced or separated:
- If there is a court decree which states that the parents shall share joint custody of a dependent child, without stating that
one of the parents is responsible for the health care expenses of the child, the order of benefit determination rules specified in the above provision will apply.
- If there is a court decree which makes one parent financially responsible for the nedical, dental, or other health care expenses of such child, the benefits of a plan which covers the child as a dependent of such parent will be determined before the benefits of any other plan which covers the child as a dependent child.
- If there is not such a court decree:

If the parent with custody of the child has not remarried, the benefits of a plan which covers the child as a dependent of the parent with custody of the child will be determined before the benefits of a plan which covers the child as a dependent of the parent without custody.
If the parent with custody of the child has remarried, the benefits of a plan which covers the child as a dependent of the parent with custody shall be determined before the benefits of a plan which covers that child as a dependent of the stepparent. The benefits of a plan which covers that child as a dependent of the stepparent will be determined before the benefits of a plan which covers that child as a dependent of the parent without custody.

- If the above rules do not establish an order of payment, the plan under which the person has been covered for the longest will be deemed to pay its benefits first, except that the benefits of a plan which covers the person as a:
- laid-off or retired employee, or
- the dependent of such person,
shall be determined after the benefits of any other plan which covers such person as:
- an employee who is not laid-off or retired, or
- a dependent of such person.

If the other plan does not have a provision regarding laid-off or retired employees and, as a result, each plan determines its benefits after the other, then the previous paragraph will not apply.

- The benefits of a plan which covers the person under a right of continuation pursuant to federal or state law shall be deternnined after the benefits of any other plan which covers the person other than under such right of continuation.

If the other plan does not have a provision regarding right of continuation pursuant to federal or state law, and as a result, each
plan determines its benefits after the other, then the above paragraph will not apply.

Horizon has the right to release or obtain any information and to make or recover any payment it considers necessary in order to adnuinister this provision.

When this provision operates to reduce the total amount of benefits otherwise payable to you under this Plan during a calendar year, each benefit that would be payable in the absence of this provision will be reduced proportionately. Such reduced amount will be charged against any applicable benelit limit of your American Water Plan.

## Abromobite Perconal hojuy protecton (PM)

If you are injured in an automobile accident and become cligible for benefits under the personal injury protection (PIP) provision of an automobile insurance policy, benefits under the American Water Medical Plan are payable after the automobile insurance policy benefits have been paid, even if you have designated the American Water Medical Plan as primary to your automobile insurance coverage in exchange for reduced automobile insurance premiums.

## Thurd pary Rublity and Subrogatorn

## General Principle

When you or your dependent receive benefits under the Plan which are related to medical expenses that are also payable under Workers' Compensation, any statute, any uninsured or underinsured motorist program, any no fault or school insurance program, any other insurance policy or any other plan of benefits, or when related medical expenses that arise through an act or omission of another person are paid by a third party, whether through legal action, settlement or for any other reason, you or your dependent slall reimburse the Plan for the related benefits received out of any funds or monies you or your dependent recovers from any third party.

## Specific Requirements and Plan Rights

Because the Plan is entitled to reimbursement, the Plan shall be fully subrogated to any and all rights, recovery or causes of actions or
claims that you or your dependent may have against any third party. The Plan is granted a specific and first right of reimbursement from any payment, amount or recovery from a third party. This right to reimbursement is regardless of the manner in which the recovery is structured or worded, and even if you or your dependent has not been paid or fully reimbursed for all of their damages or expenses.

The Plan's share of the recovery slall not be reduced because the full damages or expenses claimed have not been reimbursed unless the Plan agrees in writing to such reduction. Further, the Plan's right to subrogation or reimbursement will not be affected or reduced by the "make whole" doctrine, the "fund" doctrine, the "common fund" doctrine, comparative/contributory negligence, "collateral source" nule, "attorncy's fund" doctrine, regulatory diligence or any other equitable defenses that may affect the Plan's right to subrogation or reimbursement.

The Plan may enforce its subrogation or reimbursement rights by requiring you or your dependent to assert a claim to any of the benefits to which you or your dependent may be entitled. The Plan will not pay attorneys fees or costs associated with the claim or lawsuit without express written authorization from the Employer.

If the Plan should become aware that you or your dependent has received a third party payment, amount or recovery and not reported such amount, the Plan, in its sole discretion, may suspend all further benefits payments related to you or any of your dependents until the reinbursable portion is returned to the Plan or offset against amounts that would otherwise be paid to or on behalf of you or your dependents.

## Participant Duties and Actions

By participating in the Plan you and your dependents consent and agree that a constructive trust, lien or an equitable lien by agreement in favor of the Plan exists with regard to any sellement or recovery from a third person or party. In accordance with that constructive trust, lien or equitable lien by agreement, you and your dependents agree to cooperate with the Plan in reimbursing it for Plan costs and expenses.

Once you or your dependent has any reason to believe that you or they may be entitled to recovery from any third party, you or your dependent must notify the Plan. And, at that time, you and your dependent (and your or their attorney, if applicable) must sign a subrogation/reimbursement agreement that confirms the prior acceptance of the Plan's subrogation rights and the Plan's right to be rejmbursed for expenses arising from circumstances that entitle you or your dependent to any payment, amount or recovery from a third party.

If you or your dependent fails or refuses to execute the requited subrogation/reimbursement agreement, the Plan may deny payment of any benefits to you and any of your dependents until the agtcement is signed. Alternatively, if you or your dependent fails or refuses to execute the required subrogation/reimbursement agreement and the Plan nevertheless pays benetits to or on behalf of you or your dependent, your or your dependent's acceptance of such benefits shall constitute agreement to the Plan's right to subrogation or reimbursement.

You and your dependent consent and agree that you or they shall not assign your or their rights to settlement or recovery against a third person or party to any other party, including their attorneys, without the Plan's consent. As such, the Plan's reimbursement will not be reduced by attorneys* fees and expenses without express written authorization from the Employer.

## Recompment

The Plan has the right to recover any mistaken payment, any overpayment, any payment that is made to any individual who was not eligible for that payment or any payment that was required to have been made to the Plan under the "Third Pary Liability and Subrogation" section above. The Plan, or its designec, may withoold or offset future benefit payments, sue to recover such amounts, or may use any other lawful remedy to recoup any such amounts.

## No Assignment of Renefis

You cannot assign, pledge, encumber or otherwise alienate any legal or bencficial interest in benefits under the Plan, and any attempt to do so will be void. The payment of benefits directly to a health care provider, if any, shall be done as a convenience to the covered person and shall not constitute an assignment of benefits under the Plan.

## When an Achue Enplopee Is Ehgible for

## Medicape

If an active employee or covered dependent is eligible for Medicare, the American Water Medical Plan will be primary and Medicare will coordinate with it.
A person is "eligible for Medicare" if he or she:

- Is covered under it.
- Is not covered under it because of:
- having refused it,
- having dropped it, or
- having failed to make proper request for it.

Any rule for coordinating "other plan" benefits with those under this Plan will be applied.

## When Coneroge Is Tomminatod

Coverage under either Plan teminates when the first of these events happens:

- The day your employment ends;
- When the group contract terminates as to the coverage;
- When you are no longer in an Eligible Class. (This may apply to all or part of your coverage.);
- When you fail to make any required contribution.

Under certain circumstances, American Water may continue your coverage when you are not actively at work. If you are not at work due to illness or injury, American Water medical coverage will be continued for the length of your approved leave of absence, nol to exceed 24 months from the date you are disabled as long as appropriate contributions are made.
A dependent's coverage will terminate at the first to occur of:

- The termination of all dependents' coverage under the group contract:
- When a dependent becomes covered as an employee;
- When such person is no longer an Eligible Dependent;
- When your coverage terminates.

You may be entitled to continue your medical coverage (see "Continuation of Health Coverage" on page 189).

## Cemilicate of Credinable Coverage

When you or your covered dependents terminate coverage under the Plan, a Notice of Creditable Coverage will be issucd to you specifying your coverage dates under the health plan and any probationary periods you were required to satisfy. The certificate will contain all the necessary information another health plan will need to determine if you have prior continuous coverage that should be credited toward any preexisting condition limitation period. Health plans inay require that you submit a copy of this form when you apply for coverage.

The Notice of Creditable Coverage will be issued to you when you terminate coverage with the group and, if applicable, at the expiration of any continuation period. The Plan will also issue the certification of coverage form if you request an additional copy at any time within the 24 months after your coverage terminates.

## Qualifed Medial Child Suppore Orders (0MCSOs)

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QMCSOs are usually issued for children who reside with a former spouse. A QMCSO designates the affected child as an "altermate recipient."
American Water must treat an alternate recipient as an eligible dependent and must deduct any applicable contributions from the employee's pay. A QMCSO may also require the claim administrator to issue claim payments directly to the health care provider, the alternate recipient, or his or her legal representative. A custodial parent or guardian may be designated to receive claim payments on the child's behalf. American Water is required to furnish an altemate recipient or his or her legal representative a copy of the Summary Plan Description. In addition, the alternate recipient or his or her legal

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representative may receive, without charge, a copy of the Plan's QMCSO procedures.
To be "qualified," a medical child support order must:

- Be issued by a court of competent jurisdiction,
- Include the name and last mailing address of both the employee and the affected child,
- Identify the health benefit plan subject to the order, and also the applicable time period,
- Provide a reasonable description of the type of benefits that must be provided for the child, and
- Not impose any benefits requirements that do not apply to other Plan participants.

If a child meets the definition of an eligible dependent and you are required to provide health care benefits for that child as the result of a QMCSO, bis or her initial participation in an American Water Medical Plan will not be affected by any provision that:

- Requires evidence of good health as a condition of participation,
- Delays participation due to a confinement, or
- Limits participation due to a pre-existing condition.

Coverage for the child will become effective on the date of such court order.

If you are the non-custodial parent, proof of claim for such child may be given by the custodial parent. Benefits for such claim will be paid to the custodial parent.

## Adjustwent Rule

If, for any reason, a person is entitled to a different amount of coverage, coverage will be adjusted. Any increase is subject to any active work rule. Benefits for claims incurred after the date the adjustment becomes effective are payable in accordance with the revised Plan provisions. In orher words, there are no vested rights to benefits based upon provisions of this Plan in effect before the date of any adjustment.

## Converwion to a Personal Pollacy If Yow <br> Enthoynnestior COBRA Continumaton Ends








If your medical coverage ends under a PPO or the EPO Plan, you may be able to convert your group coverage to a personal medical policy underwritten by Horizon. No evidence of insurability is required. You and your family members may convert when all coverage ceases because your employment or COBRA continuation ceases or you cease to be in an eligible class. You may not convert if American Water discontinues these Plans.

The personal policy may cover:

- You only, or
m You and all of your family members who are covered under this Plan when your coverage ceases, or
- If you die before you retire, all your family members, or your spouse only, who are covered under either Plan when your coverage ceases.

In addition, if your own coverage continues, your dependents can apply if they cease to be a dependent as defined in this Plan

You may convert when you become a retired employee. However, if you are eligible and you elect to participate in the American Water Retiree Medical Plan, this conversion privilege will not again be available to you.

You must apply for a personal policy within 31 days after coverage ends or would otherwise end withoul a provision to continue coverage for retired employees. The 31 days start on the date coverage actually ends, even if the person is still eligible for benefits because of a total disability.
Horizon will insure and administer the converted personal policy and may decline to issue the personal policy if:

- It is applied for in a jurisdiction in which Horizon cannot issue or deliver the policy.
- On the date of conversion, a person is covered, eligible, or has benefits available under one of the following:
- any other hospital or surgical expense insurance policy,
-- any hospital service or medical expense indeminity corporation subscriber contract,
- any other group contract,
- any statute, welfare plan, or program,
and which, with the converted policy, would result in overinsurance or match benefits.

You do not have the right to convert if you have been covered under this Plan for less than three months. In addition, no person has the right to convert if:

- He or she has used up the naximum benefit, or
- He or she becomes eligible for any other Medical Expense Coverage under this Plan.
The personal policy, and its terms, will be of a type for group conversion purposes:
- As required by law or regulation, or
- As then offered by Horizon according to American Water conversion plan.
It will not provide coverage which is the same as coverage under this Plan. The level of coverage may be lower and an overall Lifetime Maximum Benefit will apply.
The personal policy may contain either or both:
- A statement that bencfits under it will be cut back by any like benefits payable under this Plan after your coverage ceases.
- A statement that Horizon may ask for data about your coverage under any other plan. 'This may be asked for on any premium due date of the personal policy. If you do not give the data, expenses covered under the personal policy may be reduced by expenses which are covered or provided under those plans.
- The personal policy will state that Horizon has the right to refuse renewal under some conditions. These will be shown in that policy.

If you or your dependent want to convert, you should contact Horizon at (800) 355-BLUE (2583) to obtain the telephone number of your local Blue Cross-Blue Shield office. When you reach the local office, ask to speak witl a representative in the Consumer Individual Sales Department and request that a package on converting your coverage be mailed to you.

If a person is eligible to convert, information will be sent about the personal policy for which he or she may apply.

The first premium for the personal policy must be paid at the time the person applies for that policy. The premium due will be Horizon's notmal rate for the person's class and age, and the form and amount of coverage.

The personal policy will take effect on the day after coverage terminates under the American Water Plan.

## Disease Managenenat Progrant

Horizon's Disease Management Program provides educational materials and, in some cases, individualized case management for meobers, with an emphasis on health education and behavior modification for modifiable risks. Members are encouraged to work closely with their doctor(s) to remain personally involved in their care. Employees with one of the conditions listed below may be identified as eligible for program participation.

- asthma
- congestive heart failure
- coronary artery disease
- diabetes, and
- low back pain

A "participant" in this program is a covered person:

- who has identified himself or herself; or
- who bas been identified by his or her attending doctor or other health care provider. Horizon; or his or her Employer; and
- who is approved by Horizon as a participant.

For additional information or to take part in this program, call Horizon at (800) 355-BLUE (2583).

# The Prescription Drug Benefly Prograns 

## Prescription Drug benefit Pragran

Horizon's Prescription Drug Benefit program is administered by Caremark. You are autonatically covered by the Prescription Drug Benefit if you enroll in an American Water Medical Plan.
 Whicr the MMSI plath.

The program offers you two ways to receive medications - at a retail phamnacy or by mail-order.
. For your short-term and immediate prescription drug needs, you may use local participating pharmacies that have agreed to charge discounted prices.

- For medications you use on an extended or maintenance basis, you may purchase up to a 90 -day supply through Caremark, the administrator of the mail-order program. They will be deljvered by mail directly to your home.

Coverage under the Prescription Drug Program ends when your American Water Medical Plan terminates.

## What Mon Pay for Prescription Drags

Your coinsurance and copays are the same under both PPO options and the EPO option.

| Retail Pharmacy - Up to a 34-Day Supply |  |  |
| :--- | :---: | :---: |
|  | Standard or Premium PPO | EPO |
| Generic | You pay $10 \%$ | You pay $10 \%$ |
| Preferred Brand | You pay $20 \%$ | You pay $20 \%$ |
| Non- Preferred Brand | You pay $20 \%$ | You pay $20 \%$ |

Mail-Order Program - Up to a 90-Day Supply

|  | Standard or Premium PPO | EPO |
| :--- | :---: | :---: |
| Generic | You pay $\$ 14$ | You pay $\$ 14$ |
| Preferred Brand | You pay $\$ 30$ | You pay $\$ 30$ |
| Non- Preferred Braod | You pay $\$ 70$ | You pay $\$ 70$ |

Note: Coinsurance and copayments may not be applied to Medical or Dental Plan deductibles or maximums. In addition, certain controlled substances and other prescription medications may be subject to dispensing limitations and to the professional judgment of the phamnacist.

## Preferred Dr meg Lint

Your Prescription Drug coverage levels are based on the plan's Preferred Drug List - also called a "formulary." When your prescription medication is on the Preferred Drug List, you pay a lower cost than when the drug is not on the Preferred Drug List. If you receive a prescription for a drug that is not on the list, you should ask your doctor if there is another drug on the Preferred Drug List for your specific condition.

As part of our commitment to provide the best Prescription Drug program possible, we continue to seek ways to help control the rising costs of health care without compromising quality. As a result, the Horizon's Prescription Drug Guide is continually reviewed to belp ensure that the list of preferred medications remains responsive to the needs of the member and the prescriber.

In general, medications are moved to non-preferred status for one or more of the following reasons:

- A generic equivalent product becomes available,
- New satety or clinical effectiveness information supports the move to non-preferred status, or
- Drug use information shows that preferred altematives with better patient compliance rates are available.

To find out if your prescription is on the Preferred Drug List, call Horizon Member Services at (800) 355-BLUE (2583) or log on to www.horizonblue.com/nationalaccounts. Click on "Pbarmacy Services" in the lower right and then on "Preferred Drug Guide."

## Save Whth Generics

When using your Prescription Drug plan, you will pay less if you receive a prescription for a generic drug. The Food and Drug

Administration (FDA) regulates generic drugs and requires that they contain the same active ingredients, strength, and dosage as the original brand-name drug. Although generic and brand-name drugs work the same way in the body and have the same risks and benefits, generic drugs cosi significantly less than their brand-name counterparts.

When you receive a prescription from your doctor, ask him or her to prescribe a generic or to allow for generic substifution.

## Coweredinges

The Prescription Drug Program covers drugs that require a doctor's written prescription and are medically necessary for the treatment of illness or injury. Covered drugs include. but are not limited to:

- Federal legend drugs,
- State restricted drugs,
- Compounded medications,
as Injectable drugs, including insulin, needles, and syringes, and
- Oral contraceplives


## Specialy Drugg

Specialty Drugs (also called Specialty Phammaceuticals) are a class of medications typically produced through biotechnology (sometimes known as biologicals), administered by jnjection, and/or requiring special patient montoring and handling.

Horizon members who are required to take a specialty pharmaceutical must obtain their medication from a specialty pharmacy contracted by Horizon. These pharmacies will provide members with a high level of prescription delivery service along with the following:

- Drug/disease-specific education and support;
- Convenient home or doctor office delivery;
- Claims assistance:
- Easy ordering with a dedicated toll-free number;
- Hejpful follow up care calls to remind members when it is time to relill a prescription, check on therapy progress, and answer questions.

If you have any questions, experience any difficulty in filling your specialty pharmaceutical prescription, or would like to obtain a listing of specialty pharmacies or pharmaccuticals, please call Caremark Member Services at (866) 881-5603. In most cases your doctor will advise you if your medication is a specially drug.

## How to Use the frewerphios Dragg progrann

Using a

When you need medication immediately, simply present your ID card at a participating pharmacy and pay a percent of the discounted prescription cost for a 34 -day supply of medication. You will pay $20 \%$ for brand names and $10 \%$ for generic drugs. There is no deductible to meet. You will have no claim forms to complete and no waiting for reimbursemem.

Using an Out-of- When you have a prescription filled at non-participating pharmacy,
If you use a participating pharmacy, you will receive discounted prices and will not need to complete a claim form. Otherwise, you will pay more and must complete a claim form to receive reimbursement. You can locate participating pharmacies by calling Horizon Member Services at (800) 355-BLUE (2583) or by logging on to www.horizonblue.com/nationalaccounts. Click on "Pharnacy Services" in the lower right and then on "Choosing a Pharmacy" to access the Pharmacy Locator. you must pay the regular charge. To receive reimbursement, submit a claim form to Horizon at the address printed on the back of the Prescription Benefits clain form.

The Plan will pay $80 \%$ or $90 \%$ of the tetail (non-discounted) cost of your prescription. If your claim is approved, your reimbursement check should arrive about two weeks after you mail the claim form.

# How the Mail Order Drag Progrow Works 

The Mail Order Drug Program is designed to save you money on medications that you use on a long-term or maintenance basis. The program allows you to receive up to a 90 -day supply of medication as follows: $\$ 14$ for gencric, $\$ 30$ for preferred brand, and $\$ 70$ for nonprcferred brand.

Ordering for the Pist Time

The mail order service option gives you the convenience of ordering medication for direct delivery by mail to your home, office, or other location. Your doctor may call in your new prescription to Caremark, or you can simply fill out the mail service order form and send it in with your prescription(s).
For your first mail service prescription, complete the Participant Profile/Order Form in your Welcome Package. You can also print an order form from www.caremark.com. Log in with your login ID and password, click on the "Prescriptions and Coverage" tab, and select "Print Forms" from the menu on the left.

Attach your 90 -day supply prescription and mail it along with the appropriate copayment to:

Caremark
P.O. Box 830070

Bimuingham, AL 35283-0070
Your prescription should arrive within 10 to 14 days from the date Caremark receives your order.

Ordering Remiss You can order refills online, by mail, or over the phone.
To place a refill order online:

- Go to www.caremark.com and log in with your login ID and password. Click on the "Prescriptions and Coverage" tab, select Refill Prescriptions, and choose the prescription(s) that you want to refill. Because the system retains your information, you do not need to complete an order form for each refill.

To place a retill order by mail:

- Use the computerized pre-printed Participant Profile/Order Form and pre-addressed envelope that comes with each Caremark prescription mailed to you. If your address, doctor, or health condition information changes, please note them on the form and be sure to make the same changes to your account on www.careonark.com

To place a refill order over the phone:
Call Caremark toll-free at (800) 213-0879 using a touch-tone phone. This service is available 24 hours a day, seven days a week. Enter the patient's Identification number and year of birth. For payment of your share, enter your credit card number and expiration date.

## Drugs and Supphes Not Covered

- The following drugs and supplies are not covered under the Prescription Drug Benefit Program.
- Bandages
- Braces
- Cosmetics
- Dietary supplements
- Drugs intended for use in a doctor's office or orher setting that is nor the participant's home
- Certain experimental or investigational drugs
- Fertility drugs
- Health and beauty aids
- Heat lamps
- Non-fegend drugs
- Norplant
- Injectable drugs (other than insulio) and specialty drugs
- Prescriptions that a participant is enlitled to receive without charge under any Worker's Compensation or municipal. state, or federal program
- Retin-A
- Splints and artificial applianccs
-- Appetite suppressants that are not medically necessary
- Any prescription medication that is also available over the counter
Devices and equipment
- In addition, certain controlled substances and other prescription medications may be subject to dispensing limitations and to the professional judgment of the pharmacist.


# Temmanaton of Coberge 

Your prescription drug coverage ends when your Medical Plan ecrminates.

## Prewcription Drug Phan Adminasmemor

Caremark Rx, Inc. (www.caremark.com) administers the program, with a national retail pharmacy network of over 60,000 participating pharmacies and seven mail service pharmacies. Their online tools and other communications provide you with convenient service, personal care and attention, and up-to-date information.

## No Ascignoment of Bemeftrs

You cannot assign, pledge, encumber or otherwise alienate any legal or beneficial interest in benefits under the Plan, and any attempt to do so will be void. The payment of benefits directly to a health care provider, if any, shall be done as a convenience to the covered person and shall not constitute an assignment of benefits under the Plan.

## The Dental Plans

## Demal Benefits


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Your dental health is an important aspect of your overall health and well-being. All employees and their dependents who enroll in any of American Water Medical Plans are also enrolled in a Dental Plan. This valuable benefit is self-insured by American Water. and Aetna provides certain administrative services under this Plan. The provisions of the Plan will remain effective only while you are covered under the group contract
There are two dental plans - Standard and Premium. The dental plan you receive depends on the medical plan you select, since dental benefits are bundled with the medical plan. The Standard PPO medical plan includes Standard PPO Dental, and the Premium PPO and EPO medical plans include Premium PPO Dental. If you opt out of medical and select dental/vision coverage you will be enrolled in the Dental Premium PPO Plan. Vote: // ron we a l/owaii complote
 Prominn: la () Denall Pon.

The Plan pays beoefits for charges for dental services and supplies incurred for treatment of dental disease or injury. These benefits apply separately to each covered person.

The dental plans offer both in-network and out-of-network benefits, but your benefit levels are higher (and your out-of-pocket costs lower) when you use Aetna in-network dentists. To find a dentist or see if your dentist participates in Aetna's provider network, visit Www.actna.com or contact Member Services at (800) 292-4366.

If you choose an out of network dentist you will be responsible for any provider charges in excess of what the Plan pays in addition to any deductible and coinsurance amount. Plan benefits will be based on reasonable and customary charges.

## Denal Phan Summary Chant

The following chart provides a summary of your dental benefit levels and coverages:

|  | Standard PPO Dental | Premium PPO Dental |
| :--- | :---: | :---: |
| Deductible (single / family) | $\$ 100 / \$ 200$ | $\$ 50 / \$ 100$ |
| Preventive Care | $80 \%$ of covered expenses <br> after deductible | $100 \%$ of covered expenses with <br> no deductible |
| Basic and Major Services | $50 \%$ of covercd expenses after <br> deductible | $80 \%$ of covered expenses <br> after deductible |
| Calendar Year <br> Maximum | $\$ 1,000$ | $\$ 1,000$ |
| Orthodontia | Not covered | $50 \%$ of covered expenses <br> after deductible <br> $\$ 1,500$ lifetime maximum <br> (covers employecs and cligible <br> dependents) |

## Coverod Denalal Expenses

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Note: You are responsible for any amounts billed by providers that are in excess of the amount paid by the Plan.
The Premium PPO Dental Plan pays the following benefits for Covered Dental Expenses up to the payment percentage:

- $100 \%$ of Preventive (Type A) expenses with no deductible.
- $80 \%$ of Restorative and Major Services (Type B) expenses after the deductible
- $50 \%$ of Orthodontia (Type C) expenses after the deductible, up to a lifetime maximum of $\$ 1,500$.

The Standard PPO Dental Plan pays the following benefits for Covered Dental Expenses up to the payment percentage:

- $80 \%$ of Preventive (Type A) expenses after the deductible.
- $50 \%$ of Restorative and Major Services (Type B) expenses after the deductible.
- There is no coverage for Orthodontia (Type C) expenses.

Both Dental plans pay the dentist's charges for the services and supplies listed below which, for the condition being treated, are in Aetna's sole determination:

- Necessary,
- Customarily used nationwide, and
- Deemed by the profession to be appropriate. They must meet broadly accepted national standards of dental practice.


## Type A Expenses - Preventive Services

- Oral exams once every six months. This includes prophylaxis, scaling, and cleaning of teeth.
- X-rays for diagnosis.
- Other X-rays (up to one full mouth serics in a 36 -month period and one set of bitewings in a 6-month period).


## Type B Expenses - Restorative and Major Services

- Topical application of sodium or stannous fluoride for persons under 15 years of age.
- Space maintainers.
- Non-surgical extractions.
- Fillings.
- General anesthetics given in connection with covered dental services.
- Non-surgical trcatment of diseased periodontal structures.
- Non-surgical endodontic trearment. This includes root canal therapy.
- Injection of antibiotic drugs.

Repair or recementing of crowns, inlays, bridgework, or dentures.

- Relining of dentures.
- First installation of removable dentures to replace one or more natural teeth extracted while the person is covered. This includes adjustments for the 6 -month period following the date they were installed.
- Replacement of an existing removable denture or fixed bridgework by a new denture, or the adding of teeth to a partial removable denture. Note: the "Prosthesis Replacement Rule" below must be met.
- Inlays, gold fillings, or crowns. This includes precision attachments for dentures.
- First installation of fixed bridgework to replace one or more natural teeth extracted while the person is covered. This includes inlays and crowns as abutments.
- Replacement of an existing removable denture or fixed bridgework by new fixed bridgework, or the adding of teeth to existing fixed bridgework. Note: the "Prosthesis Replacement Rule" below must be met.


## Type C Expenses - Orthodontic Treatment (Premium PPO Dental Plan Only)

A dentist's charges for services and supplies for Orthodontic Treatment are included as Covered Dental Expenses under the Premium PPO Dental Plan. In addition to all other terms of this dental benefit:

- The Plan pays $50 \%$ of Covered Dental Expenses after the deductible, up to a $\$ 1,500$ lifetime maximum, for employees and cligible dependents.
- Benelits will not exceed the Orthodontic Maximum for all expenses incurred by a fanily member in his or her lifetime, even if there is a break in coverage.
- Please note: All claims for dental benefits must be submitted within 24 months from the start of treatment.


## Adwance Claim Revien

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Before starting a course of treatment for which the dentist's charges are expected to be $\$ 150$ or more, details of the proposed course of treatment and charges to be made should be filed with Aetna. Please contact Aetna Member Services at (800) 292-4366 for additional details and to obtain forms. Actna will then estimate the benefits and notify you and your dentist before treatment starts. Advance review is not required as a condition of receiving benefits, but ir will let you
know what to expect as far as Plan benefits if you obtain more expensive treatment.

Some services may be given before an Advance Claim Review is made (emergency treatments and oral exams, including prophylaxis and X-rays).

A course of treatment is a planned program of one or more services or supplies to treat a dental condition. The condition must be diagnosed by the attending dentist as a result of an oral exam. The treatment may be given by one or more dentists. The course of treatment starts on the date a dentist first gives a service to correct or treat such dental condition.

Note: As a part of the Advance Claim Review and as part of proof of any claim, Aetna has the right to require an oral exam of the person at its own expense. You must give Aetna all diagnostic and evaluative material which it may require. These include: X-rays, models, charts, and written reports.

The benefits for a course of treatment may be less than you expect if an Advance Claim Review is not made or if any required verifying material is not fumished. Benefits will be reduced by the amount of expenses that Aetna cannot verify.

## Ahernate Treament

If altemate services or supplies may be used to treat a dental condition, Covered Dental Expenses will be limited to those services and supplies which, as determined by Actna:

- Are customarily used nationwide for treatment, and
- Are deemed by the profession to be approptiate for treatment. They must meet broadly accepted national standards of dental practice. The person's total current oral condition will be taken into account.
- The Limitations section has some examples of how this works. Please refer to page 103 for more information.


## Prowhesis Replacenont Rate

Certain replacements or additions to existing dentures or bridgework will be covered under this Plan. Aetna must receive satisfactory proof that:

- The replacement or addition of teeth is required to replace teeth extracted after the present denture or bridgework was installed. The person must have been covered when the tooth was extracted.
- The present denture or bridgework cannot be made serviceable. and it must be at least five years old.
- The present denture is an immediate temporary one to replace one or more natural teeth extracted while the person is covered and cannot be made permanent. Replacement by a permanent denture is needed and takes place within 12 months from the date the immediate temporary denture was first installed.


## Explanation of Some lnoportant Plan

## Provisions

## Calendar Year Deductible

The Calendar Year Deductible is the amount of Covered Dental Expenses you must pay each calendar year before the Plan pays benefits.

## Family Deductible Limit

The Family Deductible L.imit is the amount of Covered Dental Expenses your family must pay before the Plan pays benefits. When these expenses exceed the Family Deductible Limit, the Plan pays benefits at the percentage listed on the Dental Chart on page 98 . The family deductible limit must be met by more than one person.

## Coinsurance

Coinsurance is the amount you must pay out of your own pocket for Covered Dental Expenses affer you meet the calendar year deductible
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## Calendar Year Maximum Benefit

The Calendar Year Maximum Benefit is the most the Plan will pay for all dental expenses incumed by a covered person in a calendar year. It applies even if there is a break in coverage.

## Coordination of Benefits

In many families, both husbands and wives work and may be eligible for benefits under more than one group medical or dental plan. In such situations, the various plans "coordinate" benefits to determine how covered expense will be paid by the American Water Plan and the other plans. This may mean a reduction in benefits under this Plan. The combined benefits will not be more than the expenses recognized under the American Water Plans.

If the American Water Plan is detemmined 10 be the primary plan (the plan that pays its benefits first), it will pay its regular benefits in full wirhout regard to any payment that may be made under any other plan.

If the American Water Plan is detemmined to be the secondary plan (the plan that pays its benefits after the primary plan pays benefits), it will pay a reduced amount of benefits that will in no event cause the toral benefit from all plans to exceed the benefit that would have been paid by the American Water Plan if it had been the primary plan. However, if benefits under the primary plan are reduced because a covered person does not comply with the plan provisions (such as penaltics resulting from the failure to comply with cost management provisions of the plan), the amount of the reduction will not be considered for payment under the American Water Plan.

For example, if you have Standard PPO Dental coverage and receive Preventive Care Scrvices and the primary plan pays $70 \%$ of eligible charges to an in-network provider, the American Water Plan will pay an additional $10 \%$ of covered charges for a total benefit equal to $80 \%$ of covered charges which is the benefit the American Water Plan would have paid as the primary plan.

See "Coordination of Your Benelits with Other Plans, Not Including Medicare" on page 76 for the rules for determining primary and secondary plans.

## Limitations

When the Altemate Treatment part of this Plan applies, benefits will be limited. Here are some examples:

## Restorative and Reconstructive Services

- Gold, Baked Porcelain, Crowns, and Jackets

Covered Dental Expenses will be limiled to the charges for the procedure using amalgam or like material, if it would restore a tooth. This limit applies even if you and the dentist choose some other type of restoration.

- Reconstruction

Covered Dental Expenses will be limited to the charges for the procedure needed to eliminate oral disease and replace missing tecth. Appliances or restorations needed to increase vertical dimension or restore the ocelusion are deemed to be optional and are not covered.

## Prosthodontic Services

- Partial Dentures

Covered Dental Expenscs will be limited to the charges for a cast chrome or acrylic denture if this would satisfactorily restore an arch. This limit applies even if you and the dentist choose a more claborate or precision appliance.

## - Complete Dentures

Covered Dental Expenses will be limited to the charges for a standard procedure. This limit applies even if you and the dentisi choose personalized or specialized treatment.

Replacement of Existing Dentures will be covered only if the existing denture cannot be used or repaired. If it can be used or repaired, Covered Dental Expenses will be limited to the charges for the services needed to taake the denture usable.

## When Coverage IS Temninated

Coverage under any section of this Plan will be in exchange for all privileges and benefits provided under any like prior coverage. Aoy benefits provided under such prior coverage may reduce benefits payable under this Plan.
Coverage under either Plan terminates when the first of these events happens:

- The day your employment ends;
- When the group contract terminates as to the coverage;
- When you are no longer in an Eligible Class. (This may apply to all or part of your coverage.);
- When you fail to make any required contribution.

Under certain circumstances, American Water may continue your coverage when you are not actively at work. If you are not at work due to illness or injury, American Water dental coverage will be continued for the length of your approved leave of absence, not to exceed 24 months from the date you are disabled as long as appropriate contributions are made.

A dependent's coverage will terminate at the first to occur of:

- The termination of all dependents' coverage under the group contract;
- When a dependent becomes covered as an employee;
- When such person is no longer an Eligible Dependent;
- When your coverage terminates.

You may be entitled to coutinue your dental coverage (see "Continuation of Health Coverage" on page 172).

## Bencyus Aher Ternination of Coverage



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Expenses incurred for the following after the person's dental coverage ends because medical coverage ends will be deemed to be incurred when ordered:

- Dentures
- Fixed bridgework
- Crowns

This applies only if the item is finally installed or deljvered no more than 60 days after coverage ends.
"Ordered" means:

- Impressions have been taken from which the dentures, crowns, or fixed bridgework will be made, and
For fixed bridgework and crowns, the teeth must have been fully prepared if they will serve as retainers or support or if they are being restored.


## General Exchusions

Coverage is not provided for the following expenses:

- Services and supplies not necessary, as determined by Aetna, for the diagnosis, care, or treament of disease or injury. This applies even if they are prescribed, recommended, or approved by the person's attending dentist.
- Care, treatment, scrvices, or supplies that are not prescribed, recommended, and approved by the person's attending dentist.
- Treatment by someone other than a licensed dentist. (The Plan will cover some treatments by a licensed dental hygienist if supervised by a dentist, including scaling of teeth, cleaning of teeth, and topical application of fluoride.)
- Services or supplies determined by Aetna to be experimental or investigational. A drug, device, procedure, or treatment will be determined to be experimental or investigational if:
- there are insufficient outcomes data available from controlled clinical trials published in the peer reviewed literature to substantiale its safety and effectiveness for the disease or injury involved;
- as required by the FDA, approval has not been granted for marketing;
- a recognized national medical or dental society or regulatory agency has determined, in writing, that it is experimental, investigational, or for research purposes; or
- the written protocol or protocols used by the treating facility or the protocol or protocos of any other facility sudying substantially the same drug, device, procedure, or treatment or the written informed consent used by the treating facility or by another facility studying the same drug, device, procedure, or treatment states that it is experimental, investigational, or for research purposes.
- Services of a resident doctor, dentist, or intern rendered in that capacity.
- Charges which Aetna derermines not to be reasonable.
- Charges for services and supplies which are covered in whole or in part under any other part of ihis Plan, or under any other group benefits plan provided by American Water.
- Charges that are made only because there is health coverage.
- Charges that a covered person is not legally obliged to pay.
- Charges for services and supplies:
- fumished, paid for, or for which benefits are provided or required by reason of the past or present service of any person in the armed forces of a government;
- fumished, paid for, or for which benefius are provided or required under any law of a govenument. (This does not include a plan established by a government for its own employees or their dependents or Medicaid.) An example is benefits provided, to the extent required by law, under "nofault" anto insurance.
- Charges for plastic surgery, reconstructive surgery, cosmetic surgery, or other services and supplics which improve, alter; or enhance appearance, whether or not for psychological or emotional reasons, including but not limited to charges for personalization or characterization of dentures, except to the extent needed to repair an injury which occurs while the person is covered under this Plan.
- Charges for routine dental exams or other preventive services and supplies.
- Charges for acupuncture therapy, unless performed by a doctor as a form of anesthesia in connection with surgery covered under the Plan.
- Charges for sealants.
- Charges for the replacement of a prosthetic device that is lost, missing, or stolen.
- Charges for services or supplies for orthodontic treatment, except as specifically provided.
- Charges for services or supplies to increase vertical dimension, such as dentures, crowns, inlays and onlays, bridgework, or any other appliance or service.

Any exclusion above will not apply to the extent that:

- Coverage is specifically provided by name in this Suminary Plan Description, or
- Coverage of the charges is required under any law that applies to the coverage.
These excluded charges will not be used when calculating benefits.
The law of the jurisdiction where a person lives when a claim occurs may prohibit some benefits. If so, they will not be paid.

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How Your

Benefits Are paid

## Subnuting Clama


#### Abstract

All clains must be filed within two years from the date of the incurred expense. (See page 100 for information on filing Orthodontic Claims) Claims must be in writing and must include proof of the nature and extent of the expense. To obtain Dental Benefits Request forms, call Aetna Member Services at (800) 2924366 or visit their website at www.aetna.com.


The Dental Plan is administered by Aetna. Claims will be paid as soon as Aetna receives the necessary written pronf supporting your claim.

## How to File a Menal Clama

Fast processing of your claim depends on complete, accurate information, When filing a claim under the Dental Plan, please remember to:

- Complete all irens under applicable sections of the claim form. Unanswered questions will cause delay in processing your claim.
- Be sure to include your Identification number on all claims, including claims for your dependent(s), and be sure to sign the form.
- Attach the itemized bill to the form. An itemized bill must contain the following information:
- the patient's full name,
- the patient's relationship to you,
- the date service was provided,
- the name of the Dentist or other licensed health care professional providing service,
--. the provider's taxpayer identification number,
- the type of service provided,
- the nature of the condition being treated, and
- the charges for the service or treatment (multiple expenses should be itemized).

If any of this information is missing, write it on the bill yourself and sign your name. Your dental provider should complete the provider
section of the Benefits Request form if he or she has not given you an itemized statement.

If you have other group coverage that pays benefits before this Plan. you must provide Aetna with a copy of the other carrier's Explanation of Benefits ( $E O B$ ) reflecting the benefits paid under the other coverage when you submit expenses for payment under this Plan.

Send the completed claim form and itemized bill(s) to:

## Aetna

P.O. Box 14094

Lexington, KY 40512-4094
If you have any questions about the status of your claim, call Aetna Member Services at (800) 292-4366

## No Assigntanen of Benefin

You cannot assign, pledge, encumber or otherwise alienate any legal or beneficial interest in benefits under the Plan, and any attempt to do so will be void. The payment of benefits directly to a health care provider, if any, shall be done as a convenience to the covered person and shall not constitute an assignment of benefits under the Plan.

Your
Contributions

You pay your share of the cost for your bencfits each pay cycle through convenient pre-fax payroll deductions. Pre-tax means that your contributions are withheld before lederal (and in mosl cases, state (other than New Jersey) and local) income and FICA (Social Security) taxes are withheld. This reduces your taxable income and the amount of tax you pay. As a result, you have more take-home pay. Because your pre-tax contributions are not subject to FICA laxes, your Social Security benefit at reirement may be slighly reduced if your eamings are under the Social Security Taxable Wage Base ( $\$ 94,200$ for 2006; $\$ 97,500$ for 2007). However, the loss in future retirement benefits should be more than offsel by the current tax savings under the Plan.

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The Vision Plan

## Thion Bencfifs

Healthy eyes and good vision are important to your overall well-being and quality of life. All employees and their dependents who enroll in any of American Water Medical Plans are also enrolled in the Vision Plan, since both vision and dental benefits are bundled with the medical plan. Employees may enroll in dental/vision coverage if they opt out of medical.

The Vision Plan is administered by EyeMed. EyeMed provides certain administrative and claim payment services under the Plan, but does nol guarantee benefit payments. You can receive routine eye exams, corrective lenses, frames, and contacts through EyeMed's nationwide network of over 16,000 participating providers optometrists, ophthalmologists, and optical retail locations.
The Vision Plan offers both in-network and out-of-network benefits, but your benefit levels are higher (and your out-of-pocket costs lower) when you use in-network providers.

To find a provider or to make sure your provider participates in the EyeMed network:

- Before you enroll: visit www.enrollwithevemed.com/access.
- Once you are enrolled: visit www.eyemedvisioncare.com.

There are no ID cards with the EyeMed plan. Just call an EyeMed provider to make an appointment and furmish your Social Security number.

## Wion Bervefis Stmanary Chat

The following chart provides a summary of your vision benefits. Keep in mind that the Network Providers column shows what you pay and the Out-of-Network Provider column shows what the Plan pays.

| Vision Care Service | Member Cost at a Netwivar Provider | Reimbursembent at an Out-of-Nuwotk Provider |
| :---: | :---: | :---: |
| Vision Exam | \$15 copay | U\&C' less \$15 copay |
| Prames | $\$ 50$ copay, $\$ 200$ allowance: $80 \%$ of bolance over $\$ 200$ | Lp to \$120 |
| Slandard Plastic Lenses <br> - Single Vision <br> - Bifocal <br> - Trifocal <br> - Lenticular | $\$ 35$ copay <br> $\$ 50$ copay <br> $\$ 50$ copay <br> $\$ 50$ copay | Uptos $\$ 25$ <br> Up $10 \$ 40$ <br> Up 10555 <br> Up $10 \$ 70$ |
| Lens Options <br> (paid by menher and added to basu price of the lens) <br> - Tim (Solid and Gradient) <br> - UV Coating <br> - Standard Scratch-Resistance <br> - Standard Polycarbonate <br> - Standard Anti-Reflective <br> - Standard Progressive (add-on to bifoc:al) <br> - Other Add-Ons and Services | $\$ 15$ copay <br> $\$ 15$ copay <br> $\$ 15$ copary <br> $\$ 40$ copay <br> S45 copay <br> $\$ 65$ copay <br> $20 \%$ off retail price | NA <br> No Reimbursement |
| Contact Lenses (in lieu or Standard Plastic lenses) (includes fin. tollow-un and matcrials) <br> - Conventional <br> - Disposables <br> - Medically necessary | S100 allowance: $15 \%$ off balance over $\$ 100$ 5100 allowance: $15 \%$ off balance over $\$ 100$ Paid in full | Up 10580 <br> Up to $\$ 80$ <br> Up to \$200 |
| L.ASIK and PRK Vision Currection | $15 \%$ off retail price OR $5 \%$ off promotional pricing (whichever results in the lower cost to the member) | N/A <br> No Reimbursement |
| Frequency | Exams- once every 24 inonths <br> Frames- once every 24 months <br> Standard Plastic Lenses or C'ontact Len | ce every 24 months |
| Additional Parchases and Out-of-Pocket Discount: Member will receive a $20 \%$ discount on remaining balance at Participating Providers beyond plan coverage. which may not be combined with any other discounts or promotional offers. and the discount does not apply to EyeMed's l'roviders' professional services or disposable contact lenses. |  |  |

## Witing an Out-wiNework provider

All vision care services received fiom an out-of-network provider are paid up to a scheduled amount. You are responsible for paying any amount the provider charges in excess of that amount.

## Services Not Covered

The Vision Plan does not cover:

- Orthoptics or vision training;
- Subnormal vision aids and associated supplemental testing;
- Aniscikonic lenses;
- Medical and/or surgical treatment of the eyes;
- Corrective eyewear required by an employer as a condition of employment, and safety eyewear unless specifically covered under the plan;
- Services provided as a result of Workers' Compensation Law:
- Non-prescription lenses (plano lenses) and non-prescription sunglasses (except for the $20 \%$ EyeMed discount);
- Two pair of glasses in lieu of bifocals;
- Services or materials provided by any other group benefit providing for vision;
- Benefit allowances provide no remaining balance for future use within same benefit period;
- Lost or broken lenses, frames, glasses, or contact lenses will not be replaced except in the next benefit period.


## When Coverage IS Terminated

Coverage under any section of this Plan will be in exchange for all privileges and benefits provided under any like prior coverage. Any benefits provided under such prior coverage may reduce benefits payable under this Plan.

Coverage under the Plan terminates when the first of these events happens:

- The day your employment ends;
- When the group contract terminates as to the coverage;
- When you are no longer in an Eligible Class. (This may apply to all or part of your coverage.):
- When you fail to make any required contribution

Under certain circumstances, American Water may continue your coverage when you are not actively at work. If you are not at work due to illness or injury, American Water vision coverage will be continued for the length of your approved leave of absence, not to exceed 24 months from the date you are disabled as long as appropriate contributions are made.

A dependent's coverage will terminate at the first 10 occur of:

- The termination of all dependents` coverage under the group contract;
- When a dependent becomes covered as an employee;
- When such person is no longer an Eligible Dependent:
- When your coverage terminates.

You may be entitled to continue your vision coverage (see "Continuation of Health Coverage" on page 172).

## Filing a Clamu

When you visit an EyeMed network provider, you must present the provider with your Social Security number. Your provider will submis the benetit form for you.

If you visit an out-of-network provider, you must pay the provider at the time you receive vision care services. You must then submit an EyeMed claim form and an itemized paid receipt to reccive reimbursement. Your itemized receipt must include:

- Patient's name
- Date service began
- The services and materials received
- Amount paid

Claim forms and receipts should be mailed to:

EycMed Vision Care<br>Attention OON Claims<br>P.O. Box 8504<br>Mason. OH 45040-7111

You can fax the form and receipts to: (866) 293-7373. You can also e-mail the form and receipts to: oonclaims(a)eyemedvisioncare.com. Claim forms are available on EyeMed's website at www.eyemedvisioncare.com. You can also obtain forms by contacting EyeMed Member Services at (866) 939-3633.

## EyeMed will not process claims subnitted more than 12 months after the date of service or purchase.

## No Assignment of Renefits

You cannot assign, pledge, encumber or otherwise alienate any legal or beneficial interest in benefits under the Plan, and any attempt to do so will be void. The payment of benefits directly to a health care provider, if any, shall be done as a convenience to the covered person and shall not constitute an assignment of benefits under the Plan.

Your Contributons

You pay your share of the cosi for your benefits each pay cycle through convenient pre-tax payroll deductions. Pre-tax means that your contributions are withheld before federal (and in most cases, state (other than New Jersey) and local) income and FICA (Social Security) taxes are withheld. This reduces your taxable income and the amount of tax you pay. As a result, yon have more take-home pay. Because your pre-tax contributions are not subject to FICA taxes, your Social Security benefit at refirement may be slightly reduced if your earnings. are under the Social Security Taxable Wage Base ( $\$ 94,200$ for 2006; $\$ 97,500$ for 2007). However, the loss in future retirement benefils should be more than offset by the current tax savings under the Plan.

## Flexible Spending Accounts

## Flexible Spending Accounts

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To help you meet the high costs of health and dependent care in the most cost-efficient manner, American Water offers two programs which allow you to pay for qualifying expenses using pre-tax dollars. You pay fewer taxes because those amounts are not subject to federal income or Social Security taxes. You keep more of what you earn, increasing your spendable income

You make voluntary contributions on a pre-tax basis to spending accounts, from which you receive tax-free reimbursement to cover the cost of your qualifying medical and dependent care expenses.

The Health Care Spending Account reimburses you for most healthrelated expenses for yourself or your eligible dependents that are not reimbursable through any bealth benefit plans.

The Dependent Care Spending Account reimburses you for most dependent day care expenses for your qualifying dependents.

Reimbursements that you receive from your Health Care and/or Dependent Care Spending Accounts are tax-free to you.

Your contributions to your Health Care and/or Dependent Care Spending Accounts are deducted each pay cycle through conveniont prerax payroll deductions. Pre-tax means that your contributions are withheld before federal (and in most cases, state and local) income and FICA (Social Security) taxes are withheld. (Note: If you are a resident of Pennsylvania, your contributions to the Dependent Care Spending Account will be subject to state income taxes. If you are a resident of New Jersey, your contributions to both the Health Care Spending Account and the Dependent Care Flexible Spending Account will be subject to New Jersey state income taxes.) Pre-tax contributions reduce your taxable income and the amount of tax you pay. As a result, you have more take-home pay. Because your pre-tax contributions are not subject to FICA taxes, your Social Security benefit at retirement may be slightly reduced if your earnings are under the Social Security Taxable Wage Base ( $\$ 94,200$ for $2006 ; \$ 97,500$ for 2007). However, the loss in future retirement benefits should be more than offset by the current tax savings under the Plan

## Whe Heald Care Spending Account



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The Health Care Spending Account allows you to contribute money on a pre-tax basis to an account set up for you. If you (or your eligible dependents) incur qualifying health care expenses which are not covered, or are only partially covered, by insurance or any other source. you will be reimbursed from the spending account for these expenses.

Here is an example of the potential tax savings with a Health Care Spending Account:

|  | With Account | Without Account |
| :--- | :---: | :---: |
| Annual Family Income | $\$ 50,000$ | $\$ 50,000$ |
| Pre-Tax Contributions to Account | $\$ 2,400$ | None |
| Taxable Income | $\$ 47,600$ | $\$ 50,000$ |
| Federal, State, and Social Security Taxes | $\$ 12,685$ | $\$ 13,325$ |
| After-Tax Health Care Expenses | None | $\$ 2,400$ |
| Net Spendable Income | $\$ 34,915$ | $\$ 34,275$ |
| Tax Savings (Extra Take-Home Pay) | $\$ 640$ |  |

Example ures tar rates of $15 \%$ jederal. $4 \%$ state, and $7.65 \%$ Sovial Sen miy

## Eligibilty

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## Elighle

Dependents

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If you are a regular full-time eligible employee (see "Eligibility" on page 3). you are eligible to participate in the Health Care Spending Accounts according to the terms of your union contract. You may enroll by completing and signing the appropriate Flexible Spending Account section on your Enrollment Form. If you are newly hired, you must enroll and make your contribution election within the 31-day enrollment period. You will have the opportunity to change your elections in the fall of every year, effective for the upcoming plan year. You are not permitted to make changes to your election amount during the Plan Year, except under certain circumstances (see page 122).

In addition to your own expenses, you can also be reimbursed from the Health Care Spending Account for qualifying expenses incurred by an eligible dependent. For you to include these expenses, the person must have been your dependent either at the time the medical services were provided or at the time you paid the expenses.

In general, an eligible dependent is your spouse or any person whom you could claim as a dependent on your federal income tax return (without regard to that individual's gross income). As of January 1, 2006, the definition of "dependent child" for this purpose changed. A person generally qualifies as your dependent if he or she is a "qualifying child" or a "qualifying relative."

A qualifying child is your son, daughter, stepchild, foster child, brother, sister, stepbrother, stepsister, or a descendant of any of them who is:

- Under age 19, under age 23 and a full-time student, or permanently and totally disabled;
- Lived with you for more than half of the year; and
- Did not provide over half of his or her own support for the year.

A legally adopled child (or a child lawfully placed with you for legal adoption) is treated as your own child. Special rules apply to expenses paid before and after the adoption or placement. A child of divorced
or separated parents can be treated as a dependent of both parents. Again, special rules apply.

A qualifying relative is your:

- Son, daughter, stepchild, foster child, or a descendant of any of them (for example, your grandchild);
- Brother, sister, or a child of either of them;
- Father, mother, or an ancestor or sibling of either of them (for example, your grandmother, grandfather, aunt, or uncle):
- Stepbrother, stepsister, stepfather, stepmother, son-in-law, daughter-in-law, father-in-law, mother-in-law, brother-in-law, or sister-in-law; or
- Any other person (other than your spouse) who lived with you all year as a member of your household if your relationship does not violate local law.

You should consult your own tax advisor to determine whether your child or other relative is eligible to be your dependent.

How the Account Whorks

Clam
Documentation

The spending account docs not replace your medical benefits. It is a separate plan that reimburses you for qualifying expenses that are not covered, or only partially covered, by your Medical, Denfal, or Vision Plan or by any other source (such as a spousc's plan).
When you have an eligible medical expense, you pay the bill. You can be reimbursed for these expenses from your account by filing a claim form. (See page 128.)

For additional convenience, you will be issued a debit card. Use the card to pay for eligible medical expenses just as you would use your bank debit card. The money is automatically debited from your Health Care Spending Account. You should keep copies of all receipts for any expenses you pay for from your Health Care Spending Account in case further substantiation is required.

Your debit card will permit all transactions to be mado in the phamacy at the point of sale. This includes prescription and over-thecounter items. Internal Revenue Service (IRS) regulations require documentation to verify tbat clajms are legitimate. Therefore, any transaction that does not match a copayment from the American Water Medical Plan or Prescription Drug Plan or is not otherwise clearly a medical expense based on the information obtained from the vendor's ioventory system at the point of sale, will be audited by Horizon.
If you are audited for a transaction, you (the member) are required to provide documentation to validate the expense. Return the letter to

## How Much Can Contribute'?

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Horizon along with a receipt or Explanation of Benefits (EOB) which includes the following:

- Provider
- Service(s) received or item(s) purchased
- Date of service
- Amount of expenses incurred

Horizon's Customer Service area will review the transaction. If it is eligible under IRS regulations and the supporting documentation is approved, no further action will be required. If any portion of the transaction is deemed ineligible according to IRS regulations, you (the member) will be responsible for returning those funds.

During open enrollment (or your 31 -day enrollment period), you should estimate what you will spend during the next Plan Year (or the balance of the current Plan Year) (January I to December 31, plus the $21 / 2$ month grace period, see below) on unreimbursed medical expenses. We will deduct from your paycheck the amount of money you choose to set aside, in equal amounts over the course of the calendas year.

You may elect to contribute up to $\$ 2,500$ per year (this may vary depending on the terms of your union contract) to the Health Care Spending Account. There is a minimum contribution of $\$ 120$ per calendar year. If your spouse also has a health care spending account, whether through the Company or another employer, this will not affect the ulaximum amount of your contribution. You may each contribute the maximum amount.

The amount available to you for reimbursement for qualifying expenses incurred during the Plan Year (plus the $21 / 2$ month grace period) is the annual amount you have elected to contribute to the spending account, even if the full amount has not yet been deducted from your pay. For example, if you elect to contribute $\$ 1,200$ to the spending account, the entire $\$ 1,200$ will be available to you for reimbursement of your eligible expenses beginning January 1. Note that there is a different rule for reimbursements from the Dependent Care Spending Account.

Use All the Woney In Your Account









Canl Change he Amount of Ny Contributions?

According to IRS rules, any amounts remaining in your spending account alter the deadline for submitting claims incurred during the Plan Year (plus the $21 / 2$ month grace period) will be forfeited. You may not carry forward unused amounts to the next Plan Ycar, and you may not transfer unused amounts from the Health Care Spending Account to another employee or to another plan or account (such as the Dependent Care Spending Account). Therefore, you should plan carefully before you make your annual contribution election. Any forfeited amounts are used by American Water to reduce future administrative expenses.

The claims accumulation period for the Health Care Spending Account is $141 / 2$ months - the current 12 -month Plan Year (January 1 Decentber 31) plus the period January 1 through March 15 of the following calendar year. The deadline to submit claims for reimbursement from your Health Care FSA is April 30 of the following year. You must be an active participant or COBRA participant as of December 31 in order to take advantage of the grace period. Expenses incurred during the grace period that are not applied against Health Care Spending Account balance for the prior Plan Year can be applied against the Health Care Spending Account for the current Plan Year. For example, if you establish a Health Care Spending Account for 2007, eligible expenses incurred during the period January 1, 2008 - March 15, 2008, can be applied against your 2007 account balance. If you have exhausted your 2007 account balance or you do not submit the grace period expenses by April 30 , 2008, you can apply those expeuses against your 2008 Health Care Spending Account, if any. If you do not have a 2008 Heallh Care Spending Account, you would not be able to be reimbursed for those grace period expenses.

You can starl, stop, or change the automatic deductions from your paycheck during the calendar year only if you have a change in status (as listed below). The change in status must be on account of, and correspond with, a change in status affecting eligibility. The following events are changes in status:

- Change in employee's legal marital status (marriage, death of spouse, divorce, legal separation, or anaulment).
- Change in the number of employee's dependents (gain a child through birth, aduption, placement for adoption, or newly-eligible dependent; loss of dependent through death).
- Change in dependent's eligibility status (dependent qualifies or no longer qualifies because of age, student status, or marriage).


## Expenses Eligible for

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Only "qualifying" expenses can be reimbursed through the Health Care Spending Account. These include:

- Medical, dental, and vision care expenses incurred by you or an eligible dependent in the diagnosis, treatment, or prevention of disease, including prescription drug expenses and transportation or lodging expenses incurred in receiving treatment.
- Certain other medical expenses not covered by your medical insurance
- Deductibles or copayments you have paid under any type of health care plan.
- Over-the-counter medicines and drugs purchased without a prescription, provided they are for the diagnosis, cure, mitigation, freatment, or prevention of disease or for the purpose of affecting any structure or function of the body. The over-the-counter drug must be more than just beneficial to general health and not "cosmetic" in nature.

Some over-the-counter drugs have a dual purpose, serving a personal/cosmetic or general health purpose as well as a medical purpose. These drugs will require a letter from a doctor stating the medical condition or disease that is being treated.

Keep in mind that the expenses you submit for reimbursement may not be covered or reimbursed by orher insurance or another source, including a plan sponsored by your spouse's employer, Medicare, Workers' Compensation, automobile insurance, or any recovery or settlement from a lawsuit.
Below is a list of some of the health care expenses eligible for reimbursement from your spending account. Only healihcare expenses not reimbursed by insurance can be claimed.

For additional information, call Horizon FSA al (800) 224-4426. You can also refer to IRS Publication 502 ("Medical and Dental Expenses"). You can request a copy of Publication 502 from your local IRS office or go online at www.irs.gov/publications/p502. But keep in mind, not all expenses listed in Publication 502 are eligible (like insurance premiums) and some expenses not listed in the publication are eligible (such as some over-the-counter drugs and medicines).

- Acupuncture (excluding remedies)
- Adoption

缐 Adult diapers
Alcoholism treatment

- Ambulance
- Artificial insernination
- Artificial limbs/teeth
- Birth control
- Braille books/magazines
a Chiropractic treatment

4. Christian Science practitioners
: Coinsurance/deductibles

- Contact lenses/salinc solution
- Copayments
- Cosmetic Surgery:
- to treat illness/disease
- to improve a congenital abnormality
- to treat injury from accident/trauma
- to improve a disfiguring deformity
- Crutches
- Deductibles
- Dental treatment and oral surgery (non-cosmetic only)
- Dentures
- Diagnostic fees
- Dietary supplements and vitamins with doctor's letter of medical necessity
- Doctor fees (cosmetic procedures not eligible)
an Drug addiction treatments
- Drug and medical supplies (i.e. syringes, needles, etc.)
- Excess of reasonable and customary charges scheduled, annual, or lifetime maximuns
- Eye care/exams

Eye surgery (cataracts, LASIK, etc.)

* Eyeglasses (prescription only)
- Guide dogs
a Hearing aids/exams
- Hearing devices and batteries
w. Home health care
- Hospital bills
a Insulin
- In-vitro fertilization
- Laboratory fees
- Nursing lrome costs
- Orthodontia (non-cosmetic only)
a Orthopedic devices
- Over-the-counter drugs that are medically necessary like allergy medications, aspirin, or antacids (see list below)
(3) Oxygen
-1. Prescribed medicincs
a. Psychiatric reatment
- Psychologist's fces
- Routine physicals and other non-diagnostic services or treatments
a Smoking-cessation over-the-counter drugs
- Smoking cessation prograns
- Specialized car equipment for disabled persons
- Speech therapy
- Sterilization
- Surgical fees
a Transplants (except hair)
(1) Vaccinations and immunizations
a Vitamins, with doctor's letter of medical necessity
$\pm$ Weight loss programs
2z Weight-loss over-the-counter drugs with doctor's letter of medical necessity
. Well-baby care
- Wheelchairs
- X-ray fees

Dver-TheCounter llems

Dual Useltems

The following over-the-counter items qualify for reimbursement under the Health Care FSA Plan:

- Antiseptics
- Asthma medications
- Cold, flu, and allergy medications
- Diabetic supplies

2. Ear/eye care

- Health aids
- Pain relief
- Personal test kits
- Skin care
- Stomach care

The following dual use items qualify for reimbursement under the Health Care Spending Account with a letter of medical necessity from the patient's doctor:

- Adhesive or elastic bandages
- Blood pressure meter
- Cold or hot compresses
- Eye drops
- Foot spa
wanze and tape
- Gloves and masks
- Herbs
- Leg or arm braces
- Massagers
- Minerals
- Multivitamins
- Saline nose drops
- Special supplements
- Special teeth cleaning system
e Thermometers

Expenses Not Eligible for Reimbursement

The following are not considered qualifying healthcare expenses and cannot be reimbursed from the Health Care Spending Account:

- Bleaching/bonding of teeth
m Contact lens insurance
- Cosmetic surgery, unless necessary to correct a deformity which is congenital or which resulted from a disfiguring illness or an injury resulting from an accident or trauma
\& Dancing lessons
ai Diaper services for children
* Electrolysis
- Expenses for general health purposes, such as fitness, excrcisc, or health club dues unless recommended by a doctor for a particular medical condition
- Expenses lor weight loss programs unless recommended by a doctor to treat obesity
- Expenses in excess of the amount you have elected to contribute to the Health Care Spending Account
- Expenses of someone who is not an eligible dependent
- Funcral expenses
- Hair restoration (procedurcs, drugs, or medications)
- Hair transplants

73 Health club or gym memberships for general health

- Household help
- Insurance premiums (including COBRA premiuns)
- Liposuction
- Marriage and family counseling
- Matemity clothes
- Over-the-counter items, drugs, or medications that are not medically necessary or are not prescribed by your doctor
- Premiums you or your spouse pay for insurance coverage
- Rogaine, when used for cosmetic purposes; that is, to stimulate growth, and not for a specific medical condition
- School tuition
- Swimming lessons
- Transportation costs of a disabled person to and from work
a Vacation or travel costs to improve health
g YMCA/YWCA memberships
This list is intended to give you a general description of expenses not eligible for reimbursement through the spending account. There may be other expenses. in addition to those listed above, which are not cligible.

Over-the-
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Expenses wot
Elighbe for Reimbursement

The following over-the-counter items do not qualify for reimbursement from the Health Care FSA:

- Aromatherapy
- Baby bottles and cups
\# Baby oil
- Baby wipes
- Breast euhancement system
- Cosmetics
a Cotton swabs
- Dental floss
- Deodorants
- Facial carc
- Feminine care
- Fragrances
- Hair regrowth
- Low "carb" foods
- Low caloric foods
: Oral care
2: Petroleum jelly
- Shampoo and conditioner
- Skin care
- Spa salts



## The Depondent Cure Soendmg Accomat

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The Dependent Care Spending Account allows you to contribute money on a pre-tax basis to an account set up for you. These amounts can be used to reimburse you for most daycare or eldercare expenses you might incur for your qualifying dependents.

Here is an example of the potential tax savings with a Dependent Care Spending Account:

|  | With Account | Without Account |
| :--- | :---: | :---: |
| Annual Family Tncome | $\$ 50,000$ | $\$ 50.000$ |
| Pre-Tax Contributions to Account | $\$ 5,000$ | None |
| Taxable Income | $\$ 45,000$ | $\$ 50,000$ |
| Federal, State, and Social Security Taxes | $\$ 11,993$ | $\$ 13,325$ |
| After-Tax Dependent Carc Expenses | None | $\$ 5,000$ |
| Net Spendable Income | $\$ 33,007$ | $\$ 31,675$ |
| Tax Savings (Extra Take-Home Pay) | $\$ 1,332$ |  |

Exmuple uses rax rater of $15 \%$ federal, $4 \%$ withe, and $7.65 \%$ Social Securing

## Eligibility

If you are a regular full-time eligible employee (see "Eligibility" on page 3), you are eligible to participate in the Dependent Care Spending Account in accordance with the terms of your Union contract. You may enroll by completing and signing the appropriate Flexible Spending Account section on your Enrollment Form. If you are newly fired, you must enroll and make your contribution election within the 31 -day enrollment period. You will have the opportunity to change your elections in the fall of every year, effective for the upcoming plan year. You are not permitted to make changes to your election amount during the Plan Year, except under certain circumstances (see page 134).

## Qualifying Depentents

Expenses are reimbursable for care of the following qualifying depeudents:

- your child, grandechild, brother or sister who is under age 13, who resides in your household for more than one-half of the year and who does not provide more than one-half of his or her own support for the year;
- a disabled spouse who resides in your household for more than one-half of the year; and
- a disabled relative or household member who is principally dependent on you for support and who resides in your houschold for more than one-half of the year.

In the case of a child who receives over one-half of his or her support during the calendar year from his or her parents (i) who are divorced or legally separated under a decree of divorce or separate maintenance, (ii) who are separated under a written separation agreement, (iii) who live apart at all times during the last six months of the year, (iv) who have agreed that the custodial parent will not claim the child as an income tax exemption, and (v) where such child is in the custody of one or both parents for more than one-half of the year, such child will be considered the dependent of both parents, regardless of the child's place of residence of the amount of support provided by either parent. Contact your tax advisor or refer to IRS Publication 503 (Child and Dependent Care Expenses) for more information.

Wow the Account Works

When you have eligible dependent care expenses, you pay the bill and submit a reimbursement clainn to Horizon, along with a copy of the bill. You can be reimbursed for these expenses from your account by tiling a claim form, assuming that you have enough money in your account. If not. you will be reimbursed up to the amount in your account and the remainder of the claim will be held until the balance in your Dependent Care Spending Account is sufficient to cover the bill.
Keep in mind, however, that because you are contributing to the spending account through payroll deductions, you will have a period of increased expenses. You will have to pay your dependent care provider, as well as have payroll deductions, before receiving reimbursement from your account.

How Much Can Contrimute?

You may contribute up to a maximum of $\$ 5,000$ per year, regardless of the actual number of qualifying dependents you have. Normally, amounts reimbursed from your Dependent Care Spending Account are tax-free to you. However, federal law states that the amount excluded from your gross income cannot exceed, in any calendar year (under all dependent care plans in which you or your spouse may participate) the lesser of:

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- \$5,000 (\$2,500 if you are married and filing separate federal income tax returns);
- Your annual income; or
- Your spouse's annual income.

If your spouse is (1) a full-time studeat for at least five montbs during the year or (2) physically and/or mentally disabled, there is a special nule to determine his or her annual income. To calculate the income, determine your spouse`s actual taxable income (if any) earned each month that he or she is a full-time student or disabled. Then, for each month, compare this amount to either $\$ 2.50$ (if you claim expenses for one dependent) or $\$ 500$ (if you claim expenses for two or more dependents). The amount you use to determine your spouse's annual income is the greater of the actual carned income or 12 times the assumed monthly income amounts of either $\$ 250$ or $\$ 500$.
If you are martied and filing separate federal income tax returns, the $\$ 2,500$ limit described above will not apply if you are (1) legally separated or (2) separated for more than six (6) months and pay for more than half of the household expenses.
By making an election under the Plan, you are representing to the Company that your contributions to the Plan are not expected to exceed these limits.

To qualify for tax-free treatment, you are required to list on your federal income tax retum the names and taxpayer identification numbers of any person who provided you with dependent care services during the calendar year for which you have claimed a tax-free reimbursement. The identification number of a care provider who is an individual and not a care center is that individual's Social Security number. You should make your care provider aware of this reporting requirement.
In addition, your Dependent Care Spending Account contribution can never be more than your earned wages or your spouse's earned wages, whichever is less. If your spouse is a full-time student, the IRS considers him or her to be gainfully employed, with camed income of $\$ 250$ per month (if you have one qualifying dependent) or $\$ 500$ per month (if you have two or more qualifying dependents) for each month the spouse is a student. To be considered a "full-time student" as defined by the IRS, your spouse must maintain full-time status at a college or university during at least five months of the year.

The amount you elect to contribute will depend upon the amount you anticipate you will need to cover your dependent care expenses for the Plan Year (January 1 -- December 31). You sbould compare the tax benefit you would receive with the Dependent Care Spending Account
to the benefit that you would receive with the Federal child and dependent care tax credit (see below), and then choose between them. For additional details about the Federal tax credit, see IRS Publication 503 ("Child and Dependent Care Expenses") and IRS Tax Topic 602 (www.irs.gov/taxtopics/tc $602 . \mathrm{hml}$ ). You can request a copy of Publication 503 from your local IRS office or go online at www.irs.gov/publications/p503.

Federal Earned Income Credit. A tax credit available under current tax law is the earned income credit. This credit also reduces the federal tax you have to pay on a dollar-for-dollar basis, but is calculated somewhat differently from the child care credit described above. The credit is available to individuals with a child who is under age 19 (under age 24 if a student) or who is totally and permanently disabled. An additional credit is available to individuals with a child who is under one year old. The credit does not depend on the amount you pay in child care expenses. The earned income credit has no effect on the amount you can contribute under the Dependent Care Spending Account for dependent care expenses, and the camed income credit cannot be claimed for any individual for whom you claim the child care credit described above. Moreover, the use of the Dependent Care Spending Account may result in a reduction in your taxable income thus qualifying you for the earned income credit where you would not otherwise have qualified.

Use All hie Money in Your Account

You must request reimbursement by March 31 of the following year for dependent care expenses incurred on or before December 31 of each Plan Year.

According to IRS rules, any amounts remaining in your spending account after the deadline for submitting claims for the Plan Year will be forfeited. You may not carry forward unused amounts to the next Plan Year, and you may not transfer unused amounts from the Dependent Care Spending Account to another employee or to another plan or accounl (such as the Health Care Spending Account). Therefore. you should plan carefully before you make your annual contribution election. Any forfeited amounts are used by American Water to reduce future administrative expenses

## Expenses Elighte for Reimbursement

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The following expenses may be reimbursed so that you, the employee (and your spouse, if you are married), can work or look for work. There is an exception to this rule if you or your spouse work part-time and the payment for care must be made on a periodic (for example, weekly or momhly) basis, In this case, expenses for both work and non-work days are cligible. If payment is made on a daily basis, expenses must be allocated between work and non-work days. Similarly, if you or your spouse are nol working due to illness, and you must pay for care on a periodic basis, expenses for nonwork days are eligible if the absence is considered short and temporary.

Expenses may also be reimbursed so that your spouse can attend school full-time or if your spouse is physically or mentally unable to care for himself or herself.

- Qualified child or adult day care center expenses (if the center provides care for more than six non-resident persons, the center must meet state or local regulations and receives a fee for such services, whether or not for profit).
- Before-school care, afier-school care, or extended day programs (supervised activities for children after the regular school program) if used to enable the employee and spouse to work.
- A babysitter or companion inside or outside the home.
- A housekeeper, namy, or au pair to the extent the expenses are for the care of a qualifying individual.
- A relative (who is not your dependent nor your child under age 19) who cares for a dependent.
- Someone who cares for an elderly or disabled dependent in your home.
- Nursery school or pre-kindergarten.
- Agency, application, deposit, or other registration fees if necessary to obtain the related care. Fees should not be reimbursed until care is provided, and fees that are forfeited (for example, because the employee selects a different provider) do uot qualify.
- Custodial expenses for a dependent over age 13, not attributable to medical services, provided the qualifying individual spends at least eight hours each day in your home.
- Summer day camp tuition (including specialty camp) or a similar program to care for a qualifying individual. Separate equipment or similar charges (e.g., a laptop rental fee) do not qualify.

Expenses Not
Eligible for Reimbursenent

Can / Change the Amomet of Ms Comtributions?

- FICA and FUTA taxes of day care provider, as long as the overall expenses of the care provider qualify.
- Late fees charged to care for the child because the child was picked up late. Late fees charged because the childcare bill was paid late do not qualify.
- Sick-child facility expenses (care to enable the employee to go to work when the child is ill).
- Transportation costs to and from the location where the care or program is provided, if the expense is part of the cost of the program.

Expenscs ineligible for reimbursement inchude the following:

- Payments for babysitters when you are not working, such as in the cvening or ou weekends.
- Private school tuition (except before-school and after-school care).
- Educational expenses for children in kindergarten or higher.
- Boarding school tuition.
a Overnight camp expenses.
- 24-hour-a-day nursing home expenses.
- Transportation costs to and from the location where the care or program is provided, unless the expense is part of the cost of the program.
- Expenses for food, clothing, education, or entertainment incurred for the normal care of an eligible dependent, unless these expenses are incidental and cannot be separated from the cost of care.
- Cost for care that enables your spouse to do volunteer work.

This list is intended to give you a general description of expenses nor eligible for reimbursement through the spending account. There may be other expenses in addition to those listed above which are nol eligible.

You can start, stop, or change the automatic deductions from your paycheck during the calendar year if there is a change in your dependent care provider, if there is a change in the cost of dependent care or if your dependent no longer mects the definition of qualifying individual. Here are some examples of situations in which you can change your election:

- Change from one childcare center to another and the new center charges a different rate.
- Change in a home childcare provider, including a clange in a nanny-sharing arrangement.
- A qualifying child reaches age 13 and is no longer an eligible dependent under the Dependent Care Spending Account.
- The employee marries and the new spouse has dependent children, increasing dependent care costs.
- Child of divorced parents switches residence between parents.

Submiting
Clams

You may be reimbursed from your Dependent Care Spending Account by completing a Claim for Reimbursement form, which can be downloaded from www horizon-healihcare.con/fsa. You must submit the form along with proof of payment for the services (such as receipts, statements, canceled checks, etc.).

Any itemized bills that you submit should contain, at a minimum, the following information

- The dependent's name and age,
- The nature of the care provided,
- The date(s) the care was provided,
- The amount paid for the care,
- The dependent's relationship to you, and
ra The name and taxpayer identification number (or Social Security number) of the care provider.

Sign and date the claim form. Attach copies of bills, invoices, or other written statements from a third party that suppott each reimbursement request and mail or fax to:

## Horizon Healthcare <br> 3 Penn Plaza East PP-05S <br> Newark, NJ 07105-2200

Fax: (973) 466-6499 or (973) 274-2215
Remember that you are entitled to reimbursement only afier the care has been provided, even if you pay for dependent care in advance.
You will receive an Explanation of Payment (EOP) statement from Horizon detailing the status of your account wilh each reimbursement.
family and Medical Leaves of Absence

If you take a Family and Medical Leave of Absence (FMLA Leave) from American Water, your pre-tax payroll deductions to the Dependent Care Spending Account will stop. You may submit claims for reimbursement for care provided through your last day of work before your leave began.

If you terminate or retire from American Water, your pre-tax payroll Emplogment deductions to the Dependent Care Spending Account will stop. You may still continue to submit claims for reimbursement of expenses incurred before your date of termination. Expenses for care provided after your date of termination are not eligible for reimbursement. COBRA continuation coverage does not apply to the Dependent Care Spending Account.

$$
\begin{aligned}
& \text { Showt Term Disabilitity } \\
& \text { Coverage (STD) }
\end{aligned}
$$

## Disabilly Renefils

Disability benefits provide income protection when you are mable to work because of an extended illness or iojury. American Water provides you with Shor1-Term Disability (STD) benetits at no cost to you

You are eligible for STD benefits if you are a full-time eligible employee (refer to your union contract to see if you are eligible for this benefit). Part time employees and temporary employees are not eligible, unless specificd by state laws.

Your eligibility date is in accordance with the temns of your union contract. If you are on a layoff, on disability, or on leave of absence on your eligibility date, coverage or an increase in coverage will begin on the day you return to active full-time work for one full day.

After a waiting period, this plan will pay an STD benefit of $\$ 300$ for each week of a disability absence (unless superseded by State law), increasing by $\$ 10$ per year on January $1^{51}$ of each future year as follows:

$$
\begin{aligned}
& 2006-\$ 300 \\
& 2007-\$ 310 \\
& 2008-\$ 320 \\
& 2009-\$ 330 \\
& 2010-\$ 340
\end{aligned}
$$

The amounts listed above may vary according to the terms of your union contract.

The absence must start while you are covered under the Plan. A disability absence is lost time from work because of a nonoccupational injury or illness which stated while you were covered under this plan

Your benefit amount will be reduced by any weekly amount for which you are eligible under any Workers` Compensation or similar law that pays you for time lost from work.

Benefits start on Day 8 of a disability due to illness, including pregnancy, and on Day 1 of a disability due to injury. You musi report your case to Actna Managed Disability at (800) 804-5329 if you are (or expect to be) absent from work for more than 5 consecutive workdays. Even if you are receiving $100 \%$ of pay, you must register your disability with Aetna. You will not be eligible for STD benefits
for any period of time in which you are eligible to receive paid sick leave, and the combination of paid sick leave and STD benefits will not exceed 52 weeks. The number of weeks eligible for STD may vary according to the terms of your union contract.

You must provide a doctor's certification that you are disabled and medically unable to work becanse of the specific condition. Aetma may request any additional evidence it believes is necessary before deciding that benefits are payable.

More than one disability absence will be part of the same period of disability:

- If it is due to the same or a related cause, and
- If it is separated by less than 2 consecutive weeks of full-time work.

Your Maximum Period of Payment starts over if:

- A new disability absence is due to a cause different from that of any prior disability, and
- It is separated from the prior disability by at least one day of fulltime active work.


## STD Benefit Limitations

No beuefits are payable for:

- Days on which you do work for pay or profit outside American Water.
- Any period of time you are nol under a doctor's care. You must have been seen in person and treated by a doctor to be deemed under his or her care.


## Coverage for Dechmahowal Mhess or Infacy

This Plan pays a weekly benefit if you are absent from work, while covered, because of an illness or injury resulting from employment with American Water. However, the Weekly Benefit amount will be reduced by the weekly amount for which you are eligible for time lost under any Workers' Compensation law or any other similar law or doctrine. This benefit runs concurrently with sick leave.

## Suloniming STD Chaw

To apply for benefits under the Short Term Disability Plan, contact Aetna Managed Disability at (800) 804-5329.

To receive disability benefits, you must file a claim within 31 days of your disability. Even if you are using sick time, you must register your disability with Aetna. Benefits will begin as soon as Aetna reccives the information to verify your disability.

While you are receiving STD benefits, you may be required to periodically provide Aetna with additional medical information from your doctor documenting your continued disability. Aetna may also require that an appointed doctor examine you in order to verify your disability.

It is your responsibility to provide Aetna with the requested documentation supporting your claim. Otherwise, your benefits will stop.

## Thim Pary Liability and Subrocation

## General Principle

When you receive disability benefits under the Plan which are related to disabilities for which benefits are payable under Workers" Compensation, any statute, any uninsured or underinsured motorist program, any no fault or school insurance program, any other insurance policy or any other plan of benefits, or when related expenses that arise through an act or omission of another person are paid by a third party, whether through legal action, settlement or for any other reason, you or your dependent shall reimburse the Plan for the related benefits received out of any funds or monies you recover from any third party.

## Specific Requirements and Plan Rights

Because the Plan is entitled to remblbursement, the Plan shall be fully subrogated to any and all rights, recovery or causes of actions or claims that you may have against any third party. The Plan is granted a specific and first right of reimbursement from any payment, amount or recovery from a chird party. This right to reimbursement is regardless of the manuer in wbich the recovery is structured or
worded, and even if you have not been paid or fully reimbursed for all damages or expenses.
The Plan's share of the recovery shall not be reduced because the full damages or expenses claimed have not been reimbursed unless the Plan agrees in writing to such reduction. Further, the Plan's right to subrogation or reimbursement will not be affected or reduced by the "make whole" doctrine, the "fund" doctrine, the "common fund" doctrine, comparative/contributory negligence, "collateral source" rule, "attorney's fund" doctrine, regulatory diligence or any other equitable defenses that may affect the Plan's right to subrogation or reimbursement.

The Plan may enforce its subrogation or reimbursement rights by requiring you to assert a claim to any of the benefits to which you may be entilled. The Plan will not pay attorneys fees or costs associated with the clain or lawsuit without express written authorization from the Employer.
If the Plan should become aware that you have received a third party payment, amount or recovery and not reported such amount, the Plan, in its sole discretion, may suspend all further benefits payments related to you or any of your dependents until the reimbursable portion is returned to the Plan or offset against amounts that would otherwise be paid to or on behalf of you.

## Participant Duties and Actions

By participating in the Plan you consent and agree that a constructive trust, lien or an equitable lien by agreement in favor of the Plan exists with regard to any settlement or recovery from a third person or party. In accordance with that constructive trust, lien or equitable lien by agreement, you agree to cooperate with the Plan in reimbursing it for Plan costs and expenses.

Once you have any reason to believe that you may be entitled to recovery from any third party, you must notify the Plan. And, at that time, you (and your attorney, if applicable) must sign a subrogation/reimbursement agreement that confirms the prior acceptance of the Plan's subrogation rights and the Plan's right to be reimbursed for expenses arising from circumstances that entitle you to any payment, amount or recovery from a third party.
If you fail or refuse to cxecute the required subrogation/reimbursement agreement, the Plan may deny payment of any benefits to you and any of your dependents until the agreement is signed. Alternatively, if you fail or refuse to execute the required subrogation/reimbursement agreement and the Plan nevertheless pays benefits to or on behalf of you, your acceptance of such benefits shall constitute agreement to the Plan's right to subrogation or reimbursenvent.

You consent and agree that you shall not assign your rights to setllement or recovery against a third person or party 10 any other party, including their attomeys, without the Plan's consent. As such, the Plan's reimbursement will not be reduced by attomeys' fees and expenses without express written authorization from the Employer.

## Recortponeat

The Plan has the right to recover any mistaken payment, any overpayment, any payment that is made to any individual who was not eligible for that payment or any payment that was required to have been made to the Plan under the "Third Party Liability and Subrogation" section above. The Plan, or its designee, may withhold or offser future bencfit payments, sue to recover such amounts, or may use any other lawful remedy to recoup any such amounts.

## No Assignment of Benefts

You cannot assign, pledge, encumber or otherwise alienate any legal or beneficial interest in benefits under the Plan, and any attempt to do so will be void. The payment of benefits directly to a health care provider, if any, shall be done as a convenience to the covered person and shall not constitute an assignment of benefits under the Plan.

## Life Insumance

## Ufe Ansurnace Benefis

American Water helps you provide Gnancial security for your family in the event of your death. You also have coverage in case of a specific accidental injury, or if you die as the result of an accident.

In addition to the coverage provided to you at no cost by American Water, you also have the option of buying supplemental life insurance coverage for you or your eligible dependents.

The following table summarizes the Plan's life insurance benefits.
Please note: Bencfit amounts may vary depending on the terms of your union contract.

| Basic | 1.25 times your base pay (maximum benefit $\$ 200,000$ ) |
| :---: | :---: |
| Acsidental Death and Dismemberment | Up to maximum benefit of $\$ 10,000$ |
| Voluntary | 1. 2, or 3 times your base pay (maximum benefit \$1,000,000) |
| Voluntary Dependent | $\$ 20,000$ (spouse) and <br> $\$ 10,000$ per dependent child |

## Eligibility

If you are a full-time eligible employee (see "Eligibility" on page 3), you are eligible to participate in American Water Life Insurance Benefit Plans. Your eligibility and participation date is in accordance with your union contract provided you are then actively working or would have been able to work had you been scheduled to work that day. If you are on a layoff, on disability, or on leave of absence on your eligibility date, coverage or an increase in coverage will begin on the day you return to active work.

## Bosic Life Insurance *

Your Company-paid life insurance amount is equal to 1.25 times your base pay, rounded to the next higher $\$ 1,000$. The maximum bene $\sqrt{3}$ is $\$ 200,000$.

Your life insurance amount will increase automatically with salary increases. If you are an hourly-paid employee, your life insurance benefit is calculated based on your normalky scheduled hours, excluding overtime

This is an insured plan underwitten by MetLife. The provisions of the Plan will remain effective only while you are covered under the group contract

* Benefit amount may vary depending on the terms of your union contract.


## Honputed Income

Federal law requires you to pay income taxes on the value of Company-provided group term life insurance coverage on your life (but not voluntary life insurance) that exceeds $\$ 50,000$. Therefore, you have additional income called "imputed income" that is included in your annual compensation for income tax withholding and Social Security purposes. You do not actually receive additional income in your paycheck. The imputed income amount is determined by the IRS using age-related rates.

Accelerated
Death Benents

If you (or your spouse, if enrolled in voluntary dependent coverage) become terminally ill while covered under the Life Insurance program, you may request that MetLife pay an Accelerated Death Bencfit.
"Terminally ill" is defined as a person who:

- suffers from an incurable, progressive, and medically recognized disease or condition; and
- to a reasonable medical probability and based on generally accepted protocols, will not survive longer than six (6) months.

You may request an Accelerated Death Benefit on your own behalf or on behalf of your spouse (if emrolled in volutary dependent coverage) at any time by completing a MetLife Request for Accelerated Death Benefit Form and submitting it to MetLife. The request must include the statement of a currently licensed United States doctor that you or your spouse is terminally ill.
The doctor's statement must include:

- all medical test results,

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Life Insurance
After Termination

Conversion of Your infe Insurance

- laboratory reports, and
- any other information on which the statement is based, including the generally accepted protocols used by the doctor to delermine the person's expected remaining life span.
Your request for an Accelerated Death Benefit must state the amount of the benefit requested. The Plan includes an Accelerated Death Benefit of $50 \%$ of your normal dearh benefit to you or your spouse in the event of a terminal illness. The Accelerated Death Benefit Minimum is $\$ 5,000$ and the Accelerated Death Benefit Maximum is $\$ 100,000$ of Basic Life Insurance and $\$ 300,000$ of Voluntary Life Insurance.

This benefil can be requested only once on your own behalf and once for your spouse. If someone other than you owns the Life Insurance coverage for you and your spouse, the Accelerated Death Benefit will not be available under this Plan for or on behalf of such person.

Your Life Insurance amount in force on the day before the month of your $70^{\prime \prime}$ birthday will be reduced by $35 \%$ at age $70 ; 60 \%$ at age 75 : and $75 \%$ at age 80 .

If you become insured during or after the month in which you reach the above ages ( 70,75 , or 80 ), your Life Insurance amount will be the applicable percentage of the amount shown for your classification.

In most cases, you may apply for an individual policy under the Conversion Privilege within 31 days after your American Water Life Insurance ceases. If you die during this 31 -day period and before the individual policy goes into effect, the amount payable under the group policy is limited to the maximum that could have been converted. The limit applies even if you have not applied for, or paid the first premium on, the individual policy. This applics to Basic and Voluntary life insurance.

If any of your life insurance ceases because your employment ends or you are no longer in a class eligible for that insurance, or because of age, pension, or retirement, you may convert the amount of insurance which ends (or a lesser amount, it desired) to an individual policy. This applies to Basic and Voluntary life insurance.

Your converted policy may be any kind of individual policy then customarily being issued by MetLife for the amount being converted and for your age (nearest birthday) on the date it will be issued, except a term policy or one with disability or other supplementary benefits.

## Applying for an Individual policy

## Wfact of Prion Coverage

When life insurance ends because that part of the group contract discontinues as to your employee class, and your insurance has been in force under the group contract for at least five years in a row before it was discontinued, you may convert the amount that ends (minus the amount of any group life insurance for which you become eligible within 31 days of discontinuance) to an individual policy. The maximum amount that can be conveited by each person in any event is $\$ 10,000$.

In order to convert, you must make written application for an individual policy and pay the first premium within 31 days after insurance ends for any of the above reasons. No evidence of insurability (that is, prool of good health) will be required. The individual policy will become effective at the end of the 31-day period during which conversion is possible.

The premiums for the converted policy will be at MetLife's then customary rates for the same policy issued to any other person of the same class of risk and age at the time the converted policy is to become effective.

After an individual policy becomes effective for any person, that policy will be in exchange for all benefits and privileges under the group contract as regards the person involved and the amount that could have been converted.

In most cases, you may apply for an individual policy under the Conversion Privilege within 31 days after your American Water life insurance ceases. If you die during this 31 -day period and before the individual policy goes into effect, the amount payable under the group policy is limited to the maximum that could have been converted. The limit applies even if you have not applied for, or paid the first premium on, the individual policy.

If the coverage of any person under any part of this Plan replaces any of the person's prior coverage, the rules below apply to that part.
"Prior coverage" is any plan of group insurance sponsored by American Water that has been replaced by coverage under part or all of this Plan. The replacement can be complete or in patt for the Eligible Class to which you belong. Any such plan is prior coverage if provided by another group contract or any benefit section of this Plan.

A person's life insurance under this Plan replaces and supersedes any prior life insurance. It will be in exchange for everything under the prior life insurance. If you or your beneficiary become entitled to a claim under the prior life insurance, your Life Insurance under this Plan will be canceled as of its effective date and any premiums paid
for your life insurance under this Plan will be returned to American Water

The mode of settlement you chose and the beneficiary you named under a prior MelLife plan will apply to this Plan. This can be changed according to the terms of this Plan.

## Wolwnomy Life Masmance

## Voluntary <br> Coverage for You

In addition to Company-paid life insurance, you can buy supplemental life insurance coverage for you or your eligible dependents on an aftertax basis.

You can buy life insurance of one, two, or three times your base pay, up to a maximum benefit of $\$ 1,000,000$. You must be actively at work in order for coverage to take effect.
If you want to buy coverage over $\$ 300,000$ at this initial offering, you will be required to show proof of good health. You will be enrolled in the level that does not exceed $\$ 300,000$ until proof of good health is approved by MetLife. If you do not elect supplemental coverage at the initial offering, proof of good health will be required for amy amount of coverage.

Note: You will be required to show proof of good health if you:

- Did not enroll previously for coverage,
- Elect coverage over $\$ 300,000$,
- Elect more than one times your current voluntary supplemental life insurance coverage amount.

If proof of good health is required, your election will be pended until you receive approval from MetLife.

[^2]You can also buy supplemental life insurance coverage of $\$ 20,000$ for your spouse and $\$ 10,000$ for each dependent. Eligible dependents include children age 14 days to age 19, or to age 23 if a full-time student.

## $\cos t$

The following table shows the premiums for voluntary supplemental life insurance:

| Voluntary <br> Supplemental Life Insurance Premiums <br> (per $\$ 1,000$ of base pay) |  |  |  |
| :---: | :---: | :---: | :---: |
| Age | Monthly Cost | Age | Monthly Cost |
| Under 30 | $\$ 0.06$ | $50-54$ | $\$ 0.32$ |
| $30-34$ | $\$ 0.08$ | $55-59$ | $\$ 0.59$ |
| $35-39$ | $\$ 0.10$ | $60-64$ | $\$ 0.75$ |
| $40-44$ | $\$ 0.12$ | $65-69$ | $\$ 1.37$ |
| $45-49$ | $\$ 0.19$ | 70 and over | $\$ 2.21$ |

The following table shows the premiums for voluntary spouse and dependent life insurance:

## Voluntary Spouse and Dependent Life Insurance Premiums

| Spouse | $\$ 5.00$ per month |
| :--- | :--- |
| Dependent Cbild(ren) | $\$ 1.20$ per month per family |

## Optionat Eneployee Group Tem Life

Masurance

Participation Frozen as of December 31. 1995

Participation in the current Optional Employee Group Term Life Insurance program was frozen as of December 31, 1995. If you are currently enrolled in either of the two options of this plan, your participation will continue while you remain actively employed. Participants' life insurance amounts will increase as their salary increases, according to the following plan options:

## Option A

$100 \%$ of your Salary Scheduled Amount, up to $\$ 40,000$ of coverage.

## Option B

$50 \%$ of your Salary Scheduled Amount, up to $\$ 20,000$ of coverage.
Employees entolled in this plan have coverage as indicated in the following chart.

The Plans will pay a life insurance benefit cqual to the amount of life insurance in force for you if you die from any cause while insured. This benefit will end upon retirement or termination, but can be converted to an individual policy.

| Annual Basic Earnings | Insurance |  |
| :---: | :---: | :---: |
|  | Option A <br> $(\mathbf{1 0 0 \%})$ | Option B <br> $\mathbf{( 5 0 \%})$ |
| $\$ 38,000$ or more | $\$ 40,000$ | $\$ 20,000$ |
| $\$ 35,000$ but less than $\$ 38,000$ | $\$ 38,000$ | $\$ 19,000$ |
| $\$ 32,000$ bul less than $\$ 35,000$ | $\$ 35,000$ | $\$ 17,500$ |
| $\$ 29,000$ but less than $\$ 32,000$ | $\$ 32,000$ | $\$ 16,000$ |
| $\$ 26,000$ but less than $\$ 29,000$ | $\$ 29,000$ | $\$ 14,500$ |
| $\$ 22,500$ but less than $\$ 26,000$ | $\$ 26,000$ | $\$ 13,000$ |
| $\$ 19,500$ bur less than $\$ 22,500$ | $\$ 23,000$ | $\$ 11,500$ |
| $\$ 16,500$ but less than $\$ 19,500$ | $\$ 20,000$ | $\$ 10,000$ |
| $\$ 13,500$ but less than $\$ 16,500$ | $\$ 17,000$ | $\$ 8,500$ |
| $\$ 10,400$ but less than $\$ 13,500$ | $\$ 14,000$ | $\$ 7,000$ |
| $\$ 7,280$ but less than $\$ 10,400$ | $\$ 10,000$ | $\$ 5,000$ |
| $\$ 5,200$ but less than $\$ 7,280$ | $\$ 7,000$ | $\$ 3,500$ |
| Less than $\$ 5,200$ | $\$ 5,000$ | $\$ 2,500$ |

## Benchicharies

When you elect to participate in any of these Plans, you need to designate a Beneficiary (or beneficiaries) to receive life insurance benefits if you die.

You may name or change your beneficiary by submitting a Beneficiary Designation Form, which is available from the Benefits Service

Center. The naming or any change will take effect on the date the Benefits Center receives your completed Beneficiary Designation Form.

Any amount payable to a beneficiary will be paid to those you name. Unless you state otherwise, if more than one beneficiary is named, they will share on equal terms.

If a named beneficiary dies before you, his or her share will be payable in equal shares to any other named beneficiaries who survive you.

If no named beneficiary survives you or if no beneficiary has been named, payment will be made as follows to those who survive you:

- Your spouse, if any.
- If you have no spouse, in equal shares to your children.
- If you have no spouse or child. to your parents, equally or to the survivor.
- If you have no spouse, child, or parent, in equal shares to your brothers and sisters.
- If none of the above survives, to your executors or administrators.


## Permanom and Tow Diswhilty wenefis

For the purposes of a Permanent and Total Disability benefit, you are considered permanently and totally disabled only if:

- An illness or injury stops you from working at:
- your own job, or
- any other job for pay or profit,
and it must continue to prevent you, for life, from working at any reasonable job. A "reasonable job" is any job for pay or profit, which you are, or may reasonably become, fitted for by education, training, or experience, or
You lose one of these functions:
- the sight of both eyes,
- the use of both hands,
- the use of both feet,
- the use of one hand and one foot.

You must meet all of the following to be eligible for a Permanent and Total Disability benefit:

- Your Life Insurance must be in force when you become permanently and totally disabled.
- You must be under age 60 when you first become permanently and totally disabled.
- You musi furnish all proof when requested. MerLife bas the right to examine you, at its expense, before approving the proof.

If you are under age 60 and you are permanently and totally disabled while insured under the Plan (meaning you can do no work for pay or profit) and you furmish all information, notices, and proof when required, the amount of your life insurance in force on your last day actively at work may be extended during the disability, without payment of premiums and contributions. The duration, nature, and extent of disability determine eligibility for this extension. This insurance benefit reduces to $\$ 10,000$ when you reach age 70 .

Any total disability should be reported immediately to American Water for help in deternining whether you qualify for this extended insurance and the amount of insurance that may be continued. Refer to the Age Reduction Rule and Conversion Privilege, which may apply to this life insurance amount.

Application for Waiver of Premium should be filed after your $8^{\text {th }}$ month of disability but before the end of the $12^{\text {th }}$ full month of disability. For example, if your first day of absence from work due to disability was February 15, 2006, the application should be filed after October 15, 2006 but before February 14, 2007. Your local HR representative will initiate the process by sending you the application and instructions. You will then be required to forward the completed application and any required documentation to MetLife. Please contact your HR representative if you have any questions or concems

Extended Death BeneTh

If MetLife reccives proof, at its Home Office, that all of the following apply, it will pay your beneficiary, as a Permanent and Total Disability benefit, the amount of life insurance in force on your life when the total disability began:

- Premium payments for your life insurance stop while you are totally disabled by illness or injury, which stops you from working in any reasonable job.
- You die during the uninterrupted continuance of the total disability. Death occurs no later than 12 months after premium payments from American Water cease.
- You would have qualified for the Permanent and Total Disability benefit except that:
- your total disability did not last at least six months, or
- the required proof was not yet received or approved by MetLifc.

Written notice of your death must be given to Medlife at its Home Office within 12 months of your death. If it is not given, Metlife will not have to pay this benefit.

When MetLife approves a claim for any bencfit under this feature, the benefit will be in full setlement and satisfaction of MetLife's obligations.

If any individual policy has been issued to you under the Conversion Privilege, your rights under this section may be restored. In order to restore those rights, you musi give up all such policies without claim, except for the return of the premiums you paid.

## Accidental Dean and Dismenhemenut Coverage $\left(A D D^{3} D\right) *$

This plan is an insured plan underwritten by MetLife. The provisions of the Plan will remain effective only while you are covered under the group contract.
Your Company-paid AD\&D lnsurance pays up to a maximum of $\$ 10,000.00$ (called the "Principal Sum"). The following must occur for benefits to become payable: while insured, you suffer a bodily injury in au accident and, within 90 days after the accident and as a direct result of the injury:

- You die.
- You lose a hand, at or above the wrist joint
- You lose a foot, at or above the ankle joint.
- You suffer the irrecoverable and complete loss of sight in the eye.
- Your full Principal Sum is payable if you die. Half your Principal Sum is payable if you lose a hand, foot, or cye. No more than the Principal Sum is payable for all losses which result from one accident. Benefits are paid for losses caused by accidents only.


## No bencfits are payable for a loss caused or contributed to by:

- Bodily or mental infirmity.
- Disease, ptomaines, or bacterial infections
- Medical or surgical treatment.
- Suicide or attempted suicide (sane or insane).
- Intentionally self-inflicted injury.
- War or any act of war (declared or undeclared).
- Participation in a riot or an attempl or commission of a felony.

These limitations do not apply if the loss is caused by:

- An infection, which results directly from the injury
- Surgery needed because of the injury.
* Benefit amount may vary depending on the terms of your union contract.


## Submilting Clams

## Tor Survivor's

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Benefity

How betethts Are Paid

To receive survivor`s benefits under Basic Life Insurance Plan, Optional Employee Group Term Life Plan, or Voluntary Life Insurance Plan, your beneficiary musk complete and submit the appropriate Statement of Claim form and provide a certified death certificare to the Benelits Service Center within one year of the death.
If you were totally disabled at the time of your death and American Water was continuing your coverages at no cost to you, your beneficiary may be required to submit proof that total disability was continuous up to the date of your death.
To recejve $A D \& D$ benefits, you must complete and submit the appropriate Statement of Claim form and provide proof documenting your loss to the Benelits Service Center within 30 days after the loss occurs. In some cases, you may be requested to undergo an independent medical examination before benefits can be paid.

Approved survivors' and $\mathrm{AD} \& \mathrm{D}$ benefits are paid in a lump sum. However, other payment options may be available from MetLife. The Bencfits Service Center will provide information about optional payment methods when you or your beneficiary are eligible to receive benefits.

## Employee Assistunce Programe (EAP)

## Employee Assaravee Progrant

The Employee Assistance Program (EAP), run by Carcbridge, provides the support you need to deal with the varicty of challenges you may face - financial, legal, family, emotional, etc. All EAP services are free and conlidential for you and your dependents.

Carebridge also provides a Website www.myliferesource.com, which purs a wealth of resources right at your fingertips. The Universal LifeHelps Library is one of the most extensive resources on the Web with over 1,474 Resource Centers centered on the five major areas of modern life: Myself, My Relationships, My Daily Life Concerns, My Wellness and My Work. In addition, you will have access to legal documents and help finding service providers (e.g., childcare locations). You can visit the new, improved Carebridge Web site at www.myliferesource.com. When visiting for the first time, enter the American Water organization code (HXSBJ) to register for your accounc.

You don't have to access the Internet to benefit from Carebridge services. You can contact an EAP counselor by phone 24 hours a day, seven days a week at 1-800-437-0911

## Additional Plane Informatione

## Alditional Plata Information

## - Plan Sponsor

American Water Works Company, Inc. 1025 Laurel Oak Road Voorhees, NJ 08043

- Plan Name - Group Insurance Plan of American Water Works Company, Inc. and Designated Subsidiaries and Affiliates
- Employer Identification Number-51-0063696
- Plan Number - 501
- Effective Date of this Summary Plan Description

January I, 2006

- Plan Year

January I through December 31st

- Type of Plan

Health and Welfare Benefit Plan, providing the following benefits: medical, dental, prescription, vision, employee assistance program, disability, life and accident insurance and flexible spending accounts. The medical, dental, prescription, vision and health care spending account are provided under a "group health plan" within the meaning of federal law.

## - Type of Administration

Self-Insured/Administrative Services Contract/Fully Insured

- Plan Administrator

Senior Vice President, Hunan Resources
American Water
1025 Laurel Oak Road
Voorhees, NJ 08043
(856) 346-8200

- Agent for Service of Legal Process

The Secretary
American Water
1025 Laurel Oak Road
Voorhees, NJ 08043
(856) 346-8200

# - Source of Contributions 

## Employer and Employee

- Appeals Administrator

Retirement / Benefits Committee
American Water
1025 Laurel Oak Road
Voorhees, NJ 08043
(856) 346-8200

- Unions

A complete list of sponsoring unions may be obtained by participants upon written request and is available for examination upon request.

## Phar Nomices

Moticare Part $\quad$| If you are actively at work at age 65 or older and then you retire and |
| :--- |
| become Medicare-eligible, you must call the Benefits Service Center |
| Notice |
| to request a Notice of Creditable Coverage to avoid the Medicare Part |
| D late enrollment fee. |

Medicare Part ${ }^{\text {M }}$ The following information comes from hitp://questions.medicare.gov, Entolment

## Can I delay Medicare Part B enrollment without paying higher premiums?

Yes. In certain cases, you can delay your Medicare Part B enrollment without having to pay higher premiums. If you didn't take Medicare Part B when you were firse eligible because you or your spouse were working and had group health plan coverage through your or your spouse's employer or union, you can sign up for Medicare Part B during a Special Enrollment Period. You can sign up:

- Anytime you are still covered by the employer or union group health plan through your or your spouse's current or active employment, or
- During the 8 months following the month the employer or union group health plan coverage ends or when the employment ends (whichever is first).

If you are disabled and working (or you have coverage from a working family member), the Special Enrollment Period rules also apply.

## Effective date if vou sign up during a Special Enrollment Period

If you enroll in Medicare Part B while covered by the group health plan or during the first full month after coverage ends, your Medicare Part B coverage starts on the first day of the month you curoll. You also can delay the start date for Medicare Part B coverage until the first day of any of the following 3 months.

If you enroll during any of the 7 remaining months of the Special Enrollment Period, your Medjcare Part B coverage begins the noonth after you enrolk.
Remember: If you do not enroll in Medicare Part B during your Special Enrollment Period, you'll have to wait until the next Gencral Enrollment Period, which is January I through March 31 of each year. You may then have to pay a higher Medicare Part B premium because you could have had Medicare Parl B and did not take it. Call the Socjal Security Administration at (800) 772-1213 for more information or to enroll in Medicare. You can visit the Social Security web site at www.socialsecurity.gov.

Anendment or Ternination of the Phan

The Right to Amend ar Terminate the Plan

American Water reserves the right to amend all or any of our employee benefit plans at any time, including the right to change eligibility criteria or program costs and the right to restrict or eliminate benefits provided. The decision to change or end the plans may be caused by changes in federal or state laws governing benefits, the reguirements of the Internal Revenue Code or ERISA, or any other reason.

The authority to make any such changes to the Plan generally rests with the Board of Directors of American Water or its designee, although the Plan Administrator may also change the Plan as required by law or in a manner which will nol result in a material cost.

Some of the employees who participate in this Plan do so under the terms of collective bargaining agreements. The Company takes its obligations under those agreements very seriously and will, as required cither by the Company's contractual agreements or by law, negotiate changes to the Plan affecting union members with those unions whose members participate in the Plan.

You will be notified if any material changes are made to the Plan or it it is terminated. No amendment, termination, or partial termination of the Plan will affect claims incurred for which items or services have been provided before the date of amendment, termination, or partial termination

## Fhing a Clainn

The clain-filing procedures for each type of benefit are outlined in the individual sections describing the benefits. In general, you and your eligible dependents or designated beneficiary (when applicable) must file a written claim on the proper form. You can obtain the necessary claim forms from your Benefits Service Center.

## Clam Detemninathon and Appeds Process

The contracts, booklets, and other materials that describe a particular benefit under the Plan will generally contain a specific set of claims and appeals procedures that you must follow to make a claim to receive that particular benefit and/or to appeal a denjed claim for that particular benefit. Although these separate claims and appeals procedures will be very similar in most respects, there nay be important differences. Because of this, you should follow the specific claims and appeals procedures for a particular benefit very carefully. If the booklets and other materials that describe a particular benefit do not contain a specific set of claims and appeals procedures, the Plan's default procedures as described below will apply. If you have any questions about which set of claims and appeals procedures to follow or any other questions about making a claim, you should contact the Plan Administrator immediately.
For purposes of this section of the SPD describing the Plan's default claims and appeals procedures, the third parties to whom the Plan Administrator has delegated the authority to review and evaluate claims (in the case of the self-insured plans) and the insurance carriers (in the case of the insured plans) shall be referred to as the "Claims Administrator" at the initial claim level and the "Appeals Administrator" at the appeal level.

A request for benefits is a "claim" subject to these procedures only if you or your authorized representative file it in accordance with the Plan's claim filing guidelines. In general, claims must be filed in

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writing (excepl urgent care claims, which may be made orally) with the applicable provider. Any claim that does not relate to a specific benefit under the Plan (for example, a general eligibility claim) must be filed with the Plan Administrator at the address set forth in the "Additional Information" section on page 158. A request for prior approval of a benefit or service where prior approval is not required under the Plan is not a "claim" under these nules. Similarly, a casual inquiry about benefits or the circumstances under which bencfits might be paid under the Plan is not a "claim" under these rules, unless it is deternined that your inquiry is an attempt to file a claim. If a claim is recejved but there is not enough information to allow the Claims Administrator to process the claim, you will be given an opportumity to provide the missing information.

If you want to bring a claim for benefits under the Plan, you may designate an authorized representative to act on your behalf as long as you provide written notice of such designation to the Claims Administrator and/or the Appeals Administrator identifying such authorized representative. In the case of a claim for medical benefits involving urgent care, a health care professional with knowledge of your medical condition may act as your authorized representative with or without prior notice.

In the case of a claim not involving health benefits (c.g., Life, $A D \& D$, STD and Dependent Care Spending Account), initial claims for benefits under the Plan should be made by you in writing to the Claims Administrator.

## Time Periods for Responding to Initial Claims

If you bring a claim for benefits under the Plan, the Claims
Administrator will respond to you within 90 days ( 45 days for a clain involving disability benefits) after receipt of the claim. For claims nor involving disability beneftes, if the Claims Administrator determines that an extension is necessary due to matters beyond the control of the Plan, the Claims Administrator will notify you within the initial 90day period that up to an additional 90 days is needed to review your claim. In the case of a claim involving disability benefits, the Claims Administrator will notify you within the initial 45-day period that up to an additional 30 days is needed to review your claim. If the Claims Administrator determines that additional time is necessary to review your claim for disability benetits, the Claims Administrator may notify you of an additional 30 -day extension.

Notice and Information Contained in Notice Denving Initial Claim If the Claims Administrator denies your claim (in whole or in part), the Claims Administrator will provide you with written notice of the denial. This notice will include the following;

- Reason for the denial - the specific reason or reasons for the denial;
- Reference to Plan provisions - reference to the specific Plan provisions on which the denial is based;
- Description of additional material - a description of any additional material or information necessary for you to substantiate your claim and an explanation as to why such infomation is necessary;
- Description of any internal rules - in the case of any claim involving disability benefits, a copy of any internal rulc. guideline, protocol, or other similar criterion relied upon in making the initial determination or a statement that such a rule, guideline, protocol, or other criterion was relied upon in making the determination and that a copy of such rule will be provided to you free of charge at your request; and
- Description of claims appeals procedures - a description of the Plar`s appeals procedures and the time limits applicable for such procedures, including a statement that you are eligible to bring a civil action in Federal courl under Section 502 of ERISA to appeal any adverse decision on appeal.


## Appealing a Denied Claim for Benefits

If the Claims Administrator denies your initial claim for benefits, you may appeal the denial by filing a written request with the Appeals Administrator within 60 days ( 180 days in the case of a claim involving disability benefits) after you receive the notice denying your initial claim for benefits. If you decide to appeal a denied claim for benefits, you will be able to submit written comments. documents, records, and other information relating to your claim for benefits (regardless of whether such information was considered in your initial claim for bencfits) to the Appeals Administrator for review and consideration. You will also be entitled to receive, upon request and free of charge, access to, and copies of all documents, records, and other information relevant to your appeal.

## Time Periods for Responding to Appealed Claims

If you appeal a denied claim for benefits under the Plan, the Appeals Administrator will respond to you within 60 days ( 45 days in the case of a claim involving disability benefits) after receipt of the claim. If the Appeals Administrator determines that an extension is necessary due to matters beyond the control of the Plan, the Appeals Administrator will notify you within the initial 60 -day period sthe initial 45-day period in the case of a claim involving disability benefits) that up to an additional 60 days ( 45 days in the case of a claim involving disability benefits) is needed to review your claim.

## Notice and Information Contained in Notice Denving Appeal

If the Appeals Administrator denies your claim (in whole or in part), the Appeals Administrator will provide you with written notice of the denial. This notice will include the following

- Reason for the denial - the specific reason or reasons for the denial;
- Reference to Plan provisions - reference to the specific Plan provisions on which the denial is based;
- Statement of entitloment to documents - a statement that you are entifled to receive, upon request and free ol charge, access to and copies of, all documents, records and other information that is relevant to your claim and/or appeal for benefits;
- Description of any internal rules - in the case of a claim involving disability benefits, a copy of any internal rule, guideline, protocol, or other similar criterion relied upon in making the appeal determination or a statement that such a rule, guideline, protocol, or other criterion was relied upon in making the appeal determination and that a copy of such rule will be provided to you free of charge at your request; and
- Statement of right to bring action - a statement that you are entitled to bring a civil action in Federal court under Section 502 of ERISA to pursue your claim for benefits.

The decision of the Appeals Administrator shall be final and conclusive on all persons claiming benefits under the Plan, subject to applicable law. If you challenge the decision of the Appeals Administrator, a review by a court of law will be limited to the facts, evidence and issues presented during the claims procedure set fortb above. The appeal process described herein must be exhausted before you can pursue the claim in Federal court. Facts and evidence that become known to you atter having exhausted the appeals procedure may be submitted for reconsideration of the appeal in accordance with the time limits established above. Issues not raised during the appeal will be deemed waived.

Clams Imvolving Healh Benchits

In the case of a claim involving health benefits (e.g., Medical, Dental, Vision, Prescription Dng, Employee Assistance Program, and Health Care Spending Account), initial claims for benefits under the Plan should be made by you in writing to the Claims Administrator.

## Types of Claims

There are several different types of claims that you may bring under the Plan. The P\}an's procedures for evaluating claims (for example, the time limits for responding to clains and appeals) depend upon the
particular type of claim. The types of claims that you generally may bring under the Plan are as follows:

- Pre-Service Claim - A "pre-service claim" is a claim for a particular benefit under the Plan that is conditioned upon you receiving prior approval in advance of receiving the benefit. A pre-service claim must contain, at a minimum, the name of the individual for wbom benefits are being claimed, a specific medical condition or symptom, and a specific treament, service or product for which approval is being requested.
- Post-Service Claim - A "post-service claim" is a claim for payment for a particular benefit or for a particular service after the benefit or service has been provided. A post-service claim must contain the information requested on a claim form provided by the applicable provider. Note: Claims under the Health Care Spending Account are always post-senvice claims.
- Urgent Care Claim - An "urgent care claim" is a claim for benefits or services involving a sudden and urgent need for such benefits or services. A claim will be considered to involve urgent care if the Claims Administrator or a doctor with knowledge of your condition determines that the application of the claims review procedures for non-urgent claims (i) could seriously jeopardize your life or your health, or your ability 10 regain maximum function, or (ii) in your doctor's opinion, would subject you to severe pain that cannot adequately be managed without the care or treatment that is the subject of the claim.
- Concurrent Care Review Claim - A "concurrent care review claim" is a claim relating to the contimuation/reduction of an ongoing course of treatment.


## Time Periods for Responding to Initial Claims

If you bring a claim for benefits under the Plan, the Claims Administrator will respond to your claim within the following time periods:

- Post-Service Claim - In the case of a post-service claim, the Claims Administrator shall respond to you within 30 days after recejpt of the claim. If the Claims Administrator determines that an extension is necessary due to matters beyond the control of the Plan, the Claims Administrator will norify you within the initial 30 -day period that the Claims Administrator needs up to an additional 15 days to review your claim. If such an extension is necessary because you failed to provide the information necessary to evaluate your claim, the notice of extension will describe the information that you need to provide to the Claims Administrator.

You will have no less than 45 days from the date you receive the notice to provide the requested information.

- Pre-Service Claim - In the case of a pre-service claim, the Claims Administrator shall respond to you wilhin 15 days after receipl of the claim. If the Claims Administrator deternines that an extension is necessary due to matters beyond the control of the Plan, the Claims Administrator will notify you within the initial 15-day period that the Claims Administrator needs up to an additional 15 days to review your chaim. If such an extension is because you failed to provide the information necessary to evaluate your claim, the notice of extension will describe the information that you need to provide to the Claims Administrator. You will have no less than 45 days from the date you receive the notice to provide the requested information.
- Urgent Care Claim - In the case of an urgent care claim, the Claims Administrator shall respond to you within 72 hours after receipt of the claim. If the Claims Administrator determines that it needs additional information to review your claim, the Claims Administrator will notify you within 24 hours after receipt of the claim and provide you with a description of the additional information that it needs to evaluate your claim. You will have no less than 48 hours from the time you receive this notice to provide the requested information. Once you provide the requested information, the Claims Administrator will evaluate your claim within 48 hours after the earlier of the Claims Administrator's receipt of the requested information, or the end of the extension period given to you to provide the requested information. There is a special time period for responding to a request to extend an ongoing course of treatment if the request is an urgent care claim. For these types of claims, the Clainss Administrator must respond to you within 24 hours after receipt of the claim by the Plan (provided, that you make the claim at least 24 hours prior to the expiration of the ongoing course of freatment).
- Concurrent Care Review Claim - If the Plan has already approved an ongoing course of treatment for you and contemplates reducing or terminating the treatment. the Claims Administrator will notify you sufficiently in advance of the reduction or termination of treatment to allow you to appeal the Claims Administrator's decision and ontain a delermination on review hefore the treament is reduced or terminated.


## Notice and Information Contained in Notice Denving Initial Claim

 If the Claims Administrator denies your claim (in whole or in part), the Claims Administrator will provide you with written notice of the denial (although initial notice of a denied urgent care claim may be provided to you orally). This notice will include the following:- Reason for the denial - the specific reason or reasons for the denial;
- Reference to Plan provisions - reference to the specific Plan provisions on which the denial is based;
- Description of additional material - a description of any additional material or information necessary for you to substantiate your claim and an explanation as to why such information is necessary:
- Description of any internal rules - a copy of any intermal rule, guideline, protocol, or other similar criterion relied upon in making the initial determination or a statement that such a rule, guideline, protocol, or other criterion was relied upon in making the appeal detemination and that a copy of such rule will be provided to you free of charge at your request; and
- Description of claims appeals procedures - a description of the Plan's appeals procedures and the time limirs applicable for such procedures (such description will include a statement that you are eligible to bring a civil action in Federal court under Section 502 of ERISA to appeal any adverse decision on appeal and a description of any expedited review process for urgent care claims).


## Appealing a Denied Claim for Benefits

If the Claims Administrator denies your initial claim for benefits, you may appeal the denial by filing a writen request (or an oral request in the case of an urgent care claim) with the Appeals Administrator within 180 days after you receive the notice denying your initial claim for benefits. If you decide to appeal a denied clain for benefits, you will be able to submit written comments, documents, records, and other information relating to your claim for benefits (regardless of whether such infomation was considered in your initial claim for benefits) to the Appeals Administrator for review and consideration. You will also be entitled to receive, upon request and free of charge, access to, and copies of, all documents, records, and other information that is relevant to your appeal.

## Time Periods for Responding to Appealed Claims

If you appeal a denied claim for benefiss, the Appeals Administrator will respond to your claim within the following time periods:

- Post-Service Claim - In the case of an appeal of a denied postservice claim, the Appeals Administrator shall respond to you within 60 days after receipt of the appeal.
- Pre-Service Claim - In the case of an appeal of a denied pre-service claim, the Appeals Administrator shall respond to you within 30 days after receipt of the appeal.
- Urgent Care Claim - In the case of an appeal of a denied urgent care claim, the Appeals Administrator shall respond to you within 72 hours after receipt of the appeal.
- Concurrent Care Review Claim - In the case of an appeal of a denied concurrent care review claim, the Appeals Administrator shall respond to you before the concurrent or ongoing treatment in question is reduced or terminated.


## Notice and Information Contained in Notice Denving Appeal

 If the Appeals Administrator denies your claim (in whole or in part), the Appeals Administrator will provide you with written notice of the denial (although initial notice of a denied urgent care claim may be provided to you orally or via facsimile or other similarly expeditious means of communication). This notice will include the following:- Reason for the denial - the specifie reason or reasons for the denial;
- Reference to Plan provisions - reference to the specific Plan provisions on which the denial is based;
- Statement of entitlement to documents - a statement that you are entitled to receive, upon request and free of cbarge, access to and copies of, all documents, records and other information that is relevant to your claim and/or appeal for benefits;
- Description of any internal rules - a copy of any internal rule, guideline, protocol, or other similar criterion relied upon in making the appeal determination or a statement that such a rule, guideline, protocol, or other criterion was relied upon in making the appeal determination and that a copy of such rule will be provided to you free of charge at your request; and
- Statement of right to bring action - a statement that you are entitled to bring a civil action in Federal court under Section 502 of ERISA to pursue your claim for benefits.

If the time limitations set forth have not been exceeded, no person may bring an action in a court of law unless the claims review procedure is exhausted and a final determination has been made. The decision of the Appeals Administrator shall be final and conclusive on all persons claiming benefits under the Plan, subject to applicable law. If you challenge the decision of the Appeals Administrator, a review by a court of law will be limited to the facts, evidence and issues presented during the claims procedure set forth above. The appeal process described berein must be exhausted before you can pursue the claim in federal court. Facts and evidence that become known to you after having exhausted the appeals procedure may be submitted for reconsideration of the appeal in accordance with the time limits
established above. Issues not raised during the appeal will be deemed waived.

## Wour Ryghe Muder ERMSA

The intent of this book is to meet the Summary Plan Description requirements of the Employee Retirement Income Security Act of 1974, as amended (ERISA). However, if there is a conflici between the information contained in the official Plan documents and the information contained in this book, the information in the Plan documents will take precedence.
Under ERISA, you arc entitled to:

- Examine, without charge, at the plan administrator's office and at other specificd locations, such as worksites and union halls, all documents governing the plan, including insurance contracts and collective bargaining agreements, and a copy of the latest annual report (Form 5500 Scries) filed by the plan with the U.S. Department of Labor and available at the Public Disclosure Room of the Employee Benefits Security Administration
- Obtain, upon written request to the plan administrator, copics of documents governing the operation of the plan, including insurance contracis and collective bargaining agreements, and copies of the latest annual report (Form 5500 Series) and updated summary plan description. The administrator may make a reasonable charge for the copies.
- Receive a summary of the plan's annual financial report. The plan administrator is required by law to furnish each participant with a copy of this summary annual report.

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Health Pan

What Are Vour Rights?

Receive
Imformation
Ahout Your Plan and Benelts

Coverage

Prudent Actions
by Phan
Finuciaries

- Continue health care coverage for yourself, spouse, or dependents if there is a loss of coverage under the plan as a result of a qualifying event. You or your dependents may have to pay for such coverage. Review this summary plan description and the documents govening the plan on the rules governing your COBRA continuation coverage rights.
In addition to creating rights for plan participants ERISA imposes duties upon the people who are responsible for the operation of the cmployce benefit plan. The people who operate your plan, called "fiduciaries" of the plas, bave a duty to do so prudently and in the interest of you and other plan participants and beneficiaries. No one, including your employer, or any other person, may fire you or

Entorce Vour Rights

Assistance with
Your Questions

ERISAC Clam Fiduchery
otherwise discriminate against you in any way to prevent you from oblaining a welfare benefit or exercising your rights under ERISA.

If your claim for a benefit is denied or ignored, in whole or in part, you have a right to know why this was done, to oblain copies of documents relating to the decision without charge, and to appeal any denial, all within certain time schedules. Under ERISA, there are steps you can take to enforce the above rights. For instance, if you request a copy of plan documents or the latest annual report from the plan and do not receive them within 30 days, you may file suit in a Federal court. In such a case, the court may require the plan administrator to provide the materials and pay you up to $\$ 110$ a day until you receive the materials, unless the inaterials were not sent because of reasons beyond the control of the administrator.

If you have a clain for benefits that is denied or ignored, in whole or in part, you may file suit in a state or Federal court. In addition, if you disagree with the plan's decision or lack thereof conceming the qualified status of a medical child support order, you may file suit in Federal court. If it should happen that plan fiduciaries misuse the plan's money, or if you are discriminated against for asserting your rights, you may seek assistance from the U.S. Department of Labor, or you may file suit in a Federal court. The court will decide who should pay court costs and legal fees. If you are successful the court may order the person you have sued to pay these costs and fees. If you lose, the court may order you to pay these costs and fees, for cxample, if it finds your claim is frivolous.

If you have any questions about your plan, you should contact the plan administrator. If you have any questions about this statement or about your rights under ERISA, or if you need assistance in obtaining documents from the plan administrator, you should contact the nearest office of the Employee Benefits Security Administration, U.S. Department of Labor, listed in your telephone directory or the Division of Technical Assistance and Inquiries, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue NW, Washington, D.C. 20210. You may also obtain certain publications about your rights and responsibilities under ERISA by calling the publications hotline of the Employee Benefits Security Administration.

For the purposes of ERISA, all third party administrators and insurance carriers are fiduciaries, with complete authority to review all denied claims for benefits under this program. This includes, but is not limited to, the denial of certification of the medical necessity of hospital or medical treatment.

In exercising its fiduciary responsibility, the American Water Retircment / Benefits Committec shall have discretionary authority to determine whether and to what extent employees and beneficiaries are entitled to benefits, and to interpret any disputed or doubtful terms of the Plan. American Water Retirement / Benefits Committee shall be deemed to have properly exercised such authority unless it acts arbitrarily or capriciously.

Some of the employees who participate in this Plan do so under the terms of collective bargaining agreements. The Company takes its obligations under those agreements very seriously and will, as required either by the Company's contractual agreements or by law, negotiate changes to the Plan affecting union members with those unions whose members participate in the Plan.

## Plan Bene/its

These benefits are provided by American Water. The following plans are self-insured benefits that are paid for directly by American Water:

- Standard Preferred Provider Organization (PPO) Plan
- Premium Preferred Provider Organization (PPO) Plan
* Exclusive Provider Organization (EPO) Plan
ri Dental Plans
- Vision Plan
- Prescription Drug Program
- Short-Term Disability Plan

Health Care Spending Account

- Dependent Care Spending Account

Horizon provides certain administrative services for the Preferred Provider Organization, the Exclusive Provider Organization and the Flexible Spending Account Plans. Caremark administers the Prescription Drug Program. Aetna provides certain administrative services for the IJental Plans and Short-Term Disability Plans.

American Water, Horizon, Caremark, Aetna and EyeMed reserve the right to interpret all Plan provisions as necessary and to make all determinations regarding benefits payable under these American Water Employee Benefit Plans.

The following plan is fully insured:

- Lite Insurance Plan


## Plan Docaments

In preparing this Summary Plan Description, American Water has attempted to avoid complex language and legal terms whenever possible. If a question should ever arise concerning the nature and extent of benefits under any aspect of American Water Group Insurance Plan, the actual legal Plan documents and not this Summary Plan Description, will govern.

## Coninatatom of health Covernge

Introdections This section contains important information about your right to COBRA continuation coverage, which is a temporary extension of coverage under the Plan. The right to COBRA contimuation coverage was created by a federal law, the Consolidated Omnibus Budget Reconciliation Acl of 1985 (COBRA). COBRA continuation coverage can become available to you and to other members of your family who are covered under the Plan when you would otherwise lose your group healih coverage. This section generally explains COBRA continuation coverage, when it may become available to you and your family, and what you need to do to protect the right to receive it. For more information about your rights and obligations under the Plan and under federal law, you should contact the Plan Administrator.

The Plan Administrator is Senior Vice President Human Resources, American Water, 1025 Laurel Oak Road, Voorhees, NJ 08043, (856) 346-8200. The Plan Administrator is responsible for administering COBRA continuation coverage.

What is COIS欺索 Continuaiton Coverage?

COBRA continuation coverage is a continuation of Plan coverage when coverage would otherwise end because of a life event known as a "qualifying event." Specific qualifying events are listed later in this notice. COBRA continuation coverage must be offered to each person who is a "qualified beneficiary." A qualified beneficiary is someone
who witl lose coverage under the Plan because of a qualifying event. Depending on the type of qualifying event, employees, spouses of employees, and dependent children of employees may be qualified beneficiaries. Under the Plan, qualified beneficiaries who elect COBRA continuation coverage must pay for COBRA continuation coverage.

If you are an employee, you will become a qualified beneficiary if you will lose your coverage under the Plan because either one of the following qualifying events happens:

- Your hours of employment are reduced, or
- Your employment ends for any reason other than your gross misconduct.

If you are the spouse of an employee, you will become a qualified beneficiary if you will lose your coverage under the Plan because any of the following qualifying events happens:

- Your spouse dies;
- Your spouse's hours of employment are reduced:
- Your spouse's employment ends for any reason other than his or ber gross inisconduct;
- Your spouse becomes enrolled in Medicare benefits (Part A, Part B, or both); or
- You become divorced or legally separated from your spouse.

Your dependent children will become qualilied beneficiaries if they will lose coverage under the Plan because any of the following qualifying events happens:

- The parent-employee dies;
- The parent-employee's hours of employment are reduced:
- The parent-employee's employment ends for any reason other than his or her gross misconduct;
- The parent-employee becomes enrolled in Medicare benefits (Part A, Part B, or both);
- The parents become divorced or legally separated; or
- The child stops being eligible for coverage under the plan as a "dependent child."

How long Does COBRA
Coverage Last?

The Plan will offer COBRA continuation coverage to qualified beneliciaries only after the Plan Administrator has been notified thal a qualifying event has occurred. When the qualifying event is the end of employment or reduction of hours of employment, death of the employee, or the employee's becoming entitled to Medicare benefits (Part A, Part B, or both), the employer must notify the Plan Administrator of the qualifying event.

For the other qualifying events (divorce or legal separation of the employee and spouse or a dependent child's losing eligibility for coverage as a dependent child), you must notify the Plan Administrator in writing within 60 days after the qualifying event occurs. You must send this notice to the Benefits Service Center, American Water, 131 Woodcrest Road, Cherry Hill, NJ 08003, along with documentation of the event.

COBRA continuation coverage is a temporary extension of coverage. When the qualifying event is the death of the employee, the employec's becoming entitled to Medicare benefits (under Part A, Pant $B$, or both), your divorce or legal separation, or a dependent child's losing eligibility as a dependent child, COBRA continuation coverage lasts for up to a total of 36 months. When the qualifying event is the end of employment or reduction of the employee's hours of employment, and the employee became entitled to Medicare benefits less than 18 months before the qualifying event, COBRA continuation coverage for qualified beneficiaries other than the employee lasts until 36 months after the date of Medicare entitlement. For example, if a covered employce becomes entitled to Medicare 8 montls before the date on which his or her employment teminates, COBRA continuation coverage for the spouse and children can last up to 36 months after the date of Medicare entitlement, which is equal to 28 months after the date of the qualifying event ( 36 months minus 8 months). Otherwise, when the qualifying event is the end of employment or reduction of the employee's hours of employment, COBRA continuation coverage generally lasts for only up to a total of 18 months.

There are two ways in which this 18 -month period of COBRA continuation coverage can be extended.

Disability extension of 18 -month period of continuation coverage. If you or anyone in your family covered under the Plan is determined by the Social Security Administration to be disabled and you notify the Plan Administrator in a timely fashion, you and your entire family may be entitled to receive up to an alditional 11 months of COBRA continuation coverage, for a total maximum of 29 months. The disability would have to have started at some time before the $60^{\text {th }}$ day

How Mo yon Elect COBEA Coverage":

How Much Does COBPA Coverage Cost?
of COBRA continuation coverage and must last at least until the end of the 18 -month period of continuation coverage. Youmust provide the Plan Administrator with notice of the Social Security Administration's determination within 60 days of the latest of (1) the date of the SSA's disability determination; (2) the date of the qualifying event; (3) the date on which the qualitied beneficiary would lose coverage under the Plan; or (4) the date you are provided notice of your COBRA continuation coverage rights. Notice should be sent to the Benefits Service Center, American Water. 131 Woodcrest Road, Cherry Hill, NJ 08003, along with a copy of the determination recejved from the Social Security Administration.

Second qualifving event extension of 18 -month period of continuation coverage. If yout spouse or dependent children experience another qualifying event while receiving 18 or 29 months of COBRA continuation coverage, the spouse and dependent children can get up to 36 total months of COBRA continuation coverage, if written notice of the second qualifying event is properly given to the Plan Administrator. This extension is available if the employee or former employee dies, becomes entitled to Medicare benefits (under Parl A, Part B, or both), or gets divorced or legally separated, or if the dependent child stops being eligible under the Plan as a dependent child, but only if the event would have caused the spouse or dependent child to lose coverage under the Plan had the first qualifying event not occurred. If the second qualifying event is divorce or legal separation or the dependent child ceasing to be eligible under the Plan, written notice must be sent to the Benefits Service Center, American Water, 131 Wooderest Road, Cherry Hill, NJ 08003 , along with documentation of the second qualifying event.

To elect continuation coverage, you must complete an election form supplied by the Plan Administrator within 60 days of the date you receive notice of your COBRA continuation coverage rights. Each qualified beneficiary has a separate right to elect continuation coverage. For example, the employec's spouse may elect continuation coverage even if the employee does not. Continuation coverage may be elected for only one, several, or for all dependent children who are qualified beneficiaries. A pareut may elect to continue coverage on hehalf of any dependent children. The employee or the employee's spouse can elect continuation coverage on behalf of all of the qualified beneficiaries.

Generally, each qualified beneficiary may be required to pay the entire cost of continuation coverage. The amount a qualified beneficiary may be required to pay may not exceed $102 \%$ (or, in the case of an extension of contimuation coverage due to a disability, $150 \%$ ) of the

Spectal Rules for the Heath Care Gpending Account

Keep Your Plan
Informed or Address Changes

If youhave Questions
cost to the group health plan (including both employer and employee contributions) for coverage of a similarly situated plan participant or beneficiary who is not receiving continuation coverage. The required paymemt for each continuation coverage period for each option is described in this notice.

COBRA coverage will consist of the Health Care Spending Account coverage in force at the time of the qualifying event (i.e., the elected annual limit reduced by expenses reimbursed up to the time of the qualifying event). The use-it-or-lose-it rule will continue to apply, so any unused amounts will be forfeiled at the end of the Plan Year, and COBRA coverage will terminate at the end of the Plan Year. Under the special grace period rule described on page 122, if you make all required COBRA premium payments through December 31, expenses incurred for the period January 1 - March 15 of the following calendar year can be applied against any remaining balance in your Health Care Spending Account. Expenses must be submitted by April 30 of the year following the year in which COBRA coverage commenced.

Unless otherwise elected, all qualified beneficiaries who were covered under the Health Care Spending Account will be covered together for Health Care Spending Account COBRA coverage. However, each qualified beneficiary could altematively elect separate COBRA coverage to cover that beneficiary only, with a separate Health Care Spending Account annual limit and a separate premium.

In order to protect your family's rights, you should keep the Plan Administrator informed of any changes in the addresses of family members. You should also keep a copy, for your records, of any notices you send to the Plan Administrator.

If you have questions about your COBRA continuation coverage, you should contact the Benetits Service Center, 131 Woodcrest Road, Cherry Hill, NJ 08003, (866) 888-8269, or you may contact the nearest Regional or District Office of the U.S. Department of Labor's Einployee Benefits Security Administration (EBSA). Addresses and phone numbers of Regional and District EBSA Offices are available through EBSA's website at www.dol.gov/ebsa.

## Comversiona

If any coverage (other than Health Care Spending Account coverage) being continued under COBRA terminates because the end of the
maximum continuation period has been reached, any Conversion Privilege will be available at the end of that period on the same terms as upon temnination of cmployment or ceasing to be in an Eligible Class.

## Continanon of Coverge Dwring an <br> Approved Lewne of Absence Granted to <br> Comply Whin Federal Law

This continuation of coverage section applies only for the period of any approved family or medical leave (approved FMLA leave) required by the Family and Medical Leave Act of 1993 (FMLA). If American Water grants you an approved FML.A leave for a period in excess of the period required by FMLA, any continuation of coverage during that excess period will be subject to prior written agreement between the appropriate carriers and American Water.

If American Water grants you an approved FMLA leave in accordance with FMLA, you may, during the continuance of such approved FMLA leave, continue any coverage you and your eligible dependents have under the American Water Plan at the time the leave commences.

Non-FMLA leaves, and benefits during such leaves, will be administered in accordance with specific leave policies established by American Water.

At the time you request the leave, you must agree to make any contributions required by American Water to continue coverage. At the time your leave begins, you will be advised on how to make payments. American Water will continue to make its contributions toward such coverage.

If any coverage you are allowed to continue has reduction rules applicable by reason of age or retirement, the coverage will be subject to such rules while you are on FMLA leave.

If you acquire a new dependent while your coverage is continued during an approved FMLA leave, the dependent will be eligible for the continued coverage on the same terms as would be applicable if you
Maximum were actively at work, not on an approved FMLA leave

Coverage will not be continued beyond the first to occur of:

- The date you are required to make any contribution and you fail to do so;


#### Abstract

When FMLA Leave Ternimates

IV You Rehum to Work

If health care coverage teminates because your approved FMLA leave is deemed terminated by American Water, you may, on the date of suclz termination, be eligible for Continuation Under Federal Law on the same terms as though your employment terminated, other than for gross misconduct, on such date.

If you return to work for American Water following the date American Water determines the approved FMLA leave is terminated, your coverage under the group contract will be in force as though you had continued in active employment rather than going on an approved FMLA leave, provided you make request for such coverage within 31 days of the date American Water determines the approved FMLA leave to be terminated. If you do nol make such request within 31 days, you will not have a chance to re-enroll before the next Open Enrollment period.


- The date American Water determines your approved FMLA leave is terminated;
- The date the coverage involved discontinues as to your Eligible Class.

Any coverage being contimued for a dependent will not be continued beyond the date it would otherwise terminate.

## Confulentituity of Protected Hecdhe <br> Heformation

Title II of the Health Insurance Portability and Accountability Act of 1996 and the privacy regulations issued thereunder (collectively called "HIPAA") requires group health plans to protect the confidentiality of your private health information. This Plan will not use or disclose information that is protected by HIPAA ("Protected Health Information") except as necessary for treatment, payment, health care operations, and plan administration functions, or as otherwise permitted or required by law, without your written authorization. According to the law, the Plan has required all of its Business Associates to comply with the HIPAA privacy rules.

Before this Plan may disclose, or permit one of its agents or coniractors to disclose, Protected Health Information ("PHI") to the Company, the Plan will require the Company to:

- certify that the information is necessary in connection with plan administration functions or other penmitted functions performed or to be perforned by the Company;
- amend the Plan documents and provide certification of amendment to give assurances that the Company will use and disclose the information solely in connection with such plan administration or other permitted functions; and
- not use or further disclose PHI for employment-related actions or decisions or in connection with any other benefit or employee benefir plan of the Company without your authorization.

Under HIPAA, you have certain rights with respect to your PHI, including the right to see and copy the information, to receive an accounting of certain disclosures of the information and, under certain circumstances, to amend the information. You also have the right to file a complaint with the Plan or with the Secretary of the Department of Health and Human Services if you believe your rights under HIPAA have been violated.

## List of Contwet

## American Water Benefit Contacts

| Carrier | Claims Administrator | Phone |
| :---: | :---: | :---: |
| Medical |  |  |
| Herizol) | Horizon Blue Cross Blue Shield of New Jersey <br> PO Box 1219 <br> Newark, NJ 07101 <br> whis:horizanbhec.om/nariomalacioms: | (800) 355-BLUE (2583) |
| Dental |  |  |
| Aema | Aetna <br> P. O. Box 14094 <br> Lexington, KY 40512-4094 <br> Whus ace'nacom | (877) 238-6200 |
| Vision |  |  |
| FyeMed | Before enrollment: wiwe enrolwithevemedcomh/access <br> After enroliment: whe cyemedvisioncare com | (866) 939-3633 |
| Flexible Spending Accounts |  |  |
| Horizon | Horizon Bluc Cross Blue Shicld of New Jersey <br> P. O. Box 1369 <br> Newark, NJ 07101-1369 <br> muwhorizonbhuecom/fise | (800) 224-4426 |
| Life and AD\&D |  |  |
| MelLife | Call the Benctits Service Cener | (866) 888.8269 |
| Disability |  |  |
| Actua Managed Disability | AcIna <br> P. O. Box 14553 <br> Lexingion, KY 40412-4553 <br> レиทท:acthuc.com | (800) 488-2386 |
| Employee Assistance Program |  |  |
| Carcluridge | Carebridge Corporation 40 L.loyd Avenue Malvern. PA 19355 Wнห:mplifesource.com Access Ciode: HASBJ | (800) 437-0911 <br> (610) 993-0955 |
| Benefits Service Center |  |  |
|  | 131 Woodcrest Road Cherry Eill, NJ 08003 (866) 888-8269 |  |

## Gllossary

## Glossary

The following definitions of certain words and phrases will help you understand the benefits to which the definitions apply. Some definitions which apply only to a specific benefil appear in the benefit section. If a definition appears in a benefit section and also appears in the Glossary, the definition in the benefit section will apply in lieu of the definition in the Glossary.

## Room and Board Charges

Charges made by an institution for room and board and other necessary services and supplies. They must be made regularly at a daily or weekly rate.

## Skilled Nursing/Convalescent Facility

An institution that:

- Is licensed to provide, and does provide, the following on an inpatient basis for persons convalescing from illness or injury:
- professional nursing care by an RN, or by an LPN directed by a full-time RN, and
- physical restoration services to help patients to meet a goal of self-care in daily living activities.
- Provides 24-hour-a-day nursing care by licensed nurses directed by a fill-time RN.
- Is supervised full-time by a doctor or RN.
- Keeps a complete medical record on eacls patient.
- Has a utilization review plan.
- Is not mainly a place for rest, for the aged, for drug addicts, for alcoholics, for mentally retarded persons, for custodial or educational care, or for care of mental disorders.
- Makes charges for services rendered.


## Copay

A fee charged to a person for Covered Medical Expenses, as specified in the applicable Sumnary of Coverage.

## Course of Treatment

A planned program of services or supplies furnished by a health care provider. The program must be:

- In connection with the diagnosis and treatment of an injury or illness, and

Of definite duration.

## Custodial Care

Services and supplies furnistbed to a person mainly to help him or her in the activities of daily life, including room and board and other institutional care. The person does not have to be disabled. These services and supplies are custodial care without regard to:

- By whom they are prescribed, or
- By whom they are recommended, or
- By whom they are performed.


## Dentist

A legally qualified dentist, or a doctor who is licensed to do the dental work he or she performs.

## Directory

A listing of Network Providers in the Service Area covered under this Plan that is available to all employees covered under the Medical Plans.

## Doctor

A legally qualified, licensed doctor.

## Emergency Care

The first care given in a hospital's emergency room after a sudden and. at the time, unexpected change in a person's physical or mental condition such that:

- Care cannot safely and adequately be provided other than in a hospital, or
- Adequate care is not available at the time and place it is needed.


## Emergency Condition

The sudden and, at that time, unexpected onset of a change in a person's physical or mental condition which, if the procedure or treatment were not performed right away could reasonably be expected to result in:

- Loss of life or limb, or
- Significant impairment to bodily function. or
- Permanent dysfunction of a body part.


## Home Health Care Agency

An agency that:

- Mainly provides skilled nursing and other therapeutic services,
- Is associated with a professional group which makes policy (this group must have at least one doctor and one RN ),
- Has full-time supervision by a doctor or RN,
- Keeps complete medical records on each person,
- Has a full-time administrator, and
- Meers licersing standards.


## Home Health Care Plan

A plan that provides for care and treatment of an illness or injury. The care and treatment must be:

- Prescribed in writing by the attending doctor, and
- An alternative to confinement in a hospital or skilled nursing/convalescent facility.


## Hospice Care

Care given to a terminally ill person by or under arrangements with a Hospice Care Agency as part of a Hospice Care Program.

## Hospice Care Agency

An agency or organization which:

- Has Hospice Care available 24 hours a day.
- Meets any licensing or certification standards set forth by the jurisdiction where it is.
- Provides:
- skilled nursing services,
- medical social services,
- psychological and dictary counseling, and
- bereavement counseling for the immediate family.
- Provides or arranges for other services which include:
- services of a doctor,
- physical or occupational therapy,
- part-time home health aide services which mainly consist of caring for terminally ill persons, and
- inpatient care in a facility when needed for pain control and acute and chronic symptom management.
- Has personnel which include at least:
-- one doctor,
- one RN,
- one licensed or certified social worker employed by the Agency, and
- one pastoral or other counselor.
- Establishes policies governing the provision of Hospice Carc.
- Assesses the patient's medical and social needs.
- Develops a Hospice Care Program to meet those needs.
- Provides an ongoing quality assurance program. This includes reviews by doctors, other than those who own or direct the Agency.
- Permits all area medical persomel to utilize its services for their patients.
- Keeps a medical record on each patient.
- Utilizes voluntecrs trained in providing services for non-medical needs.
- Has a full-time administrator.


## Hospice Care Facility

A facility, or a distinct part of one, which:

- Mainly provides inpatient Hospice Care to terminally ill persons.
- Charges its patients.
- Mects any licensing or certification standards set forth by the jurisdiction where it is.
- Kecps a medical record on each patient.
- Provides an ongoing quality assurance program; this includes revjews by doctors other than those who own or direct the facility.
- Is run by a staff of doctors; at least one such doctor musi be on call at all times.
- Provides 24-hour-a-day nursing services under the direction of an RN
- Has a full-time administrator.


## Hospice Care Program

A written plan of Hospice Care, which:

- Is established by and revicwed from time to time by:
- a doctor attending the person, and
- appropriate personnel of a Hospice Care Agency.
- Is designed to provide palliative and supportive care to terminally ill persons, and supportive care to their families.
- Includes an assessment of the person's medical and social needs, and a description of the care to be given to meet those needs.


## Hospital

A place that

- Provides mainly inpatient facilities for the surgical and medical diagnosis, treatment, and care of injured and sick persons.
- Is supervised by a staff of doctors.
- Provides 24-hour-a-day RN services.
- Is not mainly a place for rest, for the aged, for drug addicts, for alcoholics, or a nursing home
- Makes charges for services rendered.


## In-Network Care

A health care service or supply furnished by a Network Provider.

## LPN

A licensed practical nurse.

## Mental Disorder

An illness commonly understood to be a mental disorder whether or not it has a physiological or organic basis and for which treatment is generally provided by or under the direction of a mental health professional such as a psychiatrist, a psychologist, or a psychiatric social worker. A mental or pervous disorder includes, bur is not limited to:

- Alcoholism and drug abuse
- Schizophrenia
- Bipolar disorder
m Pervasive mental developmental disorder (Autism)
al Panic disorder
- Major depressive disorder.

2. Psychotic depression

- Obsessive compulsive disorder
- Mental disorders will not include alcoholism and drug abuse if a separate benefif applies to treatment of alcoholism and drug abuse.


## Necessary

A service or supply furnished by a particular provider is necessary if Horizon determines that it is appropriate for the diagnosis, care, or treatment of the illness or injury involved.

To be appropriate, the service or supply must:

- Be care or treament, as likely to produce a significant positive outcome as, and no more likely to produce a negative outcome than, any alternative service or supply, both as to the illness or injury involved and the person's overall health condition,
- Be a diagnostic procedure, indicated by the health status of the person and be as likely to result in informarion that could affect the course of treatment as, and no more likely to produce a negative outcome than, any alternative service or supply, both as to the illness or injury involved and the person's overall health condition, and
- As to diagnosis, care. and treatment be no more costly (taking into account all health expenses incurred in connection with the service or supply) than any alternative service or supply that meets the above tests

In deternining whether a service or supply is appropriate under the circumstances, Horizon will take into consideration:

- Information provided on the affected person's health status;
- Reports in peer reviewed medical literature;
- Reports and guidelines published by nationally recognized health care organizations that include supporting scientific data:
- Generally recognized professional standards of safety and effectiveness in the United States for diagnosis, care, or treaiment;
- The opinion of healto professionals in the generally recognized bealth specialty involved; and
- Any other relevant information brought to Horizon's attention.

In no event will the following services or supplies be considered to be necessary:

- Those that do not require the technical skills of a medical, mental health, or dental professional;
- Those fumished mainly for the personal comfort or convenience of the person, any person who cares for him or her, any person who is part of his or her family, any health care provider or health care facility;
- Those furnished solcly because the person is an inpatient on any day on which the person's illness or injury could safely and adequately be diagnosed or treated while not confined; or
- Those furnished solely because of the setting if the service or supply could safely and adequately be furnished in a doctor's or a dentist's office or other less costly setting.


## Negotiated Charge

The maximum charge a Network Provider has agreed to make as to any service or supply for the purpose of the benefits under this Plan.

## Network Provider

A health care provider that has contracted to furmish services or supplies for a Negotiated Charge, but only if the provider is, with Horizon's consent, included in the Directory as a Network Provider [or:

- The service or supply involved, and
- The class of employces of which you are a member.


## Non-Occupational Illness

A non-occupational illness is an illness that does not:

- arise oul of (or in the course of) any work for pay or profit, or
- result in any way from an illness that does.

An illness will be deemed to be non-occupational regardless of cause if proof is fumished that the person:

- is covered under any type of Workers' Compensation law, and
- is not covered for that illness under such law.


## Non-Occupational Injury

A non-occupational injury is an accidental bodily injury that does not:

- Arise out of (or in the course of ) any work for pay or profit, or
- Result in any way from an injury, which does.


## Orthodontic Treatment

Any:

- Medical service or supply, or
- Dental service or supply, furnished to prevent or to diagnose or to correct a misalignment:
- Of the teeth, or
- Of the bite, or
- Of the jaws or jaw joint relationship, whether or not for the purpose of relieving pain.

Not included is:

- The installation of a space maintainer, or
- A surgical procedure to correct malocclusion.


## Out-of-Network

A health care service or supply fumished by a health care provider that is not Network.

## Out-of-Network Provider

A health care provider that has not contracted to fumish services or supplies at a Negotiated Charge.

## Reasonable and Customary Charge

Only that part of a charge considered "reasonable" is covered. The reasonable charge for a service or supply is the lower of:

- The provider's usual charge for furnishing it, or
- The charge Horizon determines to be the prevailing charge level made for it in the geographic area where it is furnished.
In determining the reasonable charge for a service or supply that is unusual, not often provided in the area, or provided by only a small number of providers in the area, Horizon may take into account such factors as:
- The complexity of the service or supply,
- The degree of skill needed.
- The type of specialty of the provider,
- The range of services or supplies provided by a facility, and
- The prevailing charge in other areas.

RN
A registered nurse

## Semi-Private Rate

The charge for room and board, which an institurion applies to the most beds in its semi-private rooms with two or more beds. If there are no such rooms, Horizon will figure the rate. It will be the rate most commonly charged by similar institutions in the same geographic area.

## Service Area

The geographic area in which Network Providers for this Plan are located, as determined by Horizon.
Terminally III
A medical prognosis of six months or less to live.

## Totally Disabled

"Totally disabled" means that because of injury or illness:

- You are unable to engage in your customary occupation and are not working for pay or profit.
- Your dependent is unable to engage in most of the normal activities of a person of like age and sex in good health.


# KENTUCKY-AMERICAN WATER COMPANY <br> CASE NO. 2010-00036 <br> COMMISSION STAFF'S FIRST REQUEST FOR INFORMATION 

Witness: Sheila Miller
22. a. Provide, for each major functional plant property group or account in the format shown in Schedule 5, the following:
(1) Plant beginning balances;
(2) Plant ending balances;
(3) Gross additions occurring in the forecasted test period;
(4) Retirements occurring in the forecasted test period; and
(5) Transfers for Kentucky-American occurring in the forecasted test period.
b. For any account in which transfers regularly occur in the normal course of business, provide a general description of the nature of the transfers.

## Response:

a. Refer to Schedule B-2.3 of Exhibit 37 of the Company’s filing.

For the electronic file refer to KAW_APP_EX37B_022610.pdf.
b. There were no transfers.

For the electronic version of this document, refer to KAW_R_PSCDR1\#22_031610.pdf.

# KENTUCKY-AMERICAN WATER COMPANY <br> CASE NO. 2010-00036 <br> COMMISSION STAFF'S FIRST REQUEST FOR INFORMATION 

Witness: Michael Miller/Nick Rowe
23. Provide, in the format shown in Schedule 6 for each property leased to the utility or improvement to leased property, the following:
a. An identification or reference number;
b. A description of the property's type and use;
c. The name of the lessor;
d. The frequency of lease payments;
e. The amount of each lease payment;
f. The original value of the property, together with annual lease payments; and
g. An explanation of the method that Kentucky-American uses to capitalize the lease payment.

## Response:

Please see attached.
For the electronic version, refer to KAW_R_PSCDR1\#23_031610.pdf.

KAW_R_PSCDR1\#23_031610
Page 2 of 6

| Leased Property (Total Property) As of March 8, 2010 |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Data: X Base <br> Type of Filing Workpaper Re | iod_Forecasted Period Original_Updated_Revise nce $\mathrm{NO}(\mathrm{s})$.: |  |  |  | Schedule 6 <br> Page 1 of 5 <br> Witness Responsible: <br> Mike Miller |  |
| Identification or Reference Number | Description of Type and Use of Property | Name of Lessor | Frequency of Payment | Amount of Lease Payment | Dollar* Value of Property Involved | Explain Method of Capitalization |
| DHK02768 | Copier-Ky River Station | Canon | Monthly | \$131 | \$6,289.92 | Not Capitalized |
| MER07763 | Copier-Administration | Canon | Monthly | \$270.28 | \$12,973.44 | Not Capitalized |
| DHK03365 | Copier-Richmond Road Station | Canon | Monthly | \$131.04 | \$6,289.92 | Not Capitalized. |
| DHK02767 | Copier-Customer Service | Canon | Monthly | \$131.04 | \$6,289.92 | Not Capitalized |
| CXA00881 | Copier-Engineering | Canon | Monthly | \$252.46 | \$12,118.08 | Not Capitalized |
| DHK03277 | Copier-Stock Bldg. | Canon | Monthly | \$131.04 | \$6,289.92 | Not Capitalized |
| N09071510 | Postage Meter | Neopost | Monthly | \$213.33 | \$3,000 | Not Capitalized |

KAW_R_PSCDR1\#23_031610
Page 3 of 6





Data: X Base Period_Forecasted Period Type of Filing: X Original_Updated_Revised
Workpaper Reference NO(s).:

Pipeline Crossing
Pipeline Crossing
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LNO49058 LNO057734

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Workpaper Reference NO（s）．：

Pipeline Crossing


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*If not available, an estimate should be furnished.

## KENTUCKY-AMERICAN WATER COMPANY <br> CASE NO. 2010-00036 <br> COMMISSION STAFF'S FIRST REQUEST FOR INFORMATION

Witness: Sheila Miller
24. Provide, in the format shown in Schedule 7 for each property held for future use, the following:
a. A description of the property;
b. The date of its acquisition;
c. Its original cost;
d. Its accumulated depreciation;
e. Its expected in-service date; and
f. Its expected use.

## Response:

There was no future use property included in rate base. Please refer to Exhibit 37, Schedule B-2.6 of the Company's filing. For electronic version, refer to KAW_APP_EX37B_022610.pdf.

For electronic version of this document, refer to KAW_R_PSCDR1\#24_031610.pdf

# KENTUCKY-AMERICAN WATER COMPANY <br> CASE NO. 2010-00036 <br> COMMISSION STAFF'S FIRST REQUEST FOR INFORMATION 

Witness: Sheila Miller
25. Provide the information in the format listed in Schedule 8 regarding Certain Deferred Credits, Accumulated Deferred Income Taxes, and Other Rate Base items included in the forecasted test-period rate base.

## Response:

Please refer to Exhibit 37, Schedule B-6 of the Company's filing.
For the electronic version, refer to KAW_APP_EX37B_022610.pdf.

For the electronic version of this document, refer to KAW_R_PSCDR1\#25_031610.pdf.

## KENTUCKY-AMERICAN WATER COMPANY <br> CASE NO. 2010-00036 <br> COMMISSION STAFF'S FIRST REQUEST FOR INFORMATION

Witness: Michael Miller/Sheila Miller
26. Provide the following (original cost) monthly account balances and a calculation of the average (13-month) account balances for total company and jurisdictional operations:
a. Plant in Service;
b. Plant Purchased or Sold;
c. Property Held for Future Use;
d. Construction Work in Progress ("CWIP") (separate this balance into

CWIP eligible for capitalized interest and other CWIP);
e. Completed Construction Not Classified;
f. Accumulated Depreciation and Amortization;
g. Plant Acquisition Adjustment;
h. Amortization of Utility Plant Acquisition Adjustment;
i. Materials and Supplies;
j. Balance in Accounts Payable Applicable to each account in (i) above (if actual cannot be determined, give reasonable estimate);
k. Unamortized Investment Tax Credit - Pre-Revenue Act of 1971;
l. Unamortized Investment Tax Credit - Revenue Act of 1971;
m. Accumulated Deferred Income Taxes;
n. Summary of Customer Deposits;
o. Computation and Development of Minimum Cash Requirements;
p. Balance in Accounts Payable Applicable to amounts included in utility plant in service (if actual cannot be determined, provide a reasonable estimate);
q. Balance in Accounts Payable Applicable to prepayments by major category or subaccount;
r. Balance in Accounts Payable applicable to amounts included in plant under construction (if actual cannot be determined, provide a reasonable estimate); and
s. All Current Assets and Current Liability accounts not included above.

## Response:

Refer to Schedule B-1 page 2 of 2 and Schedule B-8 pages 1 and 2 of Exhibit 37 of the Company’s filing. For the electronic version refer to KAW_APP_EX37B_022610.pdf.

For the electronic version of this document, refer to KAW_R_PSCDR1\#26_031610pdf.

# KENTUCKY-AMERICAN WATER COMPANY <br> CASE NO. 2010-00036 <br> COMMISSION STAFF'S FIRST REQUEST FOR INFORMATION 

Witness: Michael Miller
27. Provide a calculation of federal and state income tax expense, including a reconciliation of book to taxable income, for the base period and the forecasted period in the format shown in Schedule 9.

## Response:

Please refer to Schedule E-1 of Exhibit 37 of the Company’s filing.
For the electronic file, refer to KAW_APP_EX37E_022610.pdf.

For the electronic version of this document, refer to KAW_R_PSCDR1\#27_031610.pdf.

# KENTUCKY-AMERICAN WATER COMPANY <br> CASE NO. 2010-00036 <br> COMMISSION STAFF'S FIRST REQUEST FOR INFORMATION 

Witness: Michael Miller/Sheila Miller
28. Provide a trial balance as of the last day of the base period showing account number, account title, and actual base period accounts. All income statement accounts should show activity for 12 months.

## Response:

Please see attached trial balances for the base period months of June 2009 through February 2010. March 2010 through May 2010 will be provided as they become available. Also included is the 12 month activity for all income statement accounts.

For the electronic version, please see KAW_R_PSCDR1\#28_031610.pdf

Kentucky American Water Company Case No. 2009-00036 Response to PSC DR1, Item 28

| Account | Sub | $\begin{aligned} & 2009 \\ & \text { June } \end{aligned}$ | July | August | September | October | November | December | $\begin{aligned} & 2010 \\ & \text { January } \end{aligned}$ | February |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 101000 | 301000 | 37,450 | 37,450 | 37,450 | 37,450 | 37,450 | 37,450 | 37,450 | 37,450 | 37,450 |
| 101000 | 302000 | 70,261 | 70,261 | 70,261 | 70,261 | 70,261 | 70,261 | 70,261 | 70,261 | 70,261 |
| 101000 | 303200 | 335,512 | 335,512 | 335,512 | 335,512 | 335,512 | 335,512 | 335,512 | 335,512 | 335,512 |
| 101000 | 303300 | 91,827 | 91,827 | 91,827 | 91,827 | 91,827 | 91,827 | 91,827 | 91,827 | 91,827 |
| 101000 | 303400 | 68,164 | 68,164 | 68,164 | 68,164 | 68,164 | 68,164 | 68,164 | 68,164 | 68,164 |
| 101000 | 303500 | 4,019,854 | 4,019,854 | 4,019,854 | 4,019,854 | 4,019,854 | 4,019,854 | 4,019,854 | 4,019,854 | 4,019,854 |
| 101000 | 304100 | 2,679,962 | 2,679,962 | 2,673,341 | 2,673,341 | 2,673,341 | 2,673,341 | 2,673,341 | 2,673,341 | 2,673,341 |
| 101000 | 304200 | 5,207,948 | 5,207,948 | 5,207,811 | 5,207,811 | 5,207,740 | 5,215,922 | 5,215,325 | 5,215,325 | 5,215,325 |
| 101000 | 304300 | 9,876,476 | 9,876,476 | 9,878,917 | 9,878,917 | 9,893,098 | 9,893,097 | 9,897,069 | 9,897,069 | 9,897,069 |
| 101000 | 304400 | 821,983 | 839,668 | 909,400 | 909,400 | 909,400 | 909,400 | 904,115 | 904,115 | 904,115 |
| 101000 | 304500 | 384,069 | 384,069 | 384,069 | 384,069 | 388,784 | 388,784 | 431,055 | 388,784 | 431,055 |
| 101000 | 304600 | 4,065,247 | 5,198,326 | 5,240,231 | 5,240,231 | 5,235,444 | 5,235,444 | 5,755,949 | 5,235,444 | 5,755,949 |
| 101000 | 304610 | 10,570 | 10,570 | 10,570 | 10,570 | 10,570 | 10,570 | 10,570 | 10,570 | 10,570 |
| 101000 | 304700 | 989,656 | 989,656 | 989,656 | 989,656 | 989,656 | 989,656 | 989,656 | 989,656 | 989,656 |
| 101000 | 304800 | 1,923,367 | 1,923,367 | 1,923,367 | 1,923,367 | 1,923,367 | 1,923,367 | 1,923,367 | 1,923,367 | 1,923,367 |
| 101000 | 305000 | 1,005,086 | 1,005,086 | 1,005,086 | 1,005,086 | 1,005,086 | 1,005,086 | 1,005,086 | 1,005,086 | 1,005,086 |
| 101000 | 306000 | 537,098 | 537,098 | 537,098 | 537,098 | 537,098 | 537,098 | 537,098 | 537,098 | 537,098 |
| 101000 | 309000 | 5,141,563 | 5,141,563 | 5,141,563 | 5,141,563 | 5,141,563 | 5,141,563 | 5,141,563 | 5,141,563 | 5,141,563 |
| 101000 | 310000 | 918,141 | 903,640 | 935,700 | 935,700 | 935,700 | 935,700 | 935,700 | 935,700 | 935,700 |
| 101000 | 311200 | 9,390,162 | 9,390,162 | 9,390,162 | 9,390,162 | 9,389,884 | 9,389,884 | 9,385,972 | 9,385,972 | 9,385,972 |
| 101000 | 311300 | 718,476 | 718,476 | 718,476 | 718,476 | 718,476 | 718,476 | 718,476 | 718,476 | 718,476 |
| 101000 | 311400 | -366,614 | -366,614 | -366,614 | -366,614 | -366,614 | -366,614 | -366,614 | -366,614 | -366,614 |
| 101000 | 311520 | 4,752,118 | 8,369,718 | 8,369,718 | 8,369,718 | 8,369,718 | 8,369,718 | 8,413,395 | 8,400,285 | 8,413,395 |
| 101000 | 311540 | 176,341 | 176,341 | 176,341 | 176,341 | 176,341 | 176,341 | 176,341 | 176,341 | 176,341 |
| 101000 | 320100 | 30,171,025 | 30,171,025 | 30,173,674 | 30,173,674 | 30,138,420 | 30,195,557 | 30,401,625 | 30,401,625 | 30,401,625 |
| 101000 | 320200 | 27,968 | 27,968 | 168,569 | 168,569 | 168,569 | 168,569 | 168,569 | 168,569 | 168,569 |
| 101000 | 330000 | 1,668,616 | 1,668,616 | 1,668,616 | 1,668,616 | 1,668,616 | 1,668,616 | 1,668,616 | 1,668,616 | 1,668,616 |
| 101000 | 330100 | 10,170,089 | 10,170,089 | 10,170,089 | 10,160,806 | 10,191,642 | 10,268,323 | 10,276,833 | 10,276,833 | 10,276,833 |
| 101000 | 330200 | 112,147 | 112,147 | 112,147 | 112,147 | 112,147 | 112,147 | 121,086 | 121,086 | 121,086 |
| 101000 | 330400 | 582 | 582 | 582 | 582 | 582 | 582 | 582 | 582 | 582 |
| 101000 | 331001 | 149,097,427 | 149,130,362 | 149,214,217 | 149,214,217 | 149,214,049 | 149,212,930 | 149,444,414 | 149,444,594 | 149,444,414 |
| 101000 | 331100 | 4,158,351 | 4,236,291 | 4,354,675 | 4,359,312 | 4,373,381 | 4,383,677 | 4,437,340 | 4,413,622 | 4,437,340 |
| 101000 | 331200 | 10,208,630 | 10,858,213 | 11,107,146 | 11,259,219 | 11,338,926 | 11,577,536 | 12,086,040 | 11,887,271 | 12,086,040 |
| 101000 | 331300 | 3,456,169 | 3,494,107 | 3,494,706 | 3,634,447 | 3,636,870 | 3,663,379 | 3,727,558 | 3,663,379 | 3,727,558 |
| 101000 | 331400 | 2,703,685 | 2,703,685 | 2,703,685 | 2,703,685 | 2,703,685 | 2,703,685 | 2,844,324 | 2,844,324 | 2,844,324 |
| 101000 | 333000 | 39,633,880 | 39,801,888 | 41,507,689 | 41,660,005 | 41,948,555 | 41,970,916 | 42,499,890 | 42,455,145 | 42,499,890 |
| 101000 | 334100 | 175,631 | 175,631 | 929,219 | 1,259,732 | 1,298,867 | 1,298,867 | 1,978,930 | 1,953,882 | 1,978,930 |
| 101000 | 334110 | -130,393 | -130,393 | 138,728 | 138,728 | 138,728 | 138,728 | 417,567 | 138,728 | 417,567 |
| 101000 | 334120 | 919,109 | 919,109 | 919,109 | 910,482 | 910,482 | 910,482 | 699,691 | 699,691 | 699,691 |
| 101000 | 334130 | 7,194,650 | 7,194,650 | 7,388,539 | 7,388,539 | 7,388,539 | 7,388,539 | 7,283,184 | 7,273,239 | 7,283,184 |
| 101000 | 334131 | 270,918 | 270,918 | 270,918 | 270,918 | 270,918 | 270,918 | 270,918 | 270,918 | 270,918 |
| 101000 | 334200 | 15,528,819 | 15,537,863 | 16,208,637 | 16,231,102 | 16,248,901 | 16,248,521 | 16,513,496 | 16,448,692 | 16,513,496 |
| 101000 | 334300 | 43,394 | 43,394 | 116,287 | 116,287 | 121,201 | 121,470 | 121,656 | 121,656 | 121,656 |
| 101000 | 335000 | 11,385,646 | 11,491,980 | 11,659,519 | 11,775,525 | 11,797,477 | 11,813,547 | 11,877,431 | 11,845,117 | 11,877,431 |
| 101000 | 339100 | 8,375 | 8,375 | 8,375 | 8,375 | 8,375 | 8,375 | 8,375 | 8,375 | 8,375 |
| 101000 | 339600 | -207,193 | -207,193 | -207,193 | 170,152 | 170,152 | 227,159 | 227,159 | 227,159 | 227,159 |

## Description

| Account | Sub | $\begin{aligned} & 2009 \\ & \text { June } \end{aligned}$ | July | August | September | October | November | December | $\begin{gathered} 2010 \\ \text { January } \end{gathered}$ | February |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 101000 | 340100 | 733,353 | 733,353 | 733,353 | 733,353 | 733,353 | 733,353 | 733,353 | 733,353 | 733,353 |
| 101000 | 340210 | 76,923 | 76,923 | 89,282 | 89,282 | 89,282 | 89,282 | 89,282 | 89,282 | 89,282 |
| 101000 | 340220 | 838,479 | 840,145 | 841,748 | 842,851 | 842,851 | 842,851 | 785,835 | 785,455 | 785,835 |
| 101000 | 340230 | 257,138 | 257,138 | 257,138 | 265,839 | 267,519 | 267,519 | 267,519 | 267,519 | 267,519 |
| 101000 | 340240 | 0 | 0 | 0 | 0 | 0 | 0 | 8,394 | 0 | 8,394 |
| 101000 | 340300 | 4,547,519 | 4,547,519 | 4,547,519 | 4,547,519 | 4,547,519 | 4,547,519 | 4,551,010 | 4,551,010 | 4,551,010 |
| 101000 | 340320 | 777 | 777 | 777 | 3,481 | 3,481 | 3,481 | 3,481 | 3,481 | 3,481 |
| 101000 | 340325 | 97,249 | 97,249 | 97,249 | 97,249 | 97,249 | 97,249 | 97,249 | 97,249 | 97,249 |
| 101000 | 340330 | 532,344 | 532,344 | 532,344 | 532,344 | 532,344 | 532,344 | 532,344 | 532,344 | 532,344 |
| 101000 | 340500 | 88,369 | 88,369 | 88,369 | 88,369 | 88,369 | 88,369 | 88,369 | 88,369 | 88,369 |
| 101000 | 341100 | 1,910,783 | 1,910,783 | 1,910,783 | 1,910,783 | 1,910,783 | 1,890,069 | 1,890,069 | 1,890,069 | 1,890,069 |
| 101000 | 341200 | 1,223,459 | 1,223,459 | 1,223,459 | 1,223,459 | 1,223,459 | 1,160,937 | 1,160,937 | 1,160,937 | 1,160,937 |
| 101000 | 341300 | 207,857 | 207,857 | 207,857 | 207,857 | 207,857 | 207,857 | 207,857 | 207,857 | 207,857 |
| 101000 | 341400 | 402,119 | 402,119 | 416,326 | 416,326 | 416,326 | 416,326 | 416,326 | 416,326 | 416,326 |
| 101000 | 342000 | 33,927 | 33,927 | 33,927 | 33,927 | 33,927 | 33,927 | 33,927 | 33,927 | 33,927 |
| 101000 | 343000 | 1,880,886 | 1,880,886 | 1,880,886 | 1,880,886 | 1,880,886 | 1,880,886 | 1,914,538 | 1,914,538 | 1,914,538 |
| 101000 | 344000 | 824,725 | 824,725 | 824,725 | 824,725 | 824,725 | 828,027 | 828,027 | 828,027 | 828,027 |
| 101000 | 345000 | 1,577,127 | 1,526,035 | 1,526,035 | 1,526,035 | 1,526,035 | 1,526,035 | 1,526,035 | 1,526,035 | 1,526,035 |
| 101000 | 346100 | 1,922,088 | 1,922,088 | 1,922,088 | 1,922,088 | 1,922,088 | 1,922,088 | 1,922,088 | 1,922,088 | 1,922,088 |
| 101000 | 346190 | 22,311 | 22,311 | 22,311 | 22,311 | 22,311 | 22,311 | 39,245 | 39,245 | 39,245 |
| 101000 | 346200 | 240,675 | 240,675 | 240,675 | 240,675 | 240,675 | 240,675 | 240,675 | 240,675 | 240,675 |
| 101000 | 347000 | 1,271,030 | 1,271,030 | 1,253,615 | 1,253,615 | 1,253,615 | 1,251,258 | 1,252,705 | 1,252,705 | 1,252,705 |
| 101000 | 348000 | 138,485 | 138,485 | 138,485 | 138,485 | 138,485 | 138,485 | 138,485 | 138,485 | 138,485 |
| 101100 |  | 272,637 | 272,637 | 272,637 | 272,637 | 272,637 | 272,637 | 272,637 | 272,637 | 272,637 |
| 103000 |  | 114,076 | 114,076 | 114,076 | 114,076 | 114,076 | 114,076 | 114,076 | 114,076 | 114,076 |
| 106000 | 304200 | 6,782 | 8,182 | 8,182 | 8,182 | 8,182 | 0 | 0 | 0 | 0 |
| 106000 | 304300 | 2,446 | 16,627 | 14,181 | 14,181 | 0 | 3,835 | 0 | 0 | 0 |
| 106000 | 304400 | 6,345 | 29,126 | 21,182 | 61,242 | 142,059 | 119,939 | -11 | 122,082 | -11 |
| 106000 | 304500 | 0 | 0 | 0 | 4,715 | 0 | 0 | 0 | 7,271 | 0 |
| 106000 | 304600 | 1,624,785 | 493,265 | 493,265 | 510,470 | 510,470 | 555,156 | 0 | 556,618 | 0 |
| 106000 | 304700 | 0 | 0 | 0 | 615,533 | 678,224 | 739,496 | 799,356 | 799,356 | 799,356 |
| 106000 | 309000 | 2,352 | 2,352 | 2,352 | 2,352 | 2,352 | 2,352 | 2,352 | 2,352 | 2,352 |
| 106000 | 310000 | 32,060 | 32,060 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 106000 | 311520 | 3,622,600 | 0 | 0 | 0 | 0 | 16,440 | 0 | 13,110 | 0 |
| 106000 | 320100 | 2,649 | 2,649 | 0 | 80,273 | 201,192 | 206,367 | 9,321 | 633 | 9,321 |
| 106000 | 320200 | 140,601 | 140,601 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 106000 | 330100 | 107,066 | 107,518 | 107,518 | 107,518 | 76,681 | 2,109 | 0 | 0 | 0 |
| 106000 | 330200 | 15,646 | 15,646 | 0 |  | 0 | 0 | 0 | 0 | 0 |
| 106000 | 331001 | 0 | 137,640 | 83,411 | 128,927 | 104,231 | 125,150 | 104,130 | 114,380 | 104,130 |
| 106000 | 331100 | 226,642 | 149,722 | 48,291 | 62,073 | 48,569 | 65,317 | 26,380 | 33,601 | 26,380 |
| 106000 | 331200 | 1,850,181 | 1,233,371 | 1,138,488 | 1,448,034 | 1,695,916 | 1,501,237 | 1,548,404 | 1,384,986 | 1,548,404 |
| 106000 | 331300 | 288,810 | 249,446 | 238,222 | 153,476 | 153,477 | 138,881 | 87,642 | 152,281 | 87,642 |
| 106000 | 331400 | 0 | 0 | 0 | 0 | 140,650 | 296,399 | 236,777 | 236,760 | 236,777 |
| 106000 | 333000 | 1,842,222 | 1,946,513 | 418,375 | 655,994 | 387,834 | 678,289 | 370,049 | 713,773 | 370,049 |
| 106000 | 334100 | 714,911 | 1,078,716 | 424,511 | 237,930 | 244,664 | 378,982 | 241,097 | 252,876 | 241,097 |
| 106000 | 334110 | 3,673,630 | 3,682,462 | 3,507,626 | 3,508,248 | 3,508,248 | 3,508,248 | 3,230,817 | 3,509,721 | 3,230,817 |

Kentucky American Water Company
Response to PSC DR1, Item 28
Trial Balance
Response to PSC DR1, Item 28
Trial Balance

340240 Comp \& Periph Capital Lease 340300 Computer Software

340320 Comp Software Personal 340325 Comp Software Customized 340330 Comp Software Other 340500 Other Office Equipment 341100 Trans Equip Lt Duty Trks 341300 Trans Equip Autos 341400 Trans Equip Other

## 342000 Stores Equipment <br> 343000 Tools,Shop,Garage Equip

344000 Laboratory Equipment 346100 Comm Equip Non-Telephone 346190 Remote Control \& Instrumenta 346200 Comm Equip Telephone 347000 Misc Equipment

348000 Other Tangible Property
Property Held Future Use
304200 Struct \& Imp P
304300 Struct \& Imp WT
304500 Struct \& Imp AG
304600 Struct \& Imp Offices
304700 Struct \& Imp Store,Shop, Gar
309000 Supply Mains
310000 Power Generation Equip 320100 WT Equip Non-Media 320200 WT Equip Filter Media 330100 Elevated Tanks \& Standpipes 330200 Ground Level Facilities 331100 TD Mains 4in \& Less 331200 TD Mains 6in to 8in
 $\begin{array}{ll}331400 & \text { TD Mains 18in \& Grtr } \\ 333000 & \text { Services }\end{array}$ 333000 Serre
334100 Meters
334110 Meters


Kentucky American Water Company
Response to PSC DR1, Item 28 Trial Balance

334130 Meters Other 334131 Meters Other-Rem Rdr Unts 334200 Meter Installations 334300 Meter Vaults 335000 Hydrant CPS 340100 Office Furniture \& Equip 340210 Comp \& Periph Mainframe 340220 Comp \& Periph Personal 340230 Comp \& Periph Other 340320 Comp Software Personal 341100 Trans Equip Lt Duty Trks 341400 Trans Equip Other

343000 Tools,Shop,Garage Equip 344000 Laboratory Equipment 346200 Comm Equip Telephone CWIP Accr-BIdgs CWIP Accr-Infra CWIP Accr-Plant CWIP History-Bldgs CWIP History-Infrastr CWIP Permits \& Fees CWIP Permits-Bldgs CWIP Permits-Infrastr CWIP Permits-Plant CWIP M\&S \& Purchases CWIP M \& S-Bldgs

CWIP M \& S-Infrastr
CWIP M \& S-Plant
CWIP Professional Services CWIP Prof Svc-Infrastr
CWIP Prof Svc-Plant CWIP Prof SvcCWIP Co Labor-Bldgs
 CWIP Co Labor OH CWIP Labor OH-Bldgs CWIP Labor OH-Infrastr CWIP Labor OH-Plant
CWIP Overhead

CWIP Overhead-Bldgs
CWIP Overhead-Infrastr

[^3]

[^4]Kentucky American Water Company Case No. 2009-00036

Response to PSC DR1, Item 28

| Account | Sub | 2009 <br> June | July | August | September | October | November | December | $\begin{gathered} 2010 \\ \text { January } \end{gathered}$ | February |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 105260 | 31 | 1,794,067 | 1,834,525 | 1,850,056 | 1,877,420 | 1,894,551 | 1,898,935 | 1,926,875 | 1,924,353 | 1,926,875 |
| 105270 | 1 | 5,270 | 5,270 | 5,270 | 5,270 | 5,270 | 5,270 | 5,270 | 5,270 | 5,270 |
| 105270 | 21 | 640,051 | 644,303 | 650,618 | 657,299 | 664,057 | 668,961 | 679,733 | 676,421 | 679,733 |
| 105270 | 31 | 1,218,363 | 1,264,044 | 1,303,071 | 1,357,669 | 1,399,518 | 1,445,213 | 1,558,758 | 1,509,033 | 1,558,758 |
| 105275 | 1 | 26,670,271 | 26,670,271 | 26,670,271 | 26,670,271 | 26,670,271 | 26,670,271 | 26,670,271 | 26,670,271 | 26,670,271 |
| 105275 | 11 | 729,223 | 730,013 | 730,013 | 731,001 | 732,178 | 735,329 | 735,939 | 735,863 | 735,939 |
| 105275 | 21 | 66,754,678 | 69,370,579 | 73,213,355 | 76,190,322 | 77,433,154 | 79,011,909 | 81,377,716 | 80,902,500 | 81,292,570 |
| 105275 | 31 | 70,716,388 | 75,002,953 | 77,587,892 | 84,814,443 | 89,754,715 | 94,799,704 | 106,891,241 | 102,371,812 | 106,891,241 |
| 105280 | 1 | 366,817 | 366,817 | 366,817 | 366,817 | 366,817 | 366,817 | 366,817 | 366,817 | 366,817 |
| 105280 | 11 | 61,325 | 61,325 | 61,325 | 61,325 | 61,325 | 61,325 | 61,325 | 61,325 | 61,325 |
| 105280 | 21 | 4,534,342 | 4,592,747 | 4,699,460 | 4,820,484 | 4,869,161 | 4,929,904 | 5,049,648 | 5,021,030 | 5,042,583 |
| 105280 | 31 | 2,734,426 | 2,917,837 | 4,314,214 | 3,378,555 | 3,599,954 | 3,815,808 | 4,302,852 | 4,120,569 | 4,302,852 |
| 105285 | 21 | 0 | 0 | 0 | 0 | 0 | 12,614 | 12,614 | 12,614 | 12,614 |
| 105300 | 1 | 22,858 | 22,858 | 22,858 | 22,858 | 22,858 | 22,858 | 22,858 | 22,858 | 22,858 |
| 105300 | 21 | 199,028 | 199,028 | 199,028 | 199,028 | 199,028 | 199,028 | 195,236 | 195,236 | 195,236 |
| 105300 | 31 | 466 | 466 | 466 | 466 | 466 | 466 | 466 | 466 | 466 |
| 105350 | 1 | 703,912 | 703,912 | 703,912 | 703,912 | 703,912 | 703,912 | 703,912 | 703,912 | 703,912 |
| 105350 | 11 | 51,763 | 51,763 | 51,763 | 51,763 | 51,763 | 51,763 | 51,763 | 51,763 | 51,763 |
| 105350 | 21 | 1,939,014 | 2,289,419 | 2,608,060 | 3,006,549 | 3,445,448 | 3,897,857 | 5,289,312 | 4,817,489 | 5,289,312 |
| 105350 | 31 | 852,598 | 854,589 | 858,167 | 861,055 | 860,087 | 858,781 | 860,435 | 859,759 | 860,435 |
| 105375 | 1 | 809,429 | 809,429 | 809,429 | 809,429 | 809,429 | 809,429 | 809,429 | 809,429 | 809,429 |
| 105375 | 11 | 74,380 | 74,380 | 74,380 | 74,380 | 74,380 | 74,380 | 74,380 | 74,380 | 74,380 |
| 105375 | 21 | 2,521,823 | 2,594,984 | 2,695,557 | 2,797,281 | 2,898,373 | 3,009,362 | 3,402,642 | 3,257,121 | 3,402,642 |
| 105375 | 31 | 1,081,828 | 1,084,263 | 1,088,639 | 1,092,171 | 1,090,987 | 1,089,389 | 1,091,412 | 1,090,586 | 1,091,412 |
| 105390 | 11 | 176,512 | 176,512 | 176,512 | 176,512 | 176,512 | 176,512 | 176,512 | 176,512 | 176,512 |
| 105390 | 21 | 562,183 | 562,183 | 562,183 | 562,183 | 562,183 | 562,183 | 562,183 | 562,183 | 562,183 |
| 105390 | 31 | -876,553 | -876,553 | -876,553 | -876,553 | -876,553 | -876,553 | -876,553 | -876,553 | -876,553 |
| 105391 | 1 | -9,843,395 | -9,843,395 | -9,843,395 | -9,843,395 | -9,843,395 | -9,843,395 | -9,843,395 | -9,843,395 | -9,843,395 |
| 105399 | 31 | 2,618 | 2,618 | 2,618 | 2,618 | 2,618 | 2,618 | 2,618 | 2,618 | 2,618 |
| 105810 |  | 334,120 | 283,738 | 263,639 | 167,839 | 130,218 | 42,095 | 0 | 29,147 | 115,005 |
| 105820 |  | 1,058 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 105900 |  | -3,527 | -3,527 | -3,527 | -3,527 | -3,527 | -3,527 | -3,527 | -3,527 | -3,527 |
| 105900 | 1 | -51,962,727 | -51,962,727 | -51,962,727 | -51,962,727 | -51,962,727 | -51,962,727 | -51,962,727 | -51,962,727 | -51,962,727 |
| 105900 | 11 | -1,950,919 | -1,950,919 | -1,950,919 | -1,950,919 | -1,950,919 | -1,950,919 | -1,950,919 | -1,950,919 | -1,950,919 |
| 105900 | 21 | -92,696,891 | -93,776,802 | -94,361,082 | -95,530,921 | -96,232,609 | -97,117,663 | -98,828,790 | -98,818,854 | -98,828,790 |
| 105900 | 31 | -33,209,866 | -33,196,666 | -33,236,351 | -34,257,862 | -34,487,929 | -34,418,993 | -34,752,499 | -34,738,585 | -34,752,499 |
| 108105 |  | -50,323,046 | -50,324,814 | -50,327,347 | -50,330,081 | -50,333,119 | -50,336,253 | -50,348,533 | -50,344,002 | -50,348,533 |
| 108105 | 1 | -2,245,173 | -2,275,355 | -2,305,704 | -2,336,261 | -2,366,970 | -2,397,971 | -2,490,735 | -2,459,809 | -2,490,735 |
| 108105 | 2 | -979,689 | -997,420 | -1,015,154 | -1,032,955 | -1,051,978 | -1,071,115 | -1,129,335 | -1,109,889 | -1,129,335 |
| 108105 | 5 | -24,100,635 | -24,425,739 | -24,751,798 | -25,078,437 | -25,406,240 | -25,734,819 | -26,724,723 | -26,394,382 | -26,724,723 |
| 108105 | 6 | -10,535,512 | -10,645,917 | -10,756,276 | -10,866,612 | -10,977,064 | -11,087,652 | -11,419,939 | -11,309,155 | -11,419,939 |
| 108105 | 7 | -5,324,942 | -5,388,640 | -5,451,505 | -5,514,293 | -5,586,320 | -5,658,568 | -5,867,166 | -5,797,239 | -5,867,166 |
| 108105 | 8 | -7,698,034 | -7,749,982 | -7,802,069 | -7,854,109 | -7,907,023 | -7,960,020 | -8,116,416 | -8,064,217 | -8,116,416 |
| 108105 | 9 | -54,548 | -54,687 | -54,826 | -54,966 | -55,105 | -55,244 | -55,662 | -55,523 | -55,662 |
| 108110 |  | 2,040,108 | 2,040,108 | 2,040,108 | 2,040,108 | 2,040,108 | 2,040,108 | 2,040,108 | 2,040,108 | 2,040,108 |
| 108115 |  | -141,533 | -141,533 | -236,503 | -250,722 | -270,686 | -272,884 | -297,732 | -290,138 | -297,732 |

Description
CWIP Overhead-Plant
CWIP Service Co Chgs
CWIP AWWSC Chg-Infrastr
CWIP AWWSC Chg-Plant
CWIP Contracted Services
CWIP Contr Svc-Bldgs
CWIP Contr Svc-Infrastr
CWIP Contr Svc-Plant
CWIP Retainage
CWIP Retainage-Bldgs
CWIP Retainage-Infrastr
CWIP Retainage-Plant
CWIP Developer Const Costs
CWIP Paving
CWIP Paving-Infrastr
CWIP Paving-Plant
CWIP AFUDC Debt
CWIP AFUDC Debt-Bldgs
CWIP AFUDC Debt-Infrastr
CWIP AFUDC Debt-Plant
CWIP AFUDC Equity
CWIP AFUDC Eqty-Bldgs
CWIP AFUDC Eqty-Infrastr
CWIP AFUDC Eqty-Plant
CWIP Tran PY Chg-Bldgs
CWIP Tran PY Chg-Infrastr
CWIP Tran PY Chg-Plant
CWIP Trans Current Yr Chgs
CWIP Prelim Eng-Plant
CWIP Engineering Clearing
CWIP Undistributed Items
CWIP Transfer to UPIS
CWIP Transfer to UPIS
CWIP Tran UPIS-Bldgs
CWIP Tran UPIS-Infrastr
CWIP Tran UPIS-Plant
AD UPIS-Acc Depr-Not Classif
AD UPIS-AccDepr-Oper Bldgs
AD UPIS-AccDepr-Admin Bldgs
AD UPIS-AccDepr-Infrastructu
AD UPIS-AccDepr-Op Water Pro
AD UPIS-AccDepr-Oth Op Equip
AD UPIS-AccDepr-Office Equip
AD UPIS-AccDepr-Cap Developm
AD UPIS-Removal Cost
AD UPIS-Salvage
C

|  | Description | Account | Sub | $\begin{aligned} & 2009 \\ & \text { June } \end{aligned}$ | July | August | September | October | November | December | $\begin{gathered} 2010 \\ \text { January } \end{gathered}$ | February |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | AD UPIS-Scrap Meters | 108120 |  | -23,227 | -23,227 | -23,227 | -23,227 | -23,227 | -23,227 | -23,227 | -23,227 | -23,227 |
|  | AD UPIS-Scrap Misc | 108122 |  | -10,764 | -10,764 | -10,764 | -10,764 | -10,764 | -10,764 | -10,764 | -10,764 | -10,764 |
|  | AD UPIS-Salv Trade-In | 108135 |  | -16,975 | -16,975 | -16,975 | -16,975 | -16,975 | -16,975 | -16,975 | -16,975 | -16,975 |
|  | AD UPIS-Salv Sale | 108140 |  | -2,491 | -2,491 | -2,491 | -2,491 | -2,491 | -2,491 | -2,491 | -2,491 | -2,491 |
|  | AD UPIS-Orig Cost-Not Classi | 108145 |  | 13,740,569 | 13,808,211 | 13,841,352 | 13,489,573 | 13,530,217 | 13,643,886 | 14,115,664 | 14,096,724 | 14,115,664 |
|  | Acc Depr Reg Asset | 108190 |  | -113,839 | -114,414 | -114,989 | -115,564 | -116,139 | -116,714 | -118,439 | -117,864 | -118,439 |
|  | UPAA-ATL | 114100 |  | 455,951 | 455,951 | 455,951 | 455,951 | 455,951 | 455,951 | 455,951 | 455,951 | 455,951 |
|  | Accum Amort UPAA-ATL | 115100 |  | -161,061 | -162,827 | -164,593 | -166,358 | -168,124 | -169,889 | -175,186 | -173,420 | -175,186 |
|  | NUP-Land | 121100 |  | 270,193 | 270,193 | 270,193 | 270,193 | 270,193 | 270,193 | 270,193 | 270,193 | 270,193 |
| 005 | Deutsche Bank | 131312 |  | 0 | 0 | 0 | 0 | 0 | 0 | 0 | -33,630 | 0 |
| 007 | Cash-Mellon Lockbox | 131312 |  | 367,200 | 349,719 | 590,212 | 469,598 | 291,486 | 483,858 | 2,459,586 | 294,565 | 287,342 |
| 001 | Cash Clear-NSF Checks | 131998 |  | 426 | 474 | 0 | 0 | 0 | 544 | 615 | 917 | 667 |
| 002 | Cash Clear-Mixed Pymt | 131998 |  | 0 | 16 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 003 | Cash Clear-Misc DR/CR | 131998 |  | 0 | 7 | 7 | 0 | 0 | 43 | -50 | 0 | 951 |
| 004 | Cash Clear-MI's | 131998 |  | -57 | -7,293 | 9,492 | 8,558 | 8,084 | -1,653 | 0 | 188 | 0 |
| 005 | Cash Clear-ORCOM | 131998 |  | 0 | 0 | -7 | 0 | 0 | 0 | 0 | 0 | 0 |
| 006 | Cash Clear-Interco | 131998 |  | 11,856 | -106 | 2,776 | -433 | 129 | 2,018 | -379 | 1,450 | -332 |
| 007 | Cash Clear-Pinnacl/ARP | 131998 |  | 0 | -19 | -18 | 15,115 | 0 | 0 | 0 | 0 | 0 |
|  | Petty Cash | 134100 |  | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 |
|  | Petty Cash-OTC | 134101 |  | 2,000 | 2,000 | 2,000 | 2,000 | 2,000 | 2,000 | 2,000 | 2,000 | 2,000 |
|  | Customer A/R | 141000 |  | 2,533,569 | 2,989,468 | 3,301,502 | 3,031,813 | 2,869,935 | 2,757,683 | 3,594,802 | 3,011,553 | 3,158,423 |
|  | Customer A/R Clearing | 141999 |  | 0 | 0 | 0 | -36 | -71 | 141 | -35 | 462 | -35 |
|  | Accum prov-uncoll accts | 143000 |  | -240,766 | -283,344 | -299,358 | -277,164 | -311,309 | -304,033 | -246,021 | -271,735 | -246,021 |
|  | Accrued Utility Revenue | 144000 |  | 3,662,601 | 3,733,589 | 3,673,809 | 3,697,788 | 3,731,694 | 3,561,233 | 0 | 2,843,470 | 3,036,742 |
|  | Misc A/R-System | 146100 |  | 465,846 | 611,281 | 382,428 | 509,640 | 580,040 | 352,367 | 378,087 | 464,063 | 380,187 |
| 001 | Misc A/R-Manual | 146100 | 1 | 265,741 | 93,644 | 181,515 | 93,558 | 93,058 | 93,312 | 0 | 125,137 | 253,841 |
|  | Misc A/R-Retro Ins | 146105 |  | 49,110 | 49,110 | 49,110 | 93,625 | 93,625 | 93,625 | 73,653 | 73,653 | 73,653 |
|  | Misc A/R-Medicare Subsidy | 146115 |  | 18,188 | 22,063 | 25,938 | 29,814 | 14,879 | 18,754 | 12,818 | 18,729 | 12,818 |
|  | Accum prov-uncoll misc a/r | 146370 |  | -77,820 | -75,258 | -66,813 | -75,727 | -80,960 | -80,055 | -9,046 | -8,531 | -9,046 |
| AW46 | A/R Assoc Cos-AW46 | 146500 | W46 | 9,553,800 | 9,554,782 | 0 | 18,054,011 | 10,114,096 | 6,351,798 | 0 | 521 | 0 |
| AW02 | 2 A/R Div Equiv AW02 | 146520 | W02 | 880 | 971 | 1,070 | 1,180 | 1,270 | 1,365 | 1,670 | 1,568 | 1,670 |
|  | Plant Material | 151100 |  | 457,452 | 415,944 | 393,697 | 350,803 | 438,958 | 372,683 | 425,751 | 407,628 | 417,036 |
|  | Chemicals | 151300 |  | 260,458 | 274,013 | 232,927 | 224,527 | 241,651 | 223,924 | 218,671 | 216,857 | 189,956 |
|  | Other Mat \& Supplies | 153000 |  | 0 | 0 | 0 | 0 | 0 | 20,929 | 0 | 0 | 0 |
|  | Prepaid Taxes | 165100 |  | 281,316 | 271,691 | 264,544 | 260,500 | 243,928 | 237,112 | 157,925 | 220,046 | 157,925 |
|  | Prepaid Insurance | 165200 |  | 131,673 | 190,518 | 129,888 | 69,258 | 128,139 | 67,509 | 222,976 | 277,349 | 222,685 |
|  | Prepaid PUC/PSC Assessments | 165300 |  | 0 | 84,711 | 77,010 | 69,309 | 61,608 | 53,907 | 30,804 | 38,505 | 30,804 |
|  | Prepaid Audit Fees | 165400 |  | 10,325 | 11,800 | 2,951 | 0 | -15,190 | 10,325 | 4,425 | 13,275 | 4,425 |
|  | Prepaid Other | 165500 |  | 98,480 | 95,143 | 78,240 | 75,894 | 69,250 | 54,438 | 99,985 | 36,575 | 99,985 |
|  | Deferred Vacation Pay | 174100 |  | 117,937 | 247,902 | 247,902 | 85,340 | 215,305 | 215,305 | 181,168 | 181,168 | 181,168 |
|  | Unamort Debt Exp-Out | 181110 |  | 137,480 | 136,814 | 136,149 | 135,484 | 134,818 | 134,153 | 132,157 | 132,822 | 132,157 |
| AW46 | Unamort Debt AW46 | 181120 | W46 | 122,815 | 117,529 | 112,244 | 106,958 | 101,673 | 96,387 | 80,530 | 85,816 | 80,530 |
| AW46 | Unamort Debt AW46 NoIAS | 181121 | W46 | 980,564 | 975,437 | 1,039,054 | 1,414,124 | 1,398,593 | 1,441,160 | 1,438,824 | 1,440,344 | 1,438,824 |
|  | Pref Stk Exp w/ mandatory | 181512 |  | 21,135 | 21,071 | 21,006 | 20,942 | 20,878 | 20,814 | 20,621 | 20,685 | 20,621 |
|  | Deferred Rate Proceedings | 182000 |  | 603,675 | 585,183 | 568,345 | 544,335 | 520,753 | 505,279 | 513,486 | 485,134 | 513,764 |
|  | Prelim Survey \& Invest | 183000 |  | 108,546 | 108,546 | 35,093 | 35,093 | 35,093 | 35,093 | 35,093 | 35,093 | 35,093 |

Kentucky American Water Company Case No. 2009-00036 Response to PSC DR1, Item 28
Trial Balance
Description Reg Asset-AFUDC-Eq-CWIP
Reg Asset-AFUDC-Equity
Reg Asset-PIt Flow-Diff
Reg Asset-Other
Reg Asset-Accum Amort
Eng Clearing Dist OH
Mngmt Studu - AMR
Mngmt Study - Pipe Assmnt
Eng Clearing Reclass
RWIP Permits, Fees \& Premium
RWIP M \& S and Purchases
RWIP M \& S and Purchases
RWIP Co Labor
RWIP Co Labor
RWIP Co Labor OH
RWIP Co Labor OH
RWIP Indirect Labor
RWIP Contracted Services
RWIP Contracted Services
ন స స ウ RWIP Retainage
RWIP Salvage
RWIP Scrap Meters
RWIP Scrap Meters
RWIP Scrap Misc
$\begin{array}{llll}185322 & 21 & -1,203 & -1,203 \\ 185322 & 31 & -4,216 & -4,216\end{array}$


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$\begin{array}{cc}\circ & 0 \\ \rightarrow & ल \\ \\ \\ \\ & \end{array}$
 6002

| Account | Sub | $\begin{aligned} & 2009 \\ & \text { June } \end{aligned}$ | July | August | September | October | November | December | $\begin{gathered} 2010 \\ \text { January } \\ \hline \end{gathered}$ | February |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 186030 |  | 1,431,590 | 1,479,723 | 1,546,544 | 1,614,558 | 1,678,170 | 1,746,307 | 1,859,585 | 1,766,405 | 1,859,585 |
| 186035 |  | 3,222,481 | 3,222,481 | 3,222,481 | 3,222,481 | 3,222,481 | 3,222,481 | 3,362,404 | 3,362,404 | 3,362,404 |
| 186040 |  | 3,433,826 | 3,395,339 | 3,356,852 | 3,318,365 | 3,279,878 | 3,241,391 | 3,121,354 | 3,162,129 | 3,121,354 |
| 186045 |  | -441,097 | -439,089 | -437,081 | -435,073 | -433,065 | -431,057 | -425,033 | -427,041 | -425,033 |
| 186055 |  | -531,950 | -538,282 | -544,614 | -550,946 | -557,278 | -563,610 | -583,317 | -576,630 | -583,317 |
| 184100 |  | 332,933 | 281,158 | 261,891 | 165,639 | 126,246 | 37,145 | 110,683 | 28,098 | 110,683 |
| 184102 |  | -959 | -840 | -2,340 | -2,313 | -1,142 | -996 | 2,302 | 346 | 2,302 |
| 184103 |  | 2,146 | 3,420 | 4,088 | 4,514 | 5,114 | 5,946 | 2,021 | 703 | 2,021 |
| 184199 |  | -334,120 | -283,738 | -263,639 | -167,839 | -130,218 | -42,095 | 0 | -29,147 | -115,005 |
| 185125 |  | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 |
| 185150 |  | 12,892 | 12,892 | 12,892 | 12,892 | 12,892 | 12,892 | 12,892 | 12,892 | 12,892 |
| 185150 | 21 | 15,721 | 16,884 | 18,701 | 18,701 | 19,226 | 19,848 | 23,292 | 23,292 | 23,292 |
| 185200 |  | 248,031 | 248,031 | 248,031 | 248,031 | 248,097 | 248,097 | 248,097 | 248,097 | 248,097 |
| 185200 | 21 | 94,261 | 96,675 | 99,765 | 107,454 | 115,038 | 121,314 | 143,382 | 134,082 | 143,382 |
| 185250 |  | 126,303 | 126,303 | 126,303 | 126,303 | 126,328 | 126,328 | 126,328 | 126,328 | 126,328 |
| 185250 | 21 | 50,424 | 51,955 | 53,781 | 58,349 | 63,313 | 68,545 | 81,255 | 76,053 | 81,255 |
| 185260 | 21 | 4,448 | 4,918 | 5,635 | 7,635 | 9,121 | 10,980 | 14,309 | 13,119 | 14,309 |
| 185275 |  | 2,072,129 | 2,077,129 | 2,077,129 | 2,077,129 | 2,077,129 | 2,077,129 | 2,077,129 | 2,077,129 | 2,077,129 |
| 185275 | 21 | 75,540 | 75,540 | 75,540 | 80,290 | 80,290 | 80,290 | 82,215 | 80,715 | 82,215 |
| 185275 | 31 | 110,000 | 110,000 | 110,000 | 110,000 | 110,000 | 110,000 | 110,000 | 110,000 | 110,000 |
| 185280 |  | 5,093 | 5,093 | 5,093 | 5,093 | 5,093 | 5,093 | 5,093 | 5,093 | 5,093 |
| 185315 |  | -116,421 | -116,421 | -116,421 | -120,696 | -124,263 | -123,822 | -123,822 | -123,822 | -123,822 |
| 185315 | 31 | -16,069 | -16,069 | -16,069 | -16,069 | -16,069 | -16,069 | -16,069 | -16,069 | -16,069 |
| 185320 |  | -80,420 | -86,396 | -95,490 | -104,212 | -111,027 | -111,027 | -117,787 | -117,787 | -117,787 |
| 185320 | 21 | -1,126 | -1,126 | -1,126 | -1,126 | -1,126 | -1,567 | -3,976 | -3,976 | -3,976 |
| 185322 |  | -780 | -780 | -780 | -780 | -780 | -780 | -780 | -780 | -780 |
| 185322 | 21 | -1,203 | -1,203 | -1,203 | -1,203 | -1,203 | -1,203 | -1,203 | -1,203 | -1,203 |
| 185322 | 31 | -4,216 | -4,216 | -4,216 | -4,216 | -7,378 | -7,378 | -8,386 | -8,386 | -8,386 |
| 185950 |  | 37,047 | 45,616 | 12,305 | -7,924 | 1,743 | -5,021 | 0 | -7,732 | -13,350 |
| 185999 |  | -2,397,400 | -2,402,400 | -2,402,400 | -2,402,400 | -2,402,400 | -2,402,400 | -2,402,400 | -2,402,400 | -2,402,400 |
| 185999 | 21 | -167,124 | -175,295 | -140,341 | -128,251 | -156,821 | -166,246 | -196,475 | -180,626 | -196,475 |
| 185999 | 31 | -67,141 | -67,141 | -67,141 | -65,012 | -47,212 | -45,014 | -39,754 | -44,029 | -39,754 |
| 186401 |  | 1,747,846 | 1,722,194 | 1,696,955 | 1,671,717 | 1,651,795 | 1,627,688 | 1,884,503 | 1,832,226 | 1,884,503 |
| 186426 |  | 61,130 | 61,130 | 61,130 | 61,130 | 61,130 | 61,130 | 61,130 | 61,130 | 61,130 |
| 186431 |  | 20,504 | 20,004 | 19,504 | 19,003 | 18,503 | 18,003 | 21,613 | 22,113 | 21,613 |
| 186432 |  | 25,193 | 30,458 | 23,596 | 22,797 | 21,999 | 21,200 | 19,482 | 20,281 | 19,482 |
| 186444 |  | 25,000 | 169,241 | 161,549 | 153,856 | 146,163 | 138,470 | 115,392 | 123,085 | 115,392 |
| 186598 |  | 2,490,302 | 2,444,628 | 2,261,985 | 2,227,636 | 2,193,287 | 2,158,938 | 2,055,891 | 2,090,240 | 2,055,891 |
| 187007 |  | 0 | 84,126 | 0 | 0 | 35,139 | 1,324 | 0 | 5,376 | 0 |
| 201200 | AW02 | -36,568,777 | -36,568,777 | -36,568,777 | -36,568,777 | -36,568,777 | -36,568,777 | -36,568,777 | -36,568,777 | -36,568,777 |
| 205175 | AW02 | -21,329 | -21,329 | -21,329 | -21,329 | -21,329 | -21,329 | -21,329 | -21,329 | -21,329 |
| 205300 | AW02 | -180 | -180 | -180 | -180 | -180 | -180 | -180 | -180 | -180 |
| 205310 |  | -3,330 | -3,330 | -3,330 | -3,330 | -3,330 | -3,330 | -6,330 | -3,330 | -6,330 |
| 205440 | AW02 | -46,621,033 | -46,622,778 | -46,624,524 | -46,626,655 | -46,627,917 | -56,629,407 | -56,635,387 | -56,633,475 | -56,635,387 |
| 210210 | AW02 | -343,498 | -343,498 | -343,498 | -343,498 | -343,498 | -343,498 | -343,498 | -343,498 | -343,498 |
| 210240 |  | -32,468,691 | -32,468,691 | -32,468,691 | -32,468,691 | -32,468,691 | -32,468,691 | -34,876,118 | -34,876,118 | -34,876,118 |

# KAW_R_PSCDR1\#28_031610 Page 8 of 159 

| Account Sub |  | $\begin{aligned} & 2009 \\ & \text { June } \end{aligned}$ | July | August | September | October | November | December | $\begin{gathered} 2010 \\ \text { January } \end{gathered}$ | February |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 215410 |  | -1,455,600 | -1,455,600 | -1,455,600 | -1,455,600 | -1,455,600 | -1,455,600 | -1,445,600 | -1,455,600 | -1,445,600 |
| 215113 |  | -4,500,000 | -4,500,000 | -4,500,000 | -4,500,000 | -4,500,000 | -4,500,000 | -4,500,000 | -4,500,000 | -4,500,000 |
| 221110 |  | -23,500,000 | -23,500,000 | -23,500,000 | -23,500,000 | -23,500,000 | -23,500,000 | -23,500,000 | -23,500,000 | -23,500,000 |
| 221120 AW46 |  | -95,490,000 | -95,490,000 | -95,490,000 | -121,490,000 | -121,490,000 | -121,490,000 | -124,590,000 | -121,490,000 | -121,490,000 |
| 231200 AW46 |  | -35,628,595 | -33,261,292 | -40,169,018 | -38,165,323 | -35,565,038 | -26,069,495 | -34,210,304 | -26,436,499 | -32,984,623 |
| 232200 AW46 |  | -3,100,000 | -3,100,000 | -3,100,000 | -3,100,000 | -3,100,000 | -3,100,000 | 0 | -3,100,000 | -3,100,000 |
| 234100 |  | -3,253,635 | -1,073,627 | -533,152 | -1,113,776 | -477,864 | -908,303 | -940,545 | -835,561 | -1,147,675 |
| 234110 |  | 7,452 | 7,266 | -2,772 | 3,733 | -59,218 | -43,714 | 9,967 | 11,938 | 9,967 |
| 234120 |  | 0 | 0 | 0 | 0 | -1,581 | -1,578 | 0 | -9 | 0 |
| 234125 |  | 0 | 0 | 0 | 0 | 0 | 0 | -1,588 | -2,822 | -1,588 |
| 234200 |  | -2,592,357 | -2,830,387 | -3,114,330 | -3,503,605 | -3,773,095 | -4,026,724 | -4,498,185 | -4,401,542 | -4,491,121 |
| 234300 |  | -305,419 | -169,184 | -175,183 | -112,118 | -112,653 | -115,766 | -4,031 | -160,605 | -106,595 |
| 234300 | 6 | -76,898 | -42,161 | -43,878 | -235,235 | -62,464 | -375,025 | 0 | -47,455 | -36,026 |
| 234300 | 7 | -19,857 | -18,496 | -22,604 | -16,628 | -18,890 | -21,499 | 0 | -18,249 | -18,620 |
| 234300 | 8 | 114,347 | -9,478,483 | 28,100 | 122,796 | 3,072 | 114,882 | 0 | 59,884 | 83,676 |
| 234350 |  | -7,812,613 | -9,217,469 | -9,753,107 | -6,495,089 | -7,221,019 | -5,409,884 | -4,496,118 | -7,277,910 | -4,496,118 |
| 234400 AW03 |  | -97,348 | 22,115 | 39,801 | -35,635 | 47,202 | -44,475 | 24,826 | 116,323 | 24,826 |
| 234500 AW02 |  | 0 | 0 | -8,702 | 0 | 0 | -6,568 | -7,153 | 0 | -7,153 |
| 234500 AW46 |  | -13,818 | -4,995 | -7,900 | -2,042 | -3,273 | -4,477 | 0 | -2,647 | -3,814 |
| 280999 |  | -17,321 | 3,841 | -5,996 | 78,943 | 16,387 | 325,242 | -30,608 | 18,518 | -4,294 |
| 236110 |  | 0 | 0 | 0 | 0 | 0 | 0 | -70,001 | -10,001 | -70,001 |
| 236120 |  | -90 | -172 | -313 | -438 | -19 | -19 | -7,536 | -5,945 | -8,113 |
| 236130 |  | -37,324 | -22,150 | -25,474 | -31,288 | -36,096 | -42,587 | 0 | -42,005 | -43,692 |
| 236140 |  | -170 | -326 | -590 | -842 | -77 | -77 | -14,811 | -10,793 | -16,057 |
| 236151 |  | -1,374,280 | -1,603,353 | -1,832,426 | -2,061,499 | -2,290,572 | -2,519,645 | -3,312,574 | -2,977,653 | -3,312,574 |
| 236152 |  | -9,625 | -7,147 | -4,044 | -16,572 | -6,816 | -17,065 | -10,971 | -9,239 | -9,676 |
| 236170 |  | -4,531 | -4,531 | -4,531 | -4,531 | -4,531 | -4,531 | -4,347 | -4,347 | -4,347 |
| 236210 |  | 188,599 | 231,346 | 209,193 | -885,060 | -1,065,518 | -994,626 | -391,215 | -391,215 | -391,215 |
| 236220 |  | 849,677 | 790,664 | 790,664 | 3,886,033 | 3,886,033 | 4,018,470 | -611,532 | -611,532 | -611,532 |
| 236230 |  | 173,167 | 124,287 | 201,708 | 433,898 | 365,162 | 322,930 | -71,346 | -71,346 | -71,346 |
| 236240 |  | 274,717 | 274,717 | 274,717 | 1,259,375 | 1,259,375 | 880,982 | 501,264 | 501,264 | 501,264 |
| 236310 |  | 99,181 | 99,181 | 99,181 | 99,181 | 99,181 | 99,181 | 99,181 | 99,181 | 99,181 |
| 236320 |  | 18,088 | 18,088 | 18,088 | 18,088 | 18,088 | 18,088 | 18,088 | 18,088 | 18,088 |
| 237200 |  | -311,872 | -449,585 | -319,172 | -456,885 | -594,597 | -732,310 | 0 | -449,585 | -319,172 |
| 237300 AW46 |  | -808,394 | -1,338,521 | -1,868,648 | -2,267,055 | -1,369,703 | -2,021,705 | 0 | -2,080,636 | -2,732,638 |
| 241228 | 2 | -31,763 | -63,525 | -95,288 | -31,763 | -63,525 | -95,288 | 0 | -63,525 | -95,288 |
| 240140 AW02 |  | 0 | 0 | 0 | -2,006,260 | -2,006,260 | -2,006,260 | 0 | -2,006,260 | 0 |
| 241100 |  | -117,937 | -247,902 | -247,902 | -85,340 | -215,305 | -215,305 | -181,168 | -181,168 | -181,168 |
| 241201 |  | -11,556 | -12,696 | -17,664 | -14,856 | -23,849 | -20,192 | 0 | -13,940 | -12,984 |
| 241202 |  | -314,992 | -318,990 | -296,267 | -438,325 | -266,980 | -301,609 | 0 | -314,013 | -273,160 |
| 241203 |  | -6,704 | -9,600 | -18,583 | -27,624 | -33,662 | -26,059 | 0 | -29,010 | -26,615 |
| 241204 |  | 0 | 0 | 0 | -5,899 | 0 | 0 | 0 | 0 | 0 |
| 241206 |  | -49,287 | -128,642 | -152,334 | -204,747 | -251,868 | -24,841 | 0 | -128,950 | -131,730 |
| 241210 |  | -75,006 | -79,173 | -83,340 | -87,507 | -91,674 | -95,841 | -111,436 | -104,175 | -111,436 |
| 241211 |  | -6,083 | -6,083 | -6,917 | -8,250 | -9,125 | -10,792 | -1,500 | -750 | -1,500 |
| 241212 |  | -5,615 | -7,561 | -7,923 | -4,064 | -5,073 | -5,879 | 0 | -7,606 | -7,653 |

Kentucky American Water Company Case No. 2009-00036

Response to PSC DR1, Item 28
Trial Balance
Description
Pref Stk Sub Outside
Pref Stk-Mand LT
Bonds-Outside
AW46 Bonds-Inside AW46
AW46 Notes Pay AW46
AW46 Curr Portion LTD-AW46
Accts Pay-Gen System
Accts Pay-Pcard
Accts Pay-Utility Billing
Accts Pay-Phone Billing
Accts Pay-Contract Retention
Accts Pay-Misc
006 Accts Pay-Wrkbskt Accr
007 Accts Pay-Pcard Accr
008 Accts Pay-I/C Loan Clearing
Accts Pay-Proj Exp Accr
AW03 Accts Pay-AW03
AW02 Accts Pay AW02
AW46 Accts Pay AW46
Interco Rec/Pay
Gross Inc \& Receipts Tax
FUTA
FICA
SUTA
Gen Tax - Property
Gen Tax - Sales/Use
Gen Tax - Other
Accr FIT - Current Yr
Accr FIT - Pr Yrs
Accr SIT - Current Yr
Accr SIT - Pr Yrs
Curr Def FIT
Curr Def SIT/LIT
Int Accr-LTD-Outside
AW46 Int Accr-LTD-AW46
002 Accr PFD Div w/ mand
AW02 Div Decl-Com Stk AW02
Accrued Vacation Pay
Accr Water Purchases
Accr Power
Accr Legal
Accr Audit
Accr Wages
Accr Waste Disposal
Accr Retiree Medical Reimb
Accr DCP Contribution
AT

## KAW_R_PSCDR1\#28_031610 Page 9 of 159

| Account | Sub | $\begin{aligned} & 2009 \\ & \text { June } \end{aligned}$ | July | August | September | October | November | December | $\begin{gathered} 2010 \\ \text { January } \end{gathered}$ | February |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 241214 |  | -26,136 | -26,533 | -26,712 | -26,666 | -24,944 | -27,658 | 0 | -25,083 | -25,237 |
| 241220 KY |  | -29,488 | -67 | -77 | 0 | -14,482 | -14,939 | 0 | -15,828 | -14,528 |
| 241220 | 1 | -2,101 | 0 | 0 | 0 | 0 | -2,101 | 0 | 0 | 0 |
| 241220 | 2 | -176 | 0 | 0 | 0 | 0 | -171 | 0 | -590 | -548 |
| 241220 | 5 | -3,893 | -4,127 | -2,965 | -2,993 | -3,069 | -4,603 | 0 | -3,140 | -3,160 |
| 241220 | 6 | -21,630 | -20,787 | -19,570 | 0 | 0 | -19,825 | 0 | -22,749 | -21,381 |
| 241220 | 8 | -1,306 | -130 | -130 | 0 | 0 | -1,707 | 0 | 0 | 0 |
| 241220 | 10 | -32,242 | -156 | -164 | 0 | 0 | -31,840 | 0 | -767 | 0 |
| 241220 | 12 | -26,934 | -22,224 | -18,233 | -20,420 | -14,238 | -24,187 | -17,140 | -15,262 | -17,140 |
| 241220 | 13 | -22,963 | -109 | -132 | 0 | 0 | -21,850 | 0 | -297 | 0 |
| 241220 | 14 | -3,952 | -6,431 | 0 | -2,210 | -4,392 | -1,099 | 0 | -6,175 | 0 |
| 241227 |  | -6,769 | -8,345 | -8,595 | -4,277 | -5,281 | -6,108 | 0 | -8,712 | -8,737 |
| 241228 |  | -19,532 | -6,511 | -13,021 | -19,532 | -6,511 | -13,021 | 0 | -6,511 | -12,938 |
| 241230 |  | -17,845 | -18,075 | -18,802 | -18,659 | -17,682 | -19,919 | -22,264 | -19,919 | -22,264 |
| 241232 |  | -2,377 | -2,377 | -2,377 | -2,377 | -2,377 | -2,377 | -2,281 | -2,281 | -2,281 |
| 241234 |  | -760 | -760 | -760 | -760 | -760 | -760 | -2,220 | -2,220 | -2,220 |
| 241236 |  | -110,792 | -123,210 | -10,240 | -32,663 | -66,690 | -18,442 | -110,393 | -6,889 | -19,950 |
| 241237 |  | -56,464 | -31,390 | -72,020 | -47,424 | -117,210 | -63,542 | -35,661 | -50,515 | -30,299 |
| 241238 |  | -9,003 | -8,330 | -10,985 | -14,921 | -170,490 | -31,112 | -4,232 | -2,947 | -26,534 |
| 241241 | 5 | -55 | -107 | -148 | -200 | -41 | -97 | -141 | -53 | -127 |
| 241241 | 6 | -37 | -76 | -116 | -156 | -42 | -79 | -87 | -37 | -75 |
| 241244 |  | -42,289 | -58,206 | -49,156 | -40,062 | -43,776 | -31,821 | -48,772 | -36,182 | -24,436 |
| 241246 |  | -362,271 | -523,739 | -319,313 | -473,091 | -621,516 | -280,762 | -306,542 | -550,520 | -264,516 |
| 241248 |  | -144,158 | -176,313 | -172,375 | -167,305 | -160,967 | -144,574 | -182,940 | -151,253 | -137,624 |
| 241249 | 1 | -3,145,942 | -3,739,067 | -3,981,124 | -3,942,784 | -3,795,851 | -4,179,230 | -5,170,718 | -4,748,409 | -4,747,835 |
| 241249 | 2 | 1,617,085 | 2,208,646 | 2,400,283 | 2,348,912 | 2,179,746 | 2,286,247 | 3,541,701 | 3,045,075 | 3,027,557 |
| 241249 | 4 | 1,347,645 | 1,377,401 | 1,408,616 | 1,441,958 | 1,471,689 | 1,502,614 | 1,596,172 | 1,569,167 | 1,595,516 |
| 241250 |  | -1,372,836 | -1,043,141 | -1,049,223 | -930,886 | -397,594 | -1,596,271 | -518,917 | -1,018,846 | -303,843 |
| 241251 |  | -194,786 | -5,920 | -1,086 | 0 | 0 | -200,380 | -4,138 | -3,728 | -4,138 |
| 241252 |  | 0 | -2,515 | -5,730 | -9,237 | -7,157 | -6,937 | -11,889 | -5,922 | -4,598 |
| 241260 |  | -7,000 | -8,000 | -10,000 | -11,000 | -11,000 | -11,000 | -13,000 | -13,000 | -13,000 |
| 241322 |  | -138,440 | -159,473 | -180,504 | -204,432 | -225,803 | -258,220 | -439,410 | -416,249 | -439,410 |
| 241500 |  | -23,050 | -36,457 | -40,088 | -36,970 | -38,079 | -26,602 | 0 | 0 | -48,146 |
| 241998 |  | -92,477 | -189,000 | -12,713 | -102,256 | -187,145 | 56,198 | 30,894 | -92,793 | 45,499 |
| 252999 CP |  | -2,050,000 | -2,050,000 | -2,050,000 | -1,425,000 | -1,425,000 | -1,425,000 | -1,200,000 | -1,200,000 | -1,200,000 |
| 252110 |  | -184,555 | -188,204 | -191,852 | -195,500 | -199,148 | -202,796 | -213,741 | -210,093 | -213,741 |
| 252120 |  | -14,096,019 | -13,944,300 | -14,443,980 | -14,519,635 | -14,410,941 | -14,044,829 | -14,211,831 | -14,131,388 | -14,211,831 |
| 252150 |  | 0 | 1,789 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 252170 |  | -479,110 | -591,777 | -92,097 | -92,097 | -146,907 | -193,364 | -371,621 | -305,195 | -302,832 |
| 252999 |  | 2,050,000 | 2,050,000 | 2,050,000 | 1,425,000 | 1,425,000 | 1,425,000 | 1,200,000 | 1,200,000 | 1,200,000 |
| 253203 |  | -1,886,054 | -1,886,054 | -1,886,054 | 0 | 0 | 0 | 0 | 0 | 0 |
| 253301 |  | -33,829,186 | -34,615,979 | -35,256,041 | -39,490,414 | -39,980,358 | -40,603,630 | -41,748,936 | -41,748,936 | -41,748,936 |
| 253309 |  | 133,392 | 133,392 | 133,392 | 0 | 0 | 0 | 0 | 0 | 0 |
| 253701 |  | -5,346,144 | -5,432,425 | -5,507,326 | -6,411,822 | -6,464,972 | -6,120,073 | -5,603,454 | -5,603,454 | -5,603,454 |
| 255101 |  | -90,348 | -89,710 | -89,073 | -88,435 | -87,797 | -87,160 | -85,247 | -85,884 | -85,247 |
| 255102 |  | -51,702 | -51,176 | -50,651 | -50,125 | -49,600 | -49,075 | -47,498 | -48,024 | -47,498 |

Kentucky American Water Company Case No. 2009-00036 Response to PSC DR1, Item 28

|  | Description |
| :---: | :---: |
|  | Accr Bank Fees |
| KY | WH PR-Tax Coll SIT KY |
| 001 | WH PR-Union Dues |
| 002 | WH PR-Charity Contribution |
| 005 | WH PR-Flex Spending Account |
| 006 | WH PR-401k Contribution |
| 008 | WH PR-Garnishments |
| 010 | WH PR-Tax Coll Pay FIT |
| 012 | WH PR-Tax Coll Pay LIT |
| 013 | WH PR-Tax Coll Pay FICA |
| 014 | WH PR-ESPP |
|  | Accr Employer 401k Match |
|  | Accrued PFD Div Requirements |
|  | Unclaimed Credits Pay |
|  | Outstanding Checks Pay |
|  | Unclaimed Ext Dep Refund Pay |
|  | Unbilled Items-System |
|  | Unbilled Stock C-System |
|  | Unbilled Stock E-System |
| 005 | CFO-Cust Asst NonPledged |
| 006 | CFO-Cust Asst Pledged |
|  | CFO-Sales Tax |
|  | CFO-Gross Rcts Tax |
|  | CFO-Mun Tax |
| 001 | CFO-MC/Swr Rev/Cash |
| 002 | CFO-MC/Swr A/R |
| 004 | CFO-MC/Swr Chgoff |
|  | A/P Check Clearing |
|  | P/R Check Clearing |
|  | Cred Refund A/P Check Cleari |
|  | Misc Deposits Payable |
|  | Incentive Plan Cash Annual |
|  | Accrued Paving-Analyzed |
|  | Other Curr Liab Analyzed |
| CP | Adv for Const-Current Portio |
|  | Adv for Const-NT Mains |
|  | Adv for Const-NT Ext |
|  | Adv for Const-NT Hydrants |
|  | Adv for Const-NT WIP |
|  | Adv for Const-Cur Portion Re |
|  | Def FIT-Norm Property |
|  | Def FIT-Other |
|  | Def FIT-AMT |
|  | Def SIT-Other |
|  | Unamortized ITC - 3\% |
|  | Unamortized ITC - 4\% |

Kentucky American Water Company Case No. 2009-00036 Response to PSC DR1, Item 28
Trial Balance




Kentucky American Water Company
Case No. 2009-00036
Response to PSC DR1, Item 28
Trial Balance

## Description

SFR Billed
Sales for Resale Unbilled AW12 Sale for Resale AW09
Misc Sales Billed Misc Sales Billed
Ind WW Serv Billed

Pub Auth WW Svc Billed
AW03 Oth Rev-Interco Rent
Oth Rev-Forfeited Discounts
Oth Rev-Rents Water Property Oth Rev-Collect for Others Oth Rev-NSF Check Charge Oth Rev-Reconnection Charges Oth Rev-Misc Service Rev Oth Rev-Other Water Rev

Labor Oper WT
Labor Oper WT Super/Eng Labor Oper TD Labor Oper TD Storage Labor Oper TD Lines
Labor Oper TD Meter

Labor Oper CA Mtr Read Labor Oper CA Cust Serv Labor Oper AG
Labor Maint SS

Labor Maint P
Labor Maint WT Super/Eng
Labor Maint TD
Labor Maint TD
Labor Maint TD
Labor Maint TD Super/Eng
Labor Maint TD Struct \& Imp
Labor Maint TD Dist Res
Labor Maint TD Mains
Labor Maint TD Services
Labor Maint TD Meters
Labor Maint TD Hydrants
Labor NS OT WT
Labor NS OT WT Super/Eng
Labor NS OT TD
Labor NS OT TD Super/Eng

$\begin{array}{ll}15 & \text { Labor NS OT CA } \\ 1510 & \text { Labor NS OT CA Mtr Read }\end{array}$
Kentucky American Water Company
Case No. 2009-00036
Response to PSC DR1, Item 28
Trial Balance



## 

 $\begin{array}{lr}11 & \text { Fuel for Power } \\ 13 & \text { Chemicals WT } \\ \text { AWSI } & \text { Chemicals Ca }\end{array}$

| AWSI | Chemicals Carbon AWSI |
| :--- | :--- |
| 13 | Waste Disposal Exp WT |
| 13 | Amort Waste Disp Exp |
| 16 | Mmgt Fees-Corporate |
| 16 | Mmgt Fees-External Affairs/C |
| 16 | Mmgt Fees-Finance |
| 16 | Mmgt Fees-Human Resources |
| 16 | Mmgt Fees-Legal |
| 16 | Mmgt Fees-Operations Svcs |
| 16 | Mmgt Fees-Property |
| 16 | Mmgt Fees-Business Developme |
| 16 | Mmgt Fees-Bus Transformation |
| 16 | Mmgt Fees-Audit |
| 16 | Mmgt Fees-Regulatory |
| 16 | Mmgt Fees-Inv Relations |
| 16 | SSC-Shrd Bus Srv Fees |
| 16 | CSC-Shrd Bus Srv Fees |
| 16 | ITS-Shrd Bus Srv Fees |
| 16 | Procure-Shrd Bus Srv Fees |
| 16 | Lab-Shrd Bus Srv Fees |
| 16 | BSC-Shrd Bus Srv Fees |
| 16 | Mmgt Fees-Regulated Operatio |
| 001 | Group Insurance - Cap Credit |


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|  | Description |
| :--- | :--- |
| 16 | Group Ins Oper AG |
| 001 | PBOP Cap Credits |
| 16 | PBOP Oper AG |
| 001 | Pension－Cap Credits |
| 16 | Pension Oper AG |
| 16 | Reg Comm Amort Rate Case |
| 16 | Reg Comm Amort Depr Study |
| 16 | Ins Gen Liab Oper AG |
| 001 | Ins Work Comp Cap Credits |
| 16 | Ins Work Comp AG |
| 16 | Ins Other Oper AG |
| 15 | M \＆S Oper CA |
| 15 | Uncollectible Accounts |
| 16 | Uncollectible Accts－MI＇s |
| 15 | Misc Oper CA |
| 15 | Bank Service Charges CA |
| 15 | Collection Agencies CA |
| 15 | Forms CA |
| 15 | Office \＆Admin Supplies CA |
| 15 | Postage CA |
| 15 | Telephone CA |
| 15 | Uniforms CA |
| 14 | Rents－Real Prop Oper TD |
| 14 | Rents－Equipment Oper TD |
| 16 | Rents－Equipment Oper AG |
| 16 | M \＆S Oper AG |
| 16 | Misc General Office |
| 16 | Bank Service Charges AG |
| 16 | Credit Line Fees |
| AW46 | Credit Line Fees AW46 |
| 16 | Dues／Membership Deduct |
| 16 | Electricity AG |
|  | Empl Exp AG－P／R JE |
| 16 | Employee Expenses AG |
| 16 | Empl Exp Conf／Registration A |
| 16 | Meals Deduct |
| 16 | Meals Non Deduct |
| 16 | Forms AG |
| 16 | Heat－Oil／Gas AG |
| 16 | Janitorial AG |
| 16 | Office \＆Admin Supplies AG |
| 16 | Postage AG |
| 16 | Relocation Expenses |
| 16 | Telephone AG |
| 16 | Cell Phone AG |
| 16 | Trash Removal AG |
|  |  |



Kentucky American Water Company
Case No. 2009-00036
Response to PSC DR1, Item 28
Trial Balance
M \& S Oper TD
Contr Svc-Acctg Oper AG Contr Svc-Audit Fees Oper AG Contr Svc-Other Oper WT
Contr Svc-Other Oper TD
Contr Svc-Other Oper CA Contr Svc-Temp Empl Oper CA Contr Svc-Lab Testing Oper W Trans - Cap Credits Trans Oper WT Trans Oper AG
Trans Oper AG Lease Cost Trans Oper AG Lease Fuel
Trans Oper AG Lease Maint Water Res Conservation Misc Oper SS Misc Oper WT Misc Oper TD Misc Oper AG Misc Oper Exp AG Consol
Advertising
Brochures and Handouts
Charitable Contrib Deduct
Community Relations
Co Dues/Membership Deduct
Co Dues Deduct AWWA
Co Dues Deduct NAWC
Directors Fees


| Account | Sub | $2009$ | July | August | September | October | November | December | $2010$ | February |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 575275 | 16 | -8,817 | -10,460 | -11,030 | -13,078 | -16,012 | -19,339 | -4,379 | -1,862 | -3,061 |
| 575276 | 16 | -4 | -4 | -4 | -4 | -4 | -4 | 0 | 0 | 0 |
| 575320 | 13 | 4,702 | 5,396 | 6,136 | 6,972 | 7,385 | 8,237 | 1,163 | 1,143 | 1,252 |
| 575320 | 14 | 10,477 | 12,181 | 13,604 | 15,116 | 16,182 | 17,778 | 5,137 | 2,395 | 7,943 |
| 575480 | 14 | 21,432 | 20,809 | 21,215 | 21,679 | 22,178 | 25,350 | 6,289 | 4,373 | 8,902 |
| 575490 | 16 | -11,164 | -11,339 | -13,323 | -13,323 | -13,323 | -13,323 | 0 | 0 | 0 |
| 575500 | 13 | 14,370 | 17,375 | 20,033 | 20,845 | 24,457 | 26,435 | 2,883 | 5,183 | 5,146 |
| 575500 | 14 | 7,169 | 7,342 | 8,497 | 8,608 | 9,007 | 9,273 | 531 | 531 | 531 |
| 575545 | 13 | 44,871 | 56,019 | 60,758 | 66,968 | 75,719 | 82,355 | 11,029 | 10,154 | 11,688 |
| 575560 | 16 | 8,040 | 8,040 | 8,040 | 8,040 | 8,040 | 8,040 | 0 | 0 | 0 |
| 575610 | 16 | 25 | 25 | 25 | 25 | 25 | 25 | 0 | 0 | 0 |
| 575620 | 13 | 3,509 | 3,973 | 4,270 | 5,977 | 6,625 | 7,409 | 2,087 | 788 | 2,087 |
| 575620 | 14 | 10,927 | 14,492 | 17,259 | 20,738 | 23,856 | 26,846 | 8,566 | 3,540 | 7,193 |
| 575625 | 13 | 291 | 380 | 380 | 413 | 429 | 688 | 159 | 58 | 58 |
| 575625 | 14 | 0 | 630 | 630 | 630 | 630 | 630 | 0 | 0 | 0 |
| 575625 | 16 | 7,082 | 9,119 | 10,673 | 12,482 | 13,565 | 14,998 | 1,334 | 316 | 1,106 |
| 575640 | 16 | -4,781 | -4,781 | -4,781 | -4,781 | -4,781 | -4,781 | 0 | 0 | 0 |
| 575711 | 16 | 85,670 | 102,427 | 116,070 | 128,013 | 145,641 | 159,901 | 22,485 | 15,717 | 31,921 |
| 575715 | 16 | 17,003 | 18,334 | 19,665 | 20,980 | 22,299 | 24,354 | 2,651 | 1,326 | 2,651 |
| 575740 | 14 | 113 | 131 | 150 | 169 | 188 | 433 | 144 | 134 | 250 |
| 575741 | 13 | 2,103 | 2,102 | 2,263 | 2,436 | 2,613 | 2,980 | 287 | 138 | 305 |
| 575741 | 14 | 3,904 | 4,960 | 6,004 | 6,899 | 7,958 | 8,415 | 1,809 | 968 | 1,843 |
| 575780 | 11 | 4,801 | 6,098 | 7,195 | 8,204 | 8,696 | 10,644 | 1,169 | -82 | 1,086 |
| 575780 | 14 | 1,985 | 2,468 | 2,545 | 2,625 | 3,117 | 3,743 | 630 | 60 | 547 |
| 575790 | 16 | 7,389 | 3,723 | 3,723 | 3,723 | 5,056 | 5,879 | 2,087 | 667 | 2,087 |
| 575820 | 13 | 3,860 | 4,569 | 5,194 | 6,387 | 6,878 | 7,425 | 1,442 | 709 | 1,442 |
| 575820 | 14 | 9,434 | 10,957 | 13,017 | 14,742 | 15,834 | 17,147 | 2,385 | 998 | 2,635 |
| 575830 | 11 | 7,644 | 10,991 | 13,672 | 19,590 | 23,232 | 26,774 | 6,519 | 3,372 | 6,519 |
| 575998 | 16 | -539 | -1,166 | 1,854 | 788 | 1,178 | -312 | -2,042 | -721 | -1,346 |
| 620000 | 21 | 86,610 | 72,955 | 81,749 | 88,477 | 120,020 | 155,375 | 13,668 | 5,800 | 14,658 |
| 620000 | 23 | 44,173 | 76,217 | 99,023 | 110,439 | 118,171 | 114,946 | 22,976 | 13,571 | 37,057 |
| 620000 | 24 | 106,657 | 123,205 | 155,308 | 185,497 | 199,557 | 221,909 | 34,859 | 18,540 | 35,690 |
| 620000 | 26 | 11,201 | 13,687 | 16,173 | 18,659 | 21,145 | 23,630 | 5,183 | 2,697 | 5,183 |
| 635000 | 26 | 15,811 | 16,390 | 23,005 | 25,240 | 26,089 | 29,058 | 5,676 | 2,996 | 5,571 |
| 675000 | 21 | 0 | 0 | 0 | 0 | 0 | 143 | 0 | 0 | 0 |
| 675000 | 23 | 4,281 | 5,699 | 5,523 | 8,482 | 11,883 | 15,412 | 237 | 0 | 237 |
| 675000 | 24 | 12,825 | 17,032 | 17,781 | 19,179 | 19,986 | 25,020 | 4,692 | 359 | 4,421 |
| 675000 | 2420 | 0 | 0 | 0 | 223 | 223 | 223 | 0 | 0 | 0 |
| 675000 | 2440 | 0 | 0 | 0 | 0 | 0 | 0 | 1,643 | 0 | 1,643 |
| 675000 | 26 | 38,960 | 44,225 | 61,566 | 67,587 | 73,663 | 71,883 | 17,551 | 8,628 | 16,653 |
| 675050 | 23 | 75,642 | 88,009 | 99,961 | 111,914 | 123,866 | 135,818 | 23,905 | 11,952 | 23,905 |
| 675050 | 24 | 43,851 | 57,136 | 70,422 | 83,708 | 96,994 | 110,280 | 26,572 | 13,286 | 26,572 |
| 675110 | 26 | 750,025 | 877,180 | 1,004,972 | 1,133,103 | 1,261,991 | 1,391,066 | 260,635 | 130,103 | 260,635 |
| 675650 | 24 | 98,089 | 121,767 | 135,002 | 160,522 | 167,441 | 170,490 | -13,570 | 17,547 | 36,679 |
| 680110 |  | 3,542,115 | 4,143,091 | 4,745,216 | 5,348,251 | 5,964,354 | 6,582,179 | 1,235,574 | 617,280 | 1,235,574 |
| 680120 |  | -139,201 | -162,554 | -186,015 | -209,535 | -233,080 | -256,632 | -47,218 | -23,607 | -47,218 |

## Description

 Discounts Available Discounts LostElectricity WT
ab Supplies WT
Merger Transactional Costs Office \& Admin Supplies WT Office \& Admin Supplies TD Overnight Shipping WT Overnight Shipping TD
Overnight Shipping AG Penalties Nondeduct Add'I Security Costs AG Software Licenses \& Support
Telephone TD Telephone TD
Cell Phone WT $c$ Trash Removal SS Trustee Fees AG Uniforms WT

Uniforms TD
Wtr \& Waste Wtr Exp SS PCard Undistributed Mat and Sup Maint SS Mat and Sup Maint WT Mat and Sup Maint TD
Mat and Sup Maint AG Contr Svc-Other Maint AG Misc Maint SS Misc Maint
Misc Maint TD Misc Maint TD Mains
Misc Maint TD Hydrants
Misc Maint AG
Amort Def Maint WT
Amort Def Maint TD
Maint Exp ARO/Net Neg Sal AG
Paving/Backfill TD
Depr Exp-General
Depr Exp-Amort CIAC Tax


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Kentucky American Water Company Case No. 2009-00036 Response to PSC DR1, Item 28
Trial Balance

Description
Depr Exp-Amort CIAC Non Tax Depr Exp-Amort CIAC Non Tax Amort-Reg Asset AFUDC Amort-Prop Losses Amort-Reg Asset Utility Reg Assessment Fee Property Taxes FUTA FICA

SUTA
Gross Receipts Tax
SIT-Current
SIT-PrYr Adj Over Accr
Def SIT-PY Adj Liab
Def SIT-Reg Asset Def SIT-Reg Liab

FIT-Current
FIT-PrYr Adj Over Accr
Def FIT-PY Adj Liab
Def FIT-Reg Asset
Def FIT-Reg Liab
 ITC Restored - 4\% AFUDC - Equity M\&J Revenues-Outside M\&J Expenses-Outside M\&J Expenses-Inside Amort UPAA


## Donations Deduct

 Other Income Deductions Other Lobbying Expenses Non-Op Empl Exp Deduct SIT-Other Inc \& Ded Curr FIT-Oth Inc \& Ded-curr int LTD-Outside Reg AW46 Int LTD-Inside AW46 Amort PS Exp w/ mandatory Amort Debt Disc \& Exp 97MV әp!sul dxヨa łouv 97MV AW46 Interest STD InsideOther Interest Expense



| ACCOUNT | SUB | GL DATE | DESCRIPTION | DOC TYPE | DOC\# ${ }^{\text {E }}$ - EXPLANATION | AMOUNT |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 501210 | 2415 | 6/4/2009 | Labor NS OT TD Dist Res | T2 | 33506 Payroll Labor Distribution | 227.10 |
| 501210 | 1415 | 6/4/2009 | Labor NS OT TD Lines | T2 | 33506 Payroll Labor Distribution | 254.19 |
| 501210 | 2430 | 6/4/2009 | Labor NS OT TD Services | T2 | 33506 Payroll Labor Distribution | 341.33 |
| 501210 | 1420 | 6/4/2009 | Labor NS OT TD Meter | T2 | 33506 Payroll Labor Distribution | 452.20 |
| 501210 | 1510 | 6/4/2009 | Labor NS OT CA Mtr Read | T2 | 33506 Payroll Labor Distribution | 535.55 |
| 501210 | 2420 | 6/4/2009 | Labor NS OT TD Mains | T2 | 33506 Payroll Labor Distribution | 654.69 |
| 501210 | 1305 | 6/4/2009 | Labor NS OT WT Super/Eng | T2 | 33506 Payroll Labor Distribution | 1,450.42 |
| 501210 | 13 | 6/4/2009 | Labor NS OT WT | T2 | 33506 Payroll Labor Distribution | 7,282.71 |
| 501711 |  | 6/4/2009 | IP-Off-Annual-P/R JE | T3 | 33507 Actual Burden Journal Entries | 10,649.22 |
| 504100 | 1 | 6/4/2009 | Group Insurance - Cap Credits | T1 | 33505 Payroll Disbursement Entries | -58,279.97 |
| 504100 | 16 | 6/4/2009 | Group Ins Oper AG | T1 | 33505 Payroll Disbursement Entries | -8,889.67 |
| 504100 | 16 | 6/4/2009 | Group Ins Oper AG | T3 | 33507 Actual Burden Journal Entries | 2,155.65 |
| 504100 | 1 | 6/4/2009 | Group Insurance - Cap Credits | T3 | 33507 Actual Burden Journal Entries | 47,939.45 |
| 504620 | 16 | 6/4/2009 | Employee Physical Exam AG | CC | 5989 NEW HORIZONS MEDICAL CENT | 66.00 |
| 505100 | 1 | 6/4/2009 | PBOP Cap Credits | T1 | 33505 Payroll Disbursement Entries | -38,484.47 |
| 505100 | 1 | 6/4/2009 | PBOP Cap Credits | T3 | 33507 Actual Burden Journal Entries | 32,619.38 |
| 506100 | 1 | 6/4/2009 | Pension - Cap Credits | T1 | 33505 Payroll Disbursement Entries | -54,085.56 |
| 506100 | 1 | 6/4/2009 | Pension - Cap Credits | T3 | 33507 Actual Burden Journal Entries | 46,117.37 |
| 507100 | 16 | 6/4/2009 | 401k Oper AG | T3 | 33507 Actual Burden Journal Entries | 4,641.19 |
| 508101 | 16 | 6/4/2009 | DCP Oper AG | T3 | 33507 Actual Burden Journal Entries | 3,642.69 |
| 508102 | 16 | 6/4/2009 | Retiree Med Oper AG | T3 | 33507 Actual Burden Journal Entries | 713.21 |
| 515100 | 12 | 6/4/2009 | Purch Power P | EE | 3772105 KENTUCKY UTILITIES COMPANY | 853.44 |
| 515100 | 13 | 6/4/2009 | Purch Power WT | EE | 3772115 KENTUCKY UTILITIES COMPANY | 24,177.97 |
| 515100 | 14 | 6/4/2009 | Purch Power TD | EE | 3772556 KENTUCKY UTILITIES COMPANY | 22.10 |
| 520100 | 16 | 6/4/2009 | M \& S Oper AG | CC | 5989 LYNN IMAGING FRONT COUNTE | 15.06 |
| 520100 | 14 | 6/4/2009 | M \& S Oper TD | CC | 5989 WW GRAINGER | 606.29 |
| 520100 | 13 | 6/4/2009 | M \& S Oper WT | CC | 5989 HACH COMPANY | 928.47 |
| 533000 | 16 | 6/4/2009 | Contr Svc-Legal Oper AG | PV | 42241424 Stoll Keenon Ogden PLLC-PO/REM | 3,735.09 |
| 533000 | 16 | 6/4/2009 | Contr Svc-Legal Oper AG | PV | 42241434 Stoll Keenon Ogden PLLC-PO/REM | 23,263.17 |
| 535000 | 16 | 6/4/2009 | Contr Svc-Other Oper AG | CC | 5989 THE EVERGREEN GROUP | 1,287.98 |
| 535000 | 14 | 6/4/2009 | Contr Svc-Other Oper TD | PV | 42241302 Kentucky Underground Protectio | 2,981.12 |
| 535000 | 13 | 6/4/2009 | Contr Svc-Other Oper WT | PV | 42241484 Leak Eliminators LLC | 2,700.00 |
| 535000 | 13 | 6/4/2009 | Contr Svc-Other Oper WT | PV | 42241508 Stephen Hillenmeyer Landscape | 2,576.00 |
| 535000 | 14 | 6/4/2009 | Contr Svc-Other Oper TD | PV | 42241514 Volt Services Group | 117.16 |
| 535000 | 13 | 6/4/2009 | Contr Svc-Other Oper WT | PV | 42241514 Volt Services Group | 937.30 |
| 536000 | 13 | 6/4/2009 | Contr Svc-Lab Testing Oper WT | PV | 42241497 Fouser Environmental Services | 387.00 |
| 536000 | 13 | 6/4/2009 | Contr Svc-Lab Testing Oper WT | PV | 42241501 Fouser Environmental Services | 541.00 |
| 536000 | 13 | 6/4/2009 | Contr Svc-Lab Testing Oper WT | PV | 42241503 Fouser Environmental Services | 179.50 |
| 541400 | 16 | 6/4/2009 | Rents-Equipment Oper AG | CC | 5989 LASER IMAGES PRINT MANAGE | 116.60 |
| 550000 | 16 | 6/4/2009 | Trans Oper AG | CC | 5989 SHELL OIL | 142.89 |
| 550000 | 1 | 6/4/2009 | Trans - Cap Credits | T1 | 33505 Payroll Disbursement Entries | -24,538.93 |
| 550000 | 1 | 6/4/2009 | Trans - Cap Credits | T3 | 33507 Actual Burden Journal Entries | 20,184.87 |
| 558000 | 1 | 6/4/2009 | Ins Work Comp Cap Credits | T1 | 33505 Payroll Disbursement Entries | -6,134.75 |
| 558000 | 1 | 6/4/2009 | Ins Work Comp Cap Credits | T3 | 33507 Actual Burden Journal Entries | 5,046.27 |
| 568010 | 16 | 6/4/2009 | Water Res Conservation | PV | 42241453 WUKY Radio Station | 5,000.00 |
| 570100 | 15 | 6/4/2009 | Uncollectible Accounts | JE | 30885350 KY CIS POST GL BATCH | -389.45 |
| 575000 | 13 | 6/4/2009 | Misc Oper WT | CC | 5989 RIO GRANDE FENCE CO | 679.61 |
| 575000 | 14 | 6/4/2009 | Misc Oper TD | CC | 5989 NATIONAL WORKWEAR INC | 1,253.83 |
| 575000 | 16 | 6/4/2009 | Misc Oper AG | OV | 10267658 US Pipe \& Foundry Co LLC - PO | 67.64 |
| 575000 | 14 | 6/4/2009 | Misc Oper TD | TC | 30884994 AT\&T | 47.58 |
| 575002 | 16 | 6/4/2009 | Misc General Office | CC | 5999 FTD DEBBIE'S HUNTER'S | 74.15 |
| 575030 | 16 | 6/4/2009 | Advertising | CC | 5999 KROGER | 150.00 |
| 575130 | 16 | 6/4/2009 | Brochures and Handouts | PV | 42241438 Windrunner Advertising | 55.00 |
| 575220 | 16 | 6/4/2009 | Community Relations | PV | 42241442 Big Brothers/Big Sisters(Blueg | 4,000.00 |
| 575240 | 16 | 6/4/2009 | Co Dues/Membership Deduct | CC | 5989 KY BOARD OF ENGINEERS | 150.00 |
| 575280 | 16 | 6/4/2009 | Dues/Membership Deduct | PV | 42241460 Kentucky World Trade Center | 675.00 |
| 575320 | 13 | 6/4/2009 | Electricity WT | EE | 3772107 KENTUCKY UTILITIES COMPANY | 577.75 |
| 575340 | 16 | 6/4/2009 | Employee Expenses AG | CC | 5989 AMEXFEE | 588.60 |
| 575340 | 16 | 6/4/2009 | Employee Expenses AG | T3 | 33507 Actual Burden Journal Entries | 16.00 |
| 575350 | 16 | 6/4/2009 | Meals Deduct | CC | 5989 ELK CREEK VINEYARD | 242.47 |
| 575480 | 14 | 6/4/2009 | Heat - Oil/Gas TD | EE | 3774690 COLUMBIA GAS OF KENTUCKY | 1,150.28 |
| 575480 | 16 | 6/4/2009 | Heat - Oil/Gas AG | EE | 3774692 COLUMBIA GAS OF KENTUCKY | 317.45 |
| 575545 | 13 | 6/4/2009 | Lab Supplies WT | CC | 5989 VWR INTERNATIONAL INC | 276.25 |
| 575545 | 13 | 6/4/2009 | Lab Supplies WT | PV | 42241490 LabChem Inc | 414.56 |
| 575620 | 16 | 6/4/2009 | Office \& Admin Supplies AG | CC | 5989 OFFICEMAX CT IN | 140.29 |
| 575620 | 14 | 6/4/2009 | Office \& Admin Supplies TD | CC | 5989 OFFICEMAX CT IN | 1,328.00 |
| 575740 | 16 | 6/4/2009 | Telephone AG | TC | 30884944 Local Insight YP | 108.16 |
| 575780 | 16 | 6/4/2009 | Trash Removal AG | PV | 42241389 Allied Waste Services \#993 | 186.76 |
| 575780 | 11 | 6/4/2009 | Trash Removal SS | PV | 42241492 Allied Waste Services \#993 | 10.64 |
| 575820 | 14 | 6/4/2009 | Uniforms TD | CC | 5989 UFIRST LAUNDRY SVCS | 61.62 |
| 575820 | 13 | 6/4/2009 | Uniforms WT | CC | 5989 UFIRST LAUNDRY SVCS | 135.05 |
| 575998 | 16 | 6/4/2009 | PCard Undistributed | CC | 5989 J CARINOS 902 | 55.13 |
| 620000 | 24 | 6/4/2009 | Mat and Sup Maint TD | CC | 5989 USA BLUE BOOK | 262.38 |
| 620000 | 23 | 6/4/2009 | Mat and Sup Maint WT | CC | 5989 GROTT LOCKSMITH CENTER | 773.98 |
| 620000 | 21 | 6/4/2009 | Mat and Sup Maint SS | CC | 5989 LOWES | 1,151.37 |
| 620000 | 24 | 6/4/2009 | Mat and Sup Maint TD | OV | 10267661 Powerseal Pipeline Products Co | 2,584.58 |
| 620000 | 21 | 6/4/2009 | Mat and Sup Maint SS | PV | 42241468 Bryants Sheet Metal Inc | 212.00 |
| 620000 | 23 | 6/4/2009 | Mat and Sup Maint WT | PV | 42241473 Crane America Services-REMIT | 1,200.00 |
| 635000 | 26 | 6/4/2009 | Contr Svc-Other Maint AG | CC | 5989 UFIRST LAUNDRY SVCS | 70.04 |
| 635000 | 26 | 6/4/2009 | Contr Svc-Other Maint AG | PV | 42241397 Stephen Hillenmeyer Landscape | 1,135.84 |
| 635000 | 26 | 6/4/2009 | Contr Svc-Other Maint AG | PV | 42241399 TruGreen Chemlawn-PO/REMIT | 672.00 |
| 635000 | 26 | 6/4/2009 | Contr Svc-Other Maint AG | PV | 42241401 Orkin Exterminating Co - Lexin | 53.46 |
| 675000 | 24 | 6/4/2009 | Misc Maint TD | PV | 42241294 Scott Gross Co Inc | 699.60 |
| 675000 | 26 | 6/4/2009 | Misc Maint AG | PV | 42241392 Perfection Services-PO/REMIT | 891.10 |


| ACCOUNT | SUB | GL DATE | DESCRIPTION | DOC TYPE | DOC\# ${ }^{\text {E }}$ - EXPLANATION | AMOUNT |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 675000 | 26 | 6/4/2009 | Misc Maint AG | PV | 42241396 Perfection Services-PO/REMIT | 867.00 |
| 685320 |  | 6/4/2009 | FUTA | T3 | 33507 Actual Burden Journal Entries | 20.31 |
| 685325 |  | 6/4/2009 | FICA | T3 | 33507 Actual Burden Journal Entries | 19,288.30 |
| 685350 |  | 6/4/2009 | SUTA | T3 | 33507 Actual Burden Journal Entries | 36.24 |
| 716121 |  | 6/4/2009 | M\&J Expenses-Outside | CC | 5989 APPLIED IND TECH | 1,705.30 |
| 716121 |  | 6/4/2009 | M\&J Expenses-Outside | T2 | 33506 Payroll Labor Distribution | 3,713.95 |
| 716121 |  | 6/4/2009 | M\&J Expenses-Outside | T3 | 33507 Actual Burden Journal Entries | 2,071.34 |
| 760100 |  | 6/4/2009 | Donations Deduct | CC | 5999 DOWNTOWN LEXINGTON CORPOR | 750.00 |
| 760200 |  | 6/4/2009 | Other Income Deductions | PS | 42241319 Bluegrass Inst for Pub Policy | 500.00 |
| 760200 |  | 6/4/2009 | Other Income Deductions | PS | 42241320 KY TN Section - AWWA | 2,000.00 |
| 760400 |  | 6/4/2009 | Other Lobbying Expenses | PV | 42241279 McCarthy Strategic Solutions L | 4,005.72 |
| 401110 |  | 6/5/2009 | Res Sales Billed | JE | 30885542 KY CIS POST GL BATCH | -106,149.19 |
| 401210 |  | 6/5/2009 | Com Sales Billed | JE | 30885542 KY CIS POST GL BATCH | -138,506.09 |
| 401310 |  | 6/5/2009 | Ind Sales Billed | JE | 30885542 KY CIS POST GL BATCH | -54,930.29 |
| 401450 |  | 6/5/2009 | Priv Fire Billed | JE | 30885542 KY CIS POST GL BATCH | -611.35 |
| 401510 |  | 6/5/2009 | Pub Auth Billed | JE | 30885542 KY CIS POST GL BATCH | -189,702.14 |
| 401610 |  | 6/5/2009 | SFR Billed | JE | 30885542 KY CIS POST GL BATCH | -84,091.99 |
| 402110 |  | 6/5/2009 | Dom WW Serv Billed | JE | 30885542 KY CIS POST GL BATCH | -14.53 |
| 403104 |  | 6/5/2009 | Oth Rev-NSF Check Charge | JE | 30885542 KY CIS POST GL BATCH | -96.00 |
| 403105 |  | 6/5/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30885542 KY CIS POST GL BATCH | -2,132.00 |
| 403107 |  | 6/5/2009 | Oth Rev-Reconnection Charges | JE | 30885542 KY CIS POST GL BATCH | -3,068.00 |
| 504610 | 16 | 6/5/2009 | Employee Awards AG | PV | 42242170 Tharpe Company Inc-REMIT | 214.56 |
| 504620 | 16 | 6/5/2009 | Employee Physical Exam AG | PV | 42242171 New Lexington Clinic | 38.00 |
| 510100 | 11 | 6/5/2009 | Purchased Water-Outside | PV | 42242036 Gallatin County Water District | 758.91 |
| 510100 | 11 | 6/5/2009 | Purchased Water-Outside | PV | 42242038 Carroll Co Water Dist 1 | 2,547.27 |
| 510100 | 11 | 6/5/2009 | Purchased Water-Outside | PV | 42242066 Georgetown Municipal Water \& S | 9.33 |
| 510100 | 11 | 6/5/2009 | Purchased Water-Outside | PV | 42242147 Georgetown Municipal Water \& S | 9.33 |
| 515100 | 13 | 6/5/2009 | Purch Power WT | PS | 42242519 Kentucky Department of Revenue | 2,335.82 |
| 520100 | 14 | 6/5/2009 | M \& S Oper TD | PV | 42242149 Cobb, Rodney | 243.80 |
| 520100 | 14 | 6/5/2009 | M \& S Oper TD | PV | 42242158 USA Blue Book | 1,064.85 |
| 520100 | 14 | 6/5/2009 | M \& S Oper TD | PV | 42242161 USA Blue Book | 325.83 |
| 535000 | 14 | 6/5/2009 | Contr Svc-Other Oper TD | PV | 42242149 Cobb, Rodney | 336.00 |
| 535000 | 14 | 6/5/2009 | Contr Svc-Other Oper TD | PV | 42242151 Cobb, Rodney | 689.00 |
| 535000 | 13 | 6/5/2009 | Contr Svc-Other Oper WT | PV | 42242167 Lexington Tree Service Inc-PO/ | 1,452.00 |
| 570100 | 15 | 6/5/2009 | Uncollectible Accounts | JE | 30885542 KY CIS POST GL BATCH | -423.71 |
| 575000 | 16 | 6/5/2009 | Misc Oper AG | PV | 42242173 US Pipe \& Foundry Co - REMIT | 6.42 |
| 575002 | 16 | 6/5/2009 | Misc General Office | ST | 30885316 SABRIX NO TAX CHARGED ACR | 15.90 |
| 575100 | 15 | 6/5/2009 | Bank Service Charges CA | PV | 42242381 Mellon Bank NA - LOCKBOX - ACH | 9,268.48 |
| 575275 | 16 | 6/5/2009 | Discounts Available | PK | 62056072 USA Blue Book | -13.21 |
| 575275 | 16 | 6/5/2009 | Discounts Available | PK | 62056073 US Pipe \& Foundry Co - REMIT | -353.23 |
| 575320 | 14 | 6/5/2009 | Electricity TD | EE | 3776740 KENTUCKY UTILITIES COMPANY | 62.38 |
| 575500 | 16 | 6/5/2009 | Janitorial AG | PV | 42242057 Cobb, Rodney | 399.00 |
| 575545 | 13 | 6/5/2009 | Lab Supplies WT | ST | 30885316 SABRIX NO TAX CHARGED ACR | 24.87 |
| 575545 | 13 | 6/5/2009 | Lab Supplies WT | PV | 42242168 LabChem Inc | 121.14 |
| 575625 | 16 | 6/5/2009 | Overnight Shipping AG | PV | 42242059 United Parcel Service | 25.49 |
| 575625 | 16 | 6/5/2009 | Overnight Shipping AG | PV | 42242060 United Parcel Service | 31.15 |
| 575625 | 16 | 6/5/2009 | Overnight Shipping AG | PV | 42242063 United Parcel Service | 2.09 |
| 575715 | 16 | 6/5/2009 | Software Licenses \& Support | PV | 42242014 Synergis Tech Inc | 3,512.09 |
| 575830 | 11 | 6/5/2009 | Wtr \& Waste Wtr Exp SS | PV | 42242164 Kentucky American Water | 1,484.42 |
| 620000 | 23 | 6/5/2009 | Mat and Sup Maint WT | ST | 30885316 SABRIX NO TAX CHARGED ACR | 72.00 |
| 760200 |  | 6/5/2009 | Other Income Deductions | PS | 42242087 Southland Association Inc | 1,000.00 |
| 520100 | 14 | 6/6/2009 | M \& S Oper TD | ST | 30885511 SABRIX NO TAX CHARGED ACR | 19.55 |
| 575545 | 13 | 6/6/2009 | Lab Supplies WT | ST | 30885511 SABRIX NO TAX CHARGED ACR | 7.27 |
| 401110 |  | 6/8/2009 | Res Sales Billed | JE | 30885711 KY CIS POST GL BATCH | -143,906.37 |
| 401210 |  | 6/8/2009 | Com Sales Billed | JE | 30885711 KY CIS POST GL BATCH | -63,630.86 |
| 401310 |  | 6/8/2009 | Ind Sales Billed | JE | 30885711 KY CIS POST GL BATCH | -1,096.51 |
| 401510 |  | 6/8/2009 | Pub Auth Billed | JE | 30885711 KY CIS POST GL BATCH | -5,806.39 |
| 401710 |  | 6/8/2009 | Misc Sales Billed | JE | 30885711 KY CIS POST GL BATCH | -1,970.16 |
| 402110 |  | 6/8/2009 | Dom WW Serv Billed | JE | 30885711 KY CIS POST GL BATCH | -13,689.33 |
| 402210 |  | 6/8/2009 | Com WW Serv Billed | JE | 30885711 KY CIS POST GL BATCH | -7,773.13 |
| 402510 |  | 6/8/2009 | Pub Auth WW Svc Billed | JE | 30885711 KY CIS POST GL BATCH | -260.59 |
| 403104 |  | 6/8/2009 | Oth Rev-NSF Check Charge | JE | 30885711 KY CIS POST GL BATCH | -120.00 |
| 403105 |  | 6/8/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30885711 KY CIS POST GL BATCH | -3,692.00 |
| 403107 |  | 6/8/2009 | Oth Rev-Reconnection Charges | JE | 30885711 KY CIS POST GL BATCH | -6,136.00 |
| 504660 | 16 | 6/8/2009 | Tuition Aid AG | PS | 42244302 Indiana Wesleyan University | 660.00 |
| 515100 | 14 | 6/8/2009 | Purch Power TD | EE | 3777261 OWEN ELECTRIC COOP INC | 14.05 |
| 515100 | 12 | 6/8/2009 | Purch Power P | EE | 3777365 KENTUCKY UTILITIES COMPANY | 2,501.84 |
| 535000 | 15 | 6/8/2009 | Contr Svc-Other Oper CA | PV | 42242826 Volt Services Group | 670.04 |
| 535000 | 15 | 6/8/2009 | Contr Svc-Other Oper CA | PV | 42242829 Volt Services Group | 624.00 |
| 535000 | 15 | 6/8/2009 | Contr Svc-Other Oper CA | PV | 42242832 Volt Services Group | 624.00 |
| 535000 | 15 | 6/8/2009 | Contr Svc-Other Oper CA | PV | 42242881 Volt Services Group | 624.00 |
| 535000 | 15 | 6/8/2009 | Contr Svc-Other Oper CA | PV | 42243025 Volt Services Group | 624.00 |
| 535000 | 15 | 6/8/2009 | Contr Svc-Other Oper CA | PV | 42243042 Volt Services Group | 566.19 |
| 535000 | 15 | 6/8/2009 | Contr Svc-Other Oper CA | PV | 42243068 Volt Services Group | 1,132.38 |
| 535000 | 15 | 6/8/2009 | Contr Svc-Other Oper CA | PV | 42243141 Tebco Inc-REMIT | 300.00 |
| 570100 | 15 | 6/8/2009 | Uncollectible Accounts | JE | 30885711 KY CIS POST GL BATCH | -228.36 |
| 575000 | 14 | 6/8/2009 | Misc Oper TD | PV | 42243127 Tebco Inc-REMIT | 59.47 |
| 575000 | 14 | 6/8/2009 | Misc Oper TD | PV | 42243141 Tebco Inc-REMIT | 670.30 |
| 575000 | 16 | 6/8/2009 | Misc Oper AG | PV | 42243627 Backtrack Employment Screening | 333.00 |
| 575200 | 15 | 6/8/2009 | Collection Agencies CA | RI | 10128454 Penn Credit Corp | -148.34 |
| 575320 | 14 | 6/8/2009 | Electricity TD | EE | 3777354 KENTUCKY UTILITIES COMPANY | 17.85 |
| 575320 | 14 | 6/8/2009 | Electricity TD | EE | 3777359 KENTUCKY UTILITIES COMPANY | 12.29 |
| 575625 | 16 | 6/8/2009 | Overnight Shipping AG | PV | 42242795 United Parcel Service | 182.19 |
| 620000 | 24 | 6/8/2009 | Mat and Sup Maint TD | PV | 42243030 Ogden Enterprises | 740.00 |


| ACCOUNT | SUB | GL DATE | DESCRIPTION | DOC TYPE | DOC\# | EXPLANATION | AMOUNT |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 675000 | 24 | 6/8/2009 | Misc Maint TD | PV | 42243124 | Tebco Inc-REMIT | 160.52 |
| 675000 | 24 | 6/8/2009 | Misc Maint TD | PV | 42243127 | Tebco Inc-REMIT | 180.00 |
| 675650 | 24 | 6/8/2009 | Paving/Backfill TD | PV | 42242802 | HG Wilson \& Sons Contractors 1 | 1,743.20 |
| 760200 |  | 6/8/2009 | Other Income Deductions | PS | 42235980 | Brown, Earl P | -500.00 |
| 401110 |  | 6/9/2009 | Res Sales Billed | JE | 30885837 | KY CIS POST GL BATCH | -89,147.98 |
| 401210 |  | 6/9/2009 | Com Sales Billed | JE | 30885837 | KY CIS POST GL BATCH | -31,892.96 |
| 401310 |  | 6/9/2009 | Ind Sales Billed | JE | 30885837 | KY CIS POST GL BATCH | -1,195.69 |
| 401410 |  | 6/9/2009 | Pub Fire Billed | JE | 30885837 | KY CIS POST GL BATCH | -6,043.05 |
| 401450 |  | 6/9/2009 | Priv Fire Billed | JE | 30885837 | KY CIS POST GL BATCH | -126,110.38 |
| 401510 |  | 6/9/2009 | Pub Auth Billed | JE | 30885837 | KY CIS POST GL BATCH | -2,522.36 |
| 402110 |  | 6/9/2009 | Dom WW Serv Billed | JE | 30885837 | KY CIS POST GL BATCH | -25.09 |
| 403104 |  | 6/9/2009 | Oth Rev-NSF Check Charge | JE | 30885837 | KY CIS POST GL BATCH | -180.00 |
| 403105 |  | 6/9/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30885837 | KY CIS POST GL BATCH | -2,184.00 |
| 403107 |  | 6/9/2009 | Oth Rev-Reconnection Charges | JE | 30885837 | KY CIS POST GL BATCH | -3,224.00 |
| 403199 |  | 6/9/2009 | Oth Rev-Other Water Rev | PS | 42244982 | Kentucky Department of Revenue | -737.91 |
| 504610 | 16 | 6/9/2009 | Employee Awards AG | PV | 42244675 | Tharpe Company Inc-REMIT | 331.88 |
| 504620 | 16 | 6/9/2009 | Employee Physical Exam AG | PV | 42244679 | BaptistWorx Business Office | 30.00 |
| 504620 | 16 | 6/9/2009 | Employee Physical Exam AG | PV | 42244684 | BaptistWorx Business Office | 140.00 |
| 515100 | 13 | 6/9/2009 | Purch Power WT | EE | 3780109 | KENTUCKY UTILITIES COMPANY | 4,072.61 |
| 515100 | 14 | 6/9/2009 | Purch Power TD | EE | 3780114 | KENTUCKY UTILITIES COMPANY | 78.82 |
| 515100 | 12 | 6/9/2009 | Purch Power P | PS | 42244982 | Kentucky Department of Revenue | 934.33 |
| 515100 | 13 | 6/9/2009 | Purch Power WT | PS | 42244982 | Kentucky Department of Revenue | 3,737.33 |
| 535000 | 16 | 6/9/2009 | Contr Svc-Other Oper AG | TC | 30885630 | INSIGHT | 192.91 |
| 535000 | 15 | 6/9/2009 | Contr Svc-Other Oper CA | TC | 30885672 | Language Line Services | 1,784.46 |
| 535000 | 13 | 6/9/2009 | Contr Svc-Other Oper WT | PV | 42244947 | Barnstead International | 169.03 |
| 550000 | 16 | 6/9/2009 | Trans Oper AG | PV | 42244667 | Bridgestone Americas Inc | 634.46 |
| 550000 | 16 | 6/9/2009 | Trans Oper AG | PS | 42244842 | Horton, Beverly Petty Cash | 2.90 |
| 568010 | 16 | 6/9/2009 | Water Res Conservation | PV | 42244632 | Lamar Companies The -REMIT | 6,510.00 |
| 570100 | 15 | 6/9/2009 | Uncollectible Accounts | JE | 30885837 | KY CIS POST GL BATCH | -254.98 |
| 575000 | 14 | 6/9/2009 | Misc Oper TD | ST | 30885680 | SABRIX VENDOR TAX COMPARE | . 15 |
| 575000 | 16 | 6/9/2009 | Misc Oper AG | PS | 42244842 | Horton, Beverly Petty Cash | 18.57 |
| 575000 | 16 | 6/9/2009 | Misc Oper AG | PV | 42244945 | Backtrack Employment Screening | 167.00 |
| 575350 | 16 | 6/9/2009 | Meals Deduct | PS | 42244842 | Horton, Beverly Petty Cash | 21.36 |
| 575711 | 16 | 6/9/2009 | Add'l Security Costs AG | PV | 42244623 | Murray Guard Inc-PO/REMIT | 715.20 |
| 575711 | 16 | 6/9/2009 | Add'l Security Costs AG | PV | 42244627 | Murray Guard Inc-PO/REMIT | 2,668.64 |
| 575711 | 16 | 6/9/2009 | Add'l Security Costs AG | PV | 42244629 | Murray Guard Inc-PO/REMIT | 2,668.64 |
| 575740 | 15 | 6/9/2009 | Telephone CA | TC | 30885617 | Windstream | 67.74 |
| 575740 | 15 | 6/9/2009 | Telephone CA | TC | 30885618 | Windstream | 49.26 |
| 575741 | 13 | 6/9/2009 | Cell Phone WT | TC | 30885608 | Cingular Wireless | 69.80 |
| 575741 | 16 | 6/9/2009 | Cell Phone AG | TC | 30885608 | Cingular Wireless | 254.35 |
| 620000 | 24 | 6/9/2009 | Mat and Sup Maint TD | IR | 538734 | Inventory Return | -378.60 |
| 620000 | 24 | 6/9/2009 | Mat and Sup Maint TD | IR | 538735 | Inventory Return | -43.38 |
| 620000 | 24 | 6/9/2009 | Mat and Sup Maint TD | IR | 538736 | Inventory Return | -676.77 |
| 620000 | 24 | 6/9/2009 | Mat and Sup Maint TD | IR | 538737 | Inventory Return | -254.61 |
| 620000 | 24 | 6/9/2009 | Mat and Sup Maint TD | IR | 538738 | Inventory Return | -7.24 |
| 620000 | 23 | 6/9/2009 | Mat and Sup Maint WT | PV | 42244949 | Airgas Mid America-REMIT | 103.95 |
| 635000 | 26 | 6/9/2009 | Contr Svc-Other Maint AG | PV | 42244665 | Orkin Exterminating Co - Lexin | 50.98 |
| 716121 |  | 6/9/2009 | M\&J Expenses-Outside | II | 538743 | Inventory Issue-Stk E \& D | 43.38 |
| 401110 |  | 6/10/2009 | Res Sales Billed | JE | 30886053 | KY CIS POST GL BATCH | -111,710.06 |
| 401210 |  | 6/10/2009 | Com Sales Billed | JE | 30886053 | KY CIS POST GL BATCH | -53,083.01 |
| 401310 |  | 6/10/2009 | Ind Sales Billed | JE | 30886053 | KY CIS POST GL BATCH | -6,936.75 |
| 401510 |  | 6/10/2009 | Pub Auth Billed | JE | 30886053 | KY CIS POST GL BATCH | -4,412.21 |
| 401610 |  | 6/10/2009 | SFR B Billed | JE | 30886053 | KY CIS POST GL BATCH | -557.28 |
| 401710 |  | 6/10/2009 | Misc Sales Billed | JE | 30886053 | KY CIS POST GL BATCH | -1.96 |
| 402210 |  | 6/10/2009 | Com WW Serv Billed | JE | 30886053 | KY CIS POST GL BATCH | -1,578.62 |
| 402310 |  | 6/10/2009 | Ind WW Serv Billed | RI | 10128566 |  | -500.00 |
| 403104 |  | 6/10/2009 | Oth Rev-NSF Check Charge | JE | 30886053 | KY CIS POST GL BATCH | -132.00 |
| 403105 |  | 6/10/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30886053 | KY CIS POST GL BATCH | -2,652.00 |
| 403107 |  | 6/10/2009 | Oth Rev-Reconnection Charges | JE | 30886053 | KY CIS POST GL BATCH | -2,912.00 |
| 515100 | 12 | 6/10/2009 | Purch Power P | EE | 3782155 | CLARK ENERGY COOP | 888.07 |
| 535000 | 16 | 6/10/2009 | Contr Svc-Other Oper AG | PV | 42245484 | Happy's General Contracting- R | 110.00 |
| 535000 | 16 | 6/10/2009 | Contr Svc-Other Oper AG | PV | 42245485 | Happy's General Contracting- R | 90.00 |
| 550000 | 16 | 6/10/2009 | Trans Oper AG | ST | 30885759 | SABRIX VENDOR TAX COMPARE | 7.26 |
| 570100 | 15 | 6/10/2009 | Uncollectible Accounts | JE | 30886053 | KY CIS POST GL BATCH | -114.84 |
| 575000 | 14 | 6/10/2009 | Misc Oper TD | PV | 42245486 | Grainger - ALL USE REMIT | 576.37 |
| 575000 | 14 | 6/10/2009 | Misc Oper TD | PV | 42245487 | Grainger - ALL USE REMIT | 54.91 |
| 575275 | 16 | 6/10/2009 | Discounts Available | PK | 62056116 | JCM Industries Inc - REMIT | -16.47 |
| 575625 | 16 | 6/10/2009 | Overnight Shipping AG | PV | 42245483 | United Parcel Service | 122.93 |
| 620000 | 24 | 6/10/2009 | Mat and Sup Maint TD | IR | 538930 | Inventory Return | -82.60 |
| 620000 | 24 | 6/10/2009 | Mat and Sup Maint TD | PV | 42245488 | Ferguson SAC - ALL USE REMIT | 1,378.05 |
| 716121 |  | 6/10/2009 | M\&J Expenses-Outside | 11 | 538931 | Inventory Issue-Stk E \& D | 82.60 |
| 401110 |  | 6/11/2009 | Res Sales Billed | JE | 30886112 | KY CIS POST GL BATCH | -181,253.81 |
| 401210 |  | 6/11/2009 | Com Sales Billed | JE | 30886112 | KY CIS POST GL BATCH | -50,790.78 |
| 401510 |  | 6/11/2009 | Pub Auth Billed | JE | 30886112 | KY CIS POST GL BATCH | -426.98 |
| 402110 |  | 6/11/2009 | Dom WW Serv Billed | JE | 30886112 | KY CIS POST GL BATCH | -137.42 |
| 402210 |  | 6/11/2009 | Com WW Serv Billed | JE | 30886112 | KY CIS POST GL BATCH | -59.80 |
| 403104 |  | 6/11/2009 | Oth Rev-NSF Check Charge | JE | 30886112 | KY CIS POST GL BATCH | -60.00 |
| 403105 |  | 6/11/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30886112 | KY CIS POST GL BATCH | -3,224.00 |
| 403107 |  | 6/11/2009 | Oth Rev-Reconnection Charges | JE | 30886112 | KY CIS POST GL BATCH | -3,276.00 |
| 515100 | 14 | 6/11/2009 | Purch Power TD | EE | 3784176 | OWEN ELECTRIC COOP INC | 17.57 |
| 515100 | 13 | 6/11/2009 | Purch Power WT | EE | 3784179 | OWEN ELECTRIC COOP INC | 6,232.50 |
| 515100 | 13 | 6/11/2009 | Purch Power WT | EE | 3784184 | OWEN ELECTRIC COOP INC | 9.84 |
| 515100 | 14 | 6/11/2009 | Purch Power TD | EE | 3784410 | KENTUCKY UTILITIES COMPANY | 119.04 |
| 515100 | 14 | 6/11/2009 | Purch Power TD | EE | 3784437 | KENTUCKY UTILITIES COMPANY | 31.91 |




| ACCOUNT | SUB | GL DATE $\quad$ DESCRIPTION | DOC TYPE | DOC\# ${ }^{\text {E }}$ - EXPLANATION | AMOUNT |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 535000 | 15 | 6/16/2009 Contr Svc-Other Oper CA | PV | 42249278 Tebco Inc-REMIT | 588.00 |
| 535000 | 15 | 6/16/2009 Contr Svc-Other Oper CA | PV | 42249281 Volt Services Group | 444.80 |
| 535000 | 15 | 6/16/2009 Contr Svc-Other Oper CA | PV | 42249284 Volt Services Group | 624.00 |
| 535000 | 15 | 6/16/2009 Contr Svc-Other Oper CA | PV | 42249290 Volt Services Group | 670.04 |
| 535000 | 16 | 6/16/2009 Contr Svc-Other Oper AG | PV | 42249314 Garda CL Central Inc | 488.42 |
| 535000 | 15 | 6/16/2009 Contr Svc-Other Oper CA | PV | 42249317 Volt Services Group | 658.53 |
| 535000 | 14 | 6/16/2009 Contr Svc-Other Oper TD | PV | 42249321 Volt Services Group | 117.16 |
| 535000 | 13 | 6/16/2009 Contr Svc-Other Oper WT | PV | 42249321 Volt Services Group | 987.52 |
| 535000 | 13 | 6/16/2009 Contr Svc-Other Oper WT | PV | 42249324 Siemens Water Technologies Cor | 372.96 |
| 536000 | 13 | 6/16/2009 Contr Svc-Lab Testing Oper WT | PV | 42249328 Fouser Environmental Services | 60.00 |
| 570100 | 15 | 6/16/2009 Uncollectible Accounts | JE | 30886431 KY CIS POST GL BATCH | -153.08 |
| 575000 | 14 | 6/16/2009 Misc Oper TD | PV | 42249060 United Rentals (GA) - REMIT | 305.60 |
| 575000 | 14 | 6/16/2009 Misc Oper TD | PV | 42249276 Tebco Inc-REMIT | 1,325.00 |
| 575000 | 14 | 6/16/2009 Misc Oper TD | PV | 42249278 Tebco Inc-REMIT | 561.17 |
| 575000 | 16 | 6/16/2009 Misc Oper AG | PV | 42249318 Backtrack Employment Screening | 177.00 |
| 575340 | 16 | 6/16/2009 Employee Expenses AG | PV | 42248957 Commerce Lexington-PO/REMIT | 15.00 |
| 575545 | 13 | 6/16/2009 Lab Supplies WT | PV | 42248870 VWR International Inc-PO/REMIT | 23.60 |
| 575545 | 13 | 6/16/2009 Lab Supplies WT | PV | 42249322 VWR International Inc-PO/REMIT | 96.58 |
| 575620 | 14 | 6/16/2009 Office \& Admin Supplies TD | PV | 42248841 Duplicator Sales \& Service Inc | 67.50 |
| 575711 | 16 | 6/16/2009 Add'l Security Costs AG | PV | 42248961 Murray Guard Inc-PO/REMIT | 715.20 |
| 575711 | 16 | 6/16/2009 Add'I Security Costs AG | PV | 42248965 Murray Guard Inc-PO/REMIT | 2,668.64 |
| 575711 | 16 | 6/16/2009 Add'I Security Costs AG | PV | 42248969 Murray Guard Inc-PO/REMIT | 715.20 |
| 575711 | 16 | 6/16/2009 Add'I Security Costs AG | PV | 42248972 Murray Guard Inc-PO/REMIT | 715.20 |
| 575711 | 16 | 6/16/2009 Add'I Security Costs AG | PV | 42248978 Murray Guard Inc-PO/REMIT | 2,506.28 |
| 575711 | 16 | 6/16/2009 Add'I Security Costs AG | PV | 42248981 Murray Guard Inc-PO/REMIT | 2,661.88 |
| 575711 | 16 | 6/16/2009 Add'I Security Costs AG | PV | 42248986 Murray Guard Inc-PO/REMIT | 715.20 |
| 575740 | 15 | 6/16/2009 Telephone CA | TC | 30886323 AT\&T | 1,106.09 |
| 575741 | 14 | 6/16/2009 Cell Phone TD | TC | 30886281 Verizon Wireless | 163.65 |
| 575741 | 16 | 6/16/2009 Cell Phone AG | TC | 30886319 NEXTEL | 53.46 |
| 575741 | 13 | 6/16/2009 Cell Phone WT | TC | 30886319 NEXTEL | 157.61 |
| 575741 | 14 | 6/16/2009 Cell Phone TD | TC | 30886339 Verizon Wireless | 874.98 |
| 575780 | 16 | 6/16/2009 Trash Removal AG | PV | 42248846 Rumpke of Ind LLC-REMIT-ALL AC | 78.13 |
| 575780 | 11 | 6/16/2009 Trash Removal SS | PV | 42248944 Allied Waste Services \#993 | 470.16 |
| 575780 | 14 | 6/16/2009 Trash Removal TD | PV | 42248944 Allied Waste Services \#993 | 470.16 |
| 575790 | 16 | 6/16/2009 Trustee Fees AG | PV | 42249274 US Bank Trust (CM-9703) - REMI | 3,232.50 |
| 575830 | 16 | 6/16/2009 Wtr \& Waste Wtr Exp AG | PV | 42249292 Kentucky American Water | 5.72 |
| 575830 | 16 | 6/16/2009 Wtr \& Waste Wtr Exp AG | PV | 42249311 Kentucky American Water | 213.70 |
| 575830 | 16 | 6/16/2009 Wtr \& Waste Wtr Exp AG | PV | 42249312 Kentucky American Water | 36.25 |
| 675000 | 24 | 6/16/2009 Misc Maint TD | PV | 42248875 Scott Gross Co Inc | 1,309.10 |
| 675000 | 24 | 6/16/2009 Misc Maint TD | PV | 42249055 Ditch Witch Trenching Co | 2,587.22 |
| 675000 | 24 | 6/16/2009 Misc Maint TD | PV | 42249060 United Rentals (GA) - REMIT | 34.58 |
| 675000 | 24 | 6/16/2009 Misc Maint TD | PV | 42249075 Equipment Sales \& Rental - PO/ | 225.45 |
| 675650 | 24 | 6/16/2009 Paving/Backfill TD | PV | 42248991 HG Wilson \& Sons Contractors I | 7,273.20 |
| 675650 | 24 | 6/16/2009 Paving/Backfill TD | PV | 42249330 HG Wilson \& Sons Contractors I | 5,062.20 |
| 716121 |  | 6/16/2009 M\&J Expenses-Outside | PV | 42249330 HG Wilson \& Sons Contractors I | 79.20 |
| 401110 |  | 6/17/2009 Res Sales Billed | JE | 30886784 KY CIS POST GL BATCH | -65,285.77 |
| 401210 |  | 6/17/2009 Com Sales Billed | JE | 30886784 KY CIS POST GL BATCH | -35,003.18 |
| 401450 |  | 6/17/2009 Priv Fire Billed | JE | 30886784 KY CIS POST GL BATCH | -50.72 |
| 401510 |  | 6/17/2009 Pub Auth Billed | JE | 30886784 KY CIS POST GL BATCH | -12,450.26 |
| 402110 |  | 6/17/2009 Dom WW Serv Billed | JE | 30886784 KY CIS POST GL BATCH | -28.81 |
| 403103 |  | 6/17/2009 Oth Rev-Collect for Others | RI | 10128828 Sadieville City of - REMIT | -189.60 |
| 403104 |  | 6/17/2009 Oth Rev-NSF Check Charge | JE | 30886784 KY CIS POST GL BATCH | -72.00 |
| 403105 |  | 6/17/2009 Oth Rev-Appl/Initiate Serv Fee | JE | 30886784 KY CIS POST GL BATCH | -962.00 |
| 403107 |  | 6/17/2009 Oth Rev-Reconnection Charges | JE | 30886784 KY CIS POST GL BATCH | -1,222.00 |
| 520100 | 14 | 6/17/2009 M \& S Oper TD | ST | 30886407 SABRIX NO TAX CHARGED ACR | 8.25 |
| 535000 | 16 | 6/17/2009 Contr Svc-Other Oper AG | RI | 10128782 Mueller Co - ALL USE PO/REMIT | -663.26 |
| 535000 | 15 | 6/17/2009 Contr Svc-Other Oper CA | PV | 42249747 Accenture, LLP-REMIT | 4,188.60 |
| 570100 | 15 | 6/17/2009 Uncollectible Accounts | JE | 30886784 KY CIS POST GL BATCH | -202.73 |
| 575000 | 14 | 6/17/2009 Misc Oper TD | ST | 30886404 SABRIX VENDOR TAX COMPARE | 1.40 |
| 575000 | 16 | 6/17/2009 Misc Oper AG | ST | 30886407 SABRIX NO TAX CHARGED ACR | 10.62 |
| 575100 | 15 | 6/17/2009 Bank Service Charges CA | PV | 42249850 CheckFreePay Corporation | 7,382.84 |
| 575275 | 16 | 6/17/2009 Discounts Available | PK | 62056321 US Pipe \& Foundry Co - REMIT | -3.55 |
| 575275 | 16 | 6/17/2009 Discounts Available | PK | 62056327 Mueller Co - ALL USE PO/REMIT | -10.23 |
| 575320 | 14 | 6/17/2009 Electricity TD | EE | 3791410 OWEN ELECTRIC COOP INC | 9.74 |
| 575545 | 13 | 6/17/2009 Lab Supplies WT | ST | 30886407 SABRIX NO TAX CHARGED ACR | 1.42 |
| 575620 | 14 | 6/17/2009 Office \& Admin Supplies TD | ST | 30886407 SABRIX NO TAX CHARGED ACR | 4.05 |
| 575640 | 16 | 6/17/2009 Penalties Nondeduct | RI | 10128799 Commonwealth Of Kentucky-Dep.O | -4,780.58 |
| 620000 | 24 | 6/17/2009 Mat and Sup Maint TD | IR | 539929 Inventory Return | -676.77 |
| 620000 | 24 | 6/17/2009 Mat and Sup Maint TD | IR | 539931 Inventory Return | -676.77 |
| 620000 | 24 | 6/17/2009 Mat and Sup Maint TD | PV | 42250020 Smith Blair Inc 120001 - REMIT | . 01 |
| 675000 | 26 | 6/17/2009 Misc Maint AG | PV | 42249735 Vertex Business Services - Wir | 178.55 |
| 401110 |  | 6/18/2009 Res Sales Billed | JE | 30886783 KY CIS POST GL BATCH | -88,127.27 |
| 401210 |  | 6/18/2009 Com Sales Billed | JE | 30886783 KY CIS POST GL BATCH | -82,583.98 |
| 401310 |  | 6/18/2009 Ind Sales Billed | JE | 30886783 KY CIS POST GL BATCH | -148.52 |
| 401450 |  | 6/18/2009 Priv Fire Billed | JE | 30886783 KY CIS POST GL BATCH | -593.24 |
| 401510 |  | 6/18/2009 Pub Auth Billed | JE | 30886783 KY CIS POST GL BATCH | -5,661.56 |
| 403103 |  | 6/18/2009 Oth Rev-Collect for Others | RI | 10128827 Sadieville City of - REMIT | -191.18 |
| 403103 |  | 6/18/2009 Oth Rev-Collect for Others | RI | 10128829 Lexington-Fayette Div Of Rev P | -92,659.25 |
| 403103 |  | 6/18/2009 Oth Rev-Collect for Others | RI | 10128830 Lexington-Fayette Div Of Rev P | -92,639.62 |
| 403104 |  | 6/18/2009 Oth Rev-NSF Check Charge | JE | 30886783 KY CIS POST GL BATCH | -132.00 |
| 403105 |  | 6/18/2009 Oth Rev-Appl/Initiate Serv Fee | JE | 30886783 KY CIS POST GL BATCH | -2,002.00 |
| 403107 |  | 6/18/2009 Oth Rev-Reconnection Charges | JE | 30886783 KY CIS POST GL BATCH | -1,794.00 |
| 403198 |  | 6/18/2009 Oth Rev-Misc Service Rev | RI | 10128862 Kentucky American Northern | -60.00 |
| 504620 | 16 | 6/18/2009 Employee Physical Exam AG | CC | 6039 NEW HORIZONS MEDICAL CENT | 232.00 |





| ACCOUNT | SUB | GL DATE | DESCRIPTION | DOC TYPE | DOC\# | EXPLANATION | AMOUNT |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 680125 |  | 6/25/2009 | Depr Exp-Amort CIAC Non Tax | JE | 30887550 | FA CIAC Amort True up | -11,291.66 |
| 715111 |  | 6/25/2009 | M\&J Revenues-Outside | RI | 10129086 | Ball Homes | -496.06 |
| 716121 |  | 6/25/2009 | M\&J Expenses-Outside | RI | 10129074 | PSI Plumbing | -508.86 |
| 401110 |  | 6/26/2009 | Res Sales Billed | JE | 30887701 | KY CIS POST GL BATCH | -158,400.17 |
| 401210 |  | 6/26/2009 | Com Sales Billed | JE | 30887701 | KY CIS POST GL BATCH | -12,350.00 |
| 401510 |  | 6/26/2009 | Pub Auth Billed | JE | 30887701 | KY CIS POST GL BATCH | -463.10 |
| 403104 |  | 6/26/2009 | Oth Rev-NSF Check Charge | JE | 30887701 | KY CIS POST GL BATCH | -168.00 |
| 403105 |  | 6/26/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30887701 | KY CIS POST GL BATCH | -2,626.00 |
| 403107 |  | 6/26/2009 | Oth Rev-Reconnection Charges | JE | 30887701 | KY CIS POST GL BATCH | -4,368.00 |
| 501200 | 1305 | 6/26/2009 | Labor Oper WT Super/Eng | JE | 30887638 | June 2009 Labor Accrual | 1,772.90 |
| 501200 | 14 | 6/26/2009 | Labor Oper TD | JE | 30887638 | June 2009 Labor Accrual | 1,772.90 |
| 501200 | 1405 | 6/26/2009 | Labor Oper TD Super/Eng | JE | 30887638 | June 2009 Labor Accrual | 1,772.90 |
| 501200 | 16 | 6/26/2009 | Labor Oper AG | JE | 30887638 | June 2009 Labor Accrual | 43,967.92 |
| 504660 | 16 | 6/26/2009 | Tuition Aid AG | PS | 42258129 | Sullivan University | 1,590.00 |
| 508200 | 16 | 6/26/2009 | ESPP Oper AG | JE | 30887646 | Accrue ESPP Expense Jun 2009 | 577.04 |
| 515100 | 14 | 6/26/2009 | Purch Power TD | EE | 3801471 | OWEN ELECTRIC COOP INC | 7.07 |
| 515100 | 14 | 6/26/2009 | Purch Power TD | EE | 3801531 | OWEN ELECTRIC COOP INC | 16.97 |
| 570100 | 15 | 6/26/2009 | Uncollectible Accounts | JE | 30887701 | KY CIS POST GL BATCH | -296.33 |
| 575275 | 16 | 6/26/2009 | Discounts Available | PK | 62056434 | US Pipe \& Foundry Co - REMIT | -72.46 |
| 575275 | 16 | 6/26/2009 | Discounts Available | PK | 62056438 | Cl Thornburg Co Inc | -1.96 |
| 575275 | 16 | 6/26/2009 | Discounts Available | PK | 62056442 | Ford Meter Box Co Inc - ALL US | -215.95 |
| 575320 | 14 | 6/26/2009 | Electricity TD | EE | 3801467 | OWEN ELECTRIC COOP INC | 15.04 |
| 575320 | 13 | 6/26/2009 | Electricity WT | EE | 3802855 | BLUE GRASS ENERGY | 40.24 |
| 715111 |  | 6/26/2009 | M\&J Revenues-Outside | RM | 1624 | Todd Johnson Contracting Inc | 144.46 |
| 715111 |  | 6/26/2009 | M\&J Revenues-Outside | RI | 10111507 | Todd Johnson Contracting Inc | 976.68 |
| 401110 |  | 6/29/2009 | Res Sales Billed | JE | 30887902 | KY CIS POST GL BATCH | -8,101.83 |
| 401210 |  | 6/29/2009 | Com Sales Billed | JE | 30887902 | KY CIS POST GL BATCH | -172.02 |
| 403104 |  | 6/29/2009 | Oth Rev-NSF Check Charge | JE | 30887902 | KY CIS POST GL BATCH | -180.00 |
| 403105 |  | 6/29/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30887902 | KY CIS POST GL BATCH | -78.00 |
| 403107 |  | 6/29/2009 | Oth Rev-Reconnection Charges | JE | 30887902 | KY CIS POST GL BATCH | -104.00 |
| 501200 | 2420 | 6/29/2009 | Labor Maint TD Mains | PV | 42258777 | Saf ti co Inc-PO/REMIT | 116.60 |
| 511100 | 13 | 6/29/2009 | Waste Disposal Exp WT | ID | 542101 | ISSUE CHEMICALS RRS JUNE 2009 | 3,389.08 |
| 511100 | 13 | 6/29/2009 | Waste Disposal Exp WT | ID | 542148 | CHEM ISSUES KRS JUNE 2009 | 4,847.16 |
| 515100 | 12 | 6/29/2009 | Purch Power P | EE | 3804435 | KENTUCKY UTILITIES COMPANY | 1,659.19 |
| 515100 | 14 | 6/29/2009 | Purch Power TD | EE | 3804440 | KENTUCKY UTILITIES COMPANY | 39.37 |
| 518000 | 13 | 6/29/2009 | Chemicals WT | ID | 542002 | CHEM ISSUES ROCKWELL JUNE 2009 | 1,431.91 |
| 518000 | 13 | 6/29/2009 | Chemicals WT | ID | 542017 | Owenton WWTP June 09 | 1,575.77 |
| 518000 | 13 | 6/29/2009 | Chemicals WT | ID | 542033 | Owenton WTP June 09 | 17,795.44 |
| 518000 | 13 | 6/29/2009 | Chemicals WT | ID | 542101 | ISSUE CHEMICALS RRS JUNE 2009 | 71,584.63 |
| 518000 | 13 | 6/29/2009 | Chemicals WT | ID | 542148 | CHEM ISSUES KRS JUNE 2009 | 149,617.34 |
| 520100 | 16 | 6/29/2009 | M \& S Oper AG | PV | 42258746 | Insight Direct (Peripherals) - | 103.98 |
| 535000 | 16 | 6/29/2009 | Contr Svc-Other Oper AG | PV | 42258702 | Kentucky Underground Storage I | 186.00 |
| 535000 | 14 | 6/29/2009 | Contr Svc-Other Oper TD | PV | 42258774 | Kentucky Underground Protectio | 2,917.40 |
| 570100 | 15 | 6/29/2009 | Uncollectible Accounts | JE | 30887902 | KY CIS POST GL BATCH | 49,443.46 |
| 575100 | 15 | 6/29/2009 | Bank Service Charges CA | JE | 3500 | Accr month Mellon bank fees | 505.96 |
| 620000 | 24 | 6/29/2009 | Mat and Sup Maint TD | IR | 542014 | Inventory Return | -18.70 |
| 620000 | 24 | 6/29/2009 | Mat and Sup Maint TD | IR | 542024 | Inventory Return | -683.88 |
| 620000 | 24 | 6/29/2009 | Mat and Sup Maint TD | PV | 42258768 | CI Thornburg Co Inc | 66.52 |
| 675650 | 24 | 6/29/2009 | Paving/Backfill TD | PV | 42258764 | D \& K Meter and Hydrant Repair | 5,730.00 |
| 716121 |  | 6/29/2009 | M\&J Expenses-Outside | 11 | 542027 | Inventory Issue-Stk E \& D | 18.70 |
| 401120 |  | 6/30/2009 | Res Sales Unbilled | JE | 120612 | Discretionary Unbilled Adj Jun | 332,563.00 |
| 401120 |  | 6/30/2009 | Res Sales Unbilled | JE | 30887928 | UNBILLED REVENUE | -2,217,087.67 |
| 401220 |  | 6/30/2009 | Com Sales Unbilled | JE | 120612 | Discretionary Unbilled Adj Jun | 178,445.00 |
| 401220 |  | 6/30/2009 | Com Sales Unbilled | JE | 30887928 | UNBILLED REVENUE | -1,189,635.82 |
| 401320 |  | 6/30/2009 | Ind Sales Unbilled | JE | 30887928 | UNBILLED REVENUE | -127,530.68 |
| 401460 |  | 6/30/2009 | Priv Fire Unbilled | JE | 30887928 | UNBILLED REVENUE | -146,662.33 |
| 401520 |  | 6/30/2009 | Pub Auth Unbilled | JE | 30887928 | UNBILLED REVENUE | -346,353.45 |
| 401620 |  | 6/30/2009 | Sales for Resale Unbilled | JE | 30887928 | UNBILLED REVENUE | -146,339.09 |
| 403102 |  | 6/30/2009 | Oth Rev-Rents Water Property | JE | 1203 | 6/09 Rent,phone\&indirect cost | -1,193.00 |
| 403102 |  | 6/30/2009 | Oth Rev-Rents Water Property | RI | 10129402 | Mcconathy, William - Remit | -855.00 |
| 403103 |  | 6/30/2009 | Oth Rev-Collect for Others | JE |  | Accrue Sewer \& Landfill Billin | -12.05 |
| 501200 | 1410 | 6/30/2009 | Labor Oper TD Storage | T2 | 33824 | Payroll Labor Distribution | 30.33 |
| 501200 | 2415 | 6/30/2009 | Labor Maint TD Dist Res | T2 | 33824 | Payroll Labor Distribution | 408.78 |
| 501200 | 2405 | 6/30/2009 | Labor Maint TD Super/Eng | T2 | 33824 | Payroll Labor Distribution | 663.79 |
| 501200 | 22 | 6/30/2009 | Labor Maint P | T2 | 33824 | Payroll Labor Distribution | 1,021.95 |
| 501200 | 24 | 6/30/2009 | Labor Maint TD | T2 | 33824 | Payroll Labor Distribution | 1,067.44 |
| 501200 | 2305 | 6/30/2009 | Labor Maint WT Super/Eng | T2 | 33824 | Payroll Labor Distribution | 1,991.40 |
| 501200 | 23 | 6/30/2009 | Labor Maint WT | T2 | 33824 | Payroll Labor Distribution | 1,998.48 |
| 501200 | 2435 | 6/30/2009 | Labor Maint TD Meters | T2 | 33824 | Payroll Labor Distribution | 2,339.82 |
| 501200 | 15 | 6/30/2009 | Labor Oper CA | T2 | 33824 | Payroll Labor Distribution | 3,353.38 |
| 501200 | 1405 | 6/30/2009 | Labor Oper TD Super/Eng | T2 | 33824 | Payroll Labor Distribution | 5,062.15 |
| 501200 | 2440 | 6/30/2009 | Labor Maint TD Hydrants | T2 | 33824 | Payroll Labor Distribution | 6,795.19 |
| 501200 | 1415 | 6/30/2009 | Labor Oper TD Lines | T2 | 33824 | Payroll Labor Distribution | 7,083.41 |
| 501200 | 2420 | 6/30/2009 | Labor Maint TD Mains | T2 | 33824 | Payroll Labor Distribution | 9,394.92 |
| 501200 | 1520 | 6/30/2009 | Labor Oper CA Cust Serv | T2 | 33824 | Payroll Labor Distribution | 9,771.30 |
| 501200 | 2430 | 6/30/2009 | Labor Maint TD Services | T2 | 33824 | Payroll Labor Distribution | 13,127.23 |
| 501200 | 1510 | 6/30/2009 | Labor Oper CA Mtr Read | T2 | 33824 | Payroll Labor Distribution | 18,691.89 |
| 501200 | 1305 | 6/30/2009 | Labor Oper WT Super/Eng | T2 | 33824 | Payroll Labor Distribution | 24,919.49 |
| 501200 | 14 | 6/30/2009 | Labor Oper TD | T2 | 33824 | Payroll Labor Distribution | 27,450.65 |
| 501200 | 16 | 6/30/2009 | Labor Oper AG | T2 | 33824 | Payroll Labor Distribution | 30,483.66 |
| 501200 | 13 | 6/30/2009 | Labor Oper WT | T2 | 33824 | Payroll Labor Distribution | 31,739.60 |
| 501200 | 1420 | 6/30/2009 | Labor Oper TD Meter | T2 | 33824 | Payroll Labor Distribution | 34,199.78 |
| 501200 | 13 | 6/30/2009 | Labor Oper WT | T3 | 33825 | Actual Burden Journal Entries | 33.08 |
| 501200 | 1305 | 6/30/2009 | Labor Oper WT Super/Eng | JE | 30888887 | FASTR - ALLOCATION KY_ALLEXP2 | -1,231.63 |




| ACCOUNT | SUB | GL DATE | DESCRIPTION | DOC TYPE | DOC\# ${ }^{\text {E }}$ - EXPLANATION | AMOUNT |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 575320 | 16 | 6/30/2009 | Electricity AG | JE | 1203 6/09 Rent,phone\&indirect cost | -99.00 |
| 575320 | 14 | 6/30/2009 | Electricity TD | EE | 3804961 KENTUCKY UTILITIES COMPANY | 62.53 |
| 575340 | 16 | 6/30/2009 | Employee Expenses AG | JE | 130 KY UNMAPPED PCARD ACCRUAL 0609 | -941.83 |
| 575342 | 16 | 6/30/2009 | Empl Exp Conf/Registration AG | CC | 6096 KENTUCKY/TENNESEE WATER P | 325.00 |
| 575350 | 16 | 6/30/2009 | Meals Deduct | JE | 130 KY UNMAPPED PCARD ACCRUAL 0609 | 402.66 |
| 575350 | 16 | 6/30/2009 | Meals Deduct | CC | 6096 WAL-MART | 48.12 |
| 575350 | 16 | 6/30/2009 | Meals Deduct | CC | 6106 OCHARLEYS209 RMNDRD | 129.94 |
| 575350 | 16 | 6/30/2009 | Meals Deduct | JE | 120604 Recls P-Card Errors to Prop Ac | 235.93 |
| 575350 | 16 | 6/30/2009 | Meals Deduct | JA | 30888820 FASTR - ALLOC GAMTALLCO | -1,317.33 |
| 575350 | 16 | 6/30/2009 | Meals Deduct | PV | 42259706 Sams Club | 32.29 |
| 575351 | 16 | 6/30/2009 | Meals Non Deduct | JA | 30888820 FASTR - ALLOC GAMTALLCO | 1,317.33 |
| 575420 | 15 | 6/30/2009 | Forms CA | JE | 300 Regulus accrual June global | -360.73 |
| 575480 | 16 | 6/30/2009 | Heat - Oil/Gas AG | JE | 155 June power accrual PA \& East | -2,551.90 |
| 575480 | 14 | 6/30/2009 | Heat - Oil/Gas TD | JE | 155 June power accrual PA \& East | -1,997.75 |
| 575480 | 16 | 6/30/2009 | Heat - Oil/Gas AG | JE | 1203 6/09 Rent,phone\&indirect cost | -9.00 |
| 575490 | 16 | 6/30/2009 | Injuries and Damages | JE | 160 Rec Workbasket Accrual 6/09 | 175.00 |
| 575500 | 13 | 6/30/2009 | Janitorial WT | JE | 600 Accrual for Goods/Serv Receiv | -2,825.00 |
| 575500 | 16 | 6/30/2009 | Janitorial AG | JE | 601 Accrual for Goods/Serv Rendere | 532.00 |
| 575500 | 13 | 6/30/2009 | Janitorial WT | JE | 601 Accrual for Goods/Serv Rendere | 2,300.00 |
| 575500 | 16 | 6/30/2009 | Janitorial AG | JE | 1203 6/09 Rent,phone\&indirect cost | -182.00 |
| 575545 | 13 | 6/30/2009 | Lab Supplies WT | JE | 130 KY UNMAPPED PCARD ACCRUAL 0609 | 141.79 |
| 575545 | 13 | 6/30/2009 | Lab Supplies WT | JE | 160 Acc for Inv Rec'd not yet appr | 1,834.86 |
| 575545 | 13 | 6/30/2009 | Lab Supplies WT | CC | 6096 HACH COMPANY | 54.72 |
| 575545 | 13 | 6/30/2009 | Lab Supplies WT | JE | 30888887 FASTR - ALLOCATION KY_ALLEXP2 | -39.83 |
| 575620 | 15 | 6/30/2009 | Office \& Admin Supplies CA | JE | 130 KY UNMAPPED PCARD ACCRUAL 0609 | 224.53 |
| 575620 | 14 | 6/30/2009 | Office \& Admin Supplies TD | JE | 130 KY UNMAPPED PCARD ACCRUAL 0609 | 304.70 |
| 575620 | 16 | 6/30/2009 | Office \& Admin Supplies AG | JE | 130 KY UNMAPPED PCARD ACCRUAL 0609 | 577.85 |
| 575620 | 16 | 6/30/2009 | Office \& Admin Supplies AG | JE | 1203 6/09 Rent,phone\&indirect cost | -3.00 |
| 575620 | 13 | 6/30/2009 | Office \& Admin Supplies WT | CC | 6096 OFFICEMAX CT IN | 269.42 |
| 575625 | 16 | 6/30/2009 | Overnight Shipping AG | PV | 42259663 United Parcel Service | 196.24 |
| 575625 | 16 | 6/30/2009 | Overnight Shipping AG | PV | 42259685 United Parcel Service | 131.09 |
| 575660 | 15 | 6/30/2009 | Postage CA | JE | 125 Rec'd Monthly Trans pd by AWCC | 52,284.69 |
| 575660 | 16 | 6/30/2009 | Postage AG | JE | 1203 6/09 Rent,phone\&indirect cost | 64.00 |
| 575711 | 16 | 6/30/2009 | Add'I Security Costs AG | JE | 160 Acc for Inv Rec'd not yet appr | -2,668.64 |
| 575711 | 16 | 6/30/2009 | Add'I Security Costs AG | JE | 600 Accrual for Goods/Serv Receiv | -6,767.68 |
| 575711 | 16 | 6/30/2009 | Add'I Security Costs AG | JE | 601 Accrual for Goods/Serv Rendere | 3,383.84 |
| 575715 | 16 | 6/30/2009 | Software Licenses \& Support | JR | 348 Amort RIA Insource CIS License | 284.82 |
| 575715 | 16 | 6/30/2009 | Software Licenses \& Support | JE | 30621 Rcls Microsoft License Invoice | 3,100.29 |
| 575715 | 16 | 6/30/2009 | Software Licenses \& Support | JE | 120613 True Up Prepaid Other 06.09 | 1,363.66 |
| 575715 | 16 | 6/30/2009 | Software Licenses \& Support | JE | 120614 True Up Amort for VersyPro Jun | 483.89 |
| 575715 | 16 | 6/30/2009 | Software Licenses \& Support | JR | 30059963 Vesry Pro Expert Maint Program | 43.99 |
| 575715 | 16 | 6/30/2009 | Software Licenses \& Support | JR | 30059970 Amortize global support iconic | 405.58 |
| 575715 | 16 | 6/30/2009 | Software Licenses \& Support | JR | 30059983 Amortize Industrial Defender | 113.21 |
| 575740 | 16 | 6/30/2009 | Telephone AG | JE | 410 Telephone Accrl - June 09 | -593.47 |
| 575740 | 15 | 6/30/2009 | Telephone CA | JE | 410 Telephone Accrl - June 09 | -248.93 |
| 575740 | 16 | 6/30/2009 | Telephone AG | TC | 30887776 Berry | 108.16 |
| 575740 | 15 | 6/30/2009 | Telephone CA | TC | 30887800 Windstream | 49.19 |
| 575740 | 15 | 6/30/2009 | Telephone CA | TC | 30887852 AT\&T | 2,525.02 |
| 575741 | 16 | 6/30/2009 | Cell Phone AG | JE | 410 Telephone Accrl - June 09 | -192.18 |
| 575741 | 14 | 6/30/2009 | Cell Phone TD | JE | 410 Telephone Accrl - June 09 | -16.61 |
| 575741 | 13 | 6/30/2009 | Cell Phone WT | JE | 410 Telephone Accrl - June 09 | 178.89 |
| 575741 | 14 | 6/30/2009 | Cell Phone TD | JE | 39996 Rec Telecom Credit Receivable | -16.61 |
| 575790 | 16 | 6/30/2009 | Trustee Fees AG | JE | 4605 CO OF OWEN KY FEES ON FINANCIN | 4,000.00 |
| 575820 | 14 | 6/30/2009 | Uniforms TD | CC | 6096 UFIRST LAUNDRY SVCS | 63.25 |
| 575820 | 13 | 6/30/2009 | Uniforms WT | CC | 6096 HANDS ON ORIGINALS INC. | 232.76 |
| 575820 | 14 | 6/30/2009 | Uniforms TD | JE | 120604 Recls P-Card Errors to Prop Ac | 116.40 |
| 575830 | 16 | 6/30/2009 | Wtr \& Waste Wtr Exp AG | JE | 1203 6/09 Rent,phone\&indirect cost | -4.00 |
| 575998 | 16 | 6/30/2009 | PCard Undistributed | JE | 130 KY UNMAPPED PCARD ACCRUAL 0609 | 1,015.92 |
| 575998 | 16 | 6/30/2009 | PCard Undistributed | CC | 6096 CULVERS OF LEXINGTON | 833.23 |
| 575998 | 16 | 6/30/2009 | PCard Undistributed | JE | 120604 Recls P-Card Errors to Prop Ac | -1,319.54 |
| 620000 | 21 | 6/30/2009 | Mat and Sup Maint SS | JE | 130 KY UNMAPPED PCARD ACCRUAL 0609 | 606.18 |
| 620000 | 23 | 6/30/2009 | Mat and Sup Maint WT | JE | 130 KY UNMAPPED PCARD ACCRUAL 0609 | 3,284.80 |
| 620000 | 21 | 6/30/2009 | Mat and Sup Maint SS | JE | 601 Accrual for Goods/Serv Rendere | 55,807.00 |
| 620000 | 21 | 6/30/2009 | Mat and Sup Maint SS | CC | 6096 WW GRAINGER | 715.00 |
| 620000 | 24 | 6/30/2009 | Mat and Sup Maint TD | CC | 6096 SSC LEXINGTON BRANCH | 1,756.89 |
| 620000 | 24 | 6/30/2009 | Mat and Sup Maint TD | 11 | 542443 Hide Away Hills Lot 289 | 77.15 |
| 620000 | 24 | 6/30/2009 | Mat and Sup Maint TD | 11 | 5424473095 Hwy 330 | 34.92 |
| 620000 | 24 | 6/30/2009 | Mat and Sup Maint TD | IR | 542792 Inventory Return | -398.75 |
| 620000 | 24 | 6/30/2009 | Mat and Sup Maint TD | 11 | 542804 Inventory Issue-Stk E \& D | 17,636.42 |
| 620000 | 24 | 6/30/2009 | Mat and Sup Maint TD | 11 | 542813850 East Adair | 34.93 |
| 620000 | 24 | 6/30/2009 | Mat and Sup Maint TD | 11 | 542905 Ket Hwy 22 E | 23.48 |
| 620000 | 26 | 6/30/2009 | Mat and Sup Maint AG | JR | 30009705 Amort Microsoft License \& Main | 2,485.83 |
| 620000 | 24 | 6/30/2009 | Mat and Sup Maint TD | JN | 30888008 BPCOR Pcard error rcls | 31.80 |
| 635000 | 26 | 6/30/2009 | Contr Svc-Other Maint AG | JE | 160 Acc for Inv Rec'd not yet appr | 1,135.84 |
| 675000 | 24 | 6/30/2009 | Misc Maint TD | JE | 130 KY UNMAPPED PCARD ACCRUAL 0609 | 30.21 |
| 675000 | 23 | 6/30/2009 | Misc Maint WT | JE | 160 Acc for Inv Rec'd not yet appr | 1,092.63 |
| 675000 | 24 | 6/30/2009 | Misc Maint TD | JE | 120604 Recls P-Card Errors to Prop Ac | 209.45 |
| 675000 | 26 | 6/30/2009 | Misc Maint AG | JE | 120613 True Up Prepaid Other 06.09 | -613.74 |
| 675000 | 26 | 6/30/2009 | Misc Maint AG | JR | 30059974 Amortize ECIS Extended Support | 3,580.00 |
| 675050 | 24 | 6/30/2009 | Amort Def Maint TD | JE | 120603 Amort Hydrant Paint 50127181 | 7,172.91 |
| 675050 | 23 | 6/30/2009 | Amort Def Maint WT | JR | 30009642 amtz m959 | 137.65 |
| 675050 | 23 | 6/30/2009 | Amort Def Maint WT | JR | 30009644 amtz m965 | 685.80 |
| 675050 | 23 | 6/30/2009 | Amort Def Maint WT | JR | 30009646 amtz prog maint | 414.62 |
| 675050 | 23 | 6/30/2009 | Amort Def Maint WT | JR | 30009649 amtz m1039 | 1,281.93 |


| ACCOUNT ${ }^{\text {S }}$ SUB | GL DATE ${ }^{\text {deSCRIPTION }}$ | DOC TYPE | DOC\# | AMOUNT |
| :---: | :---: | :---: | :---: | :---: |
| 67505023 | 6/30/2009 Amort Def Maint WT | JR | 30009653 amtz hydro \#8 | 1,131.92 |
| 67505023 | 6/30/2009 Amort Def Maint WT | JR | 30009657 amtz prog maint | 1,076.39 |
| 67505024 | 6/30/2009 Amort Def Maint TD | JR | 30009659 amort M1061 Hume Rd Tank | 2,149.90 |
| 67505023 | 6/30/2009 Amort Def Maint WT | JR | 30009660 AMTZ HYDROTR \#3 | 1,000.67 |
| 67505023 | 6/30/2009 Amort Def Maint WT | JR | 30009670 M1011 AMTZ HYDROTREATER \#5 | 1,004.87 |
| 67505024 | 6/30/2009 Amort Def Maint TD | JR | 30009688 Paint Hydrotreator \#1 | 1,469.26 |
| 67505024 | 6/30/2009 Amort Def Maint TD | JR | 30009689 Paint Hydrotreator \#2 | 1,800.99 |
| 67505024 | 6/30/2009 Amort Def Maint TD | JR | 30009691 Repair Cox Street Tank | 416.66 |
| 67505024 | 6/30/2009 Amort Def Maint TD | JR | 30009697 Amtz York Street Tank M1104 | 276.13 |
| 67505023 | 6/30/2009 Amort Def Maint WT | JR | 30009753 M1038 Paint Hydro Treater | 1,244.41 |
| 67505023 | 6/30/2009 Amort Def Maint WT | JR | 30059958 Amortize Programmed Maint | 4,388.67 |
| 67511026 | 6/30/2009 Maint Exp ARO/Net Neg Sal AG | DP | 30887278 Monthly Depreciation Expense | 127,256.90 |
| 67565024 | 6/30/2009 Paving/Backfill TD | JE | 160 Acc for Inv Rec'd not yet appr | 11,656.60 |
| 67565024 | 6/30/2009 Paving/Backfill TD | JE | 601 Accrual for Goods/Serv Rendere | 11,656.00 |
| 67565024 | 6/30/2009 Paving/Backfill TD | JE | 120610 Mthly Paving \& Sod Accl 06.09 | 21,165.94 |
| 680110 | 6/30/2009 Depr Exp-General | DP | 30887278 Monthly Depreciation Expense | 608,286.48 |
| 680120 | 6/30/2009 Depr Exp-Amort CIAC Tax | DP | 30887278 Monthly Depreciation Expense | -21,865.95 |
| 680125 | 6/30/2009 Depr Exp-Amort CIAC Non Tax | DP | 30887278 Monthly Depreciation Expense | -81,319.42 |
| 680300 | 6/30/2009 Amortization of UPAA | Ju | 907 Amort Tri Village/Elk Lake | 697.33 |
| 680300 | 6/30/2009 Amortization of UPAA | JU | 30009706 Amtz of Util Plant Acquis Adj | 16.06 |
| 680300 | 6/30/2009 Amortization of UPAA | JU | 30022689 Amort UPAA Boonesboro | 1,087.57 |
| 680540 | 6/30/2009 Amort-Reg Asset AFUDC | JU | 30092822 AMORTIZE AFUDC EQUITY | 6,332.12 |
| 680600 | 6/30/2009 Amort-Prop Losses | JR | 156 Amort source of supply project | 4,756.67 |
| 680600 | 6/30/2009 Amort-Prop Losses | JR | 30009687 Bluegrass Water Project | 29,592.34 |
| 680620 | 6/30/2009 Amort-Reg Asset | JU | 30092823 UPA AMORTIZATION REG ASSET | 575.00 |
| 685100 | 6/30/2009 Utility Reg Assessment Fee | JH | 4 Amortize KY Prepaid PSC Fees | 7,050.29 |
| 685200 | 6/30/2009 Property Taxes | JH | 6 Accrue KY Property Tax | 229,073.01 |
| 685200 | 6/30/2009 Property Taxes | JE | 120607 Rec'd KY Prop Tax Receivable | -167,785.26 |
| 685200 | 6/30/2009 Property Taxes | JE | 30888646 rcls08 add tax pmt:liab to exp | 279,992.10 |
| 685200 | 6/30/2009 Property Taxes | JE | 30889000 Rcrd revbl KY rfnds Grgtwn/Sad | -2,621.55 |
| 685320 | 6/30/2009 FUTA | T3 | 33825 Actual Burden Journal Entries | 36.95 |
| 685325 | 6/30/2009 FICA | T3 | 33825 Actual Burden Journal Entries | 18,370.79 |
| 685325 | 6/30/2009 FICA | JE | 30888217 FICA Accrual for June 2009 | 14,361.07 |
| 685325 | 6/30/2009 FICA | JE | 30888887 FASTR - ALLOCATION KY_ALLEXP2 | -124.22 |
| 685350 | 6/30/2009 SUTA | T3 | 33825 Actual Burden Journal Entries | 66.58 |
| 690110 | 6/30/2009 FIT-Current | JE | 705 JUNE 2009 TAX PROV | 129,709.00 |
| 6901202 | 6/30/2009 FIT-PrYr Adj Over Accr | JE | 7032008 SEPCO SUDS | 48,163.00 |
| 690120 | 6/30/2009 FIT-PrYr Adj Over Accr | JE | 704 IRS REFUND 2001-2002 | -7,485.00 |
| 690210 | 6/30/2009 SIT-Current | JE | 705 JUNE 2009 TAX PROV | 177,156.00 |
| 6902202 | 6/30/2009 SIT-PrYr Adj Over Accr | JE | 7032008 SEPCO SUDS | 39,665.00 |
| 6902202 | 6/30/2009 SIT-PrYr Adj Over Accr | JE | 704 IRS REFUND 2001-2002 | 669.00 |
| 6906302 | 6/30/2009 Def FIT-Reg Liab | JT | 30092822 CY2 Rec Amor Reg Asset/Lia | -12,287.74 |
| 6906301 | 6/30/2009 Def FIT-Reg Asset | JT | 30092822 CY2 Rec Amor Reg Asset/Lia | 30,852.12 |
| 6906502 | 6/30/2009 Def FIT-Other Liab | JE | 705 JUNE 2009 TAX PROV | 2,344,059.00 |
| 6907302 | 6/30/2009 Def SIT-Reg Liab | JT | 30092822 CY2 Rec Amor Reg Asset/Lia | -5,246.50 |
| 6907301 | 6/30/2009 Def SIT-Reg Asset | JT | 30092822 CY2 Rec Amor Reg Asset/Lia | 5,626.88 |
| 6907502 | 6/30/2009 Def SIT-Other Liab | JE | 705 JUNE 2009 TAX PROV | 280,097.00 |
| 695220 | 6/30/2009 ITC Restored - 3\% | JT | 30092822 CY2 Rec Amor Reg Asset/Lia | -637.67 |
| 695230 | 6/30/2009 ITC Restored - 4\% | JT | 30092822 CY2 Rec Amor Reg Asset/Lia | -525.42 |
| 695240 | 6/30/2009 ITC Restored - 10\% | JT | 30092822 CY2 Rec Amor Reg Asset/Lia | -5,903.33 |
| 705100 | 6/30/2009 AFUDC - Equity | F6 | 30888640 AFUDC Equity | -352,260.18 |
| 715111 | 6/30/2009 M\&J Revenues-Outside | RI | 10129404 Bluegrass Station Division-Rem | -4,251.12 |
| 716121 | 6/30/2009 M\&J Expenses-Outside | T2 | 33824 Payroll Labor Distribution | 969.63 |
| 716121 | 6/30/2009 M\&J Expenses-Outside | T3 | 33825 Actual Burden Journal Entries | 511.77 |
| 716121 | 6/30/2009 M\&J Expenses-Outside | JE | 120610 Mthly Paving \& Sod Accl 06.09 | 1,884.17 |
| 716121 | 6/30/2009 M\&J Expenses-Outside | JN | 30888008 BPCOR Pcard error rcls | 9.09 |
| 716122 | 6/30/2009 M\&J Expenses-Inside | JE | 30888887 FASTR - ALLOCATION KY_ALLEXP2 | 5,837.77 |
| 755100 | 6/30/2009 Amort UPAA | JU | 908 Amortize Owenton Acquisition | -35.38 |
| 755201 | 6/30/2009 Amort PS Exp w/ mandatory | JR | 1005 AMORT PREFERRED STOCK EXP | 64.24 |
| 760200 | 6/30/2009 Other Income Deductions | JE | 601 Accrual for Goods/Serv Rendere | 20,000.00 |
| 760200 | 6/30/2009 Other Income Deductions | CC | 6106 KENTUCKY/TENNESEE WATER P | 1,390.00 |
| 780100 | 6/30/2009 SIT-Other Inc \& Ded Curr | JE | 705 JUNE 2009 TAX PROV | -3,886.00 |
| 790100 | 6/30/2009 FIT-Oth Inc \& Ded-curr | JE | 705 JUNE 2009 TAX PROV | -2,845.00 |
| 810100 | 6/30/2009 Int LTD-Outside Reg | JE | 103 INTEREST ACCRUAL | -420,437.50 |
| 810100 | 6/30/2009 Int LTD-Outside Reg | JE | 105 LTD PAYMENTS ALL SUBS | 558,150.00 |
| 810100 | 6/30/2009 Int LTD-Outside Reg | JR | 30059977 Amortize Gain on Loan Payoff | -10,875.79 |
| 810400 AW46 | 6/30/2009 Int LTD-Inside AW46 | JE | 103 INTEREST ACCRUAL | 348,882.29 |
| 820100 | 6/30/2009 Amort Debt Disc \& Exp | JR | 1003 Amortize Debt Expense-OUTSIDE | 665.38 |
| 820110 AW46 | 6/30/2009 Amort DExp Inside AW46 | JR | 1007 Amortize debt Exp Inside | 6,666.70 |
| 830100 AW46 | 6/30/2009 Interest STD Inside | JE | 125 Rec'd Monthly Trans pd by AWCC | 40,564.86 |
| 850000 | 6/30/2009 AFUDC Debt | F0 | 30888639 AFUDC Debt | -175,988.63 |
| 860040 | 6/30/2009 Div Dec PS-Out w/ mand | JE | 103 INTEREST ACCRUAL | -63,525.00 |
| 860040 | 6/30/2009 Div Dec PS-Out w/ mand | JE | 105 LTD PAYMENTS ALL SUBS | 95,287.50 |
| 860100 | 6/30/2009 Div Dec Pref Stk-Outside | JE | 103 INTEREST ACCRUAL | 6,510.50 |
| 860220 AW02 | 6/30/2009 Div Decl Com Stk In-AW02 | DT | 120 Q2 INSIDE CS DIVIDENDS | 1,489,021.45 |
| 401110 | 7/1/2009 Res Sales Billed | JE | 30888440 KY CIS POST GL BATCH | -282,417.43 |
| 401120 | 7/1/2009 Res Sales Unbilled | JE | 120612 Discretionary Unbilled Adj Jun | -332,563.00 |
| 401120 | 7/1/2009 Res Sales Unbilled | JE | 30887928 UNBILLED REVENUE | 2,217,087.67 |
| 401210 | 7/1/2009 Com Sales Billed | JE | 30888440 KY CIS POST GL BATCH | -120,018.10 |
| 401220 | 7/1/2009 Com Sales Unbilled | JE | 120612 Discretionary Unbilled Adj Jun | -178,445.00 |
| 401220 | 7/1/2009 Com Sales Unbilled | JE | 30887928 UNBILLED REVENUE | 1,189,635.82 |
| 401320 | 7/1/2009 Ind Sales Unbilled | JE | 30887928 UNBILLED REVENUE | 127,530.68 |
| 401460 | 7/1/2009 Priv Fire Unbilled | JE | 30887928 UNBILLED REVENUE | 146,662.33 |
| 401510 | 7/1/2009 Pub Auth Billed | JE | 30888440 KY CIS POST GL BATCH | -10,094.37 |


| ACCOUNT | SUB | GL DATE ${ }^{\text {deSCRIPTION }}$ | DOC TYPE | DOC\# ${ }^{\text {E }}$ EXPLANATION | AMOUNT |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 401520 |  | 7/1/2009 Pub Auth Unbilled | JE | 30887928 UNBILLED REVENUE | 346,353.45 |
| 401620 |  | 7/1/2009 Sales for Resale Unbilled | JE | 30887928 UNBILLED REVENUE | 146,339.09 |
| 402110 |  | 7/1/2009 Dom WW Serv Billed | JE | 30888440 KY CIS POST GL BATCH | -51.81 |
| 403102 |  | 7/1/2009 Oth Rev-Rents Water Property | RR | 10128123 Cingular Wireless - El Paso, T | -2,546.99 |
| 403102 |  | 7/1/2009 Oth Rev-Rents Water Property | RR | 10128245 Sprint Nextel | -2,000.00 |
| 403104 |  | 7/1/2009 Oth Rev-NSF Check Charge | JE | 30888440 KY CIS POST GL BATCH | -60.00 |
| 403105 |  | 7/1/2009 Oth Rev-Appl/Initiate Serv Fee | JE | 30888440 KY CIS POST GL BATCH | -7,540.00 |
| 403107 |  | 7/1/2009 Oth Rev-Reconnection Charges | JE | 30888440 KY CIS POST GL BATCH | -3,276.00 |
| 501200 | 16 | 7/1/2009 Labor Oper AG | JE | 30887638 June 2009 Labor Accrual | -43,967.92 |
| 501200 | 1305 | 7/1/2009 Labor Oper WT Super/Eng | JE | 30887638 June 2009 Labor Accrual | -1,772.90 |
| 501200 | 14 | 7/1/2009 Labor Oper TD | JE | 30887638 June 2009 Labor Accrual | -1,772.90 |
| 501200 | 1405 | 7/1/2009 Labor Oper TD Super/Eng | JE | 30887638 June 2009 Labor Accrual | -1,772.90 |
| 504100 | 16 | 7/1/2009 Group Ins Oper AG | RR | 10127987 Stokley, Susie | -128.34 |
| 504100 | 16 | 7/1/2009 Group Ins Oper AG | RR | 10127988 Bailey, Dorothy - Remit | -395.00 |
| 504100 | 16 | 7/1/2009 Group Ins Oper AG | RR | 10128026 Brown, Barbara K. | -50.00 |
| 504100 | 16 | 7/1/2009 Group Ins Oper AG | RR | 10128143 Allen, Euvonnia L. | -395.00 |
| 504100 | 16 | 7/1/2009 Group Ins Oper AG | RR | 10128151 Gooch, Wilma J. | -395.00 |
| 504100 | 16 | 7/1/2009 Group Ins Oper AG | RR | 10128264 Jones, Gene A. | -148.00 |
| 504660 | 16 | 7/1/2009 Tuition Aid AG | PS | 42261652 KCTCS-PO/REMIT | 363.00 |
| 507100 | 16 | 7/1/2009 401k Oper AG | JE | 30887250 June 2009 401K Accr | -1,133.99 |
| 508101 | 16 | 7/1/2009 DCP Oper AG | JE | 30887553 DCP Accrual June 2009 | -933.85 |
| 510100 | 11 | 7/1/2009 Purchased Water-Outside | PV | 42262392 Georgetown Municipal Water \& S | 9.76 |
| 510100 | 11 | 7/1/2009 Purchased Water-Outside | PV | 42262393 Gallatin County Water District | 960.53 |
| 511100 | 13 | 7/1/2009 Waste Disposal Exp WT | JE | 156 Accrue Discretionary Power Acc | -138.04 |
| 515100 | 12 | 7/1/2009 Purch Power P | JE | 156 Accrue Discretionary Power Acc | -1,981.36 |
| 515100 | 13 | 7/1/2009 Purch Power WT | JE | 156 Accrue Discretionary Power Acc | -1,105.62 |
| 515100 | 14 | 7/1/2009 Purch Power TD | EE | 3806650 KENTUCKY UTILITIES COMPANY | 12.00 |
| 515100 | 14 | 7/1/2009 Purch Power TD | EE | 3808406 KENTUCKY UTILITIES COMPANY | 21.80 |
| 515100 | 14 | 7/1/2009 Purch Power TD | EE | 3808413 KENTUCKY UTILITIES COMPANY | 46.18 |
| 520100 | 14 | 7/1/2009 M \& S Oper TD | EE | 3808413 KENTUCKY UTILITIES COMPANY | 10.00 |
| 520100 | 14 | 7/1/2009 M \& S Oper TD | PV | 42262401 Cobb, Rodney | 574.26 |
| 535000 | 16 | 7/1/2009 Contr Svc-Other Oper AG | JE | 130 KY UNMAPPED PCARD ACCRUAL 0609 | -51.97 |
| 535000 | 13 | 7/1/2009 Contr Svc-Other Oper WT | JE | 160 Acc for Inv Rec'd not yet appr | -10,355.10 |
| 535000 | 14 | 7/1/2009 Contr Svc-Other Oper TD | JE | 160 Acc for Inv Rec'd not yet appr | -1,829.22 |
| 535000 | 15 | 7/1/2009 Contr Svc-Other Oper CA | JE | 160 Acc for Inv Rec'd not yet appr | -1,650.61 |
| 535000 | 13 | 7/1/2009 Contr Svc-Other Oper WT | JE | 601 Accrual for Goods/Serv Rendere | -22,265.00 |
| 535000 | 14 | 7/1/2009 Contr Svc-Other Oper TD | JE | 601 Accrual for Goods/Serv Rendere | -15,390.50 |
| 535000 | 16 | 7/1/2009 Contr Svc-Other Oper AG | JE | 601 Accrual for Goods/Serv Rendere | -2,830.00 |
| 535000 | 14 | 7/1/2009 Contr Svc-Other Oper TD | PV | 42261696 Volt Services Group | 117.16 |
| 535000 | 13 | 7/1/2009 Contr Svc-Other Oper WT | PV | 42261696 Volt Services Group | 1,087.94 |
| 535000 | 14 | 7/1/2009 Contr Svc-Other Oper TD | PV | 42262397 Cobb, Rodney | 689.00 |
| 535000 | 14 | 7/1/2009 Contr Svc-Other Oper TD | PV | 42262401 Cobb, Rodney | 1,254.96 |
| 536000 | 13 | 7/1/2009 Contr Svc-Lab Testing Oper WT | JE | 160 Acc for Inv Rec'd not yet appr | -1,000.00 |
| 536000 | 13 | 7/1/2009 Contr Svc-Lab Testing Oper WT | PV | 42261690 Fouser Environmental Services | 20.00 |
| 536000 | 13 | 7/1/2009 Contr Svc-Lab Testing Oper WT | PV | 42261693 Fouser Environmental Services | 35.00 |
| 536000 | 13 | 7/1/2009 Contr Svc-Lab Testing Oper WT | PV | 42262390 Fouser Environmental Services | 20.00 |
| 550000 | 14 | 7/1/2009 Trans Oper TD | JE | 130 KY UNMAPPED PCARD ACCRUAL 0609 | -281.37 |
| 550000 | 16 | 7/1/2009 Trans Oper AG | JE | 160 Acc for Inv Rec'd not yet appr | -9.77 |
| 550001 | 16 | 7/1/2009 Trans Oper AG Lease Cost | JE | 215 Accrue 6/09 ARI Vehicle Chrgs | -3,647.07 |
| 550001 | 16 | 7/1/2009 Trans Oper AG Lease Cost | JE | 216 Accr ARI M40896,M56879,M59000 | -862.89 |
| 550002 | 16 | 7/1/2009 Trans Oper AG Lease Fuel | JE | 215 Accrue 6/09 ARI Vehicle Chrgs | -20,316.85 |
| 550002 | 16 | 7/1/2009 Trans Oper AG Lease Fuel | JE | 216 Accr ARI M40896,M56879,M59000 | -30,494.51 |
| 550003 | 16 | 7/1/2009 Trans Oper AG Lease Maint | JE | 215 Accrue 6/09 ARI Vehicle Chrgs | -9,743.99 |
| 550003 | 16 | 7/1/2009 Trans Oper AG Lease Maint | JE | 216 Accr ARI M40896,M56879,M59000 | -13,474.25 |
| 568010 | 16 | 7/1/2009 Water Res Conservation | JE | 160 Rec Workbasket Accrual 6/09 | -10,283.34 |
| 570100 | 15 | 7/1/2009 Uncollectible Accounts | JE | 30888440 KY CIS POST GL BATCH | -165.28 |
| 575000 | 16 | 7/1/2009 Misc Oper AG | RR | 10128247 Mulcahy Racing Stables LLC | -141.75 |
| 575000 | 14 | 7/1/2009 Misc Oper TD | PV | 42262395 CSX Transportation Inc-REMIT | 100.00 |
| 575000 | 14 | 7/1/2009 Misc Oper TD | PV | 42262409 Grainger - ALL USE REMIT | 448.44 |
| 575000 | 14 | 7/1/2009 Misc Oper TD | PV | 42262410 Grainger - ALL USE REMIT | 52.71 |
| 575100 | 15 | 7/1/2009 Bank Service Charges CA | JE | 3500 Accr month Mellon bank fees | -19,042.92 |
| 575200 | 15 | 7/1/2009 Collection Agencies CA | JE | 30653 Accrue 6/09 Alton-GC Services | -6,380.03 |
| 575220 | 16 | 7/1/2009 Community Relations | JE | 601 Accrual for Goods/Serv Rendere | -500.00 |
| 575270 | 16 | 7/1/2009 Directors Fees | PR | 42262008 Freibert, Patricia Anne | 1,000.00 |
| 575270 | 16 | 7/1/2009 Directors Fees | PR | 42262009 Sisson, William G | 1,000.00 |
| 575270 | 16 | 7/1/2009 Directors Fees | PR | 42262185 Martin, Wayne M | 1,000.00 |
| 575320 | 13 | 7/1/2009 Electricity WT | JE | 156 Accrue Discretionary Power Acc | -51.18 |
| 575320 | 14 | 7/1/2009 Electricity TD | EE | 3805949 OWEN ELECTRIC COOP INC | 7.12 |
| 575320 | 14 | 7/1/2009 Electricity TD | EE | 3806659 KENTUCKY UTILITIES COMPANY | 12.35 |
| 575320 | 16 | 7/1/2009 Electricity AG | EE | 3808422 KENTUCKY UTILITIES COMPANY | 12.35 |
| 575320 | 14 | 7/1/2009 Electricity TD | EE | 3808435 KENTUCKY UTILITIES COMPANY | 71.95 |
| 575420 | 15 | 7/1/2009 Forms CA | JE | 300 Regulus accrual June global | -898.14 |
| 575490 | 16 | 7/1/2009 Injuries and Damages | JE | 160 Rec Workbasket Accrual 6/09 | -175.00 |
| 575500 | 13 | 7/1/2009 Janitorial WT | JE | 601 Accrual for Goods/Serv Rendere | -2,300.00 |
| 575500 | 16 | 7/1/2009 Janitorial AG | JE | 601 Accrual for Goods/Serv Rendere | -532.00 |
| 575500 | 16 | 7/1/2009 Janitorial AG | PR | 42261804 Hales Cleaning Service - ACH | 2,765.00 |
| 575500 | 16 | 7/1/2009 Janitorial AG | PV | 42262400 Cobb, Rodney | 266.00 |
| 575545 | 13 | 7/1/2009 Lab Supplies WT | JE | 130 KY UNMAPPED PCARD ACCRUAL 0609 | -1,100.91 |
| 575545 | 13 | 7/1/2009 Lab Supplies WT | JE | 160 Acc for Inv Rec'd not yet appr | -1,834.86 |
| 575545 | 13 | 7/1/2009 Lab Supplies WT | PV | 42261703 IDEXX Distribution Inc | 132.18 |
| 575545 | 13 | 7/1/2009 Lab Supplies WT | PV | 42262389 IDEXX Distribution Inc | 1,834.86 |
| 575620 | 14 | 7/1/2009 Office \& Admin Supplies TD | JE | 130 KY UNMAPPED PCARD ACCRUAL 0609 | -369.57 |
| 575625 | 16 | 7/1/2009 Overnight Shipping AG | PV | 42261699 United Parcel Service | 76.53 |
| 575625 | 16 | 7/1/2009 Overnight Shipping AG | PV | 42261701 United Parcel Service | 43.36 |


| ACCOUNT | SUB | GL DATE | DESCRIPTION | DOC TYPE | DOC\# EXPLANATION | AMOUNT |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 575711 | 16 | 7/1/2009 | Add'l Security Costs AG | JE | 601 Accrual for Goods/Serv Rendere | -3,383.84 |
| 575780 | 11 | 7/1/2009 | Trash Removal SS | PV | 42261695 Allied Waste Services \#993 | 456.40 |
| 575790 | 16 | 7/1/2009 | Trustee Fees AG | JE | 4605 CO OF OWEN KY FEES ON FINANCIN | -4,000.00 |
| 620000 | 21 | 711/2009 | Mat and Sup Maint SS | JE | 601 Accrual for Goods/Serv Rendere | -55,807.00 |
| 620000 | 24 | 7/1/2009 | Mat and Sup Maint TD | IR | 543061 Inventory Return | -41.31 |
| 620000 | 24 | 711/2009 | Mat and Sup Maint TD | IR | 543063 Inventory Return | -323.95 |
| 620000 | 24 | 7/1/2009 | Mat and Sup Maint TD | PV | 42262411 Grainger - ALL USE REMIT | 252.96 |
| 635000 | 26 | 7/1/2009 | Contr Svc-Other Maint AG | JE | 160 Acc for Inv Rec'd not yet appr | -1,135.84 |
| 635000 | 26 | 7/1/2009 | Contr Svc-Other Maint AG | PV | 42262405 D C Elevator Co Inc-PO/REMIT | 172.50 |
| 635000 | 26 | 7/1/2009 | Contr Svc-Other Maint AG | PV | 42262408 Stephen Hillenmeyer Landscape | 1,135.84 |
| 675000 | 24 | 7/1/2009 | Misc Maint TD | JE | 130 KY UNMAPPED PCARD ACCRUAL 0609 | -30.21 |
| 675000 | 23 | 7/1/2009 | Misc Maint WT | JE | 160 Acc for Inv Rec'd not yet appr | -1,092.63 |
| 675000 | 23 | 7/1/2009 | Misc Maint WT | PV | 42261689 Sullivan Environmental Technol | 1,092.63 |
| 675000 | 23 | 7/1/2009 | Misc Maint WT | PV | 42261698 Siemens Water Technologies Cor | 245.64 |
| 675650 | 24 | 7/1/2009 | Paving/Backfill TD | JE | 160 Acc for Inv Rec'd not yet appr | -11,656.60 |
| 675650 | 24 | 7/1/2009 | Paving/Backfill TD | JE | 601 Accrual for Goods/Serv Rendere | -11,656.00 |
| 675650 | 24 | 7/1/2009 | Paving/Backfill TD | JE | 120610 Mthly Paving \& Sod Accl 06.09 | -21,165.94 |
| 675650 | 24 | 7/1/2009 | Paving/Backfill TD | PV | 42262415 D \& K Meter and Hydrant Repair | 735.00 |
| 675650 | 24 | 7/1/2009 | Paving/Backfill TD | PV | 42262419 D \& K Meter and Hydrant Repair | 590.00 |
| 685325 |  | 7/1/2009 | FICA | JE | 30888217 FICA Accrual for June 2009 | -14,361.07 |
| 715111 |  | 7/1/2009 | M\&J Revenues-Outside | RR | 10128145 Bluegrass Station Division-Rem | -8,784.17 |
| 716121 |  | 7/1/2009 | M\&J Expenses-Outside | JE | 120610 Mthly Paving \& Sod Accl 06.09 | -1,884.17 |
| 716121 |  | 7/1/2009 | M\&J Expenses-Outside | II | 543062 Inventory Issue-Stk E \& D | 41.31 |
| 760200 |  | 7/1/2009 | Other Income Deductions | JE | 601 Accrual for Goods/Serv Rendere | -20,000.00 |
| 401110 |  | 7/2/2009 | Res Sales Billed | JE | 30888572 KY CIS POST GL BATCH | -137,695.33 |
| 401210 |  | 7/2/2009 | Com Sales Billed | JE | 30888572 KY CIS POST GL BATCH | -115,925.17 |
| 401510 |  | 7/2/2009 | Pub Auth Billed | JE | 30888572 KY CIS POST GL BATCH | -357.37 |
| 402110 |  | 7/2/2009 | Dom WW Serv Billed | JE | 30888572 KY CIS POST GL BATCH | -24.97 |
| 403104 |  | 7/2/2009 | Oth Rev-NSF Check Charge | JE | 30888572 KY CIS POST GL BATCH | -144.00 |
| 403105 |  | 7/2/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30888572 KY CIS POST GL BATCH | -3,536.00 |
| 403107 |  | 7/2/2009 | Oth Rev-Reconnection Charges | JE | 30888572 KY CIS POST GL BATCH | -3,042.00 |
| 504100 | 16 | 7/2/2009 | Group Ins Oper AG | PS | 42263025 Wachovia Bank National Associa | 142,946.35 |
| 520100 | 16 | 7/2/2009 | M \& S Oper AG | PV | 42262738 StudioLink Inc | 350.00 |
| 520100 | 16 | 7/2/2009 | M \& S Oper AG | PV | 42262744 Media Library Inc-PO/REMIT | 200.00 |
| 520100 | 14 | 7/2/2009 | M \& S Oper TD | PV | 42262961 Cobb, Rodney | 12.00 |
| 535000 | 13 | 7/2/2009 | Contr Svc-Other Oper WT | PV | 42262959 Siemens Water Technologies Cor | 408.00 |
| 535000 | 14 | 7/2/2009 | Contr Svc-Other Oper TD | PV | 42262961 Cobb, Rodney | 429.87 |
| 535000 | 14 | 7/2/2009 | Contr Svc-Other Oper TD | PV | 42262962 Cobb, Rodney | 789.00 |
| 568010 | 16 | 7/2/2009 | Water Res Conservation | PV | 42262728 Creative Co-op LLC | 200.00 |
| 568010 | 16 | 7/2/2009 | Water Res Conservation | PV | 42262732 WTVQ TV - AP/PO | 1,750.00 |
| 568010 | 16 | 7/2/2009 | Water Res Conservation | PV | 42262754 Rupp Arena Sports \& Entertainm | 8,333.34 |
| 570100 | 15 | 7/2/2009 | Uncollectible Accounts | JE | 30888572 KY CIS POST GL BATCH | -415.07 |
| 575000 | 14 | 7/2/2009 | Misc Oper TD | TC | 30888331 AT\&T | 47.49 |
| 575130 | 16 | 7/2/2009 | Brochures and Handouts | PV | 42262734 Windrunner Advertising | 230.00 |
| 575220 | 16 | 7/2/2009 | Community Relations | PV | 42262730 Direct Response-PO/REMIT | 95.00 |
| 575275 | 16 | 7/2/2009 | Discounts Available | PK | 62056510 USA Blue Book | -18.28 |
| 575275 | 16 | 7/2/2009 | Discounts Available | PK | 62056521 Powerseal Pipeline Products Co | -73.15 |
| 575275 | 16 | 7/2/2009 | Discounts Available | PK | 62056523 JCM Industries Inc - REMIT | -3.45 |
| 575275 | 16 | 7/2/2009 | Discounts Available | PK | 62056524 Mueller Co - ALL USE PO/REMIT | -39.26 |
| 575275 | 16 | 7/2/2009 | Discounts Available | PK | 62056536 Ferguson SAC - ALL USE REMIT | -45.30 |
| 575342 | 16 | 7/2/2009 | Empl Exp Conf/Registration AG | PS | 42263030 Bluegrass Cross Connection - P | 120.00 |
| 575480 | 16 | 7/2/2009 | Heat - Oil/Gas AG | EE | 3810361 COLUMBIA GAS OF KENTUCKY | 148.17 |
| 575500 | 16 | 7/2/2009 | Janitorial AG | PV | 42262960 Cobb, Rodney | 266.00 |
| 575545 | 13 | 7/2/2009 | Lab Supplies WT | ST | 30888413 SABRIX VENDOR TAX COMPARE | 4.17 |
| 575545 | 13 | 7/2/2009 | Lab Supplies WT | PV | 42262958 VWR International Inc-PO/REMIT | 510.41 |
| 575740 | 15 | 7/2/2009 | Telephone CA | TC | 30888301 Windstream | 48.92 |
| 620000 | 24 | 7/2/2009 | Mat and Sup Maint TD | IR | 543107 Inventory Return | -49.62 |
| 675000 | 23 | 7/2/2009 | Misc Maint WT | ST | 30888416 SABRIX NO TAX CHARGED ACR | 65.56 |
| 715111 |  | 7/2/2009 | M\&J Revenues-Outside | RI | 10129487 ATS Construction | -1,567.00 |
| 760100 |  | 7/2/2009 | Donations Deduct | PV | 42262736 News-Herald Owenton | 183.41 |
| 760200 |  | 7/2/2009 | Other Income Deductions | PV | 42262748 Home Builders Association of L | 50.00 |
| 760200 |  | 7/2/2009 | Other Income Deductions | PV | 42262751 Home Builders Association of $L$ | 340.00 |
| 520100 | 16 | 7/3/2009 | M \& S Oper AG | ST | 30888557 SABRIX NO TAX CHARGED ACR | 12.00 |
| 568010 | 16 | 7/3/2009 | Water Res Conservation | ST | 30888557 SABRIX NO TAX CHARGED ACR | 500.00 |
| 403102 |  | 7/4/2009 | Oth Rev-Rents Water Property | RI | 10129651 T-Mobile USA Inc | -2,665.62 |
| 401110 |  | 7/6/2009 | Res Sales Billed | JE | 30888889 KY CIS POST GL BATCH | -196,941.46 |
| 401210 |  | 7/6/2009 | Com Sales Billed | JE | 30888889 KY CIS POST GL BATCH | -58,622.34 |
| 401310 |  | 7/6/2009 | Ind Sales Billed | JE | 30888889 KY CIS POST GL BATCH | -71,294.15 |
| 401410 |  | 7/6/2009 | Pub Fire Billed | JE | 30888889 KY CIS POST GL BATCH | -226,072.05 |
| 401450 |  | 7/6/2009 | Priv Fire Billed | JE | 30888889 KY CIS POST GL BATCH | -139,218.27 |
| 401510 |  | 7/6/2009 | Pub Auth Billed | JE | 30888889 KY CIS POST GL BATCH | -207,324.84 |
| 401610 |  | 7/6/2009 | SFR Billed | JE | 30888889 KY CIS POST GL BATCH | -9,261.78 |
| 403104 |  | 7/6/2009 | Oth Rev-NSF Check Charge | JE | 30888889 KY CIS POST GL BATCH | -144.00 |
| 403105 |  | 7/6/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30888889 KY CIS POST GL BATCH | -4,914.00 |
| 403107 |  | 7/6/2009 | Oth Rev-Reconnection Charges | JE | 30888889 KY CIS POST GL BATCH | -3,250.00 |
| 511100 | 13 | 7/6/2009 | Waste Disposal Exp WT | EE | 3812753 KENTUCKY UTILITIES COMPANY | 859.58 |
| 515100 | 14 | 7/6/2009 | 9 Purch Power TD | EE | 3811627 OWEN ELECTRIC COOP INC | 13.22 |
| 515100 | 13 | 7/6/2009 | 9 Purch Power WT | EE | 3812778 KENTUCKY UTILITIES COMPANY | 2,886.80 |
| 515100 | 14 | 7/6/2009 | Purch Power TD | EE | 3812785 KENTUCKY UTILITIES COMPANY | 560.64 |
| 550000 | 16 | 7/6/2009 | Trans Oper AG | PV | 42263252 Automotive Rentals Inc ACH/ALL | 2,705.91 |
| 550000 | 16 | 7/6/2009 | Trans Oper AG | PV | 42263350 Automotive Rentals Inc ACH/ALL | 2,234.51 |
| 550000 | 16 | 7/6/2009 | Trans Oper AG | PV | 42263456 Automotive Rentals Inc ACH/ALL | 308.32 |
| 550000 | 16 | 7/6/2009 | Trans Oper AG | PV | 42263719 Automotive Rentals Inc ACH/ALL | 2,458.05 |
| 550001 | 16 | 7/6/2009 | Trans Oper AG Lease Cost | PV | 42263456 Automotive Rentals Inc ACH/ALL | 862.89 |




| ACCOUNT | SUB | GL DATE ${ }^{\text {deSCRIPTION }}$ | DOC TYPE | DOC\# ${ }^{\text {E }}$ - EXPLANATION | AMOUNT |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 550000 | 1 | 7/12/2009 Trans - Cap Credits | T3 | 34086 Actual Burden Journal Entries | 143.60 |
| 558000 | 1 | 7/12/2009 Ins Work Comp Cap Credits | T3 | 34071 Actual Burden Journal Entries | -12.57 |
| 558000 | 1 | 7/12/2009 Ins Work Comp Cap Credits | T3 | 34086 Actual Burden Journal Entries | 35.90 |
| 685325 |  | 7/12/2009 FICA | T3 | 34071 Actual Burden Journal Entries | -47.22 |
| 685325 |  | 7/12/2009 FICA | T3 | 34086 Actual Burden Journal Entries | 134.91 |
| 401110 |  | 7/13/2009 Res Sales Billed | JE | 30889658 KY CIS POST GL BATCH | -1,239.86 |
| 401210 |  | 7/13/2009 Com Sales Billed | JE | 30889658 KY CIS POST GL BATCH | -466.02 |
| 401450 |  | 7/13/2009 Priv Fire Billed | JE | 30889658 KY CIS POST GL BATCH | 87.80 |
| 401710 |  | 7/13/2009 Misc Sales Billed | JE | 30889658 KY CIS POST GL BATCH | -2,041.79 |
| 403104 |  | 7/13/2009 Oth Rev-NSF Check Charge | JE | 30889658 KY CIS POST GL BATCH | -48.00 |
| 403105 |  | 7/13/2009 Oth Rev-Appl/Initiate Serv Fee | JE | 30889658 KY CIS POST GL BATCH | -130.00 |
| 403107 |  | 7/13/2009 Oth Rev-Reconnection Charges | JE | 30889658 KY CIS POST GL BATCH | -26.00 |
| 403199 |  | 7/13/2009 Oth Rev-Other Water Rev | PS | 42268946 Kentucky Department of Revenue | -839.03 |
| 515100 | 14 | 7/13/2009 Purch Power TD | EE | 3820978 OWEN ELECTRIC COOP INC | 27.44 |
| 515100 | 13 | 7/13/2009 Purch Power WT | EE | 3820990 OWEN ELECTRIC COOP INC | 5,954.26 |
| 515100 | 13 | 7/13/2009 Purch Power WT | EE | 3820994 OWEN ELECTRIC COOP INC | 17.71 |
| 515100 | 12 | 7/13/2009 Purch Power P | EE | 3821762 KENTUCKY UTILITIES COMPANY | 12,485.12 |
| 515100 | 12 | 7/13/2009 Purch Power P | EE | 3823031 CLARK ENERGY COOP | 746.76 |
| 515100 | 14 | 7/13/2009 Purch Power TD | EE | 3823308 KENTUCKY UTILITIES COMPANY | 130.07 |
| 515100 | 14 | 7/13/2009 Purch Power TD | EE | 3823317 KENTUCKY UTILITIES COMPANY | 19.96 |
| 515100 | 12 | 7/13/2009 Purch Power P | PS | 42268946 Kentucky Department of Revenue | 934.33 |
| 515100 | 13 | 7/13/2009 Purch Power WT | PS | 42268946 Kentucky Department of Revenue | 3,737.33 |
| 515100 | 13 | 7/13/2009 Purch Power WT | PS | 42268947 Kentucky Department of Revenue | 2,335.81 |
| 520100 | 16 | 7/13/2009 M \& S Oper AG | PV | 42267435 Vital Records Control of KY LL | 897.24 |
| 520100 | 14 | 7/13/2009 M \& S Oper TD | PV | 42267438 Bentley Systems, Inc. - REMIT | 2,900.16 |
| 533000 | 16 | 7/13/2009 Contr Svc-Legal Oper AG | PV | 42267409 Stoll Keenon Ogden PLLC-PO/REM | 2,214.00 |
| 535000 | 14 | 7/13/2009 Contr Svc-Other Oper TD | PV | 42267371 Perfection Services-PO/REMIT | 168.00 |
| 535000 | 16 | 7/13/2009 Contr Svc-Other Oper AG | PV | 42267444 Happy's General Contracting- R | 232.50 |
| 550000 | 16 | 7/13/2009 Trans Oper AG | PV | 42267398 Bridgestone Americas Inc | 417.68 |
| 570100 | 15 | 7/13/2009 Uncollectible Accounts | JE | 30889658 KY CIS POST GL BATCH | -55.61 |
| 575000 | 14 | 7/13/2009 Misc Oper TD | PV | 42267338 Grainger - ALL USE REMIT | 780.92 |
| 575000 | 14 | 7/13/2009 Misc Oper TD | PV | 42267342 Grainger - ALL USE REMIT | 200.18 |
| 575000 | 14 | 7/13/2009 Misc Oper TD | PV | 42267374 Grainger - ALL USE REMIT | 80.01 |
| 575000 | 14 | 7/13/2009 Misc Oper TD | PV | 42267381 Grainger - ALL USE REMIT | 668.90 |
| 575220 | 16 | 7/13/2009 Community Relations | PS | 42268941 Francis Screen Printing | 500.00 |
| 575275 | 16 | 7/13/2009 Discounts Available | PK | 62056675 Ferguson SAC - ALL USE REMIT | -25.34 |
| 575320 | 14 | 7/13/2009 Electricity TD | EE | 3823327 KENTUCKY UTILITIES COMPANY | 148.89 |
| 575500 | 14 | 7/13/2009 Janitorial TD | PV | 42267451 Grainger - ALL USE REMIT | 75.10 |
| 575500 | 16 | 7/13/2009 Janitorial AG | PV | 42267455 Hales Cleaning Service - ACH | 972.50 |
| 575500 | 16 | 7/13/2009 Janitorial AG | PV | 42267457 Hales Cleaning Service - ACH | 773.00 |
| 575625 | 16 | 7/13/2009 Overnight Shipping AG | PV | 42267483 United Parcel Service | 225.65 |
| 575711 | 16 | 7/13/2009 Add'I Security Costs AG | PV | 42267319 Murray Guard Inc-PO/REMIT | 2,668.64 |
| 575711 | 16 | 7/13/2009 Add'I Security Costs AG | PV | 42267321 Murray Guard Inc-PO/REMIT | 715.20 |
| 575711 | 16 | 7/13/2009 Add'I Security Costs AG | PV | 42267484 Murray Guard Inc-PO/REMIT | 2,668.64 |
| 575711 | 16 | 7/13/2009 Add'I Security Costs AG | PV | 42267486 Murray Guard Inc-PO/REMIT | 715.20 |
| 575780 | 16 | 7/13/2009 Trash Removal AG | PV | 42267401 Allied Waste Services \#993 | 11.19 |
| 575780 | 16 | 7/13/2009 Trash Removal AG | PV | 42267446 LFUCG Division of Revenue - RE | 147.26 |
| 620000 | 24 | 7/13/2009 Mat and Sup Maint TD | IR | 544411 Inventory Return | -204.24 |
| 620000 | 24 | 7/13/2009 Mat and Sup Maint TD | IR | 544412 Inventory Return | -20.50 |
| 620000 | 24 | 7/13/2009 Mat and Sup Maint TD | IR | 544414 Inventory Return | -76.38 |
| 620000 | 24 | 7/13/2009 Mat and Sup Maint TD | IR | 544416 Inventory Return | -143.84 |
| 620000 | 24 | 7/13/2009 Mat and Sup Maint TD | PV | 42267346 Ferguson SAC - ALL USE REMIT | 240.56 |
| 620000 | 24 | 7/13/2009 Mat and Sup Maint TD | PV | 42267388 Ferguson SAC - ALL USE REMIT | 134.54 |
| 620000 | 24 | 7/13/2009 Mat and Sup Maint TD | PV | 42267393 Ferguson SAC - ALL USE REMIT | 568.97 |
| 620000 | 24 | 7/13/2009 Mat and Sup Maint TD | PV | 42267397 Ferguson SAC - ALL USE REMIT | 2,907.41 |
| 620000 | 24 | 7/13/2009 Mat and Sup Maint TD | PV | 42267488 Ferguson SAC - ALL USE REMIT | 251.23 |
| 635000 | 26 | 7/13/2009 Contr Svc-Other Maint AG | PV | 42267330 Orkin Exterminating Co - Lexin | 53.46 |
| 635000 | 26 | 7/13/2009 Contr Svc-Other Maint AG | PV | 42267334 Orkin Exterminating Co - Lexin | 50.98 |
| 635000 | 26 | 7/13/2009 Contr Svc-Other Maint AG | PV | 42267459 D C Elevator Co Inc-PO/REMIT | 186.25 |
| 675000 | 26 | 7/13/2009 Misc Maint AG | PV | 42267404 Perfection Services-PO/REMIT | 867.00 |
| 716121 |  | 7/13/2009 M\&J Expenses-Outside | II | 544417 Inventory Issue-Stk E \& D | 143.84 |
| 401110 |  | 7/14/2009 Res Sales Billed | JE | 30889723 KY CIS POST GL BATCH | -309,807.44 |
| 401210 |  | 7/14/2009 Com Sales Billed | JE | 30889723 KY CIS POST GL BATCH | -119,015.97 |
| 401450 |  | 7/14/2009 Priv Fire Billed | JE | 30889723 KY CIS POST GL BATCH | -45.17 |
| 401510 |  | 7/14/2009 Pub Auth Billed | JE | 30889723 KY CIS POST GL BATCH | -3,745.56 |
| 401710 |  | 7/14/2009 Misc Sales Billed | JE | 30889723 KY CIS POST GL BATCH | -227.73 |
| 403104 |  | 7/14/2009 Oth Rev-NSF Check Charge | JE | 30889723 KY CIS POST GL BATCH | -48.00 |
| 403105 |  | 7/14/2009 Oth Rev-Appl/Initiate Serv Fee | JE | 30889723 KY CIS POST GL BATCH | -6,656.00 |
| 403107 |  | 7/14/2009 Oth Rev-Reconnection Charges | JE | 30889723 KY CIS POST GL BATCH | -5,564.00 |
| 515100 | 13 | 7/14/2009 Purch Power WT | EE | 3824300 KENTUCKY UTILITIES COMPANY | 4,332.30 |
| 535000 | 16 | 7/14/2009 Contr Svc-Other Oper AG | TC | 30889517 INSIGHT | 192.91 |
| 535000 | 16 | 7/14/2009 Contr Svc-Other Oper AG | ST | 30889635 SABRIX NO TAX CHARGED ACR | 13.95 |
| 550000 | 16 | 7/14/2009 Trans Oper AG | ST | 30889632 SABRIX VENDOR TAX COMPARE | 2.82 |
| 570100 | 15 | 7/14/2009 Uncollectible Accounts | JE | 30889723 KY CIS POST GL BATCH | -253.02 |
| 575275 | 16 | 7/14/2009 Discounts Available | PK | 62056680 Mueller Co - ALL USE PO/REMIT | -9.55 |
| 575480 | 14 | 7/14/2009 Heat - Oil/Gas TD | EE | 3825198 CARROLLTON UTILITIES | 14.80 |
| 575740 | 15 | 7/14/2009 Telephone CA | TC | 30889486 AT\&T | 1,096.26 |
| 575740 | 15 | 7/14/2009 Telephone CA | TC | 30889507 Windstream | 69.08 |
| 575740 | 14 | 7/14/2009 Telephone TD | TC | 30889541 Cincinnati Bell | 18.75 |
| 575740 | 15 | 7/14/2009 Telephone CA | TC | 30889597 AT\&T | 1,106.09 |
| 575740 | 16 | 7/14/2009 Telephone AG | TC | 30889607 AT\&T | 54.21 |
| 575741 | 16 | 7/14/2009 Cell Phone AG | TC | 30889486 AT\&T | 223.52 |
| 575741 | 16 | 7/14/2009 Cell Phone AG | TC | 30889593 NEXTEL | 54.69 |
| 575741 | 13 | 7/14/2009 Cell Phone WT | TC | 30889593 NEXTEL | 176.46 |


| ACCOUNT | SUB | GL DATE | DESCRIPTION | DOC TYPE | DOC\# | EXPLANATION | AMOUNT |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 620000 | 24 | 7/14/2009 | Mat and Sup Maint TD | IR | 544702 | Inventory Return | -497.83 |
| 401110 |  | 7/15/2009 | Res Sales Billed | JE | 30889949 | KY CIS POST GL BATCH | -108,851.67 |
| 401210 |  | 7/15/2009 | Com Sales Billed | JE | 30889949 | KY CIS POST GL BATCH | -55,954.15 |
| 401310 |  | 7/15/2009 | Ind Sales Billed | JE | 30889949 | KY CIS POST GL BATCH | -4,852.39 |
| 401450 |  | 7/15/2009 | Priv Fire Billed | JE | 30889949 | KY CIS POST GL BATCH | -579.90 |
| 401510 |  | 7/15/2009 | Pub Auth Billed | JE | 30889949 | KY CIS POST GL BATCH | -8,658.94 |
| 402310 |  | 7/15/2009 | Ind WW Serv Billed | RI | 10130030 | Itron | -500.00 |
| 403104 |  | 7/15/2009 | Oth Rev-NSF Check Charge | JE | 30889949 | KY CIS POST GL BATCH | -144.00 |
| 403105 |  | 7/15/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30889949 | KY CIS POST GL BATCH | -2,548.00 |
| 403107 |  | 7/15/2009 | Oth Rev-Reconnection Charges | JE | 30889949 | KY CIS POST GL BATCH | -3,484.00 |
| 403198 |  | 7/15/2009 | Oth Rev-Misc Service Rev | RI | 10130023 | Kentucky American Water - Nort | -20.00 |
| 403198 |  | 7/15/2009 | Oth Rev-Misc Service Rev | RI | 10130024 | Kentucky American Water - Nort | -20.00 |
| 403198 |  | 7/15/2009 | Oth Rev-Misc Service Rev | RI | 10130025 | Kentucky American Water - Nort | -20.00 |
| 515100 | 14 | 7/15/2009 | Purch Power TD | EE | 3825710 | KENTUCKY UTILITIES COMPANY | 13.38 |
| 515100 | 14 | 7/15/2009 | Purch Power TD | EE | 3825726 | KENTUCKY UTILITIES COMPANY | 42.01 |
| 515100 | 14 | 7/15/2009 | Purch Power TD | EE | 3825728 | KENTUCKY UTILITIES COMPANY | 30.48 |
| 515100 | 14 | 7/15/2009 | Purch Power TD | EE | 3825736 | KENTUCKY UTILITIES COMPANY | 22.02 |
| 515100 | 14 | 7/15/2009 | Purch Power TD | EE | 3825748 | KENTUCKY UTILITIES COMPANY | 66.53 |
| 515100 | 14 | 7/15/2009 | Purch Power TD | EE | 3825752 | KENTUCKY UTILITIES COMPANY | 12.53 |
| 515100 | 14 | 7/15/2009 | Purch Power TD | EE | 3825756 | KENTUCKY UTILITIES COMPANY | 167.35 |
| 550000 | 16 | 7/15/2009 | Trans Oper AG | PV | 42271648 | Automotive Rentals Inc ACH/ALL | 1,999.09 |
| 550002 | 16 | 7/15/2009 | Trans Oper AG Lease Fuel | PV | 42271648 | Automotive Rentals Inc ACH/ALL | 10,366.30 |
| 550003 | 16 | 7/15/2009 | Trans Oper AG Lease Maint | PV | 42271648 | Automotive Rentals Inc ACH/ALL | 10,044.72 |
| 570100 | 15 | 7/15/2009 | Uncollectible Accounts | JE | 30889949 | KY CIS POST GL BATCH | -530.01 |
| 575000 | 16 | 7/15/2009 | Misc Oper AG | OV | 10271336 | JCM Industries Inc - PO only | 475.70 |
| 575000 | 14 | 7/15/2009 | Misc Oper TD | PV | 42271301 | Grainger - ALL USE REMIT | 671.54 |
| 575000 | 14 | 7/15/2009 | Misc Oper TD | PV | 42271319 | Grainger - ALL USE REMIT | 447.66 |
| 575000 | 16 | 7/15/2009 | Misc Oper AG | PV | 42271547 | BaptistWorx Business Office | 155.00 |
| 575275 | 16 | 7/15/2009 | Discounts Available | PK | 62056739 | Mueller Co - ALL USE PO/REMIT | -13.41 |
| 575280 | 16 | 7/15/2009 | Dues/Membership Deduct | PS | 42271215 | Lexington Forum Inc | 225.00 |
| 575320 | 14 | 7/15/2009 | Electricity TD | EE | 3822172 | KENTUCKY UTILITIES COMPANY | 12.56 |
| 575320 | 14 | 7/15/2009 | Electricity TD | EE | 3825732 | KENTUCKY UTILITIES COMPANY | 13.65 |
| 575320 | 14 | 7/15/2009 | Electricity TD | EE | 3825767 | KENTUCKY UTILITIES COMPANY | 12.20 |
| 575740 | 16 | 7/15/2009 | Telephone AG | RI | 10130021 | Local Insight Yellow Pages | -87.62 |
| 620000 | 24 | 7/15/2009 | Mat and Sup Maint TD | PV | 42271321 | Ferguson SAC - ALL USE REMIT | 100.43 |
| 675000 | 26 | 7/15/2009 | Misc Maint AG | PV | 42271680 | Vertex Business Services - Wir | 818.03 |
| 401110 |  | 7/16/2009 | Res Sales Billed | JE | 30890017 | KY CIS POST GL BATCH | -123,884.52 |
| 401210 |  | 7/16/2009 | Com Sales Billed | JE | 30890017 | KY CIS POST GL BATCH | -49,957.06 |
| 401510 |  | 7/16/2009 | Pub Auth Billed | JE | 30890017 | KY CIS POST GL BATCH | -6,647.02 |
| 402110 |  | 7/16/2009 | Dom WW Serv Billed | JE | 30890017 | KY CIS POST GL BATCH | -28.32 |
| 403104 |  | 7/16/2009 | Oth Rev-NSF Check Charge | JE | 30890017 | KY CIS POST GL BATCH | -252.00 |
| 403105 |  | 7/16/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30890017 | KY CIS POST GL BATCH | -3,432.00 |
| 403107 |  | 7/16/2009 | Oth Rev-Reconnection Charges | JE | 30890017 | KY CIS POST GL BATCH | -4,498.00 |
| 504610 | 16 | 7/16/2009 | Employee Awards AG | CC | 6143 | HARDEES OF LEXINGTON 3 | 30.59 |
| 504660 | 16 | 7/16/2009 | Tuition Aid AG | PS | 42272764 | Indiana Wesleyan University | 2,400.00 |
| 520100 | 13 | 7/16/2009 | M \& S Oper WT | CC | 6143 | UFIRST LAUNDRY SVCS | 39.12 |
| 520100 | 16 | 7/16/2009 | M \& S Oper AG | CC | 6143 | CLEAN SWEEP CAR WASH | 367.50 |
| 520100 | 14 | 7/16/2009 | M \& S Oper TD | CC | 6143 | ADVANCE AUTO PARTS | 1,909.46 |
| 535000 | 16 | 7/16/2009 | Contr Svc-Other Oper AG | CC | 6143 | CLEAN SWEEP CAR WASH | 79.95 |
| 535000 | 15 | 7/16/2009 | Contr Svc-Other Oper CA | CC | 6143 | ZORESCO EQUIPMENT CO | 318.75 |
| 550000 | 16 | 7/16/2009 | Trans Oper AG | CC | 6143 | THORNTONS \#0048 Q | 94.86 |
| 550000 | 14 | 7/16/2009 | Trans Oper TD | CC | 6143 | ADVANCE AUTO PARTS | 103.81 |
| 550003 | 16 | 7/16/2009 | Trans Oper AG Lease Maint | RI | 10130048 | Lee Tire | -28.00 |
| 570100 | 15 | 7/16/2009 | Uncollectible Accounts | JE | 30890017 | KY CIS POST GL BATCH | -74.35 |
| 575000 | 14 | 7/16/2009 | Misc Oper TD | CC | 6143 | LOWES | 1,224.44 |
| 575140 | 16 | 7/16/2009 | Charitable Contrib Deduct | CC | 6143 | BLUEGRASS COUNCIL BSA | 20.00 |
| 575280 | 16 | 7/16/2009 | Dues/Membership Deduct | CC | 6143 | WV TREASURY | 40.00 |
| 575340 | 16 | 7/16/2009 | Employee Expenses AG | CC | 6143 | DELTA AIR | 2,732.43 |
| 575342 | 16 | 7/16/2009 | Empl Exp Conf/Registration AG | CC | 6143 | KENTUCKY/TENNESEE WATER P | 325.00 |
| 575350 | 16 | 7/16/2009 | Meals Deduct | CC | 6143 | MCDONALDS F | 811.69 |
| 575351 | 16 | 7/16/2009 | Meals Non Deduct | CC | 6143 | CRACKER BARREL \# | 43.38 |
| 575620 | 16 | 7/16/2009 | Office \& Admin Supplies AG | CC | 6143 | OFFICEMAX CT IN | 167.02 |
| 575620 | 14 | 7/16/2009 | Office \& Admin Supplies TD | CC | 6143 | OFFICEMAX CT IN | 1,962.75 |
| 575620 | 16 | 7/16/2009 | Office \& Admin Supplies AG | CC | 6154 | OFFICEMAX CT IN | 1,453.83 |
| 575820 | 14 | 7/16/2009 | Uniforms TD | CC | 6143 | UFIRST LAUNDRY SVCS | 269.01 |
| 575820 | 13 | 7/16/2009 | Uniforms WT | CC | 6143 | UFIRST LAUNDRY SVCS | 294.47 |
| 575998 | 16 | 7/16/2009 | PCard Undistributed | CC | 6143 | LOWES | 710.66 |
| 620000 | 21 | 7/16/2009 | Mat and Sup Maint SS | CC | 6143 | KENTUCKY MOTOR SERVICE W | 13.74 |
| 675000 | 24 | 7/16/2009 | Misc Maint TD | CC | 6143 | SUNBELT RENTALS \#01 OF | 30.21 |
| 715111 |  | 7/16/2009 | M\&J Revenues-Outside | RI | 10109946 | Baker, Greg | 250.16 |
| 715111 |  | 7/16/2009 | M\&J Revenues-Outside | RI | 10114643 | Caudill Excavating | 845.61 |
| 715111 |  | 7/16/2009 | M\&J Revenues-Outside | RI | 10116843 | Dennis Fence Company | 1,090.26 |
| 716121 |  | 7/16/2009 | M\&J Expenses-Outside | CC | 6143 | QUIZNOS SUB \#2918 Q | 28.87 |
| 716121 |  | 7/16/2009 | M\&J Expenses-Outside | RI | 10130047 | Elrecon LLC | -744.57 |
| 401110 |  | 7/17/2009 | Res Sales Billed | JE | 30890150 | KY CIS POST GL BATCH | -157,244.85 |
| 401210 |  | 7/17/2009 | Com Sales Billed | JE | 30890150 | KY CIS POST GL BATCH | -53,676.98 |
| 401510 |  | 7/17/2009 | Pub Auth Billed | JE | 30890150 | KY CIS POST GL BATCH | -3,775.26 |
| 401710 |  | 7/17/2009 | Misc Sales Billed | JE | 30890150 | KY CIS POST GL BATCH | -133.01 |
| 402110 |  | 7/17/2009 | Dom WW Serv Billed | JE | 30890150 | KY CIS POST GL BATCH | -7.48 |
| 403104 |  | 7/17/2009 | Oth Rev-NSF Check Charge | JE | 30890150 | KY CIS POST GL BATCH | -72.00 |
| 403105 |  | 7/17/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30890150 | KY CIS POST GL BATCH | -2,002.00 |
| 403107 |  | 7/17/2009 | Oth Rev-Reconnection Charges | JE | 30890150 | KY CIS POST GL BATCH | -2,444.00 |
| 501200 | 2410 | 7/17/2009 | Labor Maint TD Struct \& Imp | T2 | 34018 | Payroll Labor Distribution | 144.22 |
| 501200 | 2415 | 7/17/2009 | Labor Maint TD Dist Res | T2 | 34018 | Payroll Labor Distribution | 363.36 |


| ACCOUNT | SUB | GL DATE $\quad$ DESCRIPTION | DOC TYPE | DOC\# EXPLANATION | AMOUNT |
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| 501200 | 21 | 7/17/2009 Labor Maint SS | T2 | 34018 Payroll Labor Distribution | 432.49 |
| 501200 | 2405 | 7/17/2009 Labor Maint TD Super/Eng | T2 | 34018 Payroll Labor Distribution | 564.22 |
| 501200 | 2305 | 7/17/2009 Labor Maint WT Super/Eng | T2 | 34018 Payroll Labor Distribution | 1,692.69 |
| 501200 | 2435 | 7/17/2009 Labor Maint TD Meters | T2 | 34018 Payroll Labor Distribution | 1,875.04 |
| 501200 | 23 | 7/17/2009 Labor Maint WT | T2 | 34018 Payroll Labor Distribution | 1,998.48 |
| 501200 | 24 | 7/17/2009 Labor Maint TD | T2 | 34018 Payroll Labor Distribution | 2,186.11 |
| 501200 | 22 | 7/17/2009 Labor Maint P | T2 | 34018 Payroll Labor Distribution | 3,270.24 |
| 501200 | 2440 | 7/17/2009 Labor Maint TD Hydrants | T2 | 34018 Payroll Labor Distribution | 5,168.51 |
| 501200 | 1405 | 7/17/2009 Labor Oper TD Super/Eng | T2 | 34018 Payroll Labor Distribution | 5,678.56 |
| 501200 | 1415 | 7/17/2009 Labor Oper TD Lines | T2 | 34018 Payroll Labor Distribution | 7,171.33 |
| 501200 | 2430 | 7/17/2009 Labor Maint TD Services | T2 | 34018 Payroll Labor Distribution | 8,397.60 |
| 501200 | 15 | 7/17/2009 Labor Oper CA | T2 | 34018 Payroll Labor Distribution | 9,286.51 |
| 501200 | 2420 | 7/17/2009 Labor Maint TD Mains | T2 | 34018 Payroll Labor Distribution | 9,342.28 |
| 501200 | 1520 | 7/17/2009 Labor Oper CA Cust Serv | T2 | 34018 Payroll Labor Distribution | 10,069.24 |
| 501200 | 1510 | 7/17/2009 Labor Oper CA Mtr Read | T2 | 34018 Payroll Labor Distribution | 17,809.54 |
| 501200 | 1420 | 7/17/2009 Labor Oper TD Meter | T2 | 34018 Payroll Labor Distribution | 23,377.65 |
| 501200 | 1305 | 7/17/2009 Labor Oper WT Super/Eng | T2 | 34018 Payroll Labor Distribution | 29,202.95 |
| 501200 | 13 | 7/17/2009 Labor Oper WT | T2 | 34018 Payroll Labor Distribution | 32,813.95 |
| 501200 | 16 | 7/17/2009 Labor Oper AG | T2 | 34018 Payroll Labor Distribution | 33,600.49 |
| 501200 | 14 | 7/17/2009 Labor Oper TD | T2 | 34018 Payroll Labor Distribution | 37,772.80 |
| 501200 | 13 | 7/17/2009 Labor Oper WT | T3 | 34019 Actual Burden Journal Entries | 27.60 |
| 501210 | 1405 | 7/17/2009 Labor NS OT TD Super/Eng | T2 | 34018 Payroll Labor Distribution | 66.00 |
| 501210 | 15 | 7/17/2009 Labor NS OT CA | T2 | 34018 Payroll Labor Distribution | 88.05 |
| 501210 | 2430 | 7/17/2009 Labor NS OT TD Services | T2 | 34018 Payroll Labor Distribution | 246.30 |
| 501210 | 2420 | 7/17/2009 Labor NS OT TD Mains | T2 | 34018 Payroll Labor Distribution | 674.67 |
| 501210 | 1510 | 7/17/2009 Labor NS OT CA Mtr Read | T2 | 34018 Payroll Labor Distribution | 702.35 |
| 501210 | 1415 | 7/17/2009 Labor NS OT TD Lines | T2 | 34018 Payroll Labor Distribution | 703.40 |
| 501210 | 14 | 7/17/2009 Labor NS OT TD | T2 | 34018 Payroll Labor Distribution | 1,261.19 |
| 501210 | 1305 | 7/17/2009 Labor NS OT WT Super/Eng | T2 | 34018 Payroll Labor Distribution | 1,918.94 |
| 501210 | 1520 | 7/17/2009 Labor NS OT CA Cust Serv | T2 | 34018 Payroll Labor Distribution | 2,475.67 |
| 501210 | 1420 | 7/17/2009 Labor NS OT TD Meter | T2 | 34018 Payroll Labor Distribution | 3,386.65 |
| 501210 | 13 | 7/17/2009 Labor NS OT WT | T2 | 34018 Payroll Labor Distribution | 4,999.90 |
| 501711 |  | 7/17/2009 IP-Off-Annual-P/R JE | T3 | 34019 Actual Burden Journal Entries | 10,649.22 |
| 504100 | 1 | 7/17/2009 Group Insurance - Cap Credits | T1 | 34017 Payroll Disbursement Entries | -59,150.24 |
| 504100 | 16 | 7/17/2009 Group Ins Oper AG | T1 | 34017 Payroll Disbursement Entries | -8,898.19 |
| 504100 | 16 | 7/17/2009 Group Ins Oper AG | T3 | 34019 Actual Burden Journal Entries | 2,737.86 |
| 504100 | 1 | 7/17/2009 Group Insurance - Cap Credits | T3 | 34019 Actual Burden Journal Entries | 49,000.04 |
| 504100 | 16 | 7/17/2009 Group Ins Oper AG | T1 | 34069 Payroll Disbursement Entries | 53.08 |
| 504100 | 1 | 7/17/2009 Group Insurance - Cap Credits | T1 | 34069 Payroll Disbursement Entries | 341.04 |
| 504100 | 1 | 7/17/2009 Group Insurance - Cap Credits | T1 | 34084 Payroll Disbursement Entries | -341.04 |
| 504100 | 16 | 7/17/2009 Group Ins Oper AG | T1 | 34084 Payroll Disbursement Entries | -53.08 |
| 504620 | 16 | 7/17/2009 Employee Physical Exam AG | PS | 42273127 Concentra Medical Ctrs | 186.00 |
| 505100 | 1 | 7/17/2009 PBOP Cap Credits | T1 | 34017 Payroll Disbursement Entries | -39,115.28 |
| 505100 | 1 | 7/17/2009 PBOP Cap Credits | T3 | 34019 Actual Burden Journal Entries | 32,812.79 |
| 505100 | 1 | 7/17/2009 PBOP Cap Credits | T1 | 34069 Payroll Disbursement Entries | 355.40 |
| 505100 | 1 | 7/17/2009 PBOP Cap Credits | T1 | 34084 Payroll Disbursement Entries | -355.40 |
| 506100 | 1 | 7/17/2009 Pension - Cap Credits | T1 | 34017 Payroll Disbursement Entries | -53,141.45 |
| 506100 | 1 | 7/17/2009 Pension - Cap Credits | T3 | 34019 Actual Burden Journal Entries | 44,578.97 |
| 506100 | 1 | 7/17/2009 Pension - Cap Credits | T1 | 34069 Payroll Disbursement Entries | 482.84 |
| 506100 | 1 | 7/17/2009 Pension - Cap Credits | T1 | 34084 Payroll Disbursement Entries | -482.84 |
| 507100 | 16 | 7/17/2009 401k Oper AG | T3 | 34019 Actual Burden Journal Entries | 4,566.79 |
| 508101 | 16 | 7/17/2009 DCP Oper AG | T3 | 34019 Actual Burden Journal Entries | 3,749.11 |
| 550000 | 1 | 7/17/2009 Trans - Cap Credits | T1 | 34017 Payroll Disbursement Entries | -24,905.39 |
| 550000 | 1 | 7/17/2009 Trans - Cap Credits | T3 | 34019 Actual Burden Journal Entries | 20,631.69 |
| 550000 | 1 | 7/17/2009 Trans - Cap Credits | T1 | 34069 Payroll Disbursement Entries | 143.60 |
| 550000 | 1 | 7/17/2009 Trans - Cap Credits | T1 | 34084 Payroll Disbursement Entries | -143.60 |
| 558000 | 1 | 7/17/2009 Ins Work Comp Cap Credits | T1 | 34017 Payroll Disbursement Entries | -6,226.35 |
| 558000 | 1 | 7/17/2009 Ins Work Comp Cap Credits | T3 | 34019 Actual Burden Journal Entries | 5,157.88 |
| 558000 | 1 | 7/17/2009 Ins Work Comp Cap Credits | T1 | 34069 Payroll Disbursement Entries | 35.90 |
| 558000 | 1 | 7/17/2009 Ins Work Comp Cap Credits | T1 | 34084 Payroll Disbursement Entries | -35.90 |
| 570100 | 15 | 7/17/2009 Uncollectible Accounts | JE | 30890150 KY CIS POST GL BATCH | -328.35 |
| 575275 | 16 | 7/17/2009 Discounts Available | PK | 62056758 US Pipe \& Foundry Co - REMIT | -9.30 |
| 575275 | 16 | 7/17/2009 Discounts Available | PK | 62056766 JCM Industries Inc - REMIT | -15.40 |
| 575275 | 16 | 7/17/2009 Discounts Available | PK | 62056767 Smith Blair Inc 120001 - REMIT | -98.63 |
| 575320 | 14 | 7/17/2009 Electricity TD | EE | 3825683 OWEN ELECTRIC COOP INC | 15.05 |
| 575320 | 14 | 7/17/2009 Electricity TD | EE | 3825693 OWEN ELECTRIC COOP INC | 17.23 |
| 575320 | 14 | 7/17/2009 Electricity TD | EE | 3830236 KENTUCKY UTILITIES COMPANY | 25.55 |
| 575340 | 16 | 7/17/2009 Employee Expenses AG | T3 | 34019 Actual Burden Journal Entries | 16.91 |
| 620000 | 24 | 7/17/2009 Mat and Sup Maint TD | IR | 545601 Inventory Return | -684.71 |
| 620000 | 24 | 7/17/2009 Mat and Sup Maint TD | 11 | 545645875 Gratz rd | 34.92 |
| 620000 | 24 | 7/17/2009 Mat and Sup Maint TD | II | 54565014665 Hwy 330 | 34.93 |
| 620000 | 24 | 7/17/2009 Mat and Sup Maint TD | II | 545661 Hwy 36 | 79.58 |
| 620000 | 24 | 7/17/2009 Mat and Sup Maint TD | II | 545669 Hwy 36 | 62.48 |
| 620000 | 24 | 7/17/2009 Mat and Sup Maint TD | 11 | 545675930 Hwy 22 E | 34.92 |
| 620000 | 24 | 7/17/2009 Mat and Sup Maint TD | 11 | 545724 Asa Phillips Farm eagle Hill | 34.92 |
| 620000 | 24 | 7/17/2009 Mat and Sup Maint TD | II | 5457287985 Hwy 227 South | 34.93 |
| 620000 | 24 | 7/17/2009 Mat and Sup Maint TD | II | 545743655 South Fork | 34.92 |
| 620000 | 24 | 7/17/2009 Mat and Sup Maint TD | 11 | 545744 Steve Wright, Tommy Dougllas | 47.07 |
| 620000 | 24 | 7/17/2009 Mat and Sup Maint TD | II | 5457501620 Leaning Oak Rd | 14.89 |
| 685320 |  | 7/17/2009 FUTA | T3 | 34019 Actual Burden Journal Entries | 50.26 |
| 685325 |  | 7/17/2009 FICA | T3 | 34019 Actual Burden Journal Entries | 19,284.16 |
| 685350 |  | 7/17/2009 SUTA | T3 | 34019 Actual Burden Journal Entries | 92.87 |
| 716121 |  | 7/17/2009 M\&J Expenses-Outside | T2 | 34018 Payroll Labor Distribution | 2,363.30 |
| 716121 |  | 7/17/2009 M\&J Expenses-Outside | T3 | 34019 Actual Burden Journal Entries | 1,858.78 |



| ACCOUNT | SUB | GL DATE | DESCRIPTION | DOC TYPE | DOC\# | EXPLANATION | AMOUNT |
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| 620000 | 23 | 7/21/2009 | Mat and Sup Maint WT | PV | 42276015 | Kentucky Service Co Inc | 2,423.06 |
| 620000 | 23 | 7/21/2009 | Mat and Sup Maint WT | PV | 42276018 | Smith Services Inc - REMIT | 25,807.18 |
| 620000 | 21 | 7/21/2009 | Mat and Sup Maint SS | PV | 42276018 | Smith Services Inc - REMIT | 30,000.00 |
| 620000 | 24 | 7/21/2009 | Mat and Sup Maint TD | PV | 42276024 | Cl Thornburg Co Inc | 66.52 |
| 635000 | 26 | 7/21/2009 | Contr Svc-Other Maint AG | PV | 42275831 | D C Elevator Co Inc-PO/REMIT | 115.00 |
| 716121 |  | 7/21/2009 | M\&J Expenses-Outside | RI | 10130553 | Aylor, Justin | -4,498.50 |
| 760100 |  | 7/21/2009 | Donations Deduct | PS | 42276132 | United Way of the Bluegrass - | 550.00 |
| 760400 |  | 7/21/2009 | Other Lobbying Expenses | PV | 42276026 | McCarthy Strategic Solutions L | 4,594.99 |
| 401110 |  | 7/22/2009 | Res Sales Billed | JE | 30890735 | KY CIS POST GL BATCH | -181,639.06 |
| 401210 |  | 7/22/2009 | Com Sales Billed | JE | 30890735 | KY CIS POST GL BATCH | -64,211.31 |
| 401310 |  | 7/22/2009 | Ind Sales Billed | JE | 30890735 | KY CIS POST GL BATCH | -242.66 |
| 401510 |  | 7/22/2009 | Pub Auth Billed | JE | 30890735 | KY CIS POST GL BATCH | -1,342.35 |
| 401610 |  | 7/22/2009 | SFR Billed | JE | 30890735 | KY CIS POST GL BATCH | -160.74 |
| 402110 |  | 7/22/2009 | Dom WW Serv Billed | JE | 30890735 | KY CIS POST GL BATCH | -1,676.60 |
| 402210 |  | 7/22/2009 | Com WW Serv Billed | JE | 30890735 | KY CIS POST GL BATCH | -343.65 |
| 402310 |  | 7/22/2009 | Ind WW Serv Billed | JE | 30890735 | KY CIS POST GL BATCH | -63.54 |
| 403104 |  | 7/22/2009 | Oth Rev-NSF Check Charge | JE | 30890735 | KY CIS POST GL BATCH | -132.00 |
| 403105 |  | 7/22/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30890735 | KY CIS POST GL BATCH | -2,054.00 |
| 403107 |  | 7/22/2009 | Oth Rev-Reconnection Charges | JE | 30890735 | KY CIS POST GL BATCH | -2,132.00 |
| 504660 | 16 | 7/22/2009 | Tuition Aid AG | PS | 42276759 | Indiana Wesleyan University | 880.00 |
| 515100 | 14 | 7/22/2009 | Purch Power TD | EE | 3834378 | KENTUCKY UTILITIES COMPANY | 22.10 |
| 515100 | 14 | 7/22/2009 | Purch Power TD | EE | 3834386 | KENTUCKY UTILITIES COMPANY | 71.56 |
| 520100 | 16 | 7/22/2009 | M \& S Oper AG | ST | 30890482 | SABRIX NO TAX CHARGED ACR | 12.00 |
| 520100 | 14 | 7/22/2009 | M \& S Oper TD | ST | 30890482 | SABRIX NO TAX CHARGED ACR | 63.81 |
| 550000 | 16 | 7/22/2009 | Trans Oper AG | PV | 42276640 | Tates Creek South Shell Ltd-RE | 37.00 |
| 550000 | 16 | 7/22/2009 | Trans Oper AG | PV | 42276641 | Thoroughbred Energy - REMIT | 351.36 |
| 550000 | 16 | 7/22/2009 | Trans Oper AG | PS | 42276857 | Kentucky State Treasurer-PO/RE | 3.00 |
| 570100 | 15 | 7/22/2009 | Uncollectible Accounts | JE | 30890735 | KY CIS POST GL BATCH | -91.58 |
| 575000 | 14 | 7/22/2009 | Misc Oper TD | ST | 30890482 | SABRIX NO TAX CHARGED ACR | 100.49 |
| 575000 | 14 | 7/22/2009 | Misc Oper TD | PV | 42276449 | Grainger - ALL USE REMIT | 106.21 |
| 575000 | 14 | 7/22/2009 | Misc Oper TD | PV | 42276612 | Grainger - ALL USE REMIT | 318.32 |
| 575000 | 16 | 7/22/2009 | Misc Oper AG | PV | 42276644 | Commerce Lexington-PO/REMIT | 1,100.00 |
| 575002 | 16 | 7/22/2009 | Misc General Office | ST | 30890474 | SABRIX NO TAX CHARGED ACR | 1.32 |
| 575220 | 16 | 7/22/2009 | Community Relations | ST | 30890482 | SABRIX NO TAX CHARGED ACR | 92.23 |
| 575275 | 16 | 7/22/2009 | Discounts Available | PK | 62056832 | Mueller Co - ALL USE PO/REMIT | -38.39 |
| 575280 | 16 | 7/22/2009 | Dues/Membership Deduct | PS | 42276551 | KY Academy of Science Inc | 250.00 |
| 575320 | 14 | 7/22/2009 | Electricity TD | EE | 3834380 | KENTUCKY UTILITIES COMPANY | 17.24 |
| 575320 | 14 | 7/22/2009 | Electricity TD | EE | 3834413 | OWEN ELECTRIC COOP INC | 15.85 |
| 575545 | 13 | 7/22/2009 | Lab Supplies WT | ST | 30890480 | SABRIX VENDOR TAX COMPARE | 14.63 |
| 575545 | 13 | 7/22/2009 | Lab Supplies WT | ST | 30890482 | SABRIX NO TAX CHARGED ACR | 35.58 |
| 575620 | 14 | 7/22/2009 | Office \& Admin Supplies TD | ST | 30890482 | SABRIX NO TAX CHARGED ACR | 4.05 |
| 575625 | 16 | 7/22/2009 | Overnight Shipping AG | PV | 42276626 | United Parcel Service | 82.96 |
| 575625 | 16 | 7/22/2009 | Overnight Shipping AG | PV | 42276637 | United Parcel Service | 114.66 |
| 575625 | 13 | 7/22/2009 | Overnight Shipping WT | PV | 42276638 | United Parcel Service | 88.51 |
| 575830 | 11 | 7/22/2009 | Wtr \& Waste Wtr Exp SS | ST | 30890482 | SABRIX NO TAX CHARGED ACR | 189.46 |
| 620000 | 23 | 7/22/2009 | Mat and Sup Maint WT | ST | 30890480 | SABRIX VENDOR TAX COMPARE | 102.00 |
| 760100 |  | 7/22/2009 | Donations Deduct | PS | 42276550 | American Cancer Society - REMI | 100.00 |
| 401110 |  | 7/23/2009 | Res Sales Billed | JE | 30890811 | KY CIS POST GL BATCH | -301,634.70 |
| 401210 |  | 7/23/2009 | Com Sales Billed | JE | 30890811 | KY CIS POST GL BATCH | -156,800.19 |
| 401510 |  | 7/23/2009 | Pub Auth Billed | JE | 30890811 | KY CIS POST GL BATCH | -7,255.18 |
| 402210 |  | 7/23/2009 | Com WW Serv Billed | JE | 30890811 | KY CIS POST GL BATCH | -809.96 |
| 403104 |  | 7/23/2009 | Oth Rev-NSF Check Charge | JE | 30890811 | KY CIS POST GL BATCH | -96.00 |
| 403105 |  | 7/23/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30890811 | KY CIS POST GL BATCH | -7,332.00 |
| 403107 |  | 7/23/2009 | Oth Rev-Reconnection Charges | JE | 30890811 | KY CIS POST GL BATCH | -5,616.00 |
| 504500 | 16 | 7/23/2009 | Other Welf Oper AG | CC | 6168 | PURDON'S RENTAL \& SALES | 702.25 |
| 520100 | 16 | 7/23/2009 | M \& S Oper AG | CC | 6168 | W W GRAINGER | 106.59 |
| 520100 | 13 | 7/23/2009 | M \& S Oper WT | CC | 6168 | LOWES | 1,681.76 |
| 520100 | 14 | 7/23/2009 | M \& S Oper TD | CC | 6168 | USA BLUE BOOK | 3,430.71 |
| 520100 | 16 | 7/23/2009 | M \& S Oper AG | CC | 6179 | STAPLES | 133.54 |
| 535000 | 13 | 7/23/2009 | Contr Svc-Other Oper WT | CC | 6168 | BARNSTEAD THER | -169.03 |
| 535000 | 14 | 7/23/2009 | Contr Svc-Other Oper TD | CC | 6168 | ORKIN, INC | 65.79 |
| 535000 | 16 | 7/23/2009 | Contr Svc-Other Oper AG | CC | 6168 | GROTT LOCKSMITH CENTER | 91.75 |
| 541400 | 16 | 7/23/2009 | Rents-Equipment Oper AG | CC | 6168 | LASER IMAGES PRINT MANAGE | 818.32 |
| 550000 | 16 | 7/23/2009 | Trans Oper AG | CC | 6168 | SHELL OIL | 463.60 |
| 550000 | 16 | 7/23/2009 | Trans Oper AG | ST | 30890714 | SABRIX NO TAX CHARGED ACR | 23.30 |
| 570100 | 15 | 7/23/2009 | Uncollectible Accounts | JE | 30890811 | KY CIS POST GL BATCH | -94.87 |
| 575000 | 11 | 7/23/2009 | Misc Oper SS | CC | 6168 | BETTER THAN A BRICK | 482.00 |
| 575000 | 14 | 7/23/2009 | Misc Oper TD | CC | 6168 | NATIONAL WORKWEAR INC | 915.57 |
| 575000 | 13 | 7/23/2009 | Misc Oper WT | CC | 6168 | LOWES | 2,400.28 |
| 575000 | 16 | 7/23/2009 | Misc Oper AG | CC | 6179 | THE UPS STORE | 7.41 |
| 575220 | 16 | 7/23/2009 | Community Relations | CC | 6168 | CHEVRON | 182.05 |
| 575275 | 16 | 7/23/2009 | Discounts Available | PK | 62056840 | Mueller Co - ALL USE PO/REMIT | -12.31 |
| 575280 | 16 | 7/23/2009 | Dues/Membership Deduct | CC | 6168 | ADDA | 84.00 |
| 575340 | 16 | 7/23/2009 | Employee Expenses AG | CC | 6168 | SHORT STREET LOT \# Q | 750.56 |
| 575340 | 16 | 7/23/2009 | Employee Expenses AG | PS | 42276905 | Kentucky State Treasurer-REMIT | 65.00 |
| 575342 | 16 | 7/23/2009 | Empl Exp Conf/Registration AG | CC | 6168 | CHAMBER OF COMMERCE | 1,100.00 |
| 575350 | 16 | 7/23/2009 | Meals Deduct | CC | 6168 | SPEEDWAY 09651 LEX | 808.25 |
| 575545 | 13 | 7/23/2009 | Lab Supplies WT | CC | 6168 | HACH COMPANY | 1,628.38 |
| 575620 | 13 | 7/23/2009 | Office \& Admin Supplies WT | CC | 6168 | FEDEX KINKO'S | 28.62 |
| 575620 | 16 | 7/23/2009 | Office \& Admin Supplies AG | CC | 6168 | OFFICEMAX CT IN | 215.28 |
| 575620 | 16 | 7/23/2009 | Office \& Admin Supplies AG | CC | 6179 | OFFICEMAX CT IN | 661.31 |
| 575740 | 15 | 7/23/2009 | Telephone CA | TC | 30890625 | Windstream | 268.38 |
| 575741 | 13 | 7/23/2009 | Cell Phone WT | TC | 30890651 | Verizon Wireless | 35.85 |
| 575741 | 16 | 7/23/2009 | Cell Phone AG | TC | 30890651 | Verizon Wireless | 6,165.69 |



| ACCOUNT | SUB | GL DATE ${ }^{\text {deSCRIPTION }}$ | DOC TYPE | DOC\# ${ }^{\text {E }}$ - EXPLANATION | AMOUNT |
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| 550000 | 1 | 7/26/2009 Trans - Cap Credits | T3 | 34208 Actual Burden Journal Entries | 21,099.66 |
| 550000 | 1 | 7/26/2009 Trans - Cap Credits | T3 | 34242 Actual Burden Journal Entries | 114.28 |
| 558000 | , | 7/26/2009 Ins Work Comp Cap Credits | T3 | 34208 Actual Burden Journal Entries | 5,274.88 |
| 558000 | 1 | 7/26/2009 Ins Work Comp Cap Credits | T3 | 34242 Actual Burden Journal Entries | 28.57 |
| 575340 | 16 | 7/26/2009 Employee Expenses AG | T3 | 34208 Actual Burden Journal Entries | 437.00 |
| 575350 | 16 | 7/26/2009 Meals Deduct | T3 | 34208 Actual Burden Journal Entries | 10.00 |
| 685320 |  | 7/26/2009 FUTA | T3 | 34208 Actual Burden Journal Entries | 77.67 |
| 685325 |  | 7/26/2009 FICA | T3 | 34208 Actual Burden Journal Entries | 19,568.18 |
| 685325 |  | 7/26/2009 FICA | T3 | 34242 Actual Burden Journal Entries | 109.28 |
| 685350 |  | 7/26/2009 SUTA | T3 | 34208 Actual Burden Journal Entries | 153.07 |
| 716121 |  | 7/26/2009 M\&J Expenses-Outside | T2 | 34207 Payroll Labor Distribution | 124.62 |
| 716121 |  | 7/26/2009 M\&J Expenses-Outside | T3 | 34208 Actual Burden Journal Entries | 74.48 |
| 716121 |  | 7/26/2009 M\&J Expenses-Outside | RI | 10130935 TR Stumbo | -582.19 |
| 716121 |  | 7/26/2009 M\&J Expenses-Outside | RI | 10130937 City of Cynthiana | -583.53 |
| 716122 |  | 7/26/2009 M\&J Expenses-Inside | T2 | 34207 Payroll Labor Distribution | 61.11 |
| 716122 |  | 7/26/2009 M\&J Expenses-Inside | T3 | 34208 Actual Burden Journal Entries | 52.36 |
| 401110 |  | 7/27/2009 Res Sales Billed | JE | 30891169 KY CIS POST GL BATCH | -188,890.90 |
| 401210 |  | 7/27/2009 Com Sales Billed | JE | 30891169 KY CIS POST GL BATCH | -25,034.04 |
| 401510 |  | 7/27/2009 Pub Auth Billed | JE | 30891169 KY CIS POST GL BATCH | -5,746.60 |
| 403104 |  | 7/27/2009 Oth Rev-NSF Check Charge | JE | 30891169 KY CIS POST GL BATCH | -84.00 |
| 403105 |  | 7/27/2009 Oth Rev-Appl/Initiate Serv Fee | JE | 30891169 KY CIS POST GL BATCH | -3,354.00 |
| 403107 |  | 7/27/2009 Oth Rev-Reconnection Charges | JE | 30891169 KY CIS POST GL BATCH | -1,898.00 |
| 515100 | 14 | 7/27/2009 Purch Power TD | EE | 3837531 OWEN ELECTRIC COOP INC | 16.73 |
| 515100 | 14 | 7/27/2009 Purch Power TD | EE | 3837535 OWEN ELECTRIC COOP INC | 66.81 |
| 518000 | 13 | 7/27/2009 Chemicals WT | PV | 42280458 Kemira Water Solutions Inc - A | 4,479.35 |
| 518000 | 13 | 7/27/2009 Chemicals WT | PV | 42280459 Kemira Water Solutions Inc - A | 4,398.55 |
| 520100 | 14 | 7/27/2009 M \& S Oper TD | PV | 42278814 HDR Engineering Inc - ALL USE | 164.50 |
| 520100 | 14 | 7/27/2009 M \& S Oper TD | PV | 42278816 HDR Engineering Inc - ALL USE | 240.50 |
| 520100 | 16 | 7/27/2009 M \& S Oper AG | PV | 42279423 Insight Direct (Peripherals) - | 4,891.71 |
| 520100 | 16 | 7/27/2009 M \& S Oper AG | PV | 42279428 Insight Direct (Peripherals) - | 194.98 |
| 535000 | 15 | 7/27/2009 Contr Svc-Other Oper CA | PV | 42279235 Accenture, LLP-REMIT | 4,188.60 |
| 535000 | 16 | 7/27/2009 Contr Svc-Other Oper AG | PV | 42279402 Kentucky Underground Storage I | 166.50 |
| 535000 | 16 | 7/27/2009 Contr Svc-Other Oper AG | PV | 42279420 Laser Images Inc - PO/REMIT | 85.00 |
| 550000 | 16 | 7/27/2009 Trans Oper AG | PV | 42280300 Automotive Rentals Inc ACH/ALL | 2,329.08 |
| 550001 | 16 | 7/27/2009 Trans Oper AG Lease Cost | PV | 42280300 Automotive Rentals Inc ACH/ALL | 18.00 |
| 550002 | 16 | 7/27/2009 Trans Oper AG Lease Fuel | PV | 42280300 Automotive Rentals Inc ACH/ALL | 10,216.39 |
| 550003 | 16 | 7/27/2009 Trans Oper AG Lease Maint | PV | 42280300 Automotive Rentals Inc ACH/ALL | 9,000.16 |
| 570100 | 15 | 7/27/2009 Uncollectible Accounts | JE | 30891169 KY CIS POST GL BATCH | -175.42 |
| 575000 | 14 | 7/27/2009 Misc Oper TD | PV | 42279449 USA Blue Book | 137.21 |
| 575000 | 14 | 7/27/2009 Misc Oper TD | PV | 42279537 Ford Meter Box Co Inc - ALL US | 1,833.77 |
| 575275 | 16 | 7/27/2009 Discounts Available | PK | 62056897 USA Blue Book | -1.37 |
| 575320 | 14 | 7/27/2009 Electricity TD | EE | 3834396 KENTUCKY UTILITIES COMPANY | 12.65 |
| 575320 | 13 | 7/27/2009 Electricity WT | EE | 3838633 BLUE GRASS ENERGY | 38.64 |
| 680120 |  | 7/27/2009 Depr Exp-Amort CIAC Tax | JE | 30890942 FA CIAC Amort True up | -1,487.48 |
| 680125 |  | 7/27/2009 Depr Exp-Amort CIAC Non Tax | JE | 30890942 FA CIAC Amort True up | -11,526.39 |
| 401110 |  | 7/28/2009 Res Sales Billed | JE | 30891316 KY CIS POST GL BATCH | -167,840.06 |
| 401210 |  | 7/28/2009 Com Sales Billed | JE | 30891316 KY CIS POST GL BATCH | -43,770.85 |
| 401510 |  | 7/28/2009 Pub Auth Billed | JE | 30891316 KY CIS POST GL BATCH | -513.99 |
| 403104 |  | 7/28/2009 Oth Rev-NSF Check Charge | JE | 30891316 KY CIS POST GL BATCH | -48.00 |
| 403105 |  | 7/28/2009 Oth Rev-Appl/Initiate Serv Fee | JE | 30891316 KY CIS POST GL BATCH | -2,444.00 |
| 403107 |  | 7/28/2009 Oth Rev-Reconnection Charges | JE | 30891316 KY CIS POST GL BATCH | -936.00 |
| 504100 | 16 | 7/28/2009 Group Ins Oper AG | JE | 101 Rec mthly pmts from retirees | -2,720.50 |
| 504610 | 16 | 7/28/2009 Employee Awards AG | PV | 42281329 Tharpe Company Inc-REMIT | 584.98 |
| 504660 | 16 | 7/28/2009 Tuition Aid AG | PS | 42281669 Morehead State University | 2,532.00 |
| 505100 | 16 | 7/28/2009 PBOP Oper AG | JE | 20012009 Fas106 for OPEB | 100,637.00 |
| 515100 | 14 | 7/28/2009 Purch Power TD | EE | 3839204 OWEN ELECTRIC COOP INC | 27.15 |
| 515100 | 14 | 7/28/2009 Purch Power TD | EE | 3839224 OWEN ELECTRIC COOP INC | 15.05 |
| 520100 | 14 | 7/28/2009 M \& S Oper TD | ST | 30891144 SABRIX NO TAX CHARGED ACR | 24.30 |
| 520100 | 14 | 7/28/2009 M \& S Oper TD | PV | 42281004 Harbor Steel \& Supply Corp | 68.28 |
| 520100 | 14 | 7/28/2009 M \& S Oper TD | PV | 42281245 CI Thornburg Co Inc | 190.16 |
| 535000 | 14 | 7/28/2009 Contr Svc-Other Oper TD | PV | 42281050 Kentucky Underground Protectio | 2,523.75 |
| 535000 | 15 | 7/28/2009 Contr Svc-Other Oper CA | PV | 42281341 Volt Services Group | 444.80 |
| 535001 | 15 | 7/28/2009 Contr Svc-Temp Empl Oper CA | PV | 42281208 Volt Services Group | 624.00 |
| 535001 | 15 | 7/28/2009 Contr Svc-Temp Empl Oper CA | PV | 42281209 Volt Services Group | 566.19 |
| 535001 | 15 | 7/28/2009 Contr Svc-Temp Empl Oper CA | PV | 42281210 Volt Services Group | 556.00 |
| 535001 | 15 | 7/28/2009 Contr Svc-Temp Empl Oper CA | PV | 42281212 Volt Services Group | 624.00 |
| 535001 | 15 | 7/28/2009 Contr Svc-Temp Empl Oper CA | PV | 42281214 Volt Services Group | 2,049.32 |
| 535001 | 15 | 7/28/2009 Contr Svc-Temp Empl Oper CA | PV | 42281232 Volt Services Group | 1,117.10 |
| 535001 | 15 | 7/28/2009 Contr Svc-Temp Empl Oper CA | PV | 42281233 Volt Services Group | 698.70 |
| 535001 | 15 | 7/28/2009 Contr Svc-Temp Empl Oper CA | PV | 42281235 Volt Services Group | 841.32 |
| 535001 | 15 | 7/28/2009 Contr Svc-Temp Empl Oper CA | PV | 42281237 Volt Services Group | 851.51 |
| 550000 | 14 | 7/28/2009 Trans Oper TD | PV | 42280876 Wilson Equipment Co | 455.37 |
| 550000 | 16 | 7/28/2009 Trans Oper AG | PV | 42281025 Allied Waste Services \#993 | 401.11 |
| 570100 | 15 | 7/28/2009 Uncollectible Accounts | JE | 30891316 KY CIS POST GL BATCH | -111.25 |
| 575000 | 14 | 7/28/2009 Misc Oper TD | ST | 30891144 SABRIX NO TAX CHARGED ACR | 8.23 |
| 575000 | 14 | 7/28/2009 Misc Oper TD | PV | 42281020 Allied Waste Services \#993 | 401.02 |
| 575000 | 14 | 7/28/2009 Misc Oper TD | PV | 42281087 HD Supply Waterworks Ltd | 297.34 |
| 575000 | 14 | 7/28/2009 Misc Oper TD | PV | 42281090 HD Supply Waterworks Ltd | 305.67 |
| 575000 | 14 | 7/28/2009 Misc Oper TD | PV | 42281193 HD Supply Waterworks Ltd | 56.18 |
| 575275 | 16 | 7/28/2009 Discounts Available | PK | 62056913 JCM Industries Inc - REMIT | -7.80 |
| 575275 | 16 | 7/28/2009 Discounts Available | PK | 62056914 Mueller Co - ALL USE PO/REMIT | -40.86 |
| 575320 | 14 | 7/28/2009 Electricity TD | EE | 3839231 OWEN ELECTRIC COOP INC | 18.51 |
| 575620 | 16 | 7/28/2009 Office \& Admin Supplies AG | RI | 10130769 Office Max Inc | -116.38 |
| 575625 | 16 | 7/28/2009 Overnight Shipping AG | PV | 42280865 United Parcel Service | 163.82 |


| ACCOUNT | SUB | GL DATE | DESCRIPTION | DOC TYPE | DOC\# | EXPLANATION | AMOUNT |
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| 575625 | 16 | 7/28/2009 | Overnight Shipping AG | PV | 42280867 | United Parcel Service | 138.13 |
| 575711 | 16 | 7/28/2009 | Add'I Security Costs AG | PV | 42280870 | Murray Guard Inc-PO/REMIT | 715.20 |
| 575711 | 16 | 7/28/2009 | Add'I Security Costs AG | PV | 42280871 | Murray Guard Inc-PO/REMIT | 2,506.28 |
| 575740 | 16 | 7/28/2009 | Telephone AG | TC | 30890991 | Genesys Conferencing | 198.68 |
| 575740 | 16 | 7/28/2009 | Telephone AG | TC | 30891008 | AT\&T | 14 |
| 575740 | 16 | 7/28/2009 | Telephone AG | TC | 30891009 | AT\&T | . 32 |
| 575740 | 16 | 7/28/2009 | Telephone AG | TC | 30891012 | AT\&T | 14 |
| 575740 | 16 | 7/28/2009 | Telephone AG | TC | 30891013 | AT\&T | -. 19 |
| 575740 | 16 | 7/28/2009 | Telephone AG | TC | 30891014 | AT\&T | . 21 |
| 575740 | 16 | 7/28/2009 | Telephone AG | TC | 30891018 | AT\&T | . 38 |
| 575740 | 16 | 7/28/2009 | Telephone AG | TC | 30891019 | AT\&T | . 53 |
| 575740 | 15 | 7/28/2009 | Telephone CA | TC | 30891038 | Windstream | 115.29 |
| 575740 | 16 | 7/28/2009 | Telephone AG | TC | 30891039 | AT\&T | 241.72 |
| 575740 | 15 | 7/28/2009 | Telephone CA | TC | 30891039 | AT\&T | 638.54 |
| 575740 | 16 | 7/28/2009 | Telephone AG | TC | 30891047 | Idearc Media | 137.85 |
| 575740 | 15 | 7/28/2009 | Telephone CA | TC | 30891094 | AT\&T | 2,475.72 |
| 575741 | 16 | 7/28/2009 | Cell Phone AG | TC | 30890991 | Genesys Conferencing | 7.97 |
| 575780 | 14 | 7/28/2009 | Trash Removal TD | PV | 42280906 | Allied Waste Services \#993 | 81.77 |
| 575780 | 11 | 7/28/2009 | Trash Removal SS | PV | 42280906 | Allied Waste Services \#993 | 81.78 |
| 575780 | 11 | 7/28/2009 | Trash Removal SS | PV | 42281020 | Allied Waste Services \#993 | 401.02 |
| 575780 | 14 | 7/28/2009 | Trash Removal TD | PV | 42281025 | Allied Waste Services \#993 | 401.11 |
| 620000 | 24 | 7/28/2009 | Mat and Sup Maint TD | IR | 547127 | Inventory Return | -1.03 |
| 620000 | 24 | 7/28/2009 | Mat and Sup Maint TD | IR | 547128 | Inventory Return | -684.71 |
| 620000 | 24 | 7/28/2009 | Mat and Sup Maint TD | IR | 547129 | Inventory Return | -33.26 |
| 620000 | 24 | 7/28/2009 | Mat and Sup Maint TD | IR | 547130 | Inventory Return | -468.83 |
| 620000 | 24 | 7/28/2009 | Mat and Sup Maint TD | IR | 547136 | Inventory Return | -161.13 |
| 620000 | 24 | 7/28/2009 | Mat and Sup Maint TD | 11 | 547471 | 1270 Agee Rd. | 34.93 |
| 620000 | 24 | 7/28/2009 | Mat and Sup Maint TD | 11 | 547476 | 10630 New Col, 955 Mussel shoa | 64.69 |
| 620000 | 24 | 7/28/2009 | Mat and Sup Maint TD | 11 | 547491 | Repair blowoff Eagle hill | 26.59 |
| 620000 | 24 | 7/28/2009 | Mat and Sup Maint TD | PV | 42280911 | Lexington Quarry Co | 626.78 |
| 620000 | 24 | 7/28/2009 | Mat and Sup Maint TD | PV | 42281007 | Lexington Quarry Co | 535.89 |
| 620000 | 24 | 7/28/2009 | Mat and Sup Maint TD | PV | 42281239 | Ogden Enterprises | 775.00 |
| 620000 | 24 | 7/28/2009 | Mat and Sup Maint TD | PV | 42281541 | Smith Blair Inc 120001 - REMIT | 341.27 |
| 675000 | 24 | 7/28/2009 | Misc Maint TD | PV | 42280874 | Saftico Inc-PO/REMIT | 29.26 |
| 675000 | 24 | 7/28/2009 | Misc Maint TD | PV | 42280875 | Saf ti co Inc-PO/REMIT | 111.30 |
| 675000 | 24 | 7/28/2009 | Misc Maint TD | PV | 42281031 | Scott Gross Co Inc | 629.64 |
| 675000 | 24 | 7/28/2009 | Misc Maint TD | PV | 42281034 | Scott Gross Co Inc | 930.15 |
| 675000 | 24 | 7/28/2009 | Misc Maint TD | PV | 42281038 | Saf ti co Inc-PO/REMIT | 159.00 |
| 675000 | 24 | 7/28/2009 | Misc Maint TD | PV | 42281043 | Saf ti co Inc-PO/REMIT | 81.62 |
| 675000 | 24 | 7/28/2009 | Misc Maint TD | PV | 42281091 | Scott Gross Co Inc | 699.60 |
| 675000 | 24 | 7/28/2009 | Misc Maint TD | PV | 42281190 | Scott Gross Co Inc | 1,033.50 |
| 675000 | 24 | 7/28/2009 | Misc Maint TD | PV | 42281200 | Scott Gross Co Inc | 466.40 |
| 675650 | 24 | 7/28/2009 | Paving/Backfill TD | PV | 42281202 | HG Wilson \& Sons Contractors 1 | 13,402.10 |
| 675650 | 24 | 7/28/2009 | Paving/Backfill TD | PV | 42281339 | D \& K Meter and Hydrant Repair | 825.00 |
| 716121 |  | 7/28/2009 | M\&J Expenses-Outside | PV | 42281218 | CI Thornburg Co Inc | 4,770.00 |
| 401110 |  | 7/29/2009 | Res Sales Billed | JE | 30891590 | KY CIS POST GL BATCH | -182,497.92 |
| 401210 |  | 7/29/2009 | Com Sales Billed | JE | 30891590 | KY CIS POST GL BATCH | -16,156.09 |
| 401510 |  | 7/29/2009 | Pub Auth Billed | JE | 30891590 | KY CIS POST GL BATCH | -288.33 |
| 403104 |  | 7/29/2009 | Oth Rev-NSF Check Charge | JE | 30891590 | KY CIS POST GL BATCH | -156.00 |
| 403105 |  | 7/29/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30891590 | KY CIS POST GL BATCH | -2,808.00 |
| 403107 |  | 7/29/2009 | Oth Rev-Reconnection Charges | JE | 30891590 | KY CIS POST GL BATCH | -2,028.00 |
| 501200 | 1305 | 7/29/2009 | Labor Oper WT Super/Eng | JE | 30891383 | Labor Accrual July 2007 | 4,466.75 |
| 501200 | 14 | 7/29/2009 | Labor Oper TD | JE | 30891383 | Labor Accrual July 2007 | 4,466.75 |
| 501200 | 1405 | 7/29/2009 | Labor Oper TD Super/Eng | JE | 30891383 | Labor Accrual July 2007 | 4,466.75 |
| 501200 | 16 | 7/29/2009 | Labor Oper AG | JE | 30891383 | Labor Accrual July 2007 | 115,242.15 |
| 504100 | 16 | 7/29/2009 | Group Ins Oper AG | JE |  | Rec monthly Allmerica Pmt | -365.20 |
| 507100 | 16 | 7/29/2009 | 401k Oper AG | JE | 30891351 | 401K Accr July 2009 | 2,807.82 |
| 508101 | 16 | 7/29/2009 | DCP Oper AG | JE | 30891352 | DCP Accrual July 2009 | 2,449.29 |
| 515100 | 14 | 7/29/2009 | Purch Power TD | EE | 3842188 | KENTUCKY UTILITIES COMPANY | 40.58 |
| 515100 | 12 | 7/29/2009 | Purch Power P | EE | 3842195 | KENTUCKY UTILITIES COMPANY | 1,725.78 |
| 515100 | 14 | 7/29/2009 | Purch Power TD | EE | 3842196 | KENTUCKY UTILITIES COMPANY | 40.44 |
| 515100 | 14 | 7/29/2009 | Purch Power TD | EE | 3842201 | KENTUCKY UTILITIES COMPANY | 12.80 |
| 518000 | 13 | 7/29/2009 | Chemicals WT | ID | 547656 | Owenton WTP June 09 | 16,303.29 |
| 518000 | 13 | 7/29/2009 | Chemicals WT | ID | 547659 | Owenton WWTP July 09 | 1,195.99 |
| 518000 | 13 | 7/29/2009 | Chemicals WT | PD | 42282814 | Kemira Water Solutions Inc - A | -4,337.95 |
| 518001 | AWSI | 7/29/2009 | Chemicals Carbon AWSI | PV | 42282502 | American Anglian Environmental | 3,872.29 |
| 520100 | 14 | 7/29/2009 | M \& S Oper TD | EE | 3842188 | KENTUCKY UTILITIES COMPANY | 12.81 |
| 520100 | 14 | 7/29/2009 | M \& S Oper TD | PV | 42282422 | Neptune Technology - ALL USE R | 544.10 |
| 535000 | 15 | 7/29/2009 | Contr Svc-Other Oper CA | PV | 42282305 | Garda CL Central Inc | 497.55 |
| 535000 | 14 | 7/29/2009 | Contr Svc-Other Oper TD | PV | 42282525 | Christopher Excavating | 825.00 |
| 535000 | 16 | 7/29/2009 | Contr Svc-Other Oper AG | PV | 42282525 | Christopher Excavating | 1,740.00 |
| 535000 | 13 | 7/29/2009 | Contr Svc-Other Oper WT | PV | 42282525 | Christopher Excavating | 16,890.00 |
| 536000 | 13 | 7/29/2009 | Contr Svc-Lab Testing Oper WT | PV | 42282508 | Fouser Environmental Services | 70.00 |
| 536000 | 13 | 7/29/2009 | Contr Svc-Lab Testing Oper WT | PV | 42282512 | Fouser Environmental Services | 350.00 |
| 550000 | 14 | 7/29/2009 | Trans Oper TD | PV | 42282542 | USA Blue Book | 11.66 |
| 550000 | 14 | 7/29/2009 | Trans Oper TD | PV | 42282548 | Grainger - ALL USE REMIT | 8.54 |
| 550000 | 14 | 7/29/2009 | Trans Oper TD | PV | 42282561 | Grainger - ALL USE REMIT | 102.24 |
| 550000 | 16 | 7/29/2009 | Trans Oper AG | PV | 42282565 | Bridgestone Americas Inc | 644.11 |
| 570100 | 15 | 7/29/2009 | Uncollectible Accounts | JE | 30891590 | KY CIS POST GL BATCH | -239.97 |
| 575000 | 14 | 7/29/2009 | Misc Oper TD | PV | 42282542 | USA Blue Book | 201.39 |
| 575000 | 14 | 7/29/2009 | Misc Oper TD | PV | 42282545 | Grainger - ALL USE REMIT | 967.32 |
| 575000 | 14 | 7/29/2009 | Misc Oper TD | PV | 42282546 | Grainger - ALL USE REMIT | 453.21 |
| 575000 | 14 | 7/29/2009 | Misc Oper TD | PV | 42282549 | USA Blue Book | 187.80 |
| 575000 | 14 | 7/29/2009 | Misc Oper TD | PV | 42282559 | CI Thornburg Co Inc | 51.94 |



| ACCOUNT | SUB | GL DATE | DESCRIPTION | DOC TYPE | DOC\# | EXPLANATION | AMOUNT |
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| 518001 | AWSI | 7/31/2009 | Chemicals Carbon AWSI | JE | 160 | Accr Inv Rec but not yet appro | 3,550.41 |
| 520100 | 14 | 7/31/2009 | M \& S Oper TD | JE |  | KY UNMAPPED PCARD ACCRUAL0709 | -916.17 |
| 520100 | 13 | 7/31/2009 | M \& S Oper WT | JE |  | KY UNMAPPED PCARD ACCRUAL0709 | -175.17 |
| 520100 | 16 | 7/31/2009 | M \& S Oper AG | JE |  | KY UNMAPPED PCARD ACCRUAL0709 | 112.08 |
| 520100 | 14 | 7/31/2009 | M \& S Oper TD | JE |  | Power Accrual for East and PA | -59.46 |
| 520100 | 16 | 7/31/2009 | M \& S Oper AG | CC |  | KENTUCKY LIGHTING AND SU | 118.96 |
| 520100 | 13 | 7/31/2009 | M \& S Oper WT | CC | 6192 | HACH COMPANY | 398.75 |
| 520100 | 14 | 7/31/2009 | M \& S Oper TD | CC | 6192 | OWEN COUNTY BLDG SUPPLY | 1,463.31 |
| 520100 | 16 | 7/31/2009 | M \& S Oper AG | CC | 6201 | WAL-MART | 164.68 |
| 520100 | 16 | 7/31/2009 | M \& S Oper AG | JE | 120701 | Recls P-Card Errors to Prop Ac | 9.96 |
| 520100 | 14 | 7/31/2009 | M \& S Oper TD | JE | 120701 | Recls P-Card Errors to Prop Ac | 937.27 |
| 532100 | 16 | 7/31/2009 | Contr Svc-Audit Fees Oper AG | JE |  | Exp PWC Out of Pocket Fees | 147.00 |
| 532100 | 16 | 7/31/2009 | Contr Svc-Audit Fees Oper AG | JR |  | Amort PWC Audit Fee 09-10 | 8,849.58 |
| 533000 | 16 | 7/31/2009 | Contr Svc-Legal Oper AG | JE |  | Accrue for Unbilled Legal Fees | -2,524.62 |
| 533000 | 16 | 7/31/2009 | Contr Svc-Legal Oper AG | JR | 30059967 | King \& Spalding Legal Fees | 34.07 |
| 534600 | 16 | 7/31/2009 | Mmgt Fees-Corporate | JB | 30892518 |  | 2,167.23 |
| 534601 | 16 | 7/31/2009 | Mmgt Fees-External Affairs/Com | JB | 30892518 |  | 33,057.94 |
| 534602 | 16 | 7/31/2009 | Mmgt Fees-Finance | JB | 30892518 |  | 83,374.42 |
| 534603 | 16 | 7/31/2009 | Mmgt Fees-Human Resources | JB | 30892518 |  | 25,782.62 |
| 534604 | 16 | 7/31/2009 | Mmgt Fees-Legal | JB | 30892518 |  | 27,130.25 |
| 534605 | 16 | 7/31/2009 | Mmgt Fees-Operations Svcs | JB | 30892518 |  | 24,354.70 |
| 534606 | 16 | 7/31/2009 | Mmgt Fees-Property | JB | 30892518 |  | 35,804.61 |
| 534607 | 16 | 7/31/2009 | Mmgt Fees-Business Development | JB | 30892518 |  | 18,047.22 |
| 534608 | 16 | 7/31/2009 | Mmgt Fees-Bus Transformation | JB | 30892518 |  | -342.58 |
| 534609 | 16 | 7/31/2009 | Mmgt Fees-Audit | JB | 30892518 |  | 4,244.38 |
| 534610 | 16 | 7/31/2009 | Mmgt Fees-Regulatory | JB | 30892518 |  | 2,306.07 |
| 534611 | 16 | 7/31/2009 | Mmgt Fees-Inv Relations | JB | 30892518 |  | 1,417.19 |
| 534615 | 16 | 7/31/2009 | SSC-Shrd Bus Srv Fees | JB | 30892518 |  | 60,280.30 |
| 534625 | 16 | 7/31/2009 | CSC-Shrd Bus Srv Fees | JB | 30892518 |  | 159,701.94 |
| 534635 | 16 | 7/31/2009 | ITS-Shrd Bus Srv Fees | JB | 30892518 |  | 127,077.51 |
| 534645 | 16 | 7/31/2009 | Procure-Shrd Bus Srv Fees | JB | 30892518 |  | 8,042.80 |
| 534655 | 16 | 7/31/2009 | Lab-Shrd Bus Srv Fees | JB | 30892518 |  | 16,492.32 |
| 534665 | 16 | 7/31/2009 | BSC-Shrd Bus Srv Fees | JB | 30892518 |  | 4,177.17 |
| 534701 | 16 | 7/31/2009 | Mmgt Fees-Regulated Operations | JB | 30892518 |  | 89,970.30 |
| 535000 | 16 | 7/31/2009 | Contr Svc-Other Oper AG | JE |  | Accr Inv Rec but not yet appro | 514.17 |
| 535000 | 15 | 7/31/2009 | Contr Svc-Other Oper CA | JE |  | ED Telephone Accrl July 09 | 633.08 |
| 535000 | 16 | 7/31/2009 | Contr Svc-Other Oper AG | JE |  | Accrue Goods/Serv Rec not Inv | 1,710.00 |
| 535000 | 14 | 7/31/2009 | Contr Svc-Other Oper TD | JE |  | Accrue Goods/Serv Rec not Inv | 10,793.25 |
| 535000 | 13 | 7/31/2009 | Contr Svc-Other Oper WT | JE |  | Accrue Goods/Serv Rec not Inv | 13,560.00 |
| 535000 | 16 | 7/31/2009 | Contr Svc-Other Oper AG | CC |  | COMMONWEALTH COMMUNICATIO | 177.98 |
| 535000 | 15 | 7/31/2009 | Contr Svc-Other Oper CA | CC | 6192 | KEN TYSON PLUMBING | 997.74 |
| 535000 | 16 | 7/31/2009 | Contr Svc-Other Oper AG | JE | 120701 | Recls P-Card Errors to Prop Ac | 148.40 |
| 535000 | 16 | 7/31/2009 | Contr Svc-Other Oper AG | JE | 17070209 | Accr PWC Contract Services | 8,144.50 |
| 535000 | 13 | 7/31/2009 | Contr Svc-Other Oper WT | JR | 30059979 | Hach Co. - Maintenance | 4,684.42 |
| 535000 | 16 | 7/31/2009 | Contr Svc-Other Oper AG | JB | 30892518 |  | 58.49 |
| 535000 | 14 | 7/31/2009 | Contr Svc-Other Oper TD | JE | 30892611 | FASTR - ALLOCATION KY_ALLEXP2 | -117.16 |
| 535000 | 13 | 7/31/2009 | Contr Svc-Other Oper WT | JE | 30892611 | FASTR - ALLOCATION KY_ALLEXP2 | 594.19 |
| 535000 | 14 | 7/31/2009 | Contr Svc-Other Oper TD | PV | 42284597 | Ken Tyson Plumbing | 2,058.67 |
| 535001 | 15 | 7/31/2009 | Contr Svc-Temp Empl Oper CA | JE |  | Accr Inv Rec but not yet appro | 1,216.10 |
| 535001 | 15 | 7/31/2009 | Contr Svc-Temp Empl Oper CA | PV | 42284541 | Volt Services Group | 596.76 |
| 535001 | 15 | 7/31/2009 | Contr Svc-Temp Empl Oper CA | PV | 42284631 | Volt Services Group | 624.00 |
| 535001 | 15 | 7/31/2009 | Contr Svc-Temp Empl Oper CA | PV | 42284638 | Volt Services Group | 624.00 |
| 535001 | 15 | 7/31/2009 | Contr Svc-Temp Empl Oper CA | PV | 42284643 | Volt Services Group | 624.00 |
| 535001 | 15 | 7/31/2009 | Contr Svc-Temp Empl Oper CA | PV | 42285520 | Volt Services Group | 556.00 |
| 536000 | 13 | 7/31/2009 | Contr Svc-Lab Testing Oper WT | JE | 30892611 | FASTR - ALLOCATION KY_ALLEXP2 | -730.00 |
| 541400 | 16 | 7/31/2009 | Rents-Equipment Oper AG | JR | 30059975 | Amortize Oce Imag Copier Lease | 199.34 |
| 541400 | 16 | 7/31/2009 | Rents-Equipment Oper AG | JR | 30059976 | Dyntek Services | 161.47 |
| 541400 | 16 | 7/31/2009 | Rents-Equipment Oper AG | JE | 30892192 | 7/09 Rent,phone\&indirect costs | -12.00 |
| 550000 | 16 | 7/31/2009 | Trans Oper AG | JE |  | KY UNMAPPED PCARD ACCRUAL0709 | -9.77 |
| 550000 | 14 | 7/31/2009 | Trans Oper TD | CC | 6192 | BEST BUY MHT | 257.53 |
| 550000 | 16 | 7/31/2009 | Trans Oper AG | CC | 6192 | CLEAN SWEEP CAR WASH | 489.65 |
| 550000 | 1 | 7/31/2009 | Trans - Cap Credits | T1 | 34206 | Payroll Disbursement Entries | -25,062.92 |
| 550000 | 1 | 7/31/2009 | Trans - Cap Credits | T1 | 34240 | Payroll Disbursement Entries | -114.28 |
| 550001 | 16 | 7/31/2009 | Trans Oper AG Lease Cost | JE |  | Accr 7/09 ARI Fuel/Maint/Gen | 16.71 |
| 550002 | 16 | 7/31/2009 | Trans Oper AG Lease Fuel | JE |  | Accr 7/09 ARI Fuel/Maint/Gen | 11,612.49 |
| 550003 | 16 | 7/31/2009 | Trans Oper AG Lease Maint | JE |  | Accr 7/09 ARI Fuel/Maint/Gen | 5,832.13 |
| 556000 | 16 | 7/31/2009 | Ins Vehicle Oper AG | JR |  | Amortize Prepaid Insurance | 3,199.49 |
| 557000 | 16 | 7/31/2009 | Ins Gen Liab Oper AG | JR |  | Amortize Prepaid Insurance | 29,383.94 |
| 558000 | 16 | 7/31/2009 | Ins Work Comp AG | JR |  | Amortize Prepaid Insurance | 14,698.74 |
| 558000 | 1 | 7/31/2009 | Ins Work Comp Cap Credits | T1 | 34206 | Payroll Disbursement Entries | -6,265.77 |
| 558000 | 1 | 7/31/2009 | Ins Work Comp Cap Credits | T1 | 34240 | Payroll Disbursement Entries | -28.57 |
| 559000 | 16 | 7/31/2009 | Ins Other Oper AG | JR |  | Amortize Prepaid Insurance | 13,348.30 |
| 559000 | 16 | 7/31/2009 | Ins Other Oper AG | JE | 120708 | True Up Prepd Ins 07.09 | 36.18 |
| 566100 | 16 | 7/31/2009 | Reg Comm Amort Rate Case | JR | 30059957 | Deferred Rate Case Expense | 12,443.21 |
| 566100 | 16 | 7/31/2009 | Reg Comm Amort Rate Case | JR | 30059987 | Deferred Rate Case Expense | 11,360.09 |
| 566200 | 16 | 7/31/2009 | Reg Comm Amort Depr Study | JR | 30059961 | DDA - Cost of Service Study | 798.61 |
| 566200 | 16 | 7/31/2009 | Reg Comm Amort Depr Study | JR | 30059971 | DDA - Depreciation Study | 500.09 |
| 570100 | 15 | 7/31/2009 | Uncollectible Accounts | JE |  | Adj Allow for Dbtfl Accts 7.09 | 42,577.99 |
| 570100 | 16 | 7/31/2009 | Uncollectible Accts-MI's | JE |  | Adj Allow for Doubtful Misc Al | -2,562.28 |
| 570100 | 15 | 7/31/2009 | Uncollectible Accounts | JE | 30891804 | KY CIS POST GL BATCH | -789.00 |
| 575000 | 13 | 7/31/2009 | Misc Oper WT | JE |  | KY UNMAPPED PCARD ACCRUAL0709 | -1,284.91 |
| 575000 | 15 | 7/31/2009 | Misc Oper CA | JE |  | KY UNMAPPED PCARD ACCRUAL0709 | -320.68 |
| 575000 | 16 | 7/31/2009 | Misc Oper AG | JE |  | KY UNMAPPED PCARD ACCRUAL0709 | 7.97 |
| 575000 | 12 | 7/31/2009 | Misc Oper P | JE | 130 | KY UNMAPPED PCARD ACCRUAL0709 | 358.95 |


| ACCOUNT | SUB | GL DATE ${ }^{\text {d }}$ DESCRIPTION | DOC TYPE | DOC\# EXPLANATION | AMOUNT |
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| 575000 | 14 | 7/31/2009 Misc Oper TD | JE | 130 KY UNMAPPED PCARD ACCRUAL0709 | 467.39 |
| 575000 | 16 | 7/31/2009 Misc Oper AG | JE | 160 Accr Inv Rec but not yet appro | -10,773.54 |
| 575000 | 14 | 7/31/2009 Misc Oper TD | JE | 410 ED Telephone Accrl July 09 | -12.55 |
| 575000 | 13 | 7/31/2009 Misc Oper WT | CC | 6192 YOUR FRAME OF MIND | 469.62 |
| 575000 | 14 | 7/31/2009 Misc Oper TD | CC | 6192 SEARS.COM | 858.47 |
| 575000 | 16 | 7/31/2009 Misc Oper AG | CC | 6192 MICHLER FLORIST | 1,161.48 |
| 575000 | 16 | 7/31/2009 Misc Oper AG | JE | 120701 Recls P-Card Errors to Prop Ac | 632.80 |
| 575000 | 13 | 7/31/2009 Misc Oper WT | JE | 30892611 FASTR - ALLOCATION KY_ALLEXP2 | -279.79 |
| 575000 | 14 | 7/31/2009 Misc Oper TD | PV | 42284663 USA Blue Book | 133.12 |
| 575001 | 16 | 7/31/2009 Misc Oper Exp AG Consol | RI | 10130950 Kentucky American Water Co | -11.00 |
| 575002 | 16 | 7/31/2009 Misc General Office | CC | 6192 DOUGLAS TIRE SERVICE LLC | 978.40 |
| 575100 | 16 | 7/31/2009 Bank Service Charges AG | JE | 105 LTD PRINC \& INT PAYMENTS | . 17 |
| 575100 | 15 | 7/31/2009 Bank Service Charges CA | JE | 140 Mellon Bank Fee Accrual | 19,287.62 |
| 575100 | 15 | 7/31/2009 Bank Service Charges CA | JE | 141 CheckFree Bank Fee July | 151.54 |
| 575200 | 15 | 7/31/2009 Collection Agencies CA | JE | 30738 GC Services Jun \& July Accrual | 9,452.33 |
| 575200 | 15 | 7/31/2009 Collection Agencies CA | JE | 120703 Recls \& True Up Coll Agenc Rfd | -27.70 |
| 575200 | 15 | 7/31/2009 Collection Agencies CA | JE | 30892193 07/31/09 TWS activity upload | -68.90 |
| 575200 | 15 | 7/31/2009 Collection Agencies CA | PV | 42284735 GC Services Limited Parnership | 2,924.60 |
| 575200 | 15 | 7/31/2009 Collection Agencies CA | PV | 42284995 Penn Credit Corp | 991.86 |
| 575200 | 15 | 7/31/2009 Collection Agencies CA | PV | 42285001 Penn Credit Corp | 1,523.34 |
| 575240 | 16 | 7/31/2009 Co Dues/Membership Deduct | JR | 30059962 Amortize AWWA Research Fees | 1,517.61 |
| 575240 | 16 | 7/31/2009 Co Dues/Membership Deduct | PV | 42285523 Sams Club | 124.34 |
| 575242 | 16 | 7/31/2009 Co Dues Deduct AWWA | JR | 30059969 AWWA Membership dues | 614.83 |
| 575244 | 16 | 7/31/2009 Co Dues Deduct NAWC | JR | 30059986 NAWC Membership Dues | 3,141.70 |
| 575260 | 16 | 7/31/2009 Credit Line Fees | JR | 30059966 JPMorgan Credit Line Fees | 34.97 |
| 575261 | AW46 | 7/31/2009 Credit Line Fees AW46 | JE | 125 Rec'd Mthly Trans Pd by AWCC | 16,731.75 |
| 575261 | AW46 | 7/31/2009 Credit Line Fees AW46 | JE | 129 ACCRUED CL FEES | -5,972.72 |
| 575261 | AW46 | 7/31/2009 Credit Line Fees AW46 | JE | 130 ADJ ACCRUED CL FEES | -2,850.88 |
| 575275 | 16 | 7/31/2009 Discounts Available | PK | 62056993 Ferguson SAC - ALL USE REMIT | -4.74 |
| 575280 | 16 | 7/31/2009 Dues/Membership Deduct | JR | 30059978 Commerce Lexington Member Dues | 416.67 |
| 575280 | 16 | 7/31/2009 Dues/Membership Deduct | JR | 30059980 Kentucky League of Cities | 416.67 |
| 575280 | 16 | 7/31/2009 Dues/Membership Deduct | JR | 30059981 Calence LLC | 341.51 |
| 575320 | 13 | 7/31/2009 Electricity WT | JE | 155 Power Accrual for East and PA | 48.21 |
| 575320 | 14 | 7/31/2009 Electricity TD | JE | 155 Power Accrual for East and PA | 187.80 |
| 575320 | 16 | 7/31/2009 Electricity AG | JE | 155 Power Accrual for East and PA | 784.15 |
| 575320 | 14 | 7/31/2009 Electricity TD | EE | 3846287 OWEN ELECTRIC COOP INC | 9.23 |
| 575320 | 16 | 7/31/2009 Electricity AG | JE | 30892192 7/09 Rent,phone\&indirect costs | -99.00 |
| 575340 | 16 | 7/31/2009 Employee Expenses AG | JE | 130 KY UNMAPPED PCARD ACCRUAL0709 | 1,022.56 |
| 575340 |  | 7/31/2009 Empl Exp AG-P/R JE | CC | 6192 KICC TICKET OFFICE | 348.96 |
| 575340 | 16 | 7/31/2009 Employee Expenses AG | CC | 6192 KENLAKE SRP | 631.92 |
| 575340 | 16 | 7/31/2009 Employee Expenses AG | CC | 6201 MARRIOTT LOUISVILLE DWNTN | 231.93 |
| 575340 | 16 | 7/31/2009 Employee Expenses AG | CC | 6205 CAPITOL REGION AIRPORT | 739.40 |
| 575342 | 16 | 7/31/2009 Empl Exp Conf/Registration AG | CC | 6192 INTELLIGENT CHANGE INITIA | 439.00 |
| 575350 | 16 | 7/31/2009 Meals Deduct | JE | 130 KY UNMAPPED PCARD ACCRUAL0709 | -538.61 |
| 575350 | 16 | 7/31/2009 Meals Deduct | CC | 6192 MR KABAB | 698.68 |
| 575350 | 16 | 7/31/2009 Meals Deduct | cc | 6201 CHEDDAR'S CASUAL CAFE | 96.37 |
| 575350 | 16 | 7/31/2009 Meals Deduct | CC | 6205 KFC-IB | 78.89 |
| 575350 | 16 | 7/31/2009 Meals Deduct | JA | 30892601 FASTR - ALLOC GAMTALLCO | -1,169.74 |
| 575351 | 16 | 7/31/2009 Meals Non Deduct | JA | 30892601 FASTR - ALLOC GAMTALLCO | 1,169.74 |
| 575480 | 14 | 7/31/2009 Heat - Oil/Gas TD | JE | 155 Power Accrual for East and PA | -1,068.10 |
| 575480 | 16 | 7/31/2009 Heat - Oil/Gas AG | JE | 155 Power Accrual for East and PA | -170.37 |
| 575480 | 16 | 7/31/2009 Heat - Oil/Gas AG | JE | 30892192 7/09 Rent,phone\&indirect costs | -9.00 |
| 575500 | 16 | 7/31/2009 Janitorial AG | JE | 600 Accrue Goods/Serv Rec not Inv | 691.00 |
| 575500 | 13 | 7/31/2009 Janitorial WT | JE | 600 Accrue Goods/Serv Rec not Inv | 2,430.00 |
| 575500 | 16 | 7/31/2009 Janitorial AG | JE | 30892192 7/09 Rent,phone\&indirect costs | -182.00 |
| 575545 | 13 | 7/31/2009 Lab Supplies WT | CC | 6192 GIBSON LABORATORIES | 3,549.47 |
| 575545 | 13 | 7/31/2009 Lab Supplies WT | JE | 30892611 FASTR - ALLOCATION KY_ALLEXP2 | -1,157.68 |
| 575620 | 16 | 7/31/2009 Office \& Admin Supplies AG | JE | 130 KY UNMAPPED PCARD ACCRUAL0709 | -7.45 |
| 575620 | 15 | 7/31/2009 Office \& Admin Supplies CA | JE | 130 KY UNMAPPED PCARD ACCRUAL0709 | 1,017.14 |
| 575620 | 16 | 7/31/2009 Office \& Admin Supplies AG | CC | 6192 RACO INDUSTRIES LLC | 107.34 |
| 575620 | 13 | 7/31/2009 Office \& Admin Supplies WT | CC | 6192 OFFICEMAX CT IN | 370.30 |
| 575620 | 14 | 7/31/2009 Office \& Admin Supplies TD | CC | 6192 OFFICEMAX CT IN | 1,666.41 |
| 575620 | 16 | 7/31/2009 Office \& Admin Supplies AG | CC | 6201 OFFICEMAX CT IN | -43.88 |
| 575620 | 14 | 7/31/2009 Office \& Admin Supplies TD | CC | 6201 OFFICEMAX CT IN | 233.33 |
| 575620 | 16 | 7/31/2009 Office \& Admin Supplies AG | JE | 120701 Recls P-Card Errors to Prop Ac | 81.07 |
| 575625 | 16 | 7/31/2009 Overnight Shipping AG | PV | 42285524 United Parcel Service | 206.93 |
| 575625 | 16 | 7/31/2009 Overnight Shipping AG | PV | 42285546 United Parcel Service | 364.59 |
| 575625 | 16 | 7/31/2009 Overnight Shipping AG | PV | 42285547 United Parcel Service | 450.75 |
| 575660 | 15 | 7/31/2009 Postage CA | JE | 125 Rec'd Mthly Trans Pd by AWCC | 46,752.57 |
| 575660 | 16 | 7/31/2009 Postage AG | JE | 30892192 7/09 Rent,phone\&indirect costs | 64.00 |
| 575711 | 16 | 7/31/2009 Add'I Security Costs AG | JE | 600 Accrue Goods/Serv Rec not Inv | 3,383.84 |
| 575711 | 16 | 7/31/2009 Add'I Security Costs AG | PV | 42285521 Murray Guard Inc-PO/REMIT | 715.20 |
| 575711 | 16 | 7/31/2009 Add'I Security Costs AG | PV | 42285522 Murray Guard Inc-PO/REMIT | 2,668.64 |
| 575715 | 16 | 7/31/2009 Software Licenses \& Support | JR | 348 Amort RIA Insource CIS License | 284.82 |
| 575715 | 16 | 7/31/2009 Software Licenses \& Support | JR | 30059963 Vesry Pro Expert Maint Program | 527.88 |
| 575715 | 16 | 7/31/2009 Software Licenses \& Support | JR | 30059970 Amortize global support iconic | 405.58 |
| 575715 | 16 | 7/31/2009 Software Licenses \& Support | JR | 30059983 Amortize Industrial Defender | 113.21 |
| 575740 | 16 | 7/31/2009 Telephone AG | JE | 410 ED Telephone Accrl July 09 | 168.61 |
| 575740 | 15 | 7/31/2009 Telephone CA | JE | 410 ED Telephone Accrl July 09 | 1,220.39 |
| 575741 | 13 | 7/31/2009 Cell Phone WT | JE | 410 ED Telephone Accrl July 09 | -271.28 |
| 575741 | 14 | 7/31/2009 Cell Phone TD | JE | 410 ED Telephone Accrl July 09 | 33.89 |
| 575741 | 16 | 7/31/2009 Cell Phone AG | JE | 410 ED Telephone Accrl July 09 | 229.14 |
| 575741 | 16 | 7/31/2009 Cell Phone AG | CC | 6192 VERIZON WRLS M4379- | 47.69 |
| 575741 | 14 | 7/31/2009 Cell Phone TD | JE | 39996 Rec Telecom Credit Rec | 33.89 |




| ACCOUNT | SUB | GL DATE | DESCRIPTION | DOC TYPE | DOC\# ${ }^{\text {E }}$ - EXPLANATION | AMOUNT |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 520100 | 16 | 8/4/2009 | M \& S Oper AG | PV | 42286576 Insight Direct (Peripherals) - | 162.84 |
| 550000 | 14 | 8/4/2009 | Trans Oper TD | PV | 42280876 Wilson Equipment Co | -455.37 |
| 550000 | 16 | 8/4/2009 | Trans Oper AG | PV | 42286840 Grainger - ALL USE REMIT | 563.88 |
| 570100 | 15 | 8/4/2009 | Uncollectible Accounts | JE | 30892308 KY CIS POST GL BATCH | -161.39 |
| 575000 | 16 | 8/4/2009 | Misc Oper AG | PV | 42276644 Commerce Lexington-PO/REMIT | -1,100.00 |
| 575000 | 14 | 8/4/2009 | Misc Oper TD | PD | 42286566 Grainger - ALL USE REMIT | -88.03 |
| 575000 | 14 | 8/4/2009 | Misc Oper TD | PV | 42286841 CI Thornburg Co Inc | 92.14 |
| 575000 | 14 | 8/4/2009 | Misc Oper TD | PV | 42286845 A \& H Safety Supply Co - PO/RE | 1,632.34 |
| 575000 | 14 | 8/4/2009 | Misc Oper TD | PV | 42286848 USA Blue Book | 17.11 |
| 575000 | 16 | 8/4/2009 | Misc Oper AG | PD | 42287668 US Pipe \& Foundry Co - REMIT | -8,475.96 |
| 575275 | 16 | 8/4/2009 | Discounts Available | PK | 62057016 Mueller Co - ALL USE PO/REMIT | -119.59 |
| 575480 | 16 | 8/4/2009 | Heat - Oil/Gas AG | EE | 3848421 COLUMBIA GAS OF KENTUCKY | 133.84 |
| 575480 | 14 | 8/4/2009 | Heat - Oil/Gas TD | EE | 3848503 COLUMBIA GAS OF KENTUCKY | 151.46 |
| 575711 | 16 | 8/4/2009 | Add'I Security Costs AG | PV | 42286577 Murray Guard Inc-PO/REMIT | 715.20 |
| 575711 | 16 | 8/4/2009 | Add'I Security Costs AG | PV | 42286578 Murray Guard Inc-PO/REMIT | 2,668.64 |
| 575740 | 15 | 8/4/2009 | Telephone CA | TC | 30892015 Windstream | 66.91 |
| 620000 | 24 | 8/4/2009 | Mat and Sup Maint TD | PV | 42286842 Ferguson SAC - ALL USE REMIT | 248.33 |
| 401110 |  | 8/5/2009 | Res Sales Billed | JE | 30892494 KY CIS POST GL BATCH | -165,375.37 |
| 401210 |  | 8/5/2009 | Com Sales Billed | JE | 30892494 KY CIS POST GL BATCH | -59,607.53 |
| 401310 |  | 8/5/2009 | Ind Sales Billed | JE | 30892494 KY CIS POST GL BATCH | -72,649.22 |
| 401410 |  | 8/5/2009 | Pub Fire Billed | JE | 30892494 KY CIS POST GL BATCH | -226,072.05 |
| 401450 |  | 8/5/2009 | Priv Fire Billed | JE | 30892494 KY CIS POST GL BATCH | -138,515.45 |
| 401510 |  | 8/5/2009 | Pub Auth Billed | JE | 30892494 KY CIS POST GL BATCH | -2,493.09 |
| 401610 |  | 8/5/2009 | SFR Billed | JE | 30892494 KY CIS POST GL BATCH | -17,585.65 |
| 402110 |  | 8/5/2009 | Dom WW Serv Billed | JE | 30892494 KY CIS POST GL BATCH | -17.27 |
| 402210 |  | 8/5/2009 | Com WW Serv Billed | JE | 30892494 KY CIS POST GL BATCH | 809.96 |
| 403104 |  | 8/5/2009 | Oth Rev-NSF Check Charge | JE | 30892494 KY CIS POST GL BATCH | -84.00 |
| 403105 |  | 8/5/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30892494 KY CIS POST GL BATCH | -6,604.00 |
| 403107 |  | 8/5/2009 | Oth Rev-Reconnection Charges | JE | 30892494 KY CIS POST GL BATCH | -4,238.00 |
| 511100 | 13 | 8/5/2009 | Waste Disposal Exp WT | EE | 3851595 KENTUCKY UTILITIES COMPANY | 873.82 |
| 511100 | 13 | 8/5/2009 | Waste Disposal Exp WT | EE | 3851783 KENTUCKY UTILITIES COMPANY | 949.96 |
| 515100 | 12 | 8/5/2009 | Purch Power P | EE | 3851504 KENTUCKY UTILITIES COMPANY | 2,665.72 |
| 515100 | 13 | 8/5/2009 | Purch Power WT | EE | 3851513 KENTUCKY UTILITIES COMPANY | 193,921.83 |
| 515100 | 14 | 8/5/2009 | Purch Power TD | EE | 3851523 KENTUCKY UTILITIES COMPANY | 22.95 |
| 515100 | 12 | 8/5/2009 | Purch Power P | EE | 3851565 KENTUCKY UTILITIES COMPANY | 764.21 |
| 515100 | 14 | 8/5/2009 | Purch Power TD | EE | 3851576 KENTUCKY UTILITIES COMPANY | 387.92 |
| 515100 | 12 | 8/5/2009 | Purch Power P | EE | 3851605 KENTUCKY UTILITIES COMPANY | 630.21 |
| 515100 | 12 | 8/5/2009 | Purch Power P | EE | 3851620 KENTUCKY UTILITIES COMPANY | 751.53 |
| 515100 | 13 | 8/5/2009 | Purch Power WT | EE | 3851651 KENTUCKY UTILITIES COMPANY | 23,008.60 |
| 515100 | 12 | 8/5/2009 | Purch Power P | EE | 3851657 KENTUCKY UTILITIES COMPANY | 244.59 |
| 515100 | 13 | 8/5/2009 | Purch Power WT | EE | 3851724 KENTUCKY UTILITIES COMPANY | 590.50 |
| 515100 | 13 | 8/5/2009 | Purch Power WT | EE | 3851773 KENTUCKY UTILITIES COMPANY | 2,608.55 |
| 515100 | 12 | 8/5/2009 | Purch Power $P$ | EE | 3851894 KENTUCKY UTILITIES COMPANY | 4,384.83 |
| 515100 | 12 | 8/5/2009 | Purch Power P | EE | 3851905 KENTUCKY UTILITIES COMPANY | 5,671.88 |
| 515100 | 14 | 8/5/2009 | Purch Power TD | EE | 3852046 OWEN ELECTRIC COOP INC | 19.46 |
| 570100 | 15 | 8/5/2009 | Uncollectible Accounts | JE | 30892494 KY CIS POST GL BATCH | -207.70 |
| 575000 | 16 | 8/5/2009 | Misc Oper AG | ST | 30892284 SABRIX NO TAX CHARGED ACR | -508.56 |
| 575000 | 14 | 8/5/2009 | Misc Oper TD | ST | 30892284 SABRIX NO TAX CHARGED ACR | 1.03 |
| 575270 | 16 | 8/5/2009 | Directors Fees | PS | 42287941 Sisson, William G | 500.00 |
| 575270 | 16 | 8/5/2009 | Directors Fees | PS | 42287942 Martin, Wayne M | 500.00 |
| 575280 | 16 | 8/5/2009 | Dues/Membership Deduct | PS | 42287939 Kentucky Bar Association-REMIT | 315.00 |
| 575320 | 14 | 8/5/2009 | Electricity TD | EE | 3851484 KENTUCKY UTILITIES COMPANY | 26.48 |
| 575320 | 13 | 8/5/2009 | Electricity WT | EE | 3851492 KENTUCKY UTILITIES COMPANY | 11.09 |
| 575320 | 14 | 8/5/2009 | Electricity TD | EE | 3851497 KENTUCKY UTILITIES COMPANY | 12.56 |
| 575320 | 13 | 8/5/2009 | Electricity WT | EE | 3851519 KENTUCKY UTILITIES COMPANY | 11.09 |
| 575320 | 13 | 8/5/2009 | Electricity WT | EE | 3851624 KENTUCKY UTILITIES COMPANY | 20.84 |
| 575320 | 16 | 8/5/2009 | Electricity AG | EE | 3851640 KENTUCKY UTILITIES COMPANY | 4,734.14 |
| 575320 | 14 | 8/5/2009 | Electricity TD | EE | 3851671 KENTUCKY UTILITIES COMPANY | 769.44 |
| 575320 | 14 | 8/5/2009 | Electricity TD | EE | 3851713 KENTUCKY UTILITIES COMPANY | 17.43 |
| 575320 | 16 | 8/5/2009 | Electricity AG | EE | 3851800 KENTUCKY UTILITIES COMPANY | 13.32 |
| 575320 | 14 | 8/5/2009 | Electricity TD | EE | 3851819 KENTUCKY UTILITIES COMPANY | 65.51 |
| 575320 | 13 | 8/5/2009 | Electricity WT | EE | 3851858 KENTUCKY UTILITIES COMPANY | 639.83 |
| 575320 | 14 | 8/5/2009 | Electricity TD | EE | 3851877 KENTUCKY UTILITIES COMPANY | 12.98 |
| 575480 | 14 | 8/5/2009 | Heat - Oil/Gas TD | EE | 3851866 KENTUCKY UTILITIES COMPANY | 34.20 |
| 620000 | 24 | 8/5/2009 | Mat and Sup Maint TD | 11 | 549252 lot 390 Elk Lake | 34.93 |
| 760100 |  | 8/5/2009 | Donations Deduct | PS | 42287758 Lexington Bluegrass Area Minor | 1,000.00 |
| 760100 |  | 8/5/2009 | Donations Deduct | PS | 42287759 Team Warrior Boxing | 200.00 |
| 401110 |  | 8/6/2009 | Res Sales Billed | JE | 30892759 KY CIS POST GL BATCH | -162,383.35 |
| 401210 |  | 8/6/2009 | Com Sales Billed | JE | 30892759 KY CIS POST GL BATCH | -129,150.97 |
| 401310 |  | 8/6/2009 | Ind Sales Billed | JE | 30892759 KY CIS POST GL BATCH | -56,509.10 |
| 401510 |  | 8/6/2009 | Pub Auth Billed | JE | 30892759 KY CIS POST GL BATCH | -367,164.04 |
| 401610 |  | 8/6/2009 | SFR Billed | JE | 30892759 KY CIS POST GL BATCH | -18,229.95 |
| 401710 |  | 8/6/2009 | Misc Sales Billed | JE | 30892759 KY CIS POST GL BATCH | -1,995.20 |
| 402110 |  | 8/6/2009 | Dom WW Serv Billed | JE | 30892759 KY CIS POST GL BATCH | -14,741.07 |
| 402210 |  | 8/6/2009 | Com WW Serv Billed | JE | 30892759 KY CIS POST GL BATCH | -8,490.46 |
| 402510 |  | 8/6/2009 | Pub Auth WW Svc Billed | JE | 30892759 KY CIS POST GL BATCH | -400.94 |
| 403104 |  | 8/6/2009 | Oth Rev-NSF Check Charge | JE | 30892759 KY CIS POST GL BATCH | -84.00 |
| 403105 |  | 8/6/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30892759 KY CIS POST GL BATCH | -3,588.00 |
| 403107 |  | 8/6/2009 | Oth Rev-Reconnection Charges | JE | 30892759 KY CIS POST GL BATCH | -3,536.00 |
| 504500 | 16 | 8/6/2009 | Other Welf Oper AG | CC | 6214 LOWES | 1,285.36 |
| 520100 | 14 | 8/6/2009 | M \& S Oper TD | CC | 6214 SPEEDWAY 09728 LEX | 1.79 |
| 520100 | 13 | 8/6/2009 | M \& S Oper WT | CC | 6214 WW GRAINGER | 1,496.10 |
| 535000 | 16 | 8/6/2009 | Contr Svc-Other Oper AG | CC | 6214 CLEAN SWEEP CAR WASH | 13.99 |
| 535000 | 15 | 8/6/2009 | Contr Svc-Other Oper CA | CC | 6214 THE MAILROOM | 229.08 |



| ACCOUNT | SUB | GL DATE | DESCRIPTION | DOC TYPE | DOC\# ${ }^{\text {E }}$ - EXPLANATION | AMOUNT |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 501210 | 2420 | 8/9/2009 | Labor NS OT TD Mains | T2 | 34352 Payroll Labor Distribution | 1,398.63 |
| 501210 | 1510 | 8/9/2009 | Labor NS OT CA Mtr Read | T2 | 34352 Payroll Labor Distribution | 1,430.95 |
| 501210 | 1305 | 8/9/2009 | Labor NS OT WT Super/Eng | T2 | 34352 Payroll Labor Distribution | 2,001.64 |
| 501210 | 1420 | 8/9/2009 | Labor NS OT TD Meter | T2 | 34352 Payroll Labor Distribution | 3,790.58 |
| 501210 | 13 | 8/9/2009 | Labor NS OT WT | T2 | 34352 Payroll Labor Distribution | 5,538.45 |
| 501711 |  | 8/9/2009 | IP-Off-Annual-P/R JE | T3 | 34353 Actual Burden Journal Entries | 10,384.47 |
| 504100 | 16 | 8/9/2009 | Group Ins Oper AG | T3 | 34353 Actual Burden Journal Entries | 2,561.39 |
| 504100 | 1 | 8/9/2009 | Group Insurance - Cap Credits | T3 | 34353 Actual Burden Journal Entries | 31,481.75 |
| 505100 | 1 | 8/9/2009 | PBOP Cap Credits | T3 | 34353 Actual Burden Journal Entries | 43,864.23 |
| 506100 | 1 | 8/9/2009 | Pension - Cap Credits | T3 | 34353 Actual Burden Journal Entries | 63,699.93 |
| 507100 | 16 | 8/9/2009 | 401k Oper AG | T3 | 34353 Actual Burden Journal Entries | 4,243.04 |
| 508101 | 16 | 8/9/2009 | DCP Oper AG | T3 | 34353 Actual Burden Journal Entries | 3,891.00 |
| 508102 | 16 | 8/9/2009 | Retiree Med Oper AG | T3 | 34353 Actual Burden Journal Entries | 763.45 |
| 550000 | 1 | 8/9/2009 | Trans - Cap Credits | T3 | 34353 Actual Burden Journal Entries | 17,148.65 |
| 558000 | 1 | 8/9/2009 | Ins Work Comp Cap Credits | T3 | 34353 Actual Burden Journal Entries | 5,374.92 |
| 685320 |  | 8/9/2009 | FUTA | T3 | 34353 Actual Burden Journal Entries | 62.01 |
| 685325 |  | 8/9/2009 | FICA | T3 | 34353 Actual Burden Journal Entries | 18,888.32 |
| 685350 |  | 8/9/2009 | SUTA | T3 | 34353 Actual Burden Journal Entries | 111.50 |
| 504620 | 16 | 8/10/2009 | Employee Physical Exam AG | PS | 42289405 Wienhoff Drug Testing | 30.00 |
| 570100 | 15 | 8/10/2009 | Uncollectible Accounts | JE | 30893049 KY CIS POST GL BATCH | -73.88 |
| 575240 | 16 | 8/10/2009 | Co Dues/Membership Deduct | PS | 42289403 Rotary Club of Owenton | 154.00 |
| 401110 |  | 8/11/2009 | Res Sales Billed | JE | 30893133 KY CIS POST GL BATCH | -266,232.64 |
| 401210 |  | 8/11/2009 | Com Sales Billed | JE | 30893133 KY CIS POST GL BATCH | -98,585.84 |
| 401310 |  | 8/11/2009 | Ind Sales Billed | JE | 30893133 KY CIS POST GL BATCH | -5,419.72 |
| 401450 |  | 8/11/2009 | Priv Fire Billed | JE | 30893133 KY CIS POST GL BATCH | -39.13 |
| 401510 |  | 8/11/2009 | Pub Auth Billed | JE | 30893133 KY CIS POST GL BATCH | -6,780.13 |
| 401610 |  | 8/11/2009 | SFR Billed | JE | 30893133 KY CIS POST GL BATCH | -5,420.99 |
| 402110 |  | 8/11/2009 | Dom WW Serv Billed | JE | 30893133 KY CIS POST GL BATCH | -50.54 |
| 402310 |  | 8/11/2009 | Ind WW Serv Billed | RI | 10131360 Itron | -500.00 |
| 403104 |  | 8/11/2009 | Oth Rev-NSF Check Charge | JE | 30893133 KY CIS POST GL BATCH | -156.00 |
| 403105 |  | 8/11/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30893133 KY CIS POST GL BATCH | -6,656.00 |
| 403107 |  | 8/11/2009 | Oth Rev-Reconnection Charges | JE | 30893133 KY CIS POST GL BATCH | -5,954.00 |
| 403199 |  | 8/11/2009 | Oth Rev-Other Water Rev | PS | 42291148 Kentucky Department of Revenue | -. 04 |
| 510100 | 11 | 8/11/2009 | Purchased Water-Outside | PV | 42290054 Georgetown Municipal Water \& S | 19.54 |
| 515100 | 12 | 8/11/2009 | Purch Power P | EE | 3857691 KENTUCKY UTILITIES COMPANY | 2,397.17 |
| 515100 | 14 | 8/11/2009 | Purch Power TD | EE | 3857979 KENTUCKY UTILITIES COMPANY | 98.96 |
| 515100 | 13 | 8/11/2009 | Purch Power WT | EE | 3858236 KENTUCKY UTILITIES COMPANY | 3,390.99 |
| 515100 | 12 | 8/11/2009 | Purch Power P | PS | 42291148 Kentucky Department of Revenue | 934.33 |
| 515100 | 13 | 8/11/2009 | Purch Power WT | PS | 42291148 Kentucky Department of Revenue | 3,737.33 |
| 515100 | 13 | 8/11/2009 | Purch Power WT | PS | 42291149 Kentucky Department of Revenue | 2,335.81 |
| 535000 | 15 | 8/11/2009 | Contr Svc-Other Oper CA | TC | 30892896 Intelliwire | 14.95 |
| 570100 | 15 | 8/11/2009 | Uncollectible Accounts | JE | 30893133 KY CIS POST GL BATCH | -113.63 |
| 575000 | 14 | 8/11/2009 | Misc Oper TD | TC | 30892963 AT\&T | 47.11 |
| 575000 | 16 | 8/11/2009 | Misc Oper AG | PD | 42290637 Univar USA Inc - Chicago REMIT | -280.00 |
| 575275 | 16 | 8/11/2009 | Discounts Available | PK | 62057070 Ferguson SAC - ALL USE REMIT | -38.47 |
| 575480 | 14 | 8/11/2009 | Heat - Oil/Gas TD | EE | 3860978 CLARK ENERGY COOP | 11.28 |
| 575620 | 16 | 8/11/2009 | Office \& Admin Supplies AG | PV | 42291057 United Parcel Service | 6.53 |
| 575740 | 15 | 8/11/2009 | Telephone CA | TC | 30892991 AT\&T | 1,106.09 |
| 575741 | 13 | 8/11/2009 | Cell Phone WT | TC | 30892929 Cingular Wireless | 50.54 |
| 575741 | 16 | 8/11/2009 | Cell Phone AG | TC | 30892929 Cingular Wireless | 206.66 |
| 675000 | 23 | 8/11/2009 | Misc Maint WT | JE | 30893068234115 pcard rec trueup 0809 | -245.64 |
| 675000 | 26 | 8/11/2009 | Misc Maint AG | PV | 42291209 Vertex Business Services - Wir | 45.20 |
| 401110 |  | 8/12/2009 | Res Sales Billed | JE | 30893398 KY CIS POST GL BATCH | -131,291.69 |
| 401210 |  | 8/12/2009 | Com Sales Billed | JE | 30893398 KY CIS POST GL BATCH | -63,818.45 |
| 401510 |  | 8/12/2009 | Pub Auth Billed | JE | 30893398 KY CIS POST GL BATCH | -3,433.47 |
| 402110 |  | 8/12/2009 | Dom WW Serv Billed | JE | 30893398 KY CIS POST GL BATCH | -53.84 |
| 402210 |  | 8/12/2009 | Com WW Serv Billed | JE | 30893398 KY CIS POST GL BATCH | -1,342.89 |
| 403104 |  | 8/12/2009 | Oth Rev-NSF Check Charge | JE | 30893398 KY CIS POST GL BATCH | -96.00 |
| 403105 |  | 8/12/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30893398 KY CIS POST GL BATCH | -3,484.00 |
| 403107 |  | 8/12/2009 | Oth Rev-Reconnection Charges | JE | 30893398 KY CIS POST GL BATCH | -2,132.00 |
| 510100 | 11 | 8/12/2009 | Purchased Water-Outside | PV | 42291828 Gallatin County Water District | 1,123.91 |
| 510100 | 11 | 8/12/2009 | Purchased Water-Outside | PV | 42291863 Georgetown Municipal Water \& S | 9.33 |
| 511100 | 13 | 8/12/2009 | Waste Disposal Exp WT | PV | 42291878 Geochemical Testing | 1,286.11 |
| 515100 | 12 | 8/12/2009 | Purch Power P | EE | 3860964 CLARK ENERGY COOP | 752.25 |
| 515100 | 14 | 8/12/2009 | Purch Power TD | EE | 3861612 OWEN ELECTRIC COOP INC | 28.11 |
| 515100 | 13 | 8/12/2009 | Purch Power WT | EE | 3861618 OWEN ELECTRIC COOP INC | 6,413.29 |
| 515100 | 13 | 8/12/2009 | Purch Power WT | EE | 3861629 OWEN ELECTRIC COOP INC | 17.96 |
| 515100 | 12 | 8/12/2009 | Purch Power P | EE | 3861988 KENTUCKY UTILITIES COMPANY | 53.29 |
| 515100 | 14 | 8/12/2009 | Purch Power TD | EE | 3862497 KENTUCKY UTILITIES COMPANY | 19.67 |
| 515100 | 14 | 8/12/2009 | Purch Power TD | EE | 3862499 KENTUCKY UTILITIES COMPANY | 24.13 |
| 515100 | 14 | 8/12/2009 | Purch Power TD | EE | 3862505 KENTUCKY UTILITIES COMPANY | 124.30 |
| 515100 | 14 | 8/12/2009 | Purch Power TD | EE | 3862512 KENTUCKY UTILITIES COMPANY | 22.48 |
| 515100 | 14 | 8/12/2009 | Purch Power TD | EE | 3862516 KENTUCKY UTILITIES COMPANY | 41.99 |
| 515100 | 14 | 8/12/2009 | Purch Power TD | EE | 3862517 KENTUCKY UTILITIES COMPANY | 13.82 |
| 515100 | 14 | 8/12/2009 | Purch Power TD | EE | 3862520 KENTUCKY UTILITIES COMPANY | 22.38 |
| 518001 | AWSI | 8/12/2009 | Chemicals Carbon AWSI | PV | 42291661 American Anglian Environmental | 3,550.41 |
| 520100 | 13 | 8/12/2009 | M \& S Oper WT | PD | 42291598 Insight Direct (Peripherals) - | -249.22 |
| 533000 | 16 | 8/12/2009 | Contr Svc-Legal Oper AG | PV | 42291930 Stoll Keenon Ogden PLLC-PO/REM | 4,660.06 |
| 535000 | 14 | 8/12/2009 | Contr Svc-Other Oper TD | PV | 42291841 Cobb, Rodney | 689.00 |
| 535000 | 14 | 8/12/2009 | Contr Svc-Other Oper TD | PV | 42291855 Cobb, Rodney | 455.00 |
| 550000 | 16 | 8/12/2009 | Trans Oper AG | PV | 42291941 Bridgestone Americas Inc | 235.11 |
| 550000 | 16 | 8/12/2009 | Trans Oper AG | PV | 42291949 Bridgestone Americas Inc | 538.11 |
| 570100 | 15 | 8/12/2009 | Uncollectible Accounts | JE | 30893398 KY CIS POST GL BATCH | -360.93 |
| 575000 | 16 | 8/12/2009 | Misc Oper AG | ST | 30893107 SABRIX NO TAX CHARGED ACR | -16.80 |





| ACCOUNT | SUB | GL DATE | DESCRIPTION | DOC TYPE | DOC\# $\quad$ EXPLANATION | AMOUNT |
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| 550000 | 16 | 8/20/2009 | Trans Oper AG | CC | 6261 BHW BP | 273.33 |
| 550000 | 14 | 8/20/2009 | Trans Oper TD | CC | 6261 CLEAN SWEEP CAR WASH | 298.76 |
| 570100 | 15 | 8/20/2009 | Uncollectible Accounts | JE | 30894176 KY CIS POST GL BATCH | -170.20 |
| 575000 | 16 | 8/20/2009 | Misc Oper AG | CC | 6261 CLEAN SWEEP CAR WASH | 143.78 |
| 575000 | 14 | 8/20/2009 | Misc Oper TD | CC | 6261 WW GRAINGER | 770.65 |
| 575000 | 13 | 8/20/2009 | Misc Oper WT | CC | 6261 LOWES | 784.04 |
| 575002 | 16 | 8/20/2009 | Misc General Office | CC | 6261 MARATHON OIL 065995 XXX | 41.32 |
| 575002 | 16 | 8/20/2009 | Misc General Office | ST | 30894054 SABRIX NO TAX CHARGED ACR | 28.11 |
| 575220 | 16 | 8/20/2009 | Community Relations | ST | 30894054 SABRIX NO TAX CHARGED ACR | 157.05 |
| 575275 | 16 | 8/20/2009 | Discounts Available | PK | 62057141 Mueller Co - ALL USE PO/REMIT | -24.00 |
| 575280 | 16 | 8/20/2009 | Dues/Membership Deduct | CC | 6261 KY BOARD OF ENGINEERS | 150.00 |
| 575320 | 14 | 8/20/2009 | Electricity TD | EE | 3869113 KENTUCKY UTILITIES COMPANY | 15.51 |
| 575340 | 16 | 8/20/2009 | Employee Expenses AG | CC | 6261 SHAKER VILLAGE | 711.41 |
| 575340 | 16 | 8/20/2009 | Employee Expenses AG | CC | 6270 GOLD SHIELD TRANSPORTA | 1,004.78 |
| 575350 | 16 | 8/20/2009 | Meals Deduct | CC | 6261 APPLEBEES | 487.46 |
| 575350 | 16 | 8/20/2009 | Meals Deduct | CC | 6270 MCDONALD'S F | 59.80 |
| 575620 | 13 | 8/20/2009 | Office \& Admin Supplies WT | CC | 6261 OFFICEMAX CT IN | 337.13 |
| 575620 | 16 | 8/20/2009 | Office \& Admin Supplies AG | CC | 6261 OFFICEMAX CT IN | 477.77 |
| 575620 | 14 | 8/20/2009 | Office \& Admin Supplies TD | CC | 6261 OFFICE MAX | 1,077.32 |
| 575660 | 16 | 8/20/2009 | Postage AG | ST | 30894054 SABRIX NO TAX CHARGED ACR | 90.90 |
| 575740 | 15 | 8/20/2009 | Telephone CA | TC | 30893941 Windstream | 268.07 |
| 575740 | 15 | 8/20/2009 | Telephone CA | TC | 30893942 Windstream | 1,144.50 |
| 575740 | 15 | 8/20/2009 | Telephone CA | TC | 30893943 Windstream | 107.14 |
| 575740 | 15 | 8/20/2009 | Telephone CA | TC | 30893944 Windstream | 147.03 |
| 575740 | 15 | 8/20/2009 | Telephone CA | TC | 30893945 Windstream | 2,270.40 |
| 575740 | 16 | 8/20/2009 | Telephone AG | TC | 30893974 AT\&T | 205.16 |
| 575740 | 16 | 8/20/2009 | Telephone AG | TC | 30893975 AT\&T | 223.03 |
| 575740 | 16 | 8/20/2009 | Telephone AG | TC | 30893976 AT\&T | 1,525.15 |
| 575820 | 13 | 8/20/2009 | Uniforms WT | CC | 6261 UFIRST LAUNDRY SVCS | 227.37 |
| 575820 | 14 | 8/20/2009 | Uniforms TD | CC | 6261 UFIRST LAUNDRY SVCS | 521.74 |
| 620000 | 21 | 8/20/2009 | Mat and Sup Maint SS | CC | 6261 LOWES | 273.03 |
| 620000 | 24 | 8/20/2009 | Mat and Sup Maint TD | CC | 6261 OWEN COUNTY BLDG SUPPLY | 419.64 |
| 620000 | 24 | 8/20/2009 | Mat and Sup Maint TD | OV | 10275060 Powerseal Pipeline Products Co | 2,196.42 |
| 620000 | 24 | 8/20/2009 | Mat and Sup Maint TD | OV | 10275061 Smith Blair Inc - PO Box 5337 | 10,004.87 |
| 635000 | 26 | 8/20/2009 | Contr Svc-Other Maint AG | CC | 6261 UFIRST LAUNDRY SVCS | 630.36 |
| 675650 | 24 | 8/20/2009 | Paving/Backfill TD | CC | 6261 CENTRAL READY MIX CONCRET | 755.07 |
| 685325 |  | 8/20/2009 | FICA | PS | 42299049 Internal Revenue Service (CA) | 718.92 |
| 716121 |  | 8/20/2009 | M\&J Expenses-Outside | CC | 6261 BURGER KING | 35.99 |
| 760100 |  | 8/20/2009 | Donations Deduct | CC | 6261 CHAMBER OF COMMERCE | 600.00 |
| 401110 |  | 8/21/2009 | Res Sales Billed | JE | 30894325 KY CIS POST GL BATCH | -187,256.64 |
| 401210 |  | 8/21/2009 | Com Sales Billed | JE | 30894325 KY CIS POST GL BATCH | -72,366.27 |
| 401310 |  | 8/21/2009 | Ind Sales Billed | JE | 30894325 KY CIS POST GL BATCH | -227.86 |
| 401450 |  | 8/21/2009 | Priv Fire Billed | JE | 30894325 KY CIS POST GL BATCH | -35.25 |
| 401510 |  | 8/21/2009 | Pub Auth Billed | JE | 30894325 KY CIS POST GL BATCH | -2,007.13 |
| 401610 |  | 8/21/2009 | SFR Billed | JE | 30894325 KY CIS POST GL BATCH | -99.42 |
| 402110 |  | 8/21/2009 | Dom WW Serv Billed | JE | 30894325 KY CIS POST GL BATCH | -1,794.61 |
| 402210 |  | 8/21/2009 | Com WW Serv Billed | JE | 30894325 KY CIS POST GL BATCH | -342.35 |
| 402310 |  | 8/21/2009 | Ind WW Serv Billed | JE | 30894325 KY CIS POST GL BATCH | -49.28 |
| 403104 |  | 8/21/2009 | Oth Rev-NSF Check Charge | JE | 30894325 KY CIS POST GL BATCH | -120.00 |
| 403105 |  | 8/21/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30894325 KY CIS POST GL BATCH | -2,080.00 |
| 403107 |  | 8/21/2009 | Oth Rev-Reconnection Charges | JE | 30894325 KY CIS POST GL BATCH | -2,028.00 |
| 570100 | 15 | 8/21/2009 | Uncollectible Accounts | JE | 30894325 KY CIS POST GL BATCH | -168.48 |
| 575000 | 16 | 8/21/2009 | Misc Oper AG | RI | 10132155 Tudor, Carol F. | -24.80 |
| 575100 | 15 | 8/21/2009 | Bank Service Charges CA | PV | 42299488 Mellon Bank NA - LOCKBOX - ACH | 9,643.81 |
| 575200 | 15 | 8/21/2009 | Collection Agencies CA | PV | 42299616 GC Services Limited Parnership | 4,611.89 |
| 575275 | 16 | 8/21/2009 | Discounts Available | PK | 62057153 Mueller Co - ALL USE PO/REMIT | -40.22 |
| 575275 | 16 | 8/21/2009 | Discounts Available | PK | 62057159 Ferguson SAC - ALL USE REMIT | -37.31 |
| 501200 | 2410 | 8/23/2009 | Labor Maint TD Struct \& Imp | T2 | 34510 Payroll Labor Distribution | 31.98 |
| 501200 | 2415 | 8/23/2009 | Labor Maint TD Dist Res | T2 | 34510 Payroll Labor Distribution | 313.08 |
| 501200 | 2405 | 8/23/2009 | Labor Maint TD Super/Eng | T2 | 34510 Payroll Labor Distribution | 597.41 |
| 501200 | 2435 | 8/23/2009 | Labor Maint TD Meters | T2 | 34510 Payroll Labor Distribution | 1,536.11 |
| 501200 | 2305 | 8/23/2009 | Labor Maint WT Super/Eng | T2 | 34510 Payroll Labor Distribution | 1,792.26 |
| 501200 | 24 | 8/23/2009 | Labor Maint TD | T2 | 34510 Payroll Labor Distribution | 2,071.39 |
| 501200 | 22 | 8/23/2009 | Labor Maint P | T2 | 34510 Payroll Labor Distribution | 2,384.55 |
| 501200 | 23 | 8/23/2009 | Labor Maint WT | T2 | 34510 Payroll Labor Distribution | 3,395.15 |
| 501200 | 15 | 8/23/2009 | Labor Oper CA | T2 | 34510 Payroll Labor Distribution | 3,465.09 |
| 501200 | 1405 | 8/23/2009 | Labor Oper TD Super/Eng | T2 | 34510 Payroll Labor Distribution | 5,466.02 |
| 501200 | 2420 | 8/23/2009 | Labor Maint TD Mains | T2 | 34510 Payroll Labor Distribution | 7,674.33 |
| 501200 | 1415 | 8/23/2009 | Labor Oper TD Lines | T2 | 34510 Payroll Labor Distribution | 8,644.33 |
| 501200 | 1520 | 8/23/2009 | Labor Oper CA Cust Serv | T2 | 34510 Payroll Labor Distribution | 9,008.28 |
| 501200 | 2440 | 8/23/2009 | Labor Maint TD Hydrants | T2 | 34510 Payroll Labor Distribution | 9,337.33 |
| 501200 | 2430 | 8/23/2009 | Labor Maint TD Services | T2 | 34510 Payroll Labor Distribution | 10,928.02 |
| 501200 | 1510 | 8/23/2009 | Labor Oper CA Mtr Read | T2 | 34510 Payroll Labor Distribution | 21,116.80 |
| 501200 | 1305 | 8/23/2009 | Labor Oper WT Super/Eng | T2 | 34510 Payroll Labor Distribution | 29,287.90 |
| 501200 | 1420 | 8/23/2009 | Labor Oper TD Meter | T2 | 34510 Payroll Labor Distribution | 30,017.77 |
| 501200 | 13 | 8/23/2009 | Labor Oper WT | T2 | 34510 Payroll Labor Distribution | 30,625.15 |
| 501200 | 14 | 8/23/2009 | Labor Oper TD | T2 | 34510 Payroll Labor Distribution | 31,276.63 |
| 501200 | 16 | 8/23/2009 | Labor Oper AG | T2 | 34510 Payroll Labor Distribution | 33,104.27 |
| 501200 | 13 | 8/23/2009 | Labor Oper WT | T3 | 34511 Actual Burden Journal Entries | 24.00 |
| 501200 | 14 | 8/23/2009 | Labor Oper TD | T2 | 34586 Payroll Labor Distribution | 1,786.40 |
| 501210 | 15 | 8/23/2009 | Labor NS OT CA | T2 | 34510 Payroll Labor Distribution | 43.97 |
| 501210 | 1405 | 8/23/2009 | Labor NS OT TD Super/Eng | T2 | 34510 Payroll Labor Distribution | 44.36 |
| 501210 | 16 | 8/23/2009 | Labor NS OT AG | T2 | 34510 Payroll Labor Distribution | 142.26 |
| 501210 | 2430 | 8/23/2009 | Labor NS OT TD Services | T2 | 34510 Payroll Labor Distribution | 399.92 |





| ACCOUNT | SUB | GL DATE | DESCRIPTION | DOC TYPE | DOC\# | EXPLANATION | AMOUNT |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 401220 |  | 8/31/2009 | Com Sales Unbilled | JE | 120818 | Discretionary Unbilled Adj Aug | 121,405.00 |
| 401220 |  | 8/31/2009 | Com Sales Unbilled | JE | 30895012 | UNBILLED REVENUE | -1,214,058.89 |
| 401320 |  | 8/31/2009 | Ind Sales Unbilled | JE | 30895012 | UNBILLED REVENUE | -127,888.79 |
| 401460 |  | 8/31/2009 | Priv Fire Unbilled | JE | 120809 | Reverse Unbilled Priate Fire | 1,575.40 |
| 401460 |  | 8/31/2009 | Priv Fire Unbilled | JE | 30895012 | UNBILLED REVENUE | -1,575.40 |
| 401520 |  | 8/31/2009 | Pub Auth Unbilled | JE | 30895012 | UNBILLED REVENUE | -339,679.24 |
| 401620 |  | 8/31/2009 | Sales for Resale Unbilled | JE | 30895012 | UNBILLED REVENUE | -118,785.84 |
| 403102 |  | 8/31/2009 | Oth Rev-Rents Water Property | JE | 30895535 | 8/09 Rent,phone\&indirect costs | -1,193.00 |
| 403103 |  | 8/31/2009 | Oth Rev-Collect for Others | JE |  | Add'I Accrual for Aug MI Sew/L | -92,983.40 |
| 403198 |  | 8/31/2009 | Oth Rev-Misc Service Rev | RI | 10132567 | Kentucky American Water - Nort | -20.00 |
| 501200 | 1305 | 8/31/2009 | Labor Oper WT Super/Eng | JE | 30895918 | FASTR - ALLOCATION KY_ALLEXP2 | -947.97 |
| 501210 | 1305 | 8/31/2009 | Labor NS OT WT Super/Eng | JE | 30895918 | FASTR - ALLOCATION KY_ALLEXP2 | -199.48 |
| 501716 | 16 | 8/31/2009 | Comp Exp-Options | JE | 30895519 | Accrue RSU \& Opt Exp Aug09 | 616.00 |
| 501718 | 16 | 8/31/2009 | Comp Exp-RSU's | JE | 30895519 | Accrue RSU \& Opt Exp Aug09 | 553.00 |
| 504100 | 16 | 8/31/2009 | Group Ins Oper AG | JE | 30895389 | Adjust Accr Ins for Aug 2009 | -4,244.86 |
| 504100 | 16 | 8/31/2009 | Group Ins Oper AG | JE | 30895918 | FASTR - ALLOCATION KY_ALLEXP2 | -20.04 |
| 504610 | 16 | 8/31/2009 | Employee Awards AG | PV | 42308096 | Tharpe Company Inc-REMIT | 842.10 |
| 506100 | 16 | 8/31/2009 | Pension Oper AG | JR | 2002 | Pension Costs Allocations | 139,476.59 |
| 507100 | 16 | 8/31/2009 | 401k Oper AG | JE | 30895918 | FASTR - ALLOCATION KY_ALLEXP2 | -12.38 |
| 508200 | 16 | 8/31/2009 | ESPP Oper AG | JE | 30895029 | Accrue ESPP Expense Aug 2009 | 577.05 |
| 510100 | 11 | 8/31/2009 | Purchased Water-Outside | JE |  | Acc for Inv Rec'd but not appr | 1,155.30 |
| 510100 | 11 | 8/31/2009 | Purchased Water-Outside | JE |  | Rec'd Purchased Water Acc 8.09 | 4,968.00 |
| 511100 | 13 | 8/31/2009 | Waste Disposal Exp WT | JE |  | Power Accrual for Eastern \& PA | -66.45 |
| 511100 | 13 | 8/31/2009 | Waste Disposal Exp WT | JE | 600 | Acc for Goods/Serv not Invoice | 1,286.11 |
| 511100 | 13 | 8/31/2009 | Waste Disposal Exp WT | JR | 30059984 | Periodic Waste Disposal Accrua | 4,167.00 |
| 511200 | 13 | 8/31/2009 | Amort Waste Disp Exp | JR | 30059991 | Amortize Waste Disposal KY Riv | 7,692.83 |
| 515100 | 12 | 8/31/2009 | Purch Power P | JE | 155 | Power Accrual for Eastern \& PA | -3,096.69 |
| 515100 | 14 | 8/31/2009 | Purch Power TD | JE | 155 | Power Accrual for Eastern \& PA | -831.66 |
| 515100 | 13 | 8/31/2009 | Purch Power WT | JE | 155 | Power Accrual for Eastern \& PA | 27,476.66 |
| 515100 | 13 | 8/31/2009 | Purch Power WT | JE |  | Power Accrual Man Adj | -45,725.74 |
| 515100 | 13 | 8/31/2009 | Purch Power WT | JE | 120816 | Add'I PTP 5 Accr KY Fac Fee | 32,402.90 |
| 520100 | 16 | 8/31/2009 | M \& S Oper AG | JE | 130 | KY pcrd accrl 08/09 | -128.41 |
| 520100 | 13 | 8/31/2009 | M \& S Oper WT | JE |  | KY pcrd accrl 08/09 | 215.27 |
| 520100 | 14 | 8/31/2009 | M \& S Oper TD | JE | 130 | KY pcrd accrl 08/09 | 3,054.57 |
| 520100 | 14 | 8/31/2009 | M \& S Oper TD | JE | 155 | Power Accrual for Eastern \& PA | 1.90 |
| 520100 | 16 | 8/31/2009 | M \& S Oper AG | CC | 30895806 | CHILI'S 2 - RICHMO | 13.99 |
| 520100 | 13 | 8/31/2009 | M \& S Oper WT | CC | 30895806 | CHILI'S 2 - RICHMO | 19.56 |
| 532100 | 16 | 8/31/2009 | Contr Svc-Audit Fees Oper AG | JR | 275 | Amort PWC Audit Fee 09-10 | 8,849.58 |
| 533000 | 16 | 8/31/2009 | Contr Svc-Legal Oper AG | JE |  | Accrual for Unbilled Legal Aug | 11,491.12 |
| 533000 | 16 | 8/31/2009 | Contr Svc-Legal Oper AG | JR | 30059967 | King \& Spalding Legal Fees | 34.07 |
| 534600 | 16 | 8/31/2009 | Mmgt Fees-Corporate | JB | 30895947 | CP | 1,082.08 |
| 534601 | 16 | 8/31/2009 | Mmgt Fees-External Affairs/Com | JB | 30895947 | CP | 25,916.49 |
| 534602 | 16 | 8/31/2009 | Mmgt Fees-Finance | JB | 30895947 | CP | 98,701.18 |
| 534603 | 16 | 8/31/2009 | Mmgt Fees-Human Resources | JB | 30895947 | CP | 33,086.63 |
| 534604 | 16 | 8/31/2009 | Mmgt Fees-Legal | JB | 30895947 | CP | 27,386.53 |
| 534605 | 16 | 8/31/2009 | Mmgt Fees-Operations Svcs | JB | 30895947 | CP | 24,139.74 |
| 534606 | 16 | 8/31/2009 | Mmgt Fees-Property | JB | 30895947 | CP | 36,922.99 |
| 534607 | 16 | 8/31/2009 | Mmgt Fees-Business Development | JB | 30895947 | CP | 16,225.96 |
| 534608 | 16 | 8/31/2009 | Mmgt Fees-Bus Transformation | JB | 30895947 | CP | -377.53 |
| 534609 | 16 | 8/31/2009 | Mmgt Fees-Audit | JB | 30895947 | CP | 5,304.27 |
| 534610 | 16 | 8/31/2009 | Mmgt Fees-Regulatory | JB | 30895947 | CP | 2,007.25 |
| 534611 | 16 | 8/31/2009 | Mmgt Fees-Inv Relations | JB | 30895947 | CP | 1,511.10 |
| 534615 | 16 | 8/31/2009 | SSC-Shrd Bus Srv Fees | JB | 30895947 | CP | 45,579.74 |
| 534625 | 16 | 8/31/2009 | CSC-Shrd Bus Srv Fees | JB | 30895947 | CP | 141,801.26 |
| 534635 | 16 | 8/31/2009 | ITS-Shrd Bus Srv Fees | JB | 30895947 | CP | 113,358.13 |
| 534645 | 16 | 8/31/2009 | Procure-Shrd Bus Srv Fees | JB | 30895947 | CP | 7,186.66 |
| 534655 | 16 | 8/31/2009 | Lab-Shrd Bus Srv Fees | JB | 30895947 | CP | 15,024.91 |
| 534665 | 16 | 8/31/2009 | BSC-Shrd Bus Srv Fees | JB | 30895947 | CP | 3,900.18 |
| 534701 | 16 | 8/31/2009 | Mmgt Fees-Regulated Operations | JB | 30895947 | CP | 92,305.75 |
| 535000 | 16 | 8/31/2009 | Contr Svc-Other Oper AG | JE | 130 | KY pcrd accrl 08/09 | 27.98 |
| 535000 | 15 | 8/31/2009 | Contr Svc-Other Oper CA | JE | 130 | KY pcrd accrl 08/09 | 100.09 |
| 535000 | 13 | 8/31/2009 | Contr Svc-Other Oper WT | JE | 160 | Acc for Inv Rec'd but not appr | 2,300.00 |
| 535000 | 14 | 8/31/2009 | Contr Svc-Other Oper TD | JE |  | Acc for Inv Rec'd but not appr | 2,354.25 |
| 535000 | 15 | 8/31/2009 | Contr Svc-Other Oper CA | JE | 410 | Rec EstDiv Calence Phone Accrl | -564.55 |
| 535000 | 13 | 8/31/2009 | Contr Svc-Other Oper WT | JE | 600 | Acc for Goods/Serv not Invoice | -2,660.00 |
| 535000 | 14 | 8/31/2009 | Contr Svc-Other Oper TD | JE | 600 | Acc for Goods/Serv not Invoice | 1,612.25 |
| 535000 | 16 | 8/31/2009 | Contr Svc-Other Oper AG | JE | 600 | Acc for Goods/Serv not Invoice | 20,890.00 |
| 535000 | 16 | 8/31/2009 | Contr Svc-Other Oper AG | JE | 120819 | Rev Rob Half on PTP5 Accrual | -20,500.00 |
| 535000 | 16 | 8/31/2009 | Contr Svc-Other Oper AG | JE | 17080910 | PWC Contract Services P08/09 | 8,144.50 |
| 535000 | 13 | 8/31/2009 | Contr Svc-Other Oper WT | JR | 30059979 | Hach Co. - Maintenance | 4,684.42 |
| 535000 | 13 | 8/31/2009 | Contr Svc-Other Oper WT | JE | 30895918 | FASTR - ALLOCATION KY_ALLEXP2 | -2,751.91 |
| 535000 | 14 | 8/31/2009 | Contr Svc-Other Oper TD | JE | 30895918 | FASTR - ALLOCATION KY_ALLEXP2 | -1,255.31 |
| 535000 | 16 | 8/31/2009 | Contr Svc-Other Oper AG | JB | 30895947 | CP | 72.39 |
| 535001 | 13 | 8/31/2009 | Contr Svc-Temp Empl Oper WT | JE | 30895918 | FASTR - ALLOCATION KY_ALLEXP2 | -2,903.93 |
| 535001 | 14 | 8/31/2009 | Contr Svc-Temp Empl Oper TD | JE | 30895918 | FASTR - ALLOCATION KY_ALLEXP2 | -995.86 |
| 541400 | 16 | 8/31/2009 | Rents-Equipment Oper AG | JR | 30059975 | Amortize Oce Imag Copier Lease | 199.34 |
| 541400 | 16 | 8/31/2009 | Rents-Equipment Oper AG | JR | 30059976 | Dyntek Services | 161.47 |
| 541400 | 16 | 8/31/2009 | Rents-Equipment Oper AG | JE | 30895535 | 8/09 Rent,phone\&indirect costs | -12.00 |
| 550000 | 16 | 8/31/2009 | Trans Oper AG | JE | 130 | KY pcrd accrl 08/09 | 3.09 |
| 550000 | 14 | 8/31/2009 | Trans Oper TD | JE |  | KY pcrd accrl 08/09 | 79.74 |
| 550000 | 16 | 8/31/2009 | Trans Oper AG | CC | 30895797 | BEST BUY | 29.00 |
| 550000 | 16 | 8/31/2009 | Trans Oper AG | PV | 42308071 | Bridgestone Americas Inc | 276.77 |
| 550002 | 16 | 8/31/2009 | Trans Oper AG Lease Fuel | JE |  | Accrue 08.09 ARI Charges | 12,980.09 |
| 550003 | 16 | 8/31/2009 | Trans Oper AG Lease Maint | JE |  | Accrue 08.09 ARI Charges | 8,835.16 |



| ACCOUNT | SUB | GL DATE ${ }^{\text {deSCRIPTION }}$ | DOC TYPE | DOC\# | AMOUNT |
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| 575711 | 16 | 8/31/2009 Add'I Security Costs AG | JE | 600 Acc for Goods/Serv not Invoice | 108.24 |
| 575711 | 16 | 8/31/2009 Add'I Security Costs AG | PV | 42308028 Murray Guard Inc-PO/REMIT | 715.20 |
| 575711 | 16 | 8/31/2009 Add'I Security Costs AG | PV | 42308033 Murray Guard Inc-PO/REMIT | 2,668.64 |
| 575715 | 16 | 8/31/2009 Software Licenses \& Support | JR | 348 Amort RIA Insource CIS License | 284.82 |
| 575715 | 16 | 8/31/2009 Software Licenses \& Support | JR | 30059963 Vesry Pro Expert Maint Program | 527.88 |
| 575715 | 16 | 8/31/2009 Software Licenses \& Support | JR | 30059970 Amortize global support iconic | 405.58 |
| 575715 | 16 | 8/31/2009 Software Licenses \& Support | JR | 30059983 Amortize Industrial Defender | 113.21 |
| 575740 | 16 | 8/31/2009 Telephone AG | JE | 149 Telephone Accrual 08.09 | 384.54 |
| 575740 | 15 | 8/31/2009 Telephone CA | JE | 149 Telephone Accrual 08.09 | 768.41 |
| 575740 | 16 | 8/31/2009 Telephone AG | JE | 410 Rec EstDiv Calence Phone Accrl | -98.97 |
| 575740 | 15 | 8/31/2009 Telephone CA | JE | 410 Rec EstDiv Calence Phone Accrl | 606.31 |
| 575741 | 16 | 8/31/2009 Cell Phone AG | JE | 410 Rec EstDiv Calence Phone Accrl | -288.47 |
| 575741 | 13 | 8/31/2009 Cell Phone WT | JE | 410 Rec EstDiv Calence Phone Accrl | -23.71 |
| 575741 | 14 | 8/31/2009 Cell Phone TD | JE | 18080937 To reaccrue unused credits | -1,306.10 |
| 575741 | 16 | 8/31/2009 Cell Phone AG | CC | 30895806 CHILI'S 2 - RICHMO | 63.58 |
| 575820 | 14 | 8/31/2009 Uniforms TD | JE | 130 KY pcrd accrl 08/09 | 620.27 |
| 575820 | 13 | 8/31/2009 Uniforms WT | CC | 30895806 CHILI'S 2 - RICHMO | 123.56 |
| 575830 | 16 | 8/31/2009 Wtr \& Waste Wtr Exp AG | JE | 30895535 8/09 Rent,phone\&indirect costs | -4.00 |
| 575998 | 16 | 8/31/2009 PCard Undistributed | JE | 130 KY pcrd accrl 08/09 | 1,548.63 |
| 620000 | 23 | 8/31/2009 Mat and Sup Maint WT | JE | 130 KY pcrd accrl 08/09 | -4,364.73 |
| 620000 | 24 | 8/31/2009 Mat and Sup Maint TD | JE | 130 KY pcrd accrl 08/09 | -358.81 |
| 620000 | 21 | 8/31/2009 Mat and Sup Maint SS | JE | 130 KY pcrd accrl 08/09 | 18.85 |
| 620000 | 24 | 8/31/2009 Mat and Sup Maint TD | JE | 160 Acc for Inv Rec'd but not appr | 2,258.34 |
| 620000 | 23 | 8/31/2009 Mat and Sup Maint WT | JE | 160 Acc for Inv Rec'd but not appr | 3,652.09 |
| 620000 | 21 | 8/31/2009 Mat and Sup Maint SS | JE | 600 Acc for Goods/Serv not Invoice | 4,775.00 |
| 620000 | 23 | 8/31/2009 Mat and Sup Maint WT | JE | 600 Acc for Goods/Serv not Invoice | 8,761.00 |
| 620000 | 24 | 8/31/2009 Mat and Sup Maint TD | IR | 554688 Inventory Return | -794.50 |
| 620000 | 24 | 8/31/2009 Mat and Sup Maint TD | 11 | 554700 Inventory Issue-Stk E \& D | 13,014.35 |
| 620000 | 26 | 8/31/2009 Mat and Sup Maint AG | JR | 30009705 Amort Microsoft License \& Main | 2,485.83 |
| 620000 | 24 | 8/31/2009 Mat and Sup Maint TD | JE | 30895353 BP KEARNEY HILLS CONDOS | 2,867.41 |
| 620000 | 23 | 8/31/2009 Mat and Sup Maint WT | CC | 30895806 CHILI'S 2 - RICHMO | 1,578.63 |
| 635000 | 26 | 8/31/2009 Contr Svc-Other Maint AG | JE | 160 Acc for Inv Rec'd but not appr | 2,166.84 |
| 635000 | 26 | 8/31/2009 Contr Svc-Other Maint AG | PV | 42308082 Stephen Hillenmeyer Landscape | 400.00 |
| 675000 | 26 | 8/31/2009 Misc Maint AG | JE | 160 Acc for Inv Rec'd but not appr | 5,229.55 |
| 675000 | 26 | 8/31/2009 Misc Maint AG | JE | 200 Reclass Versytec Maintenance | -1,566.25 |
| 675000 | 26 | 8/31/2009 Misc Maint AG | JR | 30059974 Amortize ECIS Extended Support | 3,580.00 |
| 675050 | 23 | 8/31/2009 Amort Def Maint WT | JR | 30009642 amtz m959 | 137.65 |
| 675050 | 23 | 8/31/2009 Amort Def Maint WT | JR | 30009644 amtz m965 | 685.80 |
| 675050 | 23 | 8/31/2009 Amort Def Maint WT | JR | 30009649 amtz m 1039 | 1,281.93 |
| 675050 | 23 | 8/31/2009 Amort Def Maint WT | JR | 30009653 amtz hydro \#8 | 1,131.92 |
| 675050 | 23 | 8/31/2009 Amort Def Maint WT | JR | 30009657 amtz prog maint | 1,076.39 |
| 675050 | 24 | 8/31/2009 Amort Def Maint TD | JR | 30009659 amort M1061 Hume Rd Tank | 2,149.90 |
| 675050 | 23 | 8/31/2009 Amort Def Maint WT | JR | 30009660 AMTZ HYDROTR \#3 | 1,000.67 |
| 675050 | 23 | 8/31/2009 Amort Def Maint WT | JR | 30009670 M1011 AMTZ HYDROTREATER \#5 | 1,004.87 |
| 675050 | 24 | 8/31/2009 Amort Def Maint TD | JR | 30009688 Paint Hydrotreator \#1 | 1,469.26 |
| 675050 | 24 | 8/31/2009 Amort Def Maint TD | JR | 30009689 Paint Hydrotreator \#2 | 1,800.99 |
| 675050 | 24 | 8/31/2009 Amort Def Maint TD | JR | 30009691 Repair Cox Street Tank | 416.66 |
| 675050 | 24 | 8/31/2009 Amort Def Maint TD | JR | 30009697 Amtz York Street Tank M1104 | 276.13 |
| 675050 | 23 | 8/31/2009 Amort Def Maint WT | JR | 30009753 M1038 Paint Hydro Treater | 1,244.41 |
| 675050 | 23 | 8/31/2009 Amort Def Maint WT | JR | 30059958 Amortize Programmed Maint | 1,530.40 |
| 675050 | 24 | 8/31/2009 Amort Def Maint TD | JR | 30059988 Amortize Programmed Maint | 7,172.91 |
| 675050 | 23 | 8/31/2009 Amort Def Maint WT | JR | 30059989 Amortize Programmed Maint | 2,858.27 |
| 675110 | 26 | 8/31/2009 Maint Exp ARO/Net Neg Sal AG | DP | 30894125 Monthly Depreciation Expense | 127,793.13 |
| 675650 | 24 | 8/31/2009 Paving/Backfill TD | JE | 160 Acc for Inv Rec'd but not appr | 5,309.03 |
| 675650 | 24 | 8/31/2009 Paving/Backfill TD | JE | 120814 Monthly Paving Accrual 08.09 | 35,403.47 |
| 680110 |  | 8/31/2009 Depr Exp-General | DP | 30894125 Monthly Depreciation Expense | 610,237.22 |
| 680120 |  | 8/31/2009 Depr Exp-Amort CIAC Tax | DP | 30894125 Monthly Depreciation Expense | -23,460.67 |
| 680125 |  | 8/31/2009 Depr Exp-Amort CIAC Non Tax | DP | 30894125 Monthly Depreciation Expense | -93,495.88 |
| 680300 |  | 8/31/2009 Amortization of UPAA | JU | 907 Amort Tri Village/Elk Lake | 697.33 |
| 680300 |  | 8/31/2009 Amortization of UPAA | JU | 30009706 Amtz of Util Plant Acquis Adj | 16.06 |
| 680300 |  | 8/31/2009 Amortization of UPAA | JU | 30022689 Amort UPAA Boonesboro | 1,087.57 |
| 680540 |  | 8/31/2009 Amort-Reg Asset AFUDC | JU | 30092822 AMORTIZE AFUDC EQUITY | 6,332.12 |
| 680600 |  | 8/31/2009 Amort-Prop Losses | JR | 156 Amort source of supply project | 4,756.67 |
| 680600 |  | 8/31/2009 Amort-Prop Losses | JR | 30009687 Bluegrass Water Project | 29,592.34 |
| 680620 |  | 8/31/2009 Amort-Reg Asset | JU | 30092823 UPA AMORTIZATION REG ASSET | 575.00 |
| 685100 |  | 8/31/2009 Utility Reg Assessment Fee | JH | 4 Amortize KY Prepaid PSC Fees | 7,700.97 |
| 685200 |  | 8/31/2009 Property Taxes | JH | 6 Accrue KY Property Tax | 229,073.01 |
| 685325 |  | 8/31/2009 FICA | JE | 30895056 FICA Accrual for August 2009 | 25,341.83 |
| 685325 |  | 8/31/2009 FICA | JE | 30895918 FASTR - ALLOCATION KY_ALLEXP2 | -86.45 |
| 690110 |  | 8/31/2009 FIT-Current | JE | 705 AUG TAX PROVISION | 22,241.00 |
| 690210 |  | 8/31/2009 SIT-Current | JE | 705 AUG TAX PROVISION | 45,701.00 |
| 690630 | 2 | 8/31/2009 Def FIT-Reg Liab | JT | 30092822 CY2 Rec Amor Reg Asset/Lia | -12,287.74 |
| 690630 | 1 | 8/31/2009 Def FIT-Reg Asset | JT | 30092822 CY2 Rec Amor Reg Asset/Lia | 30,852.12 |
| 690650 | 2 | 8/31/2009 Def FIT-Other Liab | JE | 705 AUG TAX PROVISION | 640,062.00 |
| 690730 | 2 | 8/31/2009 Def SIT-Reg Liab | JT | 30092822 CY2 Rec Amor Reg Asset/Lia | -5,246.50 |
| 690730 | 1 | 8/31/2009 Def SIT-Reg Asset | JT | 30092822 CY2 Rec Amor Reg Asset/Lia | 5,626.88 |
| 690750 | 2 | 8/31/2009 Def SIT-Other Liab | JE | 705 AUG TAX PROVISION | 74,901.00 |
| 695220 |  | 8/31/2009 ITC Restored - 3\% | JT | 30092822 CY2 Rec Amor Reg Asset/Lia | -637.67 |
| 695230 |  | 8/31/2009 ITC Restored - 4\% | JT | 30092822 CY2 Rec Amor Reg Asset/Lia | -525.42 |
| 695240 |  | 8/31/2009 ITC Restored - 10\% | JT | 30092822 CY2 Rec Amor Reg Asset/Lia | -5,903.33 |
| 705100 |  | 8/31/2009 AFUDC - Equity | F6 | 30895819 AFUDC Equity | -171,770.11 |
| 715111 |  | 8/31/2009 M\&J Revenues-Outside | RI | 10114732 Haddox Construction | 185.90 |
| 715111 |  | 8/31/2009 M\&J Revenues-Outside | RI | 10114739 HADDIX CONSTRUCTION, LLC | 658.16 |
| 715111 |  | 8/31/2009 M\&J Revenues-Outside | RI | 10114741 Stevens, Delsie | 1,112.60 |



| ACCOUNT | SUB | GL DATE | DESCRIPTION | DOC TYPE\| | DOC\# | EXPLANATION | AMOUNT |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 575000 | 14 | 9/1/2009 | Misc Oper TD | PV | 42310826 | Grainger - ALL USE REMIT | 703.90 |
| 575000 | 14 | 9/1/2009 | Misc Oper TD | PV | 42310827 | Grainger - ALL USE REMIT | 334.32 |
| 575000 | 14 | 9/1/2009 | Misc Oper TD | PV | 42310828 | USA Blue Book | 250.61 |
| 575030 | 16 | 9/1/2009 | Advertising | JE |  | Acc for Inv Rec'd but not appr | -2,500.00 |
| 575100 | 15 | 9/1/2009 | Bank Service Charges CA | JE |  | Mellon Bank Correction Entry | -19,421.52 |
| 575100 | 15 | 9/1/2009 | Bank Service Charges CA | PV | 42310467 | Mellon Bank NA - LOCKBOX - ACH | 9,900.06 |
| 575200 | 15 | 9/1/2009 | Collection Agencies CA | JE |  | Acc for Inv Rec'd but not appr | -1,415.38 |
| 575200 | 15 | 9/1/2009 | Collection Agencies CA | JE | 30829 | GC Services accrual august | -10,201.38 |
| 575340 | 16 | 9/1/2009 | Employee Expenses AG | PS | 42310739 | Kentucky State Treasurer-REMIT | 160.00 |
| 575342 | 16 | 9/1/2009 | Empl Exp Conf/Registration AG | PS | 42310737 | Bluegrass Cross Connection - P | 660.00 |
| 575342 | 16 | 9/1/2009 | Empl Exp Conf/Registration AG | PS | 42310738 | Bluegrass Cross Connection - P | 110.00 |
| 575500 | 16 | 9/1/2009 | Janitorial AG | PR | 42309879 | Hales Cleaning Service - ACH | 2,765.00 |
| 575620 | 14 | 9/1/2009 | Office \& Admin Supplies TD | JE | 130 | KY pcrd accrl 08/09 | -13.23 |
| 575625 | 16 | 9/1/2009 | Overnight Shipping AG | PV | 42310854 | United Parcel Service | 103.43 |
| 575625 | 16 | 9/1/2009 | Overnight Shipping AG | PV | 42310855 | United Parcel Service | 39.71 |
| 575740 | 15 | 9/1/2009 | Telephone CA | JE | 149 | Telephone Accrual 08.09 | -768.41 |
| 575740 | 16 | 9/1/2009 | Telephone AG | JE | 149 | Telephone Accrual 08.09 | -384.54 |
| 575740 | 16 | 9/1/2009 | Telephone AG | TC | 30895112 | Berry Company | 108.16 |
| 575740 | 16 | 9/1/2009 | Telephone AG | TC | 30895117 | AT\&T | . 14 |
| 575740 | 16 | 9/1/2009 | Telephone AG | TC | 30895119 | AT\&T | . 95 |
| 575740 | 16 | 9/1/2009 | Telephone AG | TC | 30895122 | AT\&T | . 14 |
| 575740 | 16 | 9/1/2009 | Telephone AG | TC | 30895123 | AT\&T | -. 17 |
| 575740 | 16 | 9/1/2009 | Telephone AG | TC | 30895124 | AT\&T | . 30 |
| 575740 | 16 | 9/1/2009 | Telephone AG | TC | 30895128 | AT\&T | . 69 |
| 575740 | 16 | 9/1/2009 | Telephone AG | TC | 30895129 | AT\&T | . 58 |
| 575740 | 15 | 9/1/2009 | Telephone CA | TC | 30895144 | Windstream | 49.48 |
| 575740 | 16 | 9/1/2009 | Telephone AG | TC | 30895147 | AT\&T | 275.82 |
| 575740 | 15 | 9/1/2009 | Telephone CA | TC | 30895147 | AT\&T | 718.93 |
| 575741 | 14 | 9/1/2009 | Cell Phone TD | JE | 18080937 | To reaccrue unused credits | 1,306.10 |
| 620000 | 24 | 9/1/2009 | Mat and Sup Maint TD | JE | 130 | KY pcrd accrl 08/09 | -63.60 |
| 620000 | 24 | 9/1/2009 | Mat and Sup Maint TD | JE |  | Acc for Inv Rec'd but not appr | -2,258.34 |
| 620000 | 21 | 9/1/2009 | Mat and Sup Maint SS | JE | 600 | Acc for Goods/Serv not Invoice | -4,775.00 |
| 620000 | 24 | 9/1/2009 | Mat and Sup Maint TD | PV | 42310816 | Ferguson SAC - ALL USE REMIT | 424.85 |
| 620000 | 24 | 9/1/2009 | Mat and Sup Maint TD | PV | 42310817 | Ferguson SAC - ALL USE REMIT | 474.11 |
| 620000 | 24 | 9/1/2009 | Mat and Sup Maint TD | PV | 42310824 | CI Thornburg Co Inc | 52.58 |
| 620000 | 24 | 9/1/2009 | Mat and Sup Maint TD | PV | 42310832 | AY McDonald Mfg Co | 1,733.56 |
| 635000 | 26 | 9/1/2009 | Contr Svc-Other Maint AG | PV | 42310812 | Stephen Hillenmeyer Landscape | 1,031.00 |
| 675650 | 24 | 9/1/2009 | Paving/Backfill TD | JE | 120814 | Monthly Paving Accrual 08.09 | -35,403.47 |
| 685325 |  | 9/1/2009 | FICA | JE | 30895056 | FICA Accrual for August 2009 | -25,341.83 |
| 715111 |  | 9/1/2009 | M\&J Revenues-Outside | RR | 10131817 | Bluegrass Station Division-Rem | -8,784.17 |
| 716121 |  | 9/1/2009 | M\&J Expenses-Outside | JE | 120814 | Monthly Paving Accrual 08.09 | -4,684.94 |
| 716121 |  | 9/1/2009 | M\&J Expenses-Outside | PV | 42310856 | Delaney \& Associates Inc | 1,062.00 |
| 760100 |  | 9/1/2009 | Donations Deduct | PS | 42310834 | UK Athletics Assn | 1,200.00 |
| 760200 |  | 9/1/2009 | Other Income Deductions | PS | 42310834 | UK Athletics Assn | 1,894.00 |
| 760200 |  | 9/1/2009 | Other Income Deductions | PS | 42310835 | Fayette County Public Schools | 1,500.00 |
| 760200 |  | 9/1/2009 | Other Income Deductions | PS | 42310836 | Citizen Police Academy Alumni | 200.00 |
| 760400 |  | 9/1/2009 | Other Lobbying Expenses | JE |  | KY pcrd accrl 08/09 | -137.00 |
| 820110 | AW46 | 9/1/2009 | Amort DExp Inside AW46 | JE | 120813 | Amortize Legal Fees for Debt F | -36.24 |
| 401110 |  | 9/2/2009 | Res Sales Billed | JE | 30895760 | KY CIS POST GL BATCH | -132,143.41 |
| 401210 |  | 9/2/2009 | Com Sales Billed | JE | 30895760 | KY CIS POST GL BATCH | -118,324.64 |
| 401450 |  | 9/2/2009 | Priv Fire Billed | JE | 30895760 | KY CIS POST GL BATCH | -130.42 |
| 401510 |  | 9/2/2009 | Pub Auth Billed | JE | 30895760 | KY CIS POST GL BATCH | -1,071.80 |
| 402110 |  | 9/2/2009 | Dom WW Serv Billed | JE | 30895760 | KY CIS POST GL BATCH | -19.34 |
| 403104 |  | 9/2/2009 | Oth Rev-NSF Check Charge | JE | 30895760 | KY CIS POST GL BATCH | -144.00 |
| 403105 |  | 9/2/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30895760 | KY CIS POST GL BATCH | -3,510.00 |
| 403107 |  | 9/2/2009 | Oth Rev-Reconnection Charges | JE | 30895760 | KY CIS POST GL BATCH | -3,484.00 |
| 504100 | 16 | 9/2/2009 | Group Ins Oper AG | PS | 42310917 | Wachovia Bank National Associa | 142,741.76 |
| 504670 | 16 | 9/2/2009 | Training AG | PV | 42311622 | J J Keller \& Associates Inc - | 645.00 |
| 510100 | 11 | 9/2/2009 | Purchased Water-Outside | PV | 42310984 | Georgetown Municipal Water \& S | 10.23 |
| 510100 | 11 | 9/2/2009 | Purchased Water-Outside | PV | 42311044 | Gallatin County Water District | 1,155.30 |
| 511100 | 13 | 9/2/2009 | Waste Disposal Exp WT | EE | 3886515 | KENTUCKY UTILITIES COMPANY | 862.85 |
| 511100 | 13 | 9/2/2009 | Waste Disposal Exp WT | EE | 3886523 | KENTUCKY UTILITIES COMPANY | 843.38 |
| 515100 | 14 | 9/2/2009 | Purch Power TD | EE | 3882540 | KENTUCKY UTILITIES COMPANY | 11.98 |
| 515100 | 12 | 9/2/2009 | Purch Power P | EE | 3882547 | KENTUCKY UTILITIES COMPANY | 79.42 |
| 515100 | 13 | 9/2/2009 | Purch Power WT | EE | 3885338 | KENTUCKY UTILITIES COMPANY | 440.53 |
| 515100 | 14 | 9/2/2009 | Purch Power TD | EE | 3885695 | KENTUCKY UTILITIES COMPANY | 398.19 |
| 515100 | 12 | 9/2/2009 | Purch Power P | EE | 3885704 | KENTUCKY UTILITIES COMPANY | 2,924.22 |
| 515100 | 12 | 9/2/2009 | Purch Power P | EE | 3885716 | KENTUCKY UTILITIES COMPANY | 4,535.92 |
| 515100 | 13 | 9/2/2009 | Purch Power WT | EE | 3885724 | KENTUCKY UTILITIES COMPANY | 19,890.29 |
| 515100 | 12 | 9/2/2009 | Purch Power P | EE | 3886431 | KENTUCKY UTILITIES COMPANY | 55.56 |
| 515100 | 14 | 9/2/2009 | Purch Power TD | EE | 3886438 | KENTUCKY UTILITIES COMPANY | 21.08 |
| 515100 | 14 | 9/2/2009 | Purch Power TD | EE | 3886456 | KENTUCKY UTILITIES COMPANY | 21.89 |
| 515100 | 12 | 9/2/2009 | Purch Power P | EE | 3886477 | KENTUCKY UTILITIES COMPANY | 716.17 |
| 515100 | 12 | 9/2/2009 | Purch Power P | EE | 3886483 | KENTUCKY UTILITIES COMPANY | 883.86 |
| 515100 | 13 | 9/2/2009 | Purch Power WT | EE | 3886522 | KENTUCKY UTILITIES COMPANY | 2,333.08 |
| 515100 | 12 | 9/2/2009 | Purch Power P | EE | 3886524 | KENTUCKY UTILITIES COMPANY | 298.16 |
| 520100 | 14 | 9/2/2009 | M \& S Oper TD | PV | 42311031 | USA Blue Book | 986.17 |
| 520100 | 16 | 9/2/2009 | M \& S Oper AG | PV | 42311271 | Insight Direct (Peripherals) - | 237.90 |
| 535000 | 14 | 9/2/2009 | Contr Svc-Other Oper TD | PV | 42310997 | Volt Services Group | 1,138.15 |
| 535000 | 13 | 9/2/2009 | Contr Svc-Other Oper WT | PV | 42311046 | Siemens Water Technologies Cor | 364.96 |
| 535000 | 13 | 9/2/2009 | Contr Svc-Other Oper WT | PV | 42311050 | Christopher Excavating | 2,300.00 |
| 535000 | 16 | 9/2/2009 | Contr Svc-Other Oper AG | PV | 42311267 | Laser Images Inc - PO/REMIT | 109.00 |
| 536000 | 13 | 9/2/2009 | Contr Svc-Lab Testing Oper WT | PV | 42311036 | Fouser Environmental Services | 785.00 |
| 536000 | 13 | 9/2/2009 | Contr Svc-Lab Testing Oper WT | PV | 42311039 | Fouser Environmental Services | 240.00 |



| ACCOUNT | SUB | GL DATE | DESCRIPTION | DOC TYPE | DOC\# EXPLANATION | AMOUNT |
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| 501200 | 1305 | 9/6/2009 | Labor Oper WT Super/Eng | T2 | 34707 Payroll Labor Distribution | 23,040.04 |
| 501200 | 13 | 9/6/2009 | Labor Oper WT | T2 | 34707 Payroll Labor Distribution | 30,150.46 |
| 501200 | 1420 | 9/6/2009 | Labor Oper TD Meter | T2 | 34707 Payroll Labor Distribution | 33,611.46 |
| 501200 | 14 | 9/6/2009 | Labor Oper TD | T2 | 34707 Payroll Labor Distribution | 33,954.15 |
| 501200 | 16 | 9/6/2009 | Labor Oper AG | T2 | 34707 Payroll Labor Distribution | 35,163.95 |
| 501200 | 13 | 9/6/2009 | Labor Oper WT | T3 | 34708 Actual Burden Journal Entries | 24.00 |
| 501210 | 1415 | 9/6/2009 | Labor NS OT TD Lines | T2 | 34707 Payroll Labor Distribution | 29.35 |
| 501210 | 1510 | 9/6/2009 | Labor NS OT CA Mtr Read | T2 | 34707 Payroll Labor Distribution | 166.82 |
| 501210 | 14 | 9/6/2009 | Labor NS OT TD | T2 | 34707 Payroll Labor Distribution | 171.70 |
| 501210 | 1420 | 9/6/2009 | Labor NS OT TD Meter | T2 | 34707 Payroll Labor Distribution | 429.68 |
| 501210 | 2430 | 9/6/2009 | Labor NS OT TD Services | T2 | 34707 Payroll Labor Distribution | 494.12 |
| 501210 | 1305 | 9/6/2009 | Labor NS OT WT Super/Eng | T2 | 34707 Payroll Labor Distribution | 508.26 |
| 501210 | 13 | 9/6/2009 | Labor NS OT WT | T2 | 34707 Payroll Labor Distribution | 821.69 |
| 501210 | 2420 | 9/6/2009 | Labor NS OT TD Mains | T2 | 34707 Payroll Labor Distribution | 1,349.71 |
| 501711 |  | 9/6/2009 | IP-Off-Annual-P/R JE | T3 | 34708 Actual Burden Journal Entries | 10,503.97 |
| 504100 | 16 | 9/6/2009 | Group Ins Oper AG | T3 | 34708 Actual Burden Journal Entries | 1,217.75 |
| 504100 | , | 9/6/2009 | Group Insurance - Cap Credits | T3 | 34708 Actual Burden Journal Entries | 30,560.48 |
| 505100 | 1 | 9/6/2009 | PBOP Cap Credits | T3 | 34708 Actual Burden Journal Entries | 41,965.18 |
| 506100 | 1 | 9/6/2009 | Pension - Cap Credits | T3 | 34708 Actual Burden Journal Entries | 60,942.15 |
| 507100 | 16 | 9/6/2009 | 401k Oper AG | T3 | 34708 Actual Burden Journal Entries | 4,199.76 |
| 508101 | 16 | 9/6/2009 | DCP Oper AG | T3 | 34708 Actual Burden Journal Entries | 4,055.40 |
| 508102 | 16 | 9/6/2009 | Retiree Med Oper AG | T3 | 34708 Actual Burden Journal Entries | 813.61 |
| 550000 | 1 | 9/6/2009 | Trans - Cap Credits | T3 | 34708 Actual Burden Journal Entries | 16,646.81 |
| 558000 | 1 | 9/6/2009 | Ins Work Comp Cap Credits | T3 | 34708 Actual Burden Journal Entries | 5,217.60 |
| 575340 | 16 | 9/6/2009 | Employee Expenses AG | T3 | 34708 Actual Burden Journal Entries | 219.31 |
| 685320 |  | 9/6/2009 | FUTA | T3 | 34708 Actual Burden Journal Entries | 61.51 |
| 685325 |  | 9/6/2009 | FICA | T3 | 34708 Actual Burden Journal Entries | 18,429.76 |
| 685350 |  | 9/6/2009 | SUTA | T3 | 34708 Actual Burden Journal Entries | 127.07 |
| 716121 |  | 9/6/2009 | M\&J Expenses-Outside | T2 | 34707 Payroll Labor Distribution | 2,312.16 |
| 716121 |  | 9/6/2009 | M\&J Expenses-Outside | T3 | 34708 Actual Burden Journal Entries | 1,717.08 |
| 401110 |  | 9/8/2009 | Res Sales Billed | JE | 30896412 KY CIS POST GL BATCH | -131,020.82 |
| 401210 |  | 9/8/2009 | Com Sales Billed | JE | 30896412 KY CIS POST GL BATCH | -175,187.35 |
| 401310 |  | 9/8/2009 | Ind Sales Billed | JE | 30896412 KY CIS POST GL BATCH | -7,697.00 |
| 401510 |  | 9/8/2009 | Pub Auth Billed | JE | 30896412 KY CIS POST GL BATCH | -84,072.84 |
| 401610 |  | 9/8/2009 | SFR Billed | JE | 30896412 KY CIS POST GL BATCH | -88,692.91 |
| 401710 |  | 9/8/2009 | Misc Sales Billed | JE | 30896412 KY CIS POST GL BATCH | -328.82 |
| 402110 |  | 9/8/2009 | Dom WW Serv Billed | JE | 30896412 KY CIS POST GL BATCH | -29.72 |
| 403104 |  | 9/8/2009 | Oth Rev-NSF Check Charge | JE | 30896412 KY CIS POST GL BATCH | -144.00 |
| 403105 |  | 9/8/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30896412 KY CIS POST GL BATCH | -2,262.00 |
| 403107 |  | 9/8/2009 | Oth Rev-Reconnection Charges | JE | 30896412 KY CIS POST GL BATCH | -2,262.00 |
| 515100 | 12 | 9/8/2009 | Purch Power P | EE | 3893102 KENTUCKY UTILITIES COMPANY | 841.57 |
| 520100 | 16 | 9/8/2009 | M \& S Oper AG | PV | 42314401 Sams Club | 52.40 |
| 535000 | 14 | 9/8/2009 | Contr Svc-Other Oper TD | PV | 42314719 Christopher Excavating | 1,020.00 |
| 535000 | 16 | 9/8/2009 | Contr Svc-Other Oper AG | PV | 42314719 Christopher Excavating | 2,100.00 |
| 535000 | 13 | 9/8/2009 | Contr Svc-Other Oper WT | PV | 42314719 Christopher Excavating | 8,400.00 |
| 535001 | 15 | 9/8/2009 | Contr Svc-Temp Empl Oper CA | PV | 42314699 Volt Services Group | 624.00 |
| 570100 | 15 | 9/8/2009 | Uncollectible Accounts | JE | 30896412 KY CIS POST GL BATCH | -93.40 |
| 575000 | 13 | 9/8/2009 | Misc Oper WT | PV | 42314710 Model Apparel | 41.18 |
| 575000 | 14 | 9/8/2009 | Misc Oper TD | PV | 42314710 Model Apparel | 41.18 |
| 575000 | 16 | 9/8/2009 | Misc Oper AG | PV | 42314710 Model Apparel | 123.56 |
| 575220 | 16 | 9/8/2009 | Community Relations | PV | 42314401 Sams Club | 8.83 |
| 575275 | 16 | 9/8/2009 | Discounts Available | PK | 62057307 US Pipe \& Foundry Co - REMIT | -7.12 |
| 575500 | 13 | 9/8/2009 | Janitorial WT | PV | 42314719 Christopher Excavating | 2,350.00 |
| 575620 | 16 | 9/8/2009 | Office \& Admin Supplies AG | PV | 42314401 Sams Club | 139.32 |
| 575625 | 16 | 9/8/2009 | Overnight Shipping AG | PV | 42314389 United Parcel Service | 327.55 |
| 575625 | 16 | 9/8/2009 | Overnight Shipping AG | PV | 42314393 United Parcel Service | 165.23 |
| 575711 | 16 | 9/8/2009 | Add'I Security Costs AG | PV | 42314414 Murray Guard Inc-PO/REMIT | 2,776.88 |
| 575711 | 16 | 9/8/2009 | Add'I Security Costs AG | PV | 42314449 Murray Guard Inc-PO/REMIT | 715.20 |
| 635000 | 26 | 9/8/2009 | Contr Svc-Other Maint AG | PV | 42314375 Stephen Hillenmeyer Landscape | 1,135.84 |
| 635000 | 26 | 9/8/2009 | Contr Svc-Other Maint AG | PV | 42314381 Orkin Exterminating Co - Lexin | 106.92 |
| 635000 | 26 | 9/8/2009 | Contr Svc-Other Maint AG | PV | 42314385 Orkin Exterminating Co - Lexin | 50.98 |
| 675000 | 23 | 9/8/2009 | Misc Maint WT | PV | 42314705 Chemtrac Systems - PO/REMIT | 1,070.00 |
| 760200 |  | 9/8/2009 | Other Income Deductions | PV | 42314401 Sams Club | 78.14 |
| 401110 |  | 9/9/2009 | Res Sales Billed | JE | 30896497 KY CIS POST GL BATCH | -153,121.23 |
| 401210 |  | 9/9/2009 | Com Sales Billed | JE | 30896497 KY CIS POST GL BATCH | -80,463.97 |
| 401310 |  | 9/9/2009 | Ind Sales Billed | JE | 30896497 KY CIS POST GL BATCH | -16,843.08 |
| 401450 |  | 9/9/2009 | Priv Fire Billed | JE | 30896497 KY CIS POST GL BATCH | 108.68 |
| 401510 |  | 9/9/2009 | Pub Auth Billed | JE | 30896497 KY CIS POST GL BATCH | -3,691.87 |
| 402110 |  | 9/9/2009 | Dom WW Serv Billed | JE | 30896497 KY CIS POST GL BATCH | -201.17 |
| 402210 |  | 9/9/2009 | Com WW Serv Billed | JE | 30896497 KY CIS POST GL BATCH | -159.49 |
| 403104 |  | 9/9/2009 | Oth Rev-NSF Check Charge | JE | 30896497 KY CIS POST GL BATCH | -36.00 |
| 403105 |  | 9/9/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30896497 KY CIS POST GL BATCH | -4,134.00 |
| 403107 |  | 9/9/2009 | Oth Rev-Reconnection Charges | JE | 30896497 KY CIS POST GL BATCH | -4,758.00 |
| 504610 | 16 | 9/9/2009 | Employee Awards AG | PV | 42316035 Tharpe Company Inc-REMIT | 80.85 |
| 515100 | 14 | 9/9/2009 | Purch Power TD | EE | 3895105 KENTUCKY UTILITIES COMPANY | 67.43 |
| 515100 | 13 | 9/9/2009 | Purch Power WT | EE | 3895397 KENTUCKY UTILITIES COMPANY | 4,189.63 |
| 515100 | 12 | 9/9/2009 | Purch Power P | EE | 3897112 CLARK ENERGY COOP | 821.39 |
| 535000 | 15 | 9/9/2009 | Contr Svc-Other Oper CA | RI | 10132858 Con-Way Transportation Svcs, I | -122.04 |
| 535000 | 14 | 9/9/2009 | Contr Svc-Other Oper TD | PV | 42316045 Kentucky Underground Protectio | 2,387.70 |
| 570100 | 15 | 9/9/2009 | Uncollectible Accounts | JE | 30896497 KY CIS POST GL BATCH | -631.19 |
| 575000 | 16 | 9/9/2009 | Misc Oper AG | 11 | 555817 Inventory Issue-Stk E \& D | 620.43 |
| 575000 | 16 | 9/9/2009 | Misc Oper AG | RI | 10132849 Magee, Louise G. | -41.98 |
| 575000 | 16 | 9/9/2009 | Misc Oper AG | PV | 42315403 US Pipe \& Foundry Co - REMIT | 23.32 |
| 575000 | 16 | 9/9/2009 | Misc Oper AG | PD | 42315408 US Pipe \& Foundry Co - REMIT | -23.32 |




| ACCOUNT | SUB | GL DATE | DESCRIPTION | DOC TYPE | DOC\# | EXPLANATION | AMOUNT |
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| 760100 |  | 9/11/2009 | Donations Deduct | PV | 42317370 H | Home Builders Association of L | 200.00 |
| 760100 |  | 9/11/2009 | Donations Deduct | PV | 42317402 H | Home Builders Association of $L$ | 340.00 |
| 575000 | 16 | 9/12/2009 | Misc Oper AG | ST | 30896666 S | SABRIX NO TAX CHARGED ACR | 4.98 |
| 575002 | 16 | 9/12/2009 | Misc General Office | ST | 30896666 S | SABRIX NO TAX CHARGED ACR | 4.80 |
| 575130 | 16 | 9/12/2009 | Brochures and Handouts | ST | 30896666 S | SABRIX NO TAX CHARGED ACR | 72.24 |
| 575545 | 13 | 9/12/2009 | Lab Supplies WT | ST | 30896666 S | SABRIX NO TAX CHARGED ACR | 10.64 |
| 575830 | 11 | 9/12/2009 | Wtr \& Waste Wtr Exp SS | ST | 30896666 S | SABRIX NO TAX CHARGED ACR | 335.01 |
| 675000 | 26 | 9/12/2009 | Misc Maint AG | ST | 30896667 S | SABRIX VENDOR TAX COMPARE | 8.90 |
| 401110 |  | 9/14/2009 | Res Sales Billed | JE | 30897025 K | KY CIS POST GL BATCH | -194,604.81 |
| 401210 |  | 9/14/2009 | Com Sales Billed | JE | 30897025 K | KY CIS POST GL BATCH | -62,297.75 |
| 401310 |  | 9/14/2009 | Ind Sales Billed | JE | 30897025 K | KY CIS POST GL BATCH | -940.92 |
| 401510 |  | 9/14/2009 | Pub Auth Billed | JE | 30897025 K | KY CIS POST GL BATCH | -565.99 |
| 402110 |  | 9/14/2009 | Dom WW Serv Billed | JE | 30897025 K | KY CIS POST GL BATCH | -12.72 |
| 402210 |  | 9/14/2009 | Com WW Serv Billed | JE | 30897025 K | KY CIS POST GL BATCH | -87.19 |
| 403104 |  | 9/14/2009 | Oth Rev-NSF Check Charge | JE | 30897025 K | KY CIS POST GL BATCH | -240.00 |
| 403105 |  | 9/14/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30897025 K | KY CIS POST GL BATCH | -3,094.00 |
| 403107 |  | 9/14/2009 | Oth Rev-Reconnection Charges | JE | 30897025 K | KY CIS POST GL BATCH | -2,938.00 |
| 504620 | 16 | 9/14/2009 | Employee Physical Exam AG | PV | 42318269 B | BaptistWorx Business Office | 100.00 |
| 504660 | 16 | 9/14/2009 | Tuition Aid AG | PS | 42317732 S | Sullivan University | 1,160.00 |
| 504660 | 16 | 9/14/2009 | Tuition Aid AG | PS | 42317733 In | Indiana Wesleyan University | 660.00 |
| 510100 | 11 | 9/14/2009 | Purchased Water-Outside | PV | 42318155 | Carroll Co Water Dist 1 | 2,802.91 |
| 520100 | 16 | 9/14/2009 | M \& S Oper AG | PV | 42318262 V | Vital Records Control of KY LL | 946.60 |
| 533000 | 16 | 9/14/2009 | Contr Svc-Legal Oper AG | PV | 42318261 S | Stoll Keenon Ogden PLLC-PO/REM | 3,467.20 |
| 535000 | 14 | 9/14/2009 | Contr Svc-Other Oper TD | PV | 42318130 | Cobb, Rodney | 589.00 |
| 535000 | 14 | 9/14/2009 | Contr Svc-Other Oper TD | PV | 42318146 | Cobb, Rodney | 789.00 |
| 535000 | 15 | 9/14/2009 | Contr Svc-Other Oper CA | PV | 42318168 B | Big Auger Machine \& Tool Co-PO | 1,192.50 |
| 535000 | 15 | 9/14/2009 | Contr Svc-Other Oper CA | PV | 42318170 B | Big Auger Machine \& Tool Co-PO | 201.40 |
| 535000 | 15 | 9/14/2009 | Contr Svc-Other Oper CA | PV | 42318256 B | Big Auger Machine \& Tool Co-PO | 201.40 |
| 535000 | 16 | 9/14/2009 | Contr Svc-Other Oper AG | PV | 42318260 S | SimplexGrinnell - CH 10320 RE | 181.26 |
| 536000 | 13 | 9/14/2009 | Contr Svc-Lab Testing Oper WT | PV | 42318165 F | Fouser Environmental Services | 20.00 |
| 570100 | 15 | 9/14/2009 | Uncollectible Accounts | JE | 30897025 K | KY CIS POST GL BATCH | -261.23 |
| 575480 | 14 | 9/14/2009 | Heat - Oil/Gas TD | EE | 3902548 | CARROLLTON UTILITIES | 14.14 |
| 575500 | 16 | 9/14/2009 | Janitorial AG | PV | 42318129 | Cobb, Rodney | 133.00 |
| 575500 | 16 | 9/14/2009 | Janitorial AG | PV | 42318152 | Cobb, Rodney | 399.00 |
| 575620 | 14 | 9/14/2009 | Office \& Admin Supplies TD | PV | 42318163 D | Duplicator Sales \& Service Inc | 67.50 |
| 575625 | 16 | 9/14/2009 | Overnight Shipping AG | PV | 42318166 U | United Parcel Service | 20.58 |
| 575660 | 16 | 9/14/2009 | Postage AG | PV | 42318166 U | United Parcel Service | 106.99 |
| 575711 | 16 | 9/14/2009 | Add'l Security Costs AG | PV | 42318873 N | Murray Guard Inc-PO/REMIT | 715.20 |
| 575711 | 16 | 9/14/2009 | Add'l Security Costs AG | PV | 42318877 M | Murray Guard Inc-PO/REMIT | 2,668.64 |
| 575780 | 16 | 9/14/2009 | Trash Removal AG | PV | 42318159 R | Rumpke of Ind LLC-REMIT-ALL AC | 79.64 |
| 401110 |  | 9/15/2009 | Res Sales Billed | JE | 30897109 K | KY CIS POST GL BATCH | -99,350.75 |
| 401210 |  | 9/15/2009 | Com Sales Billed | JE | 30897109 KY | KY CIS POST GL BATCH | -53,824.98 |
| 401310 |  | 9/15/2009 | Ind Sales Billed | JE | 30897109 K | KY CIS POST GL BATCH | -4,871.41 |
| 401510 |  | 9/15/2009 | Pub Auth Billed | JE | 30897109 KY | KY CIS POST GL BATCH | -18,096.81 |
| 402110 |  | 9/15/2009 | Dom WW Serv Billed | JE | 30897109 K | KY CIS POST GL BATCH | -20.73 |
| 402510 |  | 9/15/2009 | Pub Auth WW Svc Billed | JE | 30897109 K | KY CIS POST GL BATCH | -345.11 |
| 403103 |  | 9/15/2009 | Oth Rev-Collect for Others | RI | 10133449 S | Sadieville City of - REMIT | -192.76 |
| 403103 |  | 9/15/2009 | Oth Rev-Collect for Others | RI | 10133450 S | Sadieville City of - REMIT | -183.28 |
| 403103 |  | 9/15/2009 | Oth Rev-Collect for Others | RI | 10133451 L | Lexington-Fayette Div Of Rev P | -92,790.63 |
| 403103 |  | 9/15/2009 | Oth Rev-Collect for Others | RI | 10133452 L | Lexington-Fayette Div Of Rev P | -92,964.03 |
| 403104 |  | 9/15/2009 | Oth Rev-NSF Check Charge | JE | 30897109 KY | KY CIS POST GL BATCH | -36.00 |
| 403105 |  | 9/15/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30897109 K | KY CIS POST GL BATCH | -2,106.00 |
| 403107 |  | 9/15/2009 | Oth Rev-Reconnection Charges | JE | 30897109 K | KY CIS POST GL BATCH | -4,290.00 |
| 504620 | 16 | 9/15/2009 | Employee Physical Exam AG | PV | 42320040 B | BaptistWorx Business Office | 50.00 |
| 504660 | 16 | 9/15/2009 | Tuition Aid AG | PS | 42319956 | Columbia Southern University | 702.00 |
| 515100 | 12 | 9/15/2009 | Purch Power P | EE | 3902802 K | KENTUCKY UTILITIES COMPANY | 2,404.47 |
| 535000 | 16 | 9/15/2009 | Contr Svc-Other Oper AG | TC | 30896837 IN | INSIGHT | 192.91 |
| 535001 | 14 | 9/15/2009 | Contr Svc-Temp Empl Oper TD | PV | 42320053 V | Volt Services Group | 117.16 |
| 535001 | 13 | 9/15/2009 | Contr Svc-Temp Empl Oper WT | PV | 42320053 V | Volt Services Group | 887.09 |
| 550000 | 16 | 9/15/2009 | Trans Oper AG | PV | 42320062 T | Thoroughbred Energy LLC | 497.34 |
| 570100 | 15 | 9/15/2009 | Uncollectible Accounts | JE | 30897109 K | KY CIS POST GL BATCH | -253.61 |
| 575000 | 14 | 9/15/2009 | Misc Oper TD | TC | 30896888 A | AT\&T | 47.02 |
| 575000 | 16 | 9/15/2009 | Misc Oper AG | PS | 42319936 P | Perry, Larry | 50.00 |
| 575000 | 11 | 9/15/2009 | Misc Oper SS | PV | 42320042 U | USA Blue Book | 116.27 |
| 575200 | 15 | 9/15/2009 | Collection Agencies CA | PV | 42320038 P | Penn Credit Corp | 692.18 |
| 575200 | 15 | 9/15/2009 | Collection Agencies CA | PV | 42320039 P | Penn Credit Corp | 1,415.38 |
| 575275 | 16 | 9/15/2009 | Discounts Available | PK | 62057389 F | Ford Meter Box Co Inc - ALL US | -55.04 |
| 575320 | 14 | 9/15/2009 | Electricity TD | EE | 3902602 K | KENTUCKY UTILITIES COMPANY | 12.18 |
| 575620 | 14 | 9/15/2009 | Office \& Admin Supplies TD | ST | 30896999 S | SABRIX NO TAX CHARGED ACR | 4.05 |
| 575625 | 16 | 9/15/2009 | Overnight Shipping AG | PV | 42320050 | United Parcel Service | 11.21 |
| 575740 | 15 | 9/15/2009 | Telephone CA | TC | 30896781 A | AT\&T | 1,697.04 |
| 575740 | 14 | 9/15/2009 | Telephone TD | TC | 30896889 C | Cincinnati Bell | 18.75 |
| 575740 | 15 | 9/15/2009 | Telephone CA | TC | 30896964 A | AT\&T | 1,106.09 |
| 575740 | 16 | 9/15/2009 | Telephone AG | TC | 30896981 A | AT\&T | 59.97 |
| 575741 | 16 | 9/15/2009 | Cell Phone AG | TC | 30896959 N | NEXTEL | 79.44 |
| 575741 | 13 | 9/15/2009 | Cell Phone WT | TC | 30896959 N | NEXTEL | 91.07 |
| 575780 | 16 | 9/15/2009 | Trash Removal AG | PV | 42320056 L | Lexington Fayette Urban County | 132.55 |
| 620000 | 24 | 9/15/2009 | Mat and Sup Maint TD | 11 | 556527 W | West Perry St. St Bldg | 40.23 |
| 620000 | 24 | 9/15/2009 | Mat and Sup Maint TD | 11 | 5565282 | 2110 Natlie Saltin | 13.97 |
| 620000 | 24 | 9/15/2009 | Mat and Sup Maint TD | 11 | 556531 | 995 Mussel shoals | 34.47 |
| 620000 | 24 | 9/15/2009 | Mat and Sup Maint TD | 11 | 5565327 | 7875 Hwy 127 N | 34.46 |
| 620000 | 24 | 9/15/2009 | Mat and Sup Maint TD | 11 | 5565331 | 1790 N Liberty Sp Rd | 34.47 |
| 620000 | 24 | 9/15/2009 | Mat and Sup Maint TD | 11 | 5565351 | 114 Stephenson St. | 34.46 |
| 620000 | 24 | 9/15/2009 | Mat and Sup Maint TD | II | 556539 S | St Bld W Perry St. | 34.47 |


| ACCOUNT | SUB | GL DATE | DESCRIPTION | DOC TYPE | DOC\# | EXPLANATION | AMOUNT |
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| 635000 | 26 | 9/15/2009 | Contr Svc-Other Maint AG | PV | 42320058 | Orkin Exterminating Co - Lexin | 53.46 |
| 715111 |  | 9/15/2009 | M\&J Revenues-Outside | RI | 10133463 | Metropolitian Insurance | -1,861.12 |
| 715111 |  | 9/15/2009 | M\&J Revenues-Outside | RI | 10133464 | Stanley Pipeline Inc | -152.05 |
| 760200 |  | 9/15/2009 | Other Income Deductions | RI | 10133447 K | KY Public Service Commission | -142.35 |
| 401110 |  | 9/16/2009 | Res Sales Billed | JE | 30897291 KY | KY CIS POST GL BATCH | -113,303.12 |
| 401210 |  | 9/16/2009 | Com Sales Billed | JE | 30897291 K | KY CIS POST GL BATCH | -48,068.66 |
| 401510 |  | 9/16/2009 | Pub Auth Billed | JE | 30897291 K | KY CIS POST GL BATCH | -8,411.71 |
| 402110 |  | 9/16/2009 | Dom WW Serv Billed | JE | 30897291 KY | KY CIS POST GL BATCH | -361.52 |
| 403104 |  | 9/16/2009 | Oth Rev-NSF Check Charge | JE | 30897291 K | KY CIS POST GL BATCH | -96.00 |
| 403105 |  | 9/16/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30897291 K | KY CIS POST GL BATCH | -3,094.00 |
| 403107 |  | 9/16/2009 | Oth Rev-Reconnection Charges | JE | 30897291 K | KY CIS POST GL BATCH | -4,888.00 |
| 515100 | 12 | 9/16/2009 | Purch Power P | EE | 3903993 K | KENTUCKY UTILITIES COMPANY | 24.38 |
| 515100 | 14 | 9/16/2009 | Purch Power TD | EE | 3904017 K | KENTUCKY UTILITIES COMPANY | 29.42 |
| 515100 | 14 | 9/16/2009 | Purch Power TD | EE | 3904096 | KENTUCKY UTILITIES COMPANY | 12.51 |
| 515100 | 13 | 9/16/2009 | Purch Power WT | EE | 3904131 K | KENTUCKY UTILITIES COMPANY | 52.64 |
| 515100 | 14 | 9/16/2009 | Purch Power TD | EE | 3904261 K | KENTUCKY UTILITIES COMPANY | 11.81 |
| 515100 | 14 | 9/16/2009 | Purch Power TD | EE | 3904326 K | KENTUCKY UTILITIES COMPANY | 18.44 |
| 515100 | 14 | 9/16/2009 | Purch Power TD | EE | 3904743 | KENTUCKY UTILITIES COMPANY | 69.51 |
| 515100 | 14 | 9/16/2009 | Purch Power TD | EE | 3905069 K | KENTUCKY UTILITIES COMPANY | 198.37 |
| 515100 | 13 | 9/16/2009 | Purch Power WT | EE | 3905076 K | KENTUCKY UTILITIES COMPANY | 2,420.04 |
| 515100 | 12 | 9/16/2009 | Purch Power P | EE | 3905078 K | KENTUCKY UTILITIES COMPANY | 574.92 |
| 570100 | 15 | 9/16/2009 | Uncollectible Accounts | JE | 30897291 K | KY CIS POST GL BATCH | -167.31 |
| 575000 | 11 | 9/16/2009 | Misc Oper SS | ST | 30897075 S | SABRIX NO TAX CHARGED ACR | 6.98 |
| 575000 | 16 | 9/16/2009 | Misc Oper AG | JE | 30897143 S | SSCCORR Tsfr cost 438110,-83 | 8,475.96 |
| 575000 | 14 | 9/16/2009 | Misc Oper TD | PV | 42320436 | Grainger - ALL USE REMIT | 225.14 |
| 575000 | 14 | 9/16/2009 | Misc Oper TD | PV | 42320437 | Grainger - ALL USE REMIT | 71.31 |
| 575000 | 14 | 9/16/2009 | Misc Oper TD | PV | 42320443 | Grainger - ALL USE REMIT | 404.91 |
| 575275 | 16 | 9/16/2009 | Discounts Available | PK | 62057395 | USA Blue Book | -1.16 |
| 575275 | 16 | 9/16/2009 | Discounts Available | PK | 62057396 U | US Pipe \& Foundry Co - REMIT | -17.24 |
| 575275 | 16 | 9/16/2009 | Discounts Available | PK | 62057401 S | Smith Blair Inc 120001 - REMIT | -141.58 |
| 575275 | 16 | 9/16/2009 | Discounts Available | PK | 62057402 M | Mueller Co - ALL USE PO/REMIT | -53.63 |
| 575320 | 14 | 9/16/2009 | Electricity TD | EE | 3904219 | OWEN ELECTRIC COOP INC | 17.49 |
| 575320 | 14 | 9/16/2009 | Electricity TD | EE | 3904224 | OWEN ELECTRIC COOP INC | 15.09 |
| 575320 | 14 | 9/16/2009 | Electricity TD | EE | 3904756 K | KENTUCKY UTILITIES COMPANY | 25.66 |
| 575420 | 16 | 9/16/2009 | Forms AG | PV | 42320446 | Contemporary Graphics | 65.65 |
| 575500 | 16 | 9/16/2009 | Janitorial AG | PV | 42320391 | Hales Cleaning Service - ACH | 2,868.33 |
| 620000 | 24 | 9/16/2009 | Mat and Sup Maint TD | 11 | 5567921 | 11460 Hwy 127 N. | 26.27 |
| 401110 |  | 9/17/2009 | Res Sales Billed | JE | 30897393 KY | KY CIS POST GL BATCH | -128,674.12 |
| 401210 |  | 9/17/2009 | Com Sales Billed | JE | 30897393 KY | KY CIS POST GL BATCH | -48,132.44 |
| 401510 |  | 9/17/2009 | Pub Auth Billed | JE | 30897393 K | KY CIS POST GL BATCH | -5,161.11 |
| 402310 |  | 9/17/2009 | Ind WW Serv Billed | RI | 10133552 K | Kentucky American Northern | -500.00 |
| 403104 |  | 9/17/2009 | Oth Rev-NSF Check Charge | JE | 30897393 K | KY CIS POST GL BATCH | -96.00 |
| 403105 |  | 9/17/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30897393 KY | KY CIS POST GL BATCH | -1,716.00 |
| 403107 |  | 9/17/2009 | Oth Rev-Reconnection Charges | JE | 30897393 KY | KY CIS POST GL BATCH | -2,756.00 |
| 403198 |  | 9/17/2009 | Oth Rev-Misc Service Rev | RI | 10133553 K | Kentucky American Northern | -25.00 |
| 403198 |  | 9/17/2009 | Oth Rev-Misc Service Rev | RI | 10133554 | Kentucky American Northern | -140.00 |
| 403198 |  | 9/17/2009 | Oth Rev-Misc Service Rev | RI | 10133594 F | Fraley Harold | -25.00 |
| 403199 |  | 9/17/2009 | Oth Rev-Other Water Rev | PS | 42322307 K | Kentucky Department of Revenue | -1,060.60 |
| 515100 | 14 | 9/17/2009 | Purch Power TD | EE | 3904035 K | KENTUCKY UTILITIES COMPANY | 41.50 |
| 515100 | 14 | 9/17/2009 | Purch Power TD | EE | 3904057 K | KENTUCKY UTILITIES COMPANY | 18.29 |
| 515100 | 14 | 9/17/2009 | Purch Power TD | EE | 3904076 K | KENTUCKY UTILITIES COMPANY | 11.49 |
| 515100 | 14 | 9/17/2009 | Purch Power TD | EE | 3904082 K | KENTUCKY UTILITIES COMPANY | 11.96 |
| 515100 | 14 | 9/17/2009 | Purch Power TD | EE | 3904279 K | KENTUCKY UTILITIES COMPANY | 56.84 |
| 515100 | 14 | 9/17/2009 | Purch Power TD | EE | 3905072 K | KENTUCKY UTILITIES COMPANY | 109.74 |
| 515100 | 12 | 9/17/2009 | Purch Power P | PS | 42322307 K | Kentucky Department of Revenue | 934.33 |
| 515100 | 13 | 9/17/2009 | Purch Power WT | PS | 42322307 K | Kentucky Department of Revenue | 3,737.33 |
| 520100 | 14 | 9/17/2009 | M \& S Oper TD | CC | 6347 | WALGREENS | 4.84 |
| 520100 | 13 | 9/17/2009 | M \& S Oper WT | CC | 6347 H | HACH COMPANY | 947.92 |
| 520100 | 16 | 9/17/2009 | M \& S Oper AG | CC | 6347 | W W GRAINGER | 2,057.57 |
| 533000 | 16 | 9/17/2009 | Contr Svc-Legal Oper AG | PV | 42321539 S | Stoll Keenon Ogden PLLC-PO/REM | 1,160.00 |
| 533000 | 16 | 9/17/2009 | Contr Svc-Legal Oper AG | PV | 42321594 S | Stoll Keenon Ogden PLLC-PO/REM | 18,849.00 |
| 535000 | 14 | 9/17/2009 | Contr Svc-Other Oper TD | CC | 6347 | ORKIN, INC | 65.79 |
| 535000 | 15 | 9/17/2009 | Contr Svc-Other Oper CA | TC | 30897177 In | Intelliwire | 14.95 |
| 535000 | 15 | 9/17/2009 | Contr Svc-Other Oper CA | TC | 30897253 L | Language Line Services | 1,838.94 |
| 535000 | 15 | 9/17/2009 | Contr Svc-Other Oper CA | PV | 42320992 A | Accenture, LLP-REMIT | 4,188.60 |
| 536000 | 13 | 9/17/2009 | Contr Svc-Lab Testing Oper WT | PV | 42321603 F | Fouser Environmental Services | 660.00 |
| 550000 | 16 | 9/17/2009 | Trans Oper AG | CC | 6347 S | SOAPY JOES CAR WASH | 39.98 |
| 570100 | 15 | 9/17/2009 | Uncollectible Accounts | JE | 30897393 K | KY CIS POST GL BATCH | -91.52 |
| 575000 | 16 | 9/17/2009 | Misc Oper AG | CC | 6347 N | MICHLER FLORIST | 62.01 |
| 575000 | 13 | 9/17/2009 | Misc Oper WT | CC | 6347 N | NATIONAL WORKWEAR INC | 150.45 |
| 575000 | 14 | 9/17/2009 | Misc Oper TD | CC | 6347 U | USA BLUE BOOK | 746.30 |
| 575000 | 16 | 9/17/2009 | Misc Oper AG | CC | 6355 | FTD KREATIONS BY KAREN | 63.55 |
| 575000 | 14 | 9/17/2009 | Misc Oper TD | PV | 42321531 G | Grainger - ALL USE REMIT | 113.72 |
| 575275 | 16 | 9/17/2009 | Discounts Available | PK | 62057421 P | Powerseal Pipeline Products Co | -62.16 |
| 575320 | 14 | 9/17/2009 | Electricity TD | EE | 3905073 K | KENTUCKY UTILITIES COMPANY | 223.77 |
| 575340 | 16 | 9/17/2009 | Employee Expenses AG | CC | 6347 D | DELTA AIR | 776.72 |
| 575350 | 16 | 9/17/2009 | Meals Deduct | CC | 6347 K | KROGER | 83.94 |
| 575350 | 16 | 9/17/2009 | Meals Deduct | CC | 6355 | APPLEBEES | 25.80 |
| 575351 | 16 | 9/17/2009 | Meals Non Deduct | CC | 6347 | HARDEES OF LEXINGTON 3 | 30.59 |
| 575420 | 16 | 9/17/2009 | Forms AG | ST | 30897268 S | SABRIX NO TAX CHARGED ACR | 3.94 |
| 575420 | 15 | 9/17/2009 | Forms CA | PV | 42321388 R | Regulus Integrated Solutions L | 2,143.94 |
| 575420 | 15 | 9/17/2009 | Forms CA | PV | 42321442 R | Regulus Integrated Solutions L | 3,130.61 |
| 575420 | 15 | 9/17/2009 | Forms CA | PV | 42321477 R | Regulus Integrated Solutions L | 12,762.85 |
| 575545 | 13 | 9/17/2009 | Lab Supplies WT | CC | 6347 H | HACH COMPANY | 1,308.02 |


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| 575545 | 13 | 9/17/2009 | Lab Supplies WT | PV | 42321605 | IDEXX Distribution Inc | 2,350.64 |
| 575620 | 14 | 9/17/2009 | Office \& Admin Supplies TD | CC | 6347 | SSC OWENTON COOP | 211.95 |
| 575620 | 13 | 9/17/2009 | Office \& Admin Supplies WT | CC | 6347 | OFFICE DEPOT | 670.52 |
| 575625 | 16 | 9/17/2009 | Overnight Shipping AG | PV | 42321602 | United Parcel Service | 92.47 |
| 575660 | 16 | 9/17/2009 | Postage AG | PS | 42321217 | Postmaster-REMIT KY | 185.00 |
| 575740 | 16 | 9/17/2009 | Telephone AG | TC | 30897213 | AT\&T | 205.99 |
| 575741 | 16 | 9/17/2009 | Cell Phone AG | CC | 6347 | VERIZON WRLS M4911- | 15.89 |
| 575820 | 14 | 9/17/2009 | Uniforms TD | CC | 6347 | HANDS ON ORIGINALS INC. | 177.14 |
| 575820 | 13 | 9/17/2009 | Uniforms WT | CC | 6347 | HANDS ON ORIGINALS INC. | 369.00 |
| 620000 | 24 | 9/17/2009 | Mat and Sup Maint TD | CC | 6347 | W W GRAINGER | 400.44 |
| 620000 | 21 | 9/17/2009 | Mat and Sup Maint SS | CC | 6347 | W W GRAINGER | 586.22 |
| 620000 | 24 | 9/17/2009 | Mat and Sup Maint TD | 11 | 556858 | 116 Hawthrone St Glencoe | 54.22 |
| 620000 | 24 | 9/17/2009 | Mat and Sup Maint TD | 11 | 556859 | 2930 Loop 3 hwy 127 s | 13.97 |
| 620000 | 23 | 9/17/2009 | Mat and Sup Maint WT | PV | 42321597 | Remote Automation Solutions - | 1,748.38 |
| 620000 | 23 | 9/17/2009 | Mat and Sup Maint WT | PV | 42321600 | Remote Automation Solutions - | 3,159.72 |
| 635000 | 26 | 9/17/2009 | Contr Svc-Other Maint AG | CC | 6347 | UFIRST LAUNDRY SVCS | 82.04 |
| 675000 | 23 | 9/17/2009 | Misc Maint WT | CC | 6347 | WAL-MART | 381.05 |
| 675000 | 24 | 9/17/2009 | Misc Maint TD | RI | 10133603 | Equipment Sales \& Rental LLC | -18.76 |
| 401110 |  | 9/18/2009 | Res Sales Billed | JE | 30897551 | KY CIS POST GL BATCH | -63,325.61 |
| 401210 |  | 9/18/2009 | Com Sales Billed | JE | 30897551 | KY CIS POST GL BATCH | -36,978.34 |
| 401510 |  | 9/18/2009 | Pub Auth Billed | JE | 30897551 | KY CIS POST GL BATCH | -15,190.22 |
| 403104 |  | 9/18/2009 | Oth Rev-NSF Check Charge | JE | 30897551 | KY CIS POST GL BATCH | -120.00 |
| 403105 |  | 9/18/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30897551 | KY CIS POST GL BATCH | -598.00 |
| 403107 |  | 9/18/2009 | Oth Rev-Reconnection Charges | JE | 30897551 | KY CIS POST GL BATCH | -1,742.00 |
| 403199 |  | 9/18/2009 | Oth Rev-Other Water Rev | JE | 30897399 | Reclass SIs Tx Discount 07/09 | -1,047.65 |
| 504660 | 16 | 9/18/2009 | Tuition Aid AG | PS | 42322503 | Sullivan University | 480.00 |
| 510100 | 11 | 9/18/2009 | Purchased Water-Outside | PV | 42322850 | Winchester Municipal Utilities | 8,610.87 |
| 535000 | 15 | 9/18/2009 | Contr Svc-Other Oper CA | PV | 42322867 | Volt Services Group | 444.80 |
| 535001 | 15 | 9/18/2009 | Contr Svc-Temp Empl Oper CA | PV | 42322951 | Ken Tyson Plumbing | 1,216.10 |
| 535001 | 15 | 9/18/2009 | Contr Svc-Temp Empl Oper CA | PV | 42322956 | Volt Services Group | 624.00 |
| 535001 | 15 | 9/18/2009 | Contr Svc-Temp Empl Oper CA | PV | 42322959 | Volt Services Group | 499.20 |
| 570100 | 15 | 9/18/2009 | Uncollectible Accounts | JE | 30897551 | KY CIS POST GL BATCH | -426.21 |
| 575000 | 14 | 9/18/2009 | Misc Oper TD | PV | 42322858 | E H Wachs Co | 850.00 |
| 575000 | 14 | 9/18/2009 | Misc Oper TD | PV | 42322938 | Equipment Sales \& Rental - $\mathrm{PO} /$ | 932.80 |
| 575000 | 16 | 9/18/2009 | Misc Oper AG | PS | 42323199 | Morgan, Rick | 50.00 |
| 575275 | 16 | 9/18/2009 | Discounts Available | PK | 62057444 | Mueller Co - ALL USE PO/REMIT | -23.25 |
| 575545 | 13 | 9/18/2009 | Lab Supplies WT | ST | 30897366 | SABRIX VENDOR TAX COMPARE | 3.22 |
| 575660 | 16 | 9/18/2009 | Postage AG | ST | 30897359 | SABRIX NO TAX CHARGED ACR | 11.10 |
| 575830 | 16 | 9/18/2009 | Wtr \& Waste Wtr Exp AG | PV | 42322940 | Kentucky American Water | 41.98 |
| 575830 | 16 | 9/18/2009 | Wtr \& Waste Wtr Exp AG | PV | 42322942 | Kentucky American Water | 103.03 |
| 575830 | 16 | 9/18/2009 | Wtr \& Waste Wtr Exp AG | PV | 42322945 | Kentucky American Water | 11.45 |
| 675000 | 24 | 9/18/2009 | Misc Maint TD | PV | 42322858 | E H Wachs Co | 1,368.28 |
| 675650 | 24 | 9/18/2009 | Paving/Backfill TD | PV | 42322753 | HG Wilson \& Sons Contractors I | 5,309.30 |
| 675650 | 24 | 9/18/2009 | Paving/Backfill TD | PV | 42322758 | HG Wilson \& Sons Contractors I | 4,218.50 |
| 715111 |  | 9/18/2009 | M\&J Revenues-Outside | RI | 10133663 | Woodall Construction Co | -611.37 |
| 760100 |  | 9/18/2009 | Donations Deduct | PS | 42322500 | Explorium of Lexington | 2,500.00 |
| 760100 |  | 9/18/2009 | Donations Deduct | PS | 42322501 | Girl Scouts - REMIT | 1,000.00 |
| 760100 |  | 9/18/2009 | Donations Deduct | PS | 42322502 | Friends of McConnell Springs-R | 1,000.00 |
| 501200 | 2405 | 9/20/2009 | Labor Maint TD Super/Eng | T2 | 34795 | Payroll Labor Distribution | 398.28 |
| 501200 | 2410 | 9/20/2009 | Labor Maint TD Struct \& Imp | T2 | 34795 | Payroll Labor Distribution | 413.84 |
| 501200 | 24 | 9/20/2009 | Labor Maint TD | T2 | 34795 | Payroll Labor Distribution | 418.22 |
| 501200 | 2415 | 9/20/2009 | Labor Maint TD Dist Res | T2 | 34795 | Payroll Labor Distribution | 454.20 |
| 501200 | 2305 | 9/20/2009 | Labor Maint WT Super/Eng | T2 | 34795 | Payroll Labor Distribution | 1,194.84 |
| 501200 | 15 | 9/20/2009 | Labor Oper CA | T2 | 34795 | Payroll Labor Distribution | 1,680.98 |
| 501200 | 23 | 9/20/2009 | Labor Maint WT | T2 | 34795 | Payroll Labor Distribution | 2,361.84 |
| 501200 | 22 | 9/20/2009 | Labor Maint P | T2 | 34795 | Payroll Labor Distribution | 3,077.21 |
| 501200 | 2435 | 9/20/2009 | Labor Maint TD Meters | T2 | 34795 | Payroll Labor Distribution | 3,270.24 |
|  | 1405 | 9/20/2009 | Labor Oper TD Super/Eng | T2 | 34795 | Payroll Labor Distribution | 4,033.81 |
| 501200 | 2440 | 9/20/2009 | Labor Maint TD Hydrants | T2 | 34795 | Payroll Labor Distribution | 6,957.31 |
| 501200 | 2430 | 9/20/2009 | Labor Maint TD Services | T2 | 34795 | Payroll Labor Distribution | 7,258.13 |
| 501200 | 2420 | 9/20/2009 | Labor Maint TD Mains | T2 | 34795 | Payroll Labor Distribution | 7,710.81 |
| 501200 | 1415 | 9/20/2009 | Labor Oper TD Lines | T2 | 34795 | Payroll Labor Distribution | 8,225.43 |
| 501200 | 1520 | 9/20/2009 | Labor Oper CA Cust Serv | T2 | 34795 | Payroll Labor Distribution | 9,096.34 |
| 501200 | 1510 | 9/20/2009 | Labor Oper CA Mtr Read | T2 | 34795 | Payroll Labor Distribution | 17,245.68 |
| 501200 | 1305 | 9/20/2009 | Labor Oper WT Super/Eng | T2 | 34795 | Payroll Labor Distribution | 23,138.47 |
| 501200 | 1420 | 9/20/2009 | Labor Oper TD Meter | T2 | 34795 | Payroll Labor Distribution | 27,369.02 |
| 501200 | 13 | 9/20/2009 | Labor Oper WT | T2 | 34795 | Payroll Labor Distribution | 31,773.89 |
| 501200 | 16 | 9/20/2009 | Labor Oper AG | T2 | 34795 | Payroll Labor Distribution | 35,520.78 |
| 501200 | 14 | 9/20/2009 | Labor Oper TD | T2 | 34795 | Payroll Labor Distribution | 44,313.40 |
| 501200 | 13 | 9/20/2009 | Labor Oper WT | T3 | 34796 | Actual Burden Journal Entries | 26.40 |
| 501200 | 14 | 9/20/2009 | Labor Oper TD | T2 | 34872 | Payroll Labor Distribution | 1,193.92 |
| 501210 | 15 | 9/20/2009 | Labor NS OT CA | T2 | 34795 | Payroll Labor Distribution | 29.30 |
| 501210 | 1405 | 9/20/2009 | Labor NS OT TD Super/Eng | T2 | 34795 | Payroll Labor Distribution | 59.14 |
| 501210 | 2430 | 9/20/2009 | Labor NS OT TD Services | T2 | 34795 | Payroll Labor Distribution | 88.46 |
| 501210 | 1415 | 9/20/2009 | Labor NS OT TD Lines | T2 | 34795 | Payroll Labor Distribution | 240.60 |
| 501210 | 2420 | 9/20/2009 | Labor NS OT TD Mains | T2 | 34795 | Payroll Labor Distribution | 487.48 |
| 501210 | 1305 | 9/20/2009 | Labor NS OT WT Super/Eng | T2 | 34795 | Payroll Labor Distribution | 749.93 |
| 501210 | 1520 | 9/20/2009 | Labor NS OT CA Cust Serv | T2 | 34795 | Payroll Labor Distribution | 910.83 |
| 501210 | 1420 | 9/20/2009 | 9 Labor NS OT TD Meter | T2 | 34795 | Payroll Labor Distribution | 1,142.92 |
| 501210 | 1510 | 9/20/2009 | Labor NS OT CA Mtr Read | T2 | 34795 | Payroll Labor Distribution | 1,439.90 |
| 501210 | 14 | 9/20/2009 | Labor NS OT TD | T2 | 34795 | Payroll Labor Distribution | 1,475.82 |
| 501210 | 13 | 9/20/2009 | Labor NS OT WT | T2 | 34795 | Payroll Labor Distribution | 1,547.16 |
| 501211 | 13 | 9/20/2009 | Labor OT WT | T2 | 34795 | Payroll Labor Distribution | 2,772.72 |
| 501711 |  | 9/20/2009 | IP-Off-Annual-P/R JE | T3 | 34796 | Actual Burden Journal Entries | 10,011.48 |


| ACCOUNT | SUB | GL DATE $\quad$ DESCRIPTION | DOC TYPE\| | DOC\# $\quad$ EXPLANATION | AMOUNT |
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| 504100 | 16 | 9/20/2009 Group Ins Oper AG | T3 | 34796 Actual Burden Journal Entries | 2,342.89 |
| 504100 | 1 | 9/20/2009 Group Insurance - Cap Credits | T3 | 34796 Actual Burden Journal Entries | 30,366.79 |
| 504100 | 1 | 9/20/2009 Group Insurance - Cap Credits | T3 | 34873 Actual Burden Journal Entries | 146.85 |
| 505100 | 1 | 9/20/2009 PBOP Cap Credits | T3 | 34796 Actual Burden Journal Entries | 41,639.39 |
| 505100 | 1 | 9/20/2009 PBOP Cap Credits | T3 | 34873 Actual Burden Journal Entries | 324.75 |
| 506100 | 1 | 9/20/2009 Pension - Cap Credits | T3 | 34796 Actual Burden Journal Entries | 60,468.99 |
| 506100 | 1 | 9/20/2009 Pension - Cap Credits | T3 | 34873 Actual Burden Journal Entries | 471.60 |
| 507100 | 16 | 9/20/2009 401k Oper AG | T3 | 34796 Actual Burden Journal Entries | 4,191.07 |
| 507100 | 16 | 9/20/2009 401k Oper AG | T3 | 34873 Actual Burden Journal Entries | 29.85 |
| 508101 | 16 | 9/20/2009 DCP Oper AG | T3 | 34796 Actual Burden Journal Entries | 4,032.98 |
| 550000 | 1 | 9/20/2009 Trans - Cap Credits | T3 | 34796 Actual Burden Journal Entries | 16,541.26 |
| 550000 | 1 | 9/20/2009 Trans - Cap Credits | T3 | 34873 Actual Burden Journal Entries | 79.99 |
| 558000 | 1 | 9/20/2009 Ins Work Comp Cap Credits | T3 | 34796 Actual Burden Journal Entries | 5,184.52 |
| 558000 | 1 | 9/20/2009 Ins Work Comp Cap Credits | T3 | 34873 Actual Burden Journal Entries | 25.07 |
| 685320 |  | 9/20/2009 FUTA | T3 | 34796 Actual Burden Journal Entries | 50.10 |
| 685325 |  | 9/20/2009 FICA | T3 | 34796 Actual Burden Journal Entries | 18,205.00 |
| 685325 |  | 9/20/2009 FICA | T3 | 34873 Actual Burden Journal Entries | 91.34 |
| 685350 |  | 9/20/2009 SUTA | T3 | 34796 Actual Burden Journal Entries | 100.76 |
| 716121 |  | 9/20/2009 M\&J Expenses-Outside | T2 | 34795 Payroll Labor Distribution | 857.40 |
| 716121 |  | 9/20/2009 M\&J Expenses-Outside | T3 | 34796 Actual Burden Journal Entries | 594.56 |
| 716122 |  | 9/20/2009 M\&J Expenses-Inside | T2 | 34795 Payroll Labor Distribution | 229.32 |
| 716122 |  | 9/20/2009 M\&J Expenses-Inside | T3 | 34796 Actual Burden Journal Entries | 226.92 |
| 401110 |  | 9/21/2009 Res Sales Billed | JE | 30897869 KY CIS POST GL BATCH | -76,954.50 |
| 401210 |  | 9/21/2009 Com Sales Billed | JE | 30897869 KY CIS POST GL BATCH | -96,647.36 |
| 401310 |  | 9/21/2009 Ind Sales Billed | JE | 30897869 KY CIS POST GL BATCH | -125.88 |
| 401510 |  | 9/21/2009 Pub Auth Billed | JE | 30897869 KY CIS POST GL BATCH | -6,505.82 |
| 403104 |  | 9/21/2009 Oth Rev-NSF Check Charge | JE | 30897869 KY CIS POST GL BATCH | -96.00 |
| 403105 |  | 9/21/2009 Oth Rev-Appl/Initiate Serv Fee | JE | 30897869 KY CIS POST GL BATCH | -1,482.00 |
| 403107 |  | 9/21/2009 Oth Rev-Reconnection Charges | JE | 30897869 KY CIS POST GL BATCH | -2,990.00 |
| 515100 | 14 | 9/21/2009 Purch Power TD | EE | 3907754 OWEN ELECTRIC COOP INC | 24.85 |
| 550001 | 16 | 9/21/2009 Trans Oper AG Lease Cost | PV | 42324420 Automotive Rentals Inc ACH/ALL | 10.00 |
| 550002 | 16 | 9/21/2009 Trans Oper AG Lease Fuel | PV | 42324420 Automotive Rentals Inc ACH/ALL | 19,043.43 |
| 550003 | 16 | 9/21/2009 Trans Oper AG Lease Maint | PV | 42324420 Automotive Rentals Inc ACH/ALL | 11,015.81 |
| 570100 | 15 | 9/21/2009 Uncollectible Accounts | JE | 30897869 KY CIS POST GL BATCH | -391.78 |
| 685200 |  | 9/21/2009 Property Taxes | RI | 10133673 Georgetown City of-PO/REMIT | -2,314.13 |
| 685200 |  | 9/21/2009 Property Taxes | RI | 10133675 Sadieville City of (Prop taxes | -307.42 |
| 685200 |  | 9/21/2009 Property Taxes | RI | 10133677 Harrison County Sheriff Office | -1,830.46 |
| 401110 |  | 9/22/2009 Res Sales Billed | JE | 30897953 KY CIS POST GL BATCH | -171,117.02 |
| 401210 |  | 9/22/2009 Com Sales Billed | JE | 30897953 KY CIS POST GL BATCH | -63,608.50 |
| 401310 |  | 9/22/2009 Ind Sales Billed | JE | 30897953 KY CIS POST GL BATCH | -240.53 |
| 401510 |  | 9/22/2009 Pub Auth Billed | JE | 30897953 KY CIS POST GL BATCH | -1,211.37 |
| 401610 |  | 9/22/2009 SFR Billed | JE | 30897953 KY CIS POST GL BATCH | -92.06 |
| 402110 |  | 9/22/2009 Dom WW Serv Billed | JE | 30897953 KY CIS POST GL BATCH | -1,772.74 |
| 402210 |  | 9/22/2009 Com WW Serv Billed | JE | 30897953 KY CIS POST GL BATCH | -365.70 |
| 402310 |  | 9/22/2009 Ind WW Serv Billed | JE | 30897953 KY CIS POST GL BATCH | -58.36 |
| 403104 |  | 9/22/2009 Oth Rev-NSF Check Charge | JE | 30897953 KY CIS POST GL BATCH | -60.00 |
| 403105 |  | 9/22/2009 Oth Rev-Appl/Initiate Serv Fee | JE | 30897953 KY CIS POST GL BATCH | -1,560.00 |
| 403107 |  | 9/22/2009 Oth Rev-Reconnection Charges | JE | 30897953 KY CIS POST GL BATCH | -2,496.00 |
| 504500 | 16 | 9/22/2009 Other Welf Oper AG | PV | 42325050 Grainger - ALL USE REMIT | 305.28 |
| 504500 | 16 | 9/22/2009 Other Welf Oper AG | PV | 42325068 Grainger - ALL USE REMIT | 1,349.91 |
| 504610 | 16 | 9/22/2009 Employee Awards AG | PV | 42325401 Tharpe Company Inc-REMIT | 421.48 |
| 504620 | 16 | 9/22/2009 Employee Physical Exam AG | PV | 42325336 BaptistWorx Business Office | 35.00 |
| 511100 | 13 | 9/22/2009 Waste Disposal Exp WT | PV | 42325394 Geochemical Testing | 1,286.11 |
| 515100 | 12 | 9/22/2009 Purch Power P | EE | 3910859 KENTUCKY UTILITIES COMPANY | 1,163.86 |
| 518001 | AWSI | 9/22/2009 Chemicals Carbon AWSI | PV | 42325996 American Anglian Environmental | 3,550.41 |
| 518001 | AWSI | 9/22/2009 Chemicals Carbon AWSI | PV | 42325997 American Anglian Environmental | 3,872.29 |
| 520100 | 14 | 9/22/2009 M \& S Oper TD | PV | 42325451 USA Blue Book | 341.80 |
| 520100 | 14 | 9/22/2009 M \& S Oper TD | PV | 42325472 USA Blue Book | 105.70 |
| 535000 | 16 | 9/22/2009 Contr Svc-Other Oper AG | PV | 42325347 Computershare | 639.16 |
| 535000 | 14 | 9/22/2009 Contr Svc-Other Oper TD | PV | 42325466 TruGreen Chemlawn-PO/REMIT | 131.35 |
| 535000 | 13 | 9/22/2009 Contr Svc-Other Oper WT | PV | 42325994 Stephen Hillenmeyer Landscape | 2,649.05 |
| 535000 | 13 | 9/22/2009 Contr Svc-Other Oper WT | PV | 42325995 Stephen Hillenmeyer Landscape | 1,315.83 |
| 535001 | 15 | 9/22/2009 Contr Svc-Temp Empl Oper CA | PV | 42325341 VeBridge | 10.36 |
| 541000 | 14 | 9/22/2009 Rents-Real Prop Oper TD | PV | 42325345 CSX Transportation Inc-REMIT | 100.00 |
| 550000 | 16 | 9/22/2009 Trans Oper AG | PV | 42325373 C Store Partners - REMIT | 95.25 |
| 570100 | 15 | 9/22/2009 Uncollectible Accounts | JE | 30897953 KY CIS POST GL BATCH | -115.71 |
| 575000 | 14 | 9/22/2009 Misc Oper TD | PV | 42325418 Grainger - ALL USE REMIT | 1,105.88 |
| 575000 | 14 | 9/22/2009 Misc Oper TD | PV | 42325448 Grainger - ALL USE REMIT | 909.94 |
| 575000 | 14 | 9/22/2009 Misc Oper TD | PV | 42325451 USA Blue Book | 293.13 |
| 575000 | 14 | 9/22/2009 Misc Oper TD | PV | 42325459 Grainger - ALL USE REMIT | 378.51 |
| 575000 | 14 | 9/22/2009 Misc Oper TD | PV | 42325463 USA Blue Book | 47.09 |
| 575100 | 15 | 9/22/2009 Bank Service Charges CA | PV | 42325676 CheckFreePay Corporation | 8,200.71 |
| 575275 | 16 | 9/22/2009 Discounts Available | PK | 62057464 Ferguson SAC - ALL USE REMIT | -82.96 |
| 575320 | 14 | 9/22/2009 Electricity TD | EE | 3908652 KENTUCKY UTILITIES COMPANY | 15.43 |
| 575545 | 13 | 9/22/2009 Lab Supplies WT | PV | 42325396 VWR International Inc-PO/REMIT | 172.70 |
| 575545 | 13 | 9/22/2009 Lab Supplies WT | PV | 42325399 VWR International Inc-PO/REMIT | 198.00 |
| 575625 | 16 | 9/22/2009 Overnight Shipping AG | PV | 42325349 United Parcel Service | 78.18 |
| 575625 | 16 | 9/22/2009 Overnight Shipping AG | PV | 42325350 United Parcel Service | 51.53 |
| 575625 | 16 | 9/22/2009 Overnight Shipping AG | PV | 42325359 United Parcel Service | 56.58 |
| 575625 | 16 | 9/22/2009 Overnight Shipping AG | PV | 42325389 United Parcel Service | 177.70 |
| 575740 | 16 | 9/22/2009 Telephone AG | TC | 30897639 Genesys Conferencing | 36.43 |
| 575740 | 15 | 9/22/2009 Telephone CA | TC | 30897669 Windstream | 268.07 |
| 575740 | 15 | 9/22/2009 Telephone CA | TC | 30897670 Windstream | 1,144.50 |
| 575740 | 15 | 9/22/2009 Telephone CA | TC | 30897671 Windstream | 107.14 |




| ACCOUNT | SUB | GL DATE | DESCRIPTION | DOC TYPE | DOC\# | EXPLANATION | AMOUNT |
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| 402110 |  | 9/28/2009 | Dom WW Serv Billed | JE | 30898482 | KY CIS POST GL BATCH | -60.18 |
| 402210 |  | 9/28/2009 | Com WW Serv Billed | JE | 30898482 | KY CIS POST GL BATCH | 87.19 |
| 403104 |  | 9/28/2009 | Oth Rev-NSF Check Charge | JE | 30898482 | KY CIS POST GL BATCH | -12.00 |
| 403105 |  | 9/28/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30898482 | KY CIS POST GL BATCH | -1,716.00 |
| 403107 |  | 9/28/2009 | Oth Rev-Reconnection Charges | JE | 30898482 | KY CIS POST GL BATCH | -1,586.00 |
| 504100 | 16 | 9/28/2009 | Group Ins Oper AG | RI | 10134043 | White, Joe C. | -150.50 |
| 504500 | 16 | 9/28/2009 | Other Welf Oper AG | PV | 42329694 | Grainger - ALL USE REMIT | 60.31 |
| 504500 | 16 | 9/28/2009 | Other Welf Oper AG | PV | 42329700 | Grainger - ALL USE REMIT | 512.66 |
| 504500 | 16 | 9/28/2009 | Other Welf Oper AG | PV | 42329750 | Grainger - ALL USE REMIT | 500.32 |
| 515100 | 14 | 9/28/2009 | Purch Power TD | EE | 3917072 | OWEN ELECTRIC COOP INC | 15.09 |
| 515100 | 14 | 9/28/2009 | Purch Power TD | EE | 3917097 | OWEN ELECTRIC COOP INC | 27.99 |
| 535001 | 15 | 9/28/2009 | Contr Svc-Temp Empl Oper CA | PV | 42329482 | Volt Services Group | 499.20 |
| 535001 | 15 | 9/28/2009 | Contr Svc-Temp Empl Oper CA | PV | 42329484 | Volt Services Group | 624.00 |
| 535001 | 15 | 9/28/2009 | Contr Svc-Temp Empl Oper CA | PV | 42329487 | Volt Services Group | 624.00 |
| 570100 | 15 | 9/28/2009 | Uncollectible Accounts | JE | 30898482 | KY CIS POST GL BATCH | -259.47 |
| 575000 | 16 | 9/28/2009 | Misc Oper AG | JE | 30898280 | SEP09 INV WRITE OFF | -67.64 |
| 575320 | 14 | 9/28/2009 | Electricity TD | EE | 3917070 | OWEN ELECTRIC COOP INC | 18.57 |
| 620000 | 24 | 9/28/2009 | Mat and Sup Maint TD | OV | 10278465 | Smith Blair Inc - PO Box 5337 | 2,958.22 |
| 620000 | 24 | 9/28/2009 | Mat and Sup Maint TD | OV | 10278504 | Smith Blair Inc - PO Box 5337 | -517.83 |
| 760400 |  | 9/28/2009 | Other Lobbying Expenses | PS | 42329406 | Lexington in Touch Inc | 375.00 |
| 401110 |  | 9/29/2009 | Res Sales Billed | JE | 30898589 | KY CIS POST GL BATCH | -160,523.23 |
| 401210 |  | 9/29/2009 | Com Sales Billed | JE | 30898589 | KY CIS POST GL BATCH | -7,015.59 |
| 401510 |  | 9/29/2009 | Pub Auth Billed | JE | 30898589 | KY CIS POST GL BATCH | -878.90 |
| 403104 |  | 9/29/2009 | Oth Rev-NSF Check Charge | JE | 30898589 | KY CIS POST GL BATCH | -108.00 |
| 403105 |  | 9/29/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30898589 | KY CIS POST GL BATCH | -2,392.00 |
| 403107 |  | 9/29/2009 | Oth Rev-Reconnection Charges | JE | 30898589 | KY CIS POST GL BATCH | -3,146.00 |
| 501711 |  | 9/29/2009 | IP-Off-Annual-P/R JE | JE | 30898496 | 3rd Qtr 2009 AIP true up | 6,236.44 |
| 501711 |  | 9/29/2009 | IP-Off-Annual-P/R JE | JE | 30898501 | 3Q_AIP trnsfr SvcCo \& OH to IA | 3,900.00 |
| 501716 | 16 | 9/29/2009 | Comp Exp-Options | JE | 30898443 | Accrue RSU \& Opt Exp Sep09 | 970.00 |
| 501718 | 16 | 9/29/2009 | Comp Exp-RSU's | JE | 30898443 | Accrue RSU \& Opt Exp Sep09 | 842.00 |
| 511100 | 13 | 9/29/2009 | Waste Disposal Exp WT | PI | 46773 | Physical Inventory | 910.41 |
| 511100 | 13 | 9/29/2009 | Waste Disposal Exp WT | PI | 46807 | Physical Inventory | 2,585.14 |
| 511100 | 13 | 9/29/2009 | Waste Disposal Exp WT | ID | 558773 | Chemical issues RRS Sept. 2009 | 1,138.52 |
| 511100 | 13 | 9/29/2009 | Waste Disposal Exp WT | ID | 559214 | CHEMICAL ISSUES KRS SEPT 2009 | 6,388.75 |
| 518000 | 13 | 9/29/2009 | Chemicals WT | PI | 46773 | Physical Inventory | 25,789.47 |
| 518000 | 13 | 9/29/2009 | Chemicals WT | PI | 46776 | Physical Inventory | 401.12 |
| 518000 | 13 | 9/29/2009 | Chemicals WT | PI | 46807 | Physical Inventory | 43,728.17 |
| 518000 | 13 | 9/29/2009 | Chemicals WT | ID | 558773 | Chemical issues RRS Sept. 2009 | 41,871.60 |
| 518000 | 13 | 9/29/2009 | Chemicals WT | ID | 558785 | Chem.issues Rockwell 9/2009 | 654.03 |
| 518000 | 13 | 9/29/2009 | Chemicals WT | IR | 559189 | RETURN STOCK KRS SEPT 2009 | -50.06 |
| 518000 | 13 | 9/29/2009 | Chemicals WT | ID | 559214 | CHEMICAL ISSUES KRS SEPT 2009 | 106,217.08 |
| 518000 | 13 | 9/29/2009 | Chemicals WT | ID | 559230 | Owenton WWTP Sept. 2009 | 1,240.99 |
| 518000 | 13 | 9/29/2009 | Chemicals WT | ID | 559244 | Owenton Water Sept. 2009 | 12,943.81 |
| 520100 | 16 | 9/29/2009 | M \& S Oper AG | PV | 42331232 | Grainger - ALL USE REMIT | 636.70 |
| 536000 | 13 | 9/29/2009 | Contr Svc-Lab Testing Oper WT | PV | 42331261 | Fouser Environmental Services | 132.00 |
| 536000 | 13 | 9/29/2009 | Contr Svc-Lab Testing Oper WT | PV | 42331262 | Fouser Environmental Services | 660.00 |
| 536000 | 13 | 9/29/2009 | Contr Svc-Lab Testing Oper WT | PV | 42331264 | Fouser Environmental Services | 70.00 |
| 536000 | 13 | 9/29/2009 | Contr Svc-Lab Testing Oper WT | PV | 42331267 | Fouser Environmental Services | 20.00 |
| 550000 | 16 | 9/29/2009 | Trans Oper AG | PV | 42331219 | Cockrells Auto Body | 3,304.92 |
| 550000 | 16 | 9/29/2009 | Trans Oper AG | PV | 42331221 | Bridgestone Americas Inc | 131.51 |
| 550000 | 16 | 9/29/2009 | Trans Oper AG | PV | 42331224 | Bridgestone Americas Inc | 228.04 |
| 570100 | 15 | 9/29/2009 | Uncollectible Accounts | JE | 30898589 | KY CIS POST GL BATCH | 39,566.71 |
| 575000 | 16 | 9/29/2009 | Misc Oper AG | PV | 42331259 | Backtrack Employment Screening | 174.00 |
| 575000 | 16 | 9/29/2009 | Misc Oper AG | PV | 42331260 | Backtrack Employment Screening | 33.00 |
| 575000 | 13 | 9/29/2009 | Misc Oper WT | PV | 42331270 | VWR International Inc-PO/REMIT | 232.52 |
| 575320 | 14 | 9/29/2009 | Electricity TD | EE | 3918844 | KENTUCKY UTILITIES COMPANY | 12.53 |
| 575320 | 14 | 9/29/2009 | Electricity TD | EE | 3920821 | OWEN ELECTRIC COOP INC | 9.76 |
| 575545 | 13 | 9/29/2009 | Lab Supplies WT | PV | 42331272 | LabChem Inc | 468.58 |
| 575740 | 16 | 9/29/2009 | Telephone AG | TC | 30898339 | AT\&T | . 14 |
| 575740 | 16 | 9/29/2009 | Telephone AG | TC | 30898340 | AT\&T | 1.19 |
| 575740 | 16 | 9/29/2009 | Telephone AG | TC | 30898343 | AT\&T | . 14 |
| 575740 | 16 | 9/29/2009 | Telephone AG | TC | 30898344 | AT\&T | -. 18 |
| 575740 | 16 | 9/29/2009 | Telephone AG | TC | 30898345 | AT\&T | . 25 |
| 575740 | 16 | 9/29/2009 | Telephone AG | TC | 30898349 | AT\&T | . 40 |
| 575740 | 16 | 9/29/2009 | Telephone AG | TC | 30898350 | AT\&T | . 56 |
| 575740 | 16 | 9/29/2009 | Telephone AG | TC | 30898361 | AT\&T | 258.05 |
| 575740 | 15 | 9/29/2009 | Telephone CA | TC | 30898361 | AT\&T | 733.97 |
| 620000 | 24 | 9/29/2009 | Mat and Sup Maint TD | OV | 10278654 | Bingham \& Taylor Corp | 1,053.33 |
| 620000 | 24 | 9/29/2009 | Mat and Sup Maint TD | OV | 10278824 | Smith Blair Inc - PO Box 5337 | 1,035.66 |
| 620000 | 24 | 9/29/2009 | Mat and Sup Maint TD | PV | 42331238 | Ferguson SAC - ALL USE REMIT | 1,071.97 |
| 675000 | 23 | 9/29/2009 | Misc Maint WT | PV | 42331268 | YSI Inc - REMIT | 1,352.94 |
| 810100 |  | 9/29/2009 | Int LTD-Outside Reg | JE | 103 | INTEREST ACCRUAL | 137,712.50 |
| 810400 | AW46 | 9/29/2009 | Int LTD-Inside AW46 | JE |  | INTEREST ACCRUAL | 398,407.08 |
| 860040 |  | 9/29/2009 | Div Dec PS-Out w/ mand | JE | 103 | INTEREST ACCRUAL | -63,525.00 |
| 860100 |  | 9/29/2009 | Div Dec Pref Stk-Outside | JE | 103 | INTEREST ACCRUAL | 6,510.50 |
| 401120 |  | 9/30/2009 | Res Sales Unbilled | JE | 120918 | Disc Unbilled Revenue Adj Sep | 219,016.00 |
| 401120 |  | 9/30/2009 | Res Sales Unbilled | JE | 30898569 | UNBILLED REVENUE | -2,190,167.13 |
| 401220 |  | 9/30/2009 | Com Sales Unbilled | JE | 120918 | Disc Unbilled Revenue Adj Sep | 117,553.00 |
| 401220 |  | 9/30/2009 | Com Sales Unbilled | JE | 30898569 | UNBILLED REVENUE | -1,175,528.97 |
| 401320 |  | 9/30/2009 | Ind Sales Unbilled | JE | 30898569 | UNBILLED REVENUE | -139,270.47 |
| 401460 |  | 9/30/2009 | Priv Fire Unbilled | JE | 120907 | Rev Unbilled Private Fire | 1,303.44 |
| 401460 |  | 9/30/2009 | Priv Fire Unbilled | JE | 30898569 | UNBILLED REVENUE | -1,303.44 |
| 401520 |  | 9/30/2009 | Pub Auth Unbilled | JE | 30898569 | UNBILLED REVENUE | -377,982.18 |
| 401620 |  | 9/30/2009 | Sales for Resale Unbilled | JE | 30898569 | UNBILLED REVENUE | -151,408.50 |


| ACCOUNT | SUB | GL DATE | DESCRIPTION | DOC TYPE | DOC\# | EXPLANATION | AMOUNT |
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| 401630 | AW12 | 9/30/2009 | Sale for Resale AW09 | JE | 120906 | Reclass Owenton Wastewater | -993.58 |
| 403102 |  | 9/30/2009 | Oth Rev-Rents Water Property | JE |  | Reversal 9/09 Rent,phone costs | 1,193.00 |
| 403102 |  | 9/30/2009 | Oth Rev-Rents Water Property | JE | 30899144 | 8/09 rent FRCC and Svc Co empl | -17,604.10 |
| 403102 |  | 9/30/2009 | Oth Rev-Rents Water Property | JE | 30899145 | 9/09 rent FRCC and Svc Co empl | -17,485.50 |
| 403103 |  | 9/30/2009 | Oth Rev-Collect for Others | JE |  | Accrue Sewer \& Landfill Revenu | -93,147.31 |
| 403103 |  | 9/30/2009 | Oth Rev-Collect for Others | JE | 120902 | Rev Prior Month Sewer \& Land | 92,983.40 |
| 501200 | 16 | 9/30/2009 | Labor Oper AG | RI | 10134186 | Barnett, Jerry | -3,565.26 |
| 501200 | 1305 | 9/30/2009 | Labor Oper WT Super/Eng | JE | 30899338 | FASTR - ALLOCATION KY_ALLEXP2 | -359.87 |
| 501200 | 13 | 9/30/2009 | Labor Oper WT | JE | 30899338 | FASTR - ALLOCATION KY_ALLEXP2 | -295.23 |
| 501200 | 14 | 9/30/2009 | Labor Oper TD | JN | 30899628 | BPCORR 421758 reclass charges | 61,137.44 |
| 501711 |  | 9/30/2009 | IP-Off-Annual-P/R JE | JE | 30899300 | 3Q_09 AIP Term Adjustment | -2,823.63 |
| 504100 | 16 | 9/30/2009 | Group Ins Oper AG | JE |  | Retirees Reductions | -2,720.50 |
| 504100 | 16 | 9/30/2009 | Group Ins Oper AG | JE |  | Allmerica Payment | -365.20 |
| 504100 | 16 | 9/30/2009 | Group Ins Oper AG | JE | 30899122 | Adjust Accrued Ins for Sept 09 | -3,470.90 |
| 504620 | 16 | 9/30/2009 | Employee Physical Exam AG | JE | 130 | KY UNMAPPED PCARD ACCRUAL0909 | 148.00 |
| 504620 | 16 | 9/30/2009 | Employee Physical Exam AG | CC | 6393 | THE CHOP HOUSE | 444.00 |
| 504660 | 16 | 9/30/2009 | Tuition Aid AG | CC | 6393 | THE CHOP HOUSE | 110.71 |
| 504660 | 16 | 9/30/2009 | Tuition Aid AG | RI | 10134195 | Castle, Shawn B. | -2,532.00 |
| 504670 | 16 | 9/30/2009 | Training AG | JE |  | KY UNMAPPED PCARD ACCRUAL0909 | 850.00 |
| 505100 | 16 | 9/30/2009 | PBOP Oper AG | JE | 2002 | 2009 FAS 106 for OPEB | 100,637.00 |
| 506100 | 16 | 9/30/2009 | Pension Oper AG | JR | 2002 | Pension Costs Allocation 09/09 | 139,476.59 |
| 507100 | 16 | 9/30/2009 | 401k Oper AG | JE | 30899338 | FASTR - ALLOCATION KY_ALLEXP2 | -15.43 |
| 508101 | 16 | 9/30/2009 | DCP Oper AG | JE | 30899338 | FASTR - ALLOCATION KY_ALLEXP2 | -5.96 |
| 510100 | 11 | 9/30/2009 | Purchased Water-Outside | JE |  | Rec'd Purchased Water Accr Sep | -2,808.00 |
| 510100 | 11 | 9/30/2009 | Purchased Water-Outside | PV | 42332714 | Gallatin County Water District | 1,041.27 |
| 510100 | 11 | 9/30/2009 | Purchased Water-Outside | PV | 42332723 | Georgetown Municipal Water \& S | 9.33 |
| 510110 | AW12 | 9/30/2009 | Purch Water AW12 | JE | 120906 | Reclass Owenton Wastewater | 993.58 |
| 511100 | 13 | 9/30/2009 | Waste Disposal Exp WT | JE | 155 | Power Accr Eastern Div \& PA | 121.47 |
| 511100 | 13 | 9/30/2009 | Waste Disposal Exp WT | JR | 30059984 | Periodic Waste Disposal Accrua | 4,167.00 |
| 511200 | 13 | 9/30/2009 | Amort Waste Disp Exp | JR | 30059991 | Amortize Waste Disposal KY Riv | 7,692.83 |
| 515100 | 13 | 9/30/2009 | Purch Power WT | JE |  | Power Accr Eastern Div \& PA | -9,821.33 |
| 515100 | 14 | 9/30/2009 | Purch Power TD | JE |  | Power Accr Eastern Div \& PA | -50.34 |
| 515100 | 12 | 9/30/2009 | Purch Power P | JE |  | Power Accr Eastern Div \& PA | 4,394.48 |
| 515100 | 13 | 9/30/2009 | Purch Power WT | JE |  | Manual Power Accrual Adj Sept | 146,243.09 |
| 515100 | 14 | 9/30/2009 | Purch Power TD | EE | 3921253 | KENTUCKY UTILITIES COMPANY | 47.63 |
| 515100 | 12 | 9/30/2009 | Purch Power P | EE | 3921268 | KENTUCKY UTILITIES COMPANY | 1,826.68 |
| 515100 | 14 | 9/30/2009 | Purch Power TD | EE | 3921543 | KENTUCKY UTILITIES COMPANY | 12.18 |
| 518000 | 13 | 9/30/2009 | Chemicals WT | IA | 46930 | Pl adjustment | -12,085.41 |
| 518000 | 13 | 9/30/2009 | Chemicals WT | IA | 46931 | Pl adjustment | -5,391.75 |
| 518000 | 13 | 9/30/2009 | Chemicals WT | IA | 46932 | PI adjustment | -11,726.98 |
| 518000 | 13 | 9/30/2009 | Chemicals WT | IA | 46933 | Pl adjustment | -5,710.90 |
| 518000 | 13 | 9/30/2009 | Chemicals WT | IA | 46934 | Pl adjustment | -2,698.45 |
| 518000 | 13 | 9/30/2009 | Chemicals WT | IA | 46935 | PI adjustment | -2,259.76 |
| 518000 | 13 | 9/30/2009 | Chemicals WT | IA | 46936 | PI adjustment | -473.70 |
| 518000 | 13 | 9/30/2009 | Chemicals WT | IA | 46937 | Pl adjustment | 898.22 |
| 518000 | 13 | 9/30/2009 | Chemicals WT | IA | 46938 | Pl adjustment | -4,354.99 |
| 518000 | 13 | 9/30/2009 | Chemicals WT | IA | 46939 | Pl adjustment | -2,657.63 |
| 518000 | 13 | 9/30/2009 | Chemicals WT | IA | 46940 | Pl adjustment | -1,137.69 |
| 518000 | 13 | 9/30/2009 | Chemicals WT | IA | 46941 | PI adjustment | -1,489.32 |
| 518000 | 13 | 9/30/2009 | Chemicals WT | IA | 46942 | Pl adjustment | -5,066.24 |
| 518000 | 13 | 9/30/2009 | Chemicals WT | IA | 46943 | Pl adjustment | -2,180.37 |
| 520100 | 14 | 9/30/2009 | M \& S Oper TD | JE |  | KY UNMAPPED PCARD ACCRUAL0909 | -3,142.37 |
| 520100 | 13 | 9/30/2009 | M \& S Oper WT | JE |  | KY UNMAPPED PCARD ACCRUAL0909 | -207.34 |
| 520100 | 16 | 9/30/2009 | M \& S Oper AG | JE | 130 | KY UNMAPPED PCARD ACCRUAL0909 | -7.20 |
| 520100 | 14 | 9/30/2009 | M \& S Oper TD | JE |  | Power Accr Eastern Div \& PA | -6.80 |
| 520100 | 13 | 9/30/2009 | M \& S Oper WT | CC | 6393 | THE CHOP HOUSE | 578.33 |
| 520100 | 16 | 9/30/2009 | M \& S Oper AG | CC | 6393 | THE CHOP HOUSE | 726.71 |
| 520100 | 14 | 9/30/2009 | M \& S Oper TD | CC | 6393 | THE CHOP HOUSE | 9,130.73 |
| 520100 | 14 | 9/30/2009 | M \& S Oper TD | EE | 3921253 | KENTUCKY UTILITIES COMPANY | 10.00 |
| 520100 | 16 | 9/30/2009 | M \& S Oper AG | JN | 30899628 | BPCORR 421758 reclass charges | 1,881.03 |
| 520100 | 14 | 9/30/2009 | M \& S Oper TD | PV | 42332683 | Chapman Printing Company Inc - | 506.19 |
| 520100 | 14 | 9/30/2009 | M \& S Oper TD | PV | 42332743 | Grott Locksmith Center Inc | 149.10 |
| 520100 | 13 | 9/30/2009 | M \& S Oper WT | PV | 42332743 | Grott Locksmith Center Inc | 447.39 |
| 532100 | 16 | 9/30/2009 | Contr Svc-Audit Fees Oper AG | JR |  | Amort PWC Audit Fee 09-10 | 8,849.58 |
| 533000 | 16 | 9/30/2009 | Contr Svc-Legal Oper AG | JE |  | Accrue for Unbilled Legal Fees | 12,269.60 |
| 533000 | 16 | 9/30/2009 | Contr Svc-Legal Oper AG | JR | 30059967 | King \& Spalding Legal Fees | 34.07 |
| 534600 | 16 | 9/30/2009 | Mmgt Fees-Corporate | JB | 30899517 |  | 1,667.18 |
| 534601 | 16 | 9/30/2009 | Mmgt Fees-External Affairs/Com | JB | 30899517 |  | 27,044.21 |
| 534602 | 16 | 9/30/2009 | Mmgt Fees-Finance | JB | 30899517 | CP | 88,067.39 |
| 534603 | 16 | 9/30/2009 | Mmgt Fees-Human Resources | JB | 30899517 |  | 29,106.75 |
| 534604 | 16 | 9/30/2009 | Mmgt Fees-Legal | JB | 30899517 | CP | 25,834.88 |
| 534605 | 16 | 9/30/2009 | Mmgt Fees-Operations Svcs | JB | 30899517 | CP | 23,398.85 |
| 534606 | 16 | 9/30/2009 | Mmgt Fees-Property | JB | 30899517 |  | 37,846.53 |
| 534607 | 16 | 9/30/2009 | Mmgt Fees-Business Development | JB | 30899517 | CP | 15,968.47 |
| 534608 | 16 | 9/30/2009 | Mmgt Fees-Bus Transformation | JB | 30899517 | CP | 46.09 |
| 534609 | 16 | 9/30/2009 | Mmgt Fees-Audit | JB | 30899517 |  | 5,663.46 |
| 534610 | 16 | 9/30/2009 | Mmgt Fees-Regulatory | JB | 30899517 |  | 2,074.20 |
| 534611 | 16 | 9/30/2009 | Mmgt Fees-Inv Relations | JB | 30899517 |  | 2,133.25 |
| 534615 | 16 | 9/30/2009 | SSC-Shrd Bus Srv Fees | JB | 30899517 |  | 49,149.83 |
| 534625 | 16 | 9/30/2009 | CSC-Shrd Bus Srv Fees | JB | 30899517 |  | 147,799.61 |
| 534635 | 16 | 9/30/2009 | 9 ITS-Shrd Bus Srv Fees | JB | 30899517 |  | 134,246.84 |
| 534645 | 16 | 9/30/2009 | Procure-Shrd Bus Srv Fees | JB | 30899517 |  | 7,828.06 |
| 534655 | 16 | 9/30/2009 | Lab-Shrd Bus Srv Fees | JB | 30899517 |  | 15,859.97 |
| 534665 | 16 | 9/30/2009 | BSC-Shrd Bus Srv Fees | JB | 30899517 |  | 4,130.01 |


| ACCOUNT | SUB | GL DATE | DESCRIPTION | DOC TYPE | DOC\# | EXPLANATION | AMOUNT |
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| 534701 | 16 | 9/30/2009 | Mmgt Fees-Regulated Operations | JB | 30899517 | CP | 92,227.99 |
| 535000 | 15 | 9/30/2009 | Contr Svc-Other Oper CA | JE |  | KY UNMAPPED PCARD ACCRUAL0909 | 433.81 |
| 535000 | 14 | 9/30/2009 | Contr Svc-Other Oper TD | JE |  | Accr for Inv Rec but not appr | 3,762.80 |
| 535000 | 15 | 9/30/2009 | Contr Svc-Other Oper CA | JE |  | Telephone Accrual | -14.05 |
| 535000 | 16 | 9/30/2009 | Contr Svc-Other Oper AG | JE |  | Acc Goods/Serv Rendered not in | -20,600.00 |
| 535000 | 14 | 9/30/2009 | Contr Svc-Other Oper TD | JE |  | Acc Goods/Serv Rendered not in | -1,814.50 |
| 535000 | 13 | 9/30/2009 | Contr Svc-Other Oper WT | JE | 600 | Acc Goods/Serv Rendered not in | 6,560.00 |
| 535000 | 16 | 9/30/2009 | Contr Svc-Other Oper AG | JE | 17090904 | PWC Contract Services Accrual | 8,144.50 |
| 535000 | 13 | 9/30/2009 | Contr Svc-Other Oper WT | JR | 30059979 | Hach Co. - Maintenance | 4,684.42 |
| 535000 | 16 | 9/30/2009 | Contr Svc-Other Oper AG | JB | 30899517 | CP | 94.18 |
| 535000 | 14 | 9/30/2009 | Contr Svc-Other Oper TD | JN | 30899628 | BPCORR 421758 reclass charges | 11,296.00 |
| 535000 | 16 | 9/30/2009 | Contr Svc-Other Oper AG | PV | 42332649 | Grott Locksmith Center Inc | 351.16 |
| 535001 | 15 | 9/30/2009 | Contr Svc-Temp Empl Oper CA | JE |  | Accr for Inv Rec but not appr | 13,269.10 |
| 535001 | 15 | 9/30/2009 | Contr Svc-Temp Empl Oper CA | JE | 600 | Acc Goods/Serv Rendered not in | 3,363.42 |
| 535001 | 13 | 9/30/2009 | Contr Svc-Temp Empl Oper WT | JE | 30899338 | FASTR - ALLOCATION KY_ALLEXP2 | -895.45 |
| 535001 | 14 | 9/30/2009 | Contr Svc-Temp Empl Oper TD | JE | 30899338 | FASTR - ALLOCATION KY_ALLEXP2 | -234.32 |
| 536000 | 13 | 9/30/2009 | Contr Svc-Lab Testing Oper WT | JE | 30899338 | FASTR - ALLOCATION KY_ALLEXP2 | -240.00 |
| 541400 | 16 | 9/30/2009 | Rents-Equipment Oper AG | JE | 1203 | Reversal 9/09 Rent,phone costs | 12.00 |
| 541400 | 16 | 9/30/2009 | Rents-Equipment Oper AG | JE | 120904 | True Up Prepaid Other 09.09 | -199.34 |
| 541400 | 16 | 9/30/2009 | Rents-Equipment Oper AG | JR | 30059976 | Dyntek Services | 161.47 |
| 550000 | 16 | 9/30/2009 | Trans Oper AG | CC | 6393 | THE CHOP HOUSE | 293.93 |
| 550000 | 16 | 9/30/2009 | Trans Oper AG | ST | 30898532 | SABRIX VENDOR TAX COMPARE | 2.37 |
| 550002 | 16 | 9/30/2009 | Trans Oper AG Lease Fuel | JE |  | Accrue 09.09 ARI Charges | 3,796.21 |
| 550003 | 16 | 9/30/2009 | Trans Oper AG Lease Maint | JE |  | Accrue 09.09 ARI Charges | 16,221.44 |
| 556000 | 16 | 9/30/2009 | Ins Vehicle Oper AG | JR |  | Amortize Prepaid Insurance | 3,199.49 |
| 557000 | 16 | 9/30/2009 | Ins Gen Liab Oper AG | JR |  | Amortize Prepaid Insurance | 29,383.94 |
| 557000 | 16 | 9/30/2009 | Ins Gen Liab Oper AG | JE |  | Retro Insurance | -44,514.66 |
| 558000 | 16 | 9/30/2009 | Ins Work Comp AG | JR |  | Amortize Prepaid Insurance | 14,698.74 |
| 559000 | 16 | 9/30/2009 | Ins Other Oper AG | JR |  | Amortize Prepaid Insurance | 13,348.30 |
| 566100 | 16 | 9/30/2009 | Reg Comm Amort Rate Case | JE | 120905 | True Up Accrued Rate Case Exp | 206.48 |
| 566100 | 16 | 9/30/2009 | Reg Comm Amort Rate Case | JR | 30059957 | Deferred Rate Case Expense | 12,443.21 |
| 566100 | 16 | 9/30/2009 | Reg Comm Amort Rate Case | JR | 30059987 | Deferred Rate Case Expense | 11,360.09 |
| 566200 | 16 | 9/30/2009 | Reg Comm Amort Depr Study | JR | 30059961 | DDA - Cost of Service Study | 798.61 |
| 566200 | 16 | 9/30/2009 | Reg Comm Amort Depr Study | JR | 30059971 | DDA - Depreciation Study | 500.09 |
| 568010 | 16 | 9/30/2009 | Water Res Conservation | JE | 600 | Acc Goods/Serv Rendered not in | 15,343.33 |
| 570100 | 15 | 9/30/2009 | Uncollectible Accounts | JE |  | Adj Allow for Dbtl Accts 09.09 | -22,193.77 |
| 570100 | 16 | 9/30/2009 | Uncollectible Accts-MI's | JE |  | Adj Allow for Uncoll Misc A/R | 8,914.35 |
| 570100 | 15 | 9/30/2009 | Uncollectible Accounts | JE | 30898785 | KY CIS POST GL BATCH | -304.01 |
| 570100 | 15 | 9/30/2009 | Uncollectible Accounts | JE | 30898849 | To reclass Orcom ACO errors | 13.78 |
| 575000 | 13 | 9/30/2009 | Misc Oper WT | JE |  | KY UNMAPPED PCARD ACCRUAL0909 | -5,628.27 |
| 575000 | 14 | 9/30/2009 | Misc Oper TD | JE |  | KY UNMAPPED PCARD ACCRUAL0909 | -1,968.54 |
| 575000 | 12 | 9/30/2009 | Misc Oper P | JE |  | KY UNMAPPED PCARD ACCRUAL0909 | -102.40 |
| 575000 | 15 | 9/30/2009 | Misc Oper CA | JE |  | KY UNMAPPED PCARD ACCRUAL0909 | 3.70 |
| 575000 | 16 | 9/30/2009 | Misc Oper AG | JE |  | KY UNMAPPED PCARD ACCRUAL0909 | 274.43 |
| 575000 | 14 | 9/30/2009 | Misc Oper TD | JE |  | Accr for Inv Rec but not appr | -3,996.96 |
| 575000 | 16 | 9/30/2009 | Misc Oper AG | JE |  | Accr for Inv Rec but not appr | 1,517.59 |
| 575000 | 14 | 9/30/2009 | Misc Oper TD | JE |  | Telephone Accrual | -3.20 |
| 575000 | 11 | 9/30/2009 | Misc Oper SS | CC | 6393 | THE CHOP HOUSE | 14.82 |
| 575000 | 13 | 9/30/2009 | Misc Oper WT | CC | 6393 | THE CHOP HOUSE | 765.50 |
| 575000 | 14 | 9/30/2009 | Misc Oper TD | CC |  | THE CHOP HOUSE | 1,244.14 |
| 575000 | 16 | 9/30/2009 | Misc Oper AG | JE | 120904 | True Up Prepaid Other 09.09 | 333.33 |
| 575000 | 16 | 9/30/2009 | Misc Oper AG | OV | 10279000 | US Pipe \& Foundry Co LLC - PO | 141.91 |
| 575000 | 16 | 9/30/2009 | Misc Oper AG | ST | 30898537 | SABRIX NO TAX CHARGED ACR | 12.42 |
| 575000 | 13 | 9/30/2009 | Misc Oper WT | JE | 30899338 | FASTR - ALLOCATION KY_ALLEXP2 | -58.13 |
| 575000 | 16 | 9/30/2009 | Misc Oper AG | PV | 42333672 | US Pipe \& Foundry Co - REMIT | . 47 |
| 575002 | 16 | 9/30/2009 | Misc General Office | PV | 42332633 | Grott Locksmith Center Inc | 74.50 |
| 575100 | 15 | 9/30/2009 | Bank Service Charges CA | JE | 140 | Mellon bank fees | 19,255.42 |
| 575100 | 15 | 9/30/2009 | Bank Service Charges CA | JE |  | Checkfree Bank Fees | 120.91 |
| 575200 | 15 | 9/30/2009 | Collection Agencies CA | JE | 30942 | GC Services September Accrual | 4,821.19 |
| 575200 | 15 | 9/30/2009 | Collection Agencies CA | JE | 30899134 | 09/30/09 TWS activity | -564.11 |
| 575200 | 15 | 9/30/2009 | Collection Agencies CA | PV | 42333459 | GC Services Limited Parnership | 5,911.28 |
| 575200 | 15 | 9/30/2009 | Collection Agencies CA | PV | 42333461 | GC Services Limited Parnership | 5,077.62 |
| 575200 | 15 | 9/30/2009 | Collection Agencies CA | PV | 42333538 | Penn Credit Corp | 1,592.02 |
| 575200 | 15 | 9/30/2009 | Collection Agencies CA | PV | 42333543 | Penn Credit Corp | 1,410.88 |
| 575220 | 16 | 9/30/2009 | Community Relations | JE |  | Acc Goods/Serv Rendered not in | 1,570.00 |
| 575240 | 16 | 9/30/2009 | Co Dues/Membership Deduct | JR | 30059962 | Amortize AWWA Research Fees | 1,517.61 |
| 575242 | 16 | 9/30/2009 | Co Dues Deduct AWWA | JR | 30059969 | AWWA Membership dues | 614.83 |
| 575244 | 16 | 9/30/2009 | Co Dues Deduct NAWC | JR | 30059986 | NAWC Membership Dues | 3,141.70 |
| 575260 | 16 | 9/30/2009 | Credit Line Fees | JR | 30059966 | JPMorgan Credit Line Fees | 34.97 |
| 575261 | AW46 | 9/30/2009 | Credit Line Fees AW46 | JE |  | Rec'd Mthly Trans pd by AWCC | 12,875.98 |
| 575261 | AW46 | 9/30/2009 | Credit Line Fees AW46 | JE |  | ACCRUED CL FEES | -5,858.03 |
| 575280 | 16 | 9/30/2009 | Dues/Membership Deduct | JE |  | Acc Goods/Serv Rendered not in | 500.00 |
| 575280 | 16 | 9/30/2009 | Dues/Membership Deduct | JE | 120904 | True Up Prepaid Other 09.09 | -1,500.00 |
| 575280 | 16 | 9/30/2009 | Dues/Membership Deduct | JR | 30059978 | Commerce Lexington Member Dues | 416.67 |
| 575280 | 16 | 9/30/2009 | Dues/Membership Deduct | JR | 30059980 | Kentucky League of Cities | 125.00 |
| 575280 | 16 | 9/30/2009 | Dues/Membership Deduct | JR | 30059981 | Calence LLC | 341.51 |
| 575320 | 14 | 9/30/2009 | Electricity TD | JE |  | Power Accr Eastern Div \& PA | 73.86 |
| 575320 | 13 | 9/30/2009 | Electricity WT | JE |  | Power Accr Eastern Div \& PA | 98.00 |
| 575320 | 16 | 9/30/2009 | Electricity AG | JE |  | Power Accr Eastern Div \& PA | 971.87 |
| 575320 | 16 | 9/30/2009 | Electricity AG | JE | 1203 | Reversal 9/09 Rent,phone costs | 99.00 |
| 575340 | 16 | 9/30/2009 | Employee Expenses AG | JE |  | KY UNMAPPED PCARD ACCRUAL0909 | 2,354.22 |
| 575340 | 16 | 9/30/2009 | Employee Expenses AG | CC | 6385 | DELTA AIR | 610.80 |
| 575340 | 16 | 9/30/2009 | Employee Expenses AG | CC | 6393 | THE CHOP HOUSE | 255.26 |
| 575350 | 16 | 9/30/2009 | Meals Deduct | JE |  | KY UNMAPPED PCARD ACCRUAL0909 | -461.97 |


| ACCOUNT | SUB | GL DATE | DESCRIPTION | DOC TYPE | DOC\# ${ }^{\text {E }}$ - EXPLANATION | AMOUNT |
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| 575350 | 16 | 9/30/2009 | Meals Deduct | CC | 6385 DELTA AIR | 714.18 |
| 575350 | 16 | 9/30/2009 | Meals Deduct | CC | 6393 THE CHOP HOUSE | 632.64 |
| 575350 | 16 | 9/30/2009 | Meals Deduct | JA | 30899515 FASTR - ALLOC GAMTALLCO | -1,276.77 |
| 575351 | 16 | 9/30/2009 | Meals Non Deduct | JA | 30899515 FASTR - ALLOC GAMTALLCO | 1,276.77 |
| 575420 | 15 | 9/30/2009 | Forms CA | JE | 300 August Regulus Accrual-Global | 1,085.36 |
| 575480 | 16 | 9/30/2009 | Heat - Oil/Gas AG | JE | 155 Power Accr Eastern Div \& PA | -5.94 |
| 575480 | 14 | 9/30/2009 | Heat - Oil/Gas TD | JE | 155 Power Accr Eastern Div \& PA | 39.89 |
| 575480 | 16 | 9/30/2009 | Heat - Oil/Gas AG | JE | 1203 Reversal 9/09 Rent,phone costs | 9.00 |
| 575500 | 13 | 9/30/2009 | Janitorial WT | JE | 600 Acc Goods/Serv Rendered not in | -1,537.50 |
| 575500 | 14 | 9/30/2009 | Janitorial TD | JE | 600 Acc Goods/Serv Rendered not in | -1,416.74 |
| 575500 | 16 | 9/30/2009 | Janitorial AG | JE | 600 Acc Goods/Serv Rendered not in | 718.00 |
| 575500 | 16 | 9/30/2009 | Janitorial AG | JE | 1203 Reversal 9/09 Rent,phone costs | 182.00 |
| 575545 | 13 | 9/30/2009 | Lab Supplies WT | JE | 130 KY UNMAPPED PCARD ACCRUAL0909 | -569.96 |
| 575545 | 13 | 9/30/2009 | Lab Supplies WT | CC | 6393 THE CHOP HOUSE | 1,417.21 |
| 575545 | 13 | 9/30/2009 | Lab Supplies WT | ST | 30898537 SABRIX NO TAX CHARGED ACR | 28.11 |
| 575545 | 13 | 9/30/2009 | Lab Supplies WT | PV | 42332693 VWR International Inc-PO/REMIT | 62.53 |
| 575545 | 13 | 9/30/2009 | Lab Supplies WT | PV | 42332705 VWR International Inc-PO/REMIT | 41.94 |
| 575620 | 16 | 9/30/2009 | Office \& Admin Supplies AG | JE | 130 KY UNMAPPED PCARD ACCRUAL0909 | -636.34 |
| 575620 | 15 | 9/30/2009 | Office \& Admin Supplies CA | JE | 130 KY UNMAPPED PCARD ACCRUAL0909 | -511.76 |
| 575620 | 13 | 9/30/2009 | Office \& Admin Supplies WT | JE | 130 KY UNMAPPED PCARD ACCRUAL0909 | 493.83 |
| 575620 | 16 | 9/30/2009 | Office \& Admin Supplies AG | JE | 1203 Reversal 9/09 Rent,phone costs | 3.00 |
| 575620 | 13 | 9/30/2009 | Office \& Admin Supplies WT | CC | 6393 THE CHOP HOUSE | 14.83 |
| 575620 | 16 | 9/30/2009 | Office \& Admin Supplies AG | CC | 6393 THE CHOP HOUSE | 52.55 |
| 575620 | 14 | 9/30/2009 | Office \& Admin Supplies TD | CC | 6393 THE CHOP HOUSE | 453.07 |
| 575660 | 15 | 9/30/2009 | Postage CA | JE | 125 Rec'd Mthly Trans pd by AWCC | 48,108.77 |
| 575660 | 16 | 9/30/2009 | Postage AG | JE | 1203 Reversal 9/09 Rent,phone costs | -64.00 |
| 575660 | 16 | 9/30/2009 | Postage AG | CC | 6393 THE CHOP HOUSE | 28.16 |
| 575711 | 16 | 9/30/2009 | Add'l Security Costs AG | JE | 160 Accr for Inv Rec but not appr | 5,066.68 |
| 575711 | 16 | 9/30/2009 | Add'l Security Costs AG | JE | 600 Acc Goods/Serv Rendered not in | 5,066.68 |
| 575715 | 16 | 9/30/2009 | Software Licenses \& Support | JR | 348 Amort RIA Insource CIS License | 284.82 |
| 575715 | 16 | 9/30/2009 | Software Licenses \& Support | JE | 120904 True Up Prepaid Other 09.09 | -17.40 |
| 575715 | 16 | 9/30/2009 | Software Licenses \& Support | JR | 30059963 Vesry Pro Expert Maint Program | 527.88 |
| 575715 | 16 | 9/30/2009 | Software Licenses \& Support | JR | 30059970 Amortize global support iconic | 405.58 |
| 575715 | 16 | 9/30/2009 | Software Licenses \& Support | JR | 30059983 Amortize Industrial Defender | 113.21 |
| 575740 | 16 | 9/30/2009 | Telephone AG | JE | 410 Telephone Accrual | 26.04 |
| 575740 | 15 | 9/30/2009 | Telephone CA | JE | 410 Telephone Accrual | 733.96 |
| 575741 | 16 | 9/30/2009 | Cell Phone AG | JE | 130 KY UNMAPPED PCARD ACCRUAL0909 | 370.99 |
| 575741 | 14 | 9/30/2009 | Cell Phone TD | JE | 149 Rec Telecom Credit Rec | -410.41 |
| 575741 | 16 | 9/30/2009 | Cell Phone AG | JE | 410 Telephone Accrual | -14.69 |
| 575741 | 13 | 9/30/2009 | Cell Phone WT | JE | 410 Telephone Accrual | -4.93 |
| 575741 | 16 | 9/30/2009 | Cell Phone AG | CC | 6393 THE CHOP HOUSE | 49.76 |
| 575820 | 14 | 9/30/2009 | Uniforms TD | JE | 130 KY UNMAPPED PCARD ACCRUAL0909 | -19.53 |
| 575820 | 13 | 9/30/2009 | Uniforms WT | JE | 130 KY UNMAPPED PCARD ACCRUAL0909 | 123.72 |
| 575820 | 14 | 9/30/2009 | Uniforms TD | CC | 6393 THE CHOP HOUSE | 42.39 |
| 575830 | 16 | 9/30/2009 | Wtr \& Waste Wtr Exp AG | JE | 1203 Reversal 9/09 Rent,phone costs | 4.00 |
| 575998 | 16 | 9/30/2009 | PCard Undistributed | JE | 130 KY UNMAPPED PCARD ACCRUAL0909 | -1,305.46 |
| 575998 | 16 | 9/30/2009 | PCard Undistributed | CC | 6393 THE CHOP HOUSE | 240.00 |
| 620000 | 21 | 9/30/2009 | Mat and Sup Maint SS | JE | 130 KY UNMAPPED PCARD ACCRUAL0909 | 167.04 |
| 620000 | 23 | 9/30/2009 | Mat and Sup Maint WT | JE | 130 KY UNMAPPED PCARD ACCRUAL0909 | 2,663.68 |
| 620000 | 23 | 9/30/2009 | Mat and Sup Maint WT | JE | 160 Accr for Inv Rec but not appr | -2,404.88 |
| 620000 | 23 | 9/30/2009 | Mat and Sup Maint WT | JE | 600 Acc Goods/Serv Rendered not in | 258.80 |
| 620000 | 21 | 9/30/2009 | Mat and Sup Maint SS | CC | 6393 THE CHOP HOUSE | 59.98 |
| 620000 | 23 | 9/30/2009 | Mat and Sup Maint WT | CC | 6393 THE CHOP HOUSE | 578.26 |
| 620000 | 24 | 9/30/2009 | Mat and Sup Maint TD | 11 | 5596281280 Swope | 40.23 |
| 620000 | 24 | 9/30/2009 | Mat and Sup Maint TD | II | 559637850 Hwy330 | 34.16 |
| 620000 | 24 | 9/30/2009 | Mat and Sup Maint TD | 11 | 559671 Lot 20 Elk Lake | 34.16 |
| 620000 | 24 | 9/30/2009 | Mat and Sup Maint TD | II | 559705 Water Plant | 38.19 |
| 620000 | 24 | 9/30/2009 | Mat and Sup Maint TD | IR | 559828 Inventory Return | -131.68 |
| 620000 | 24 | 9/30/2009 | Mat and Sup Maint TD | 11 | 559857 Inventory Issue-Stk E \& D | 5,503.29 |
| 620000 | 24 | 9/30/2009 | Mat and Sup Maint TD | IR | 559943 Inventory Return | -18.29 |
| 620000 | 24 | 9/30/2009 | Mat and Sup Maint TD | IR | 559948 Inventory Return | -140.10 |
| 620000 | 26 | 9/30/2009 | Mat and Sup Maint AG | JR | 30009705 Amort Microsoft License \& Main | 2,485.83 |
| 620000 | 24 | 9/30/2009 | Mat and Sup Maint TD | JE | 30899348 BP non stock material to MJ | -191.12 |
| 635000 | 26 | 9/30/2009 | Contr Svc-Other Maint AG | JE | 160 Accr for Inv Rec but not appr | -1,031.00 |
| 635000 | 26 | 9/30/2009 | Contr Svc-Other Maint AG | CC | 6393 THE CHOP HOUSE | 82.04 |
| 635000 | 26 | 9/30/2009 | Contr Svc-Other Maint AG | PV | 42332639 TruGreen Chemlawn-PO/REMIT | 362.03 |
| 675000 | 26 | 9/30/2009 | Misc Maint AG | JE | 160 Accr for Inv Rec but not appr | -1,070.00 |
| 675000 | 23 | 9/30/2009 | Misc Maint WT | CC | 6393 THE CHOP HOUSE | 8.98 |
| 675000 | 26 | 9/30/2009 | Misc Maint AG | JR | 30059974 Amortize ECIS Extended Support | 3,580.00 |
| 675000 | 23 | 9/30/2009 | Misc Maint WT | ST | 30898537 SABRIX NO TAX CHARGED ACR | 81.18 |
| 675050 | 23 | 9/30/2009 | Amort Def Maint WT | JR | 30009642 amtz m959 | 137.65 |
| 675050 | 23 | 9/30/2009 | Amort Def Maint WT | JR | 30009644 amtz m965 | 685.80 |
| 675050 | 23 | 9/30/2009 | Amort Def Maint WT | JR | 30009649 amtz m1039 | 1,281.93 |
| 675050 | 23 | 9/30/2009 | Amort Def Maint WT | JR | 30009653 amtz hydro \#8 | 1,131.92 |
| 675050 | 23 | 9/30/2009 | Amort Def Maint WT | JR | 30009657 amtz prog maint | 1,076.39 |
| 675050 | 24 | 9/30/2009 | Amort Def Maint TD | JR | 30009659 amort M1061 Hume Rd Tank | 2,149.90 |
| 675050 | 23 | 9/30/2009 | Amort Def Maint WT | JR | 30009660 AMTZ HYDROTR \#3 | 1,000.67 |
| 675050 | 23 | 9/30/2009 | Amort Def Maint WT | JR | 30009670 M1011 AMTZ HYDROTREATER \#5 | 1,004.87 |
| 675050 | 24 | 9/30/2009 | Amort Def Maint TD | JR | 30009688 Paint Hydrotreator \#1 | 1,469.26 |
| 675050 | 24 | 9/30/2009 | Amort Def Maint TD | JR | 30009689 Paint Hydrotreator \#2 | 1,800.99 |
| 675050 | 24 | 9/30/2009 | Amort Def Maint TD | JR | 30009691 Repair Cox Street Tank | 416.66 |
| 675050 | 24 | 9/30/2009 | Amort Def Maint TD | JR | 30009697 Amtz York Street Tank M1104 | 276.13 |
| 675050 | 23 | 9/30/2009 | Amort Def Maint WT | JR | 30009753 M1038 Paint Hydro Treater | 1,244.41 |
| 675050 | 23 | 9/30/2009 | Amort Def Maint WT | JR | 30059958 Amortize Programmed Maint | 1,530.40 |


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| 675050 | 24 | 9/30/2009 | Amort Def Maint TD | JR | 30059988 | Amortize Programmed Maint | 7,172.91 |
| 675050 | 23 | 9/30/2009 | Amort Def Maint WT | JR | 30059989 | Amortize Programmed Maint | 2,858.27 |
| 675110 | 26 | 9/30/2009 | Maint Exp ARO/Net Neg Sal AG | DP | 30897445 | Monthly Depreciation Expense | 128,132.17 |
| 675650 | 24 | 9/30/2009 | Paving/Backfill TD | JE |  | Accr for Inv Rec but not appr | 15,927.67 |
| 675650 | 24 | 9/30/2009 | Paving/Backfill TD | JE | 120910 | Monthly Paving \& Sod Accrual | 32,114.64 |
| 680110 |  | 9/30/2009 | Depr Exp-General | DP | 30897445 | Monthly Depreciation Expense | 611,158.92 |
| 680120 |  | 9/30/2009 | Depr Exp-Amort CIAC Tax | DP | 30897445 | Monthly Depreciation Expense | -23,520.29 |
| 680125 |  | 9/30/2009 | Depr Exp-Amort CIAC Non Tax | DP | 30897445 | Monthly Depreciation Expense | -93,949.64 |
| 680300 |  | 9/30/2009 | Amortization of UPAA | JU |  | Amort Tri Village/Elk Lake | 697.33 |
| 680300 |  | 9/30/2009 | Amortization of UPAA | JU | 30009706 | Amtz of Util Plant Acquis Adj | 16.06 |
| 680300 |  | 9/30/2009 | Amortization of UPAA | JU | 30022689 | Amort UPAA Boonesboro | 1,087.57 |
| 680540 |  | 9/30/2009 | Amort-Reg Asset AFUDC | JU | 30092822 | AMORTIZE AFUDC EQUITY | 6,332.12 |
| 680600 |  | 9/30/2009 | Amort-Prop Losses | JR |  | Amort source of supply project | 4,756.67 |
| 680600 |  | 9/30/2009 | Amort-Prop Losses | JR | 30009687 | Bluegrass Water Project | 29,592.34 |
| 680620 |  | 9/30/2009 | Amort-Reg Asset | JU | 30092823 | UPA AMORTIZATION REG ASSET | 575.00 |
| 685100 |  | 9/30/2009 | Utility Reg Assessment Fee | JH |  | Amortize KY Prepaid PSC Fees | 7,700.97 |
| 685200 |  | 9/30/2009 | Property Taxes | JH |  | Accrue KY Property Tax | 229,073.01 |
| 685325 |  | 9/30/2009 | FICA | JE | 30899093 | FICA Accrual for Sept | 31,288.11 |
| 685325 |  | 9/30/2009 | FICA | JE | 30899338 | FASTR - ALLOCATION KY_ALLEXP2 | -48.80 |
| 690110 |  | 9/30/2009 | FIT-Current | JE |  | Q3 2009 TAX PROVISION | 1,109,907.00 |
| 690120 | 2 | 9/30/2009 | FIT-PrYr Adj Over Accr | JE |  | Rec'd 2008 Fed Prov to Ret Adj | -2,876,369.00 |
| 690120 | 2 | 9/30/2009 | FIT-PrYr Adj Over Accr | JE | 120920 | Adj 2007 \& 2008 SUDS per PWC | -170,000.00 |
| 690210 |  | 9/30/2009 | SIT-Current | JE |  | Q3 2009 TAX PROVISION | 200,880.00 |
| 690220 | 2 | 9/30/2009 | SIT-PrYr Adj Over Accr | JE |  | Rec'd 2008 Fed Prov to Ret Adj | -984,658.00 |
| 690620 | 2 | 9/30/2009 | Def FIT-PY Adj Liab | JE |  | Rec'd 2008 Fed Prov to Ret Adj | 2,875,315.00 |
| 690630 | 2 | 9/30/2009 | Def FIT-Reg Liab | JT | 30092822 | CY2 Rec Amor Reg Asset/Lia | -12,287.74 |
| 690630 | 1 | 9/30/2009 | Def FIT-Reg Asset | JT | 30092822 | CY2 Rec Amor Reg Asset/Lia | 30,852.12 |
| 690650 | 2 | 9/30/2009 | Def FIT-Other Liab | JE | 705 | Q3 2009 TAX PROVISION | -442,604.00 |
| 690720 | 2 | 9/30/2009 | Def SIT-PY Adj Liab | JE | 703 | Rec'd 2008 Fed Prov to Ret Adj | 984,714.00 |
| 690730 | 2 | 9/30/2009 | Def SIT-Reg Liab | JT | 30092822 | CY2 Rec Amor Reg Asset/Lia | -5,246.50 |
| 690730 | 1 | 9/30/2009 | Def SIT-Reg Asset | JT | 30092822 | CY2 Rec Amor Reg Asset/Lia | 5,626.88 |
| 690750 | 2 | 9/30/2009 | Def SIT-Other Liab | JE |  | Q3 2009 TAX PROVISION | -80,217.00 |
| 695220 |  | 9/30/2009 | ITC Restored - 3\% | JT | 30092822 | CY2 Rec Amor Reg Asset/Lia | -637.67 |
| 695230 |  | 9/30/2009 | ITC Restored - 4\% | JT | 30092822 | CY2 Rec Amor Reg Asset/Lia | -525.42 |
| 695240 |  | 9/30/2009 | ITC Restored - 10\% | JT | 30092822 | CY2 Rec Amor Reg Asset/Lia | -5,903.33 |
| 705100 |  | 9/30/2009 | AFUDC - Equity | F6 | 30899320 | AFUDC Equity | -172,272.68 |
| 715111 |  | 9/30/2009 | M\&J Revenues-Outside | RM | 1671 | Liberty Mutual | 511.30 |
| 715111 |  | 9/30/2009 | M\&J Revenues-Outside | RM | 1672 | Mr Barker | 714.00 |
| 715111 |  | 9/30/2009 | M\&J Revenues-Outside | RI | 10124694 | Wabash Fibre Box Co | 828.26 |
| 716121 |  | 9/30/2009 | M\&J Expenses-Outside | JE | 130 | KY UNMAPPED PCARD ACCRUAL0909 | 1,050.00 |
| 716121 |  | 9/30/2009 | M\&J Expenses-Outside | CC | 6393 | THE CHOP HOUSE | 1,050.00 |
| 716121 |  | 9/30/2009 | M\&J Expenses-Outside | JE | 120910 | Monthly Paving \& Sod Accrual | 4,855.55 |
| 716121 |  | 9/30/2009 | M\&J Expenses-Outside | JE | 30899348 | BP non stock material to MJ | 191.12 |
| 716122 |  | 9/30/2009 | M\&J Expenses-Inside | JE | 30899338 | FASTR - ALLOCATION KY_ALLEXP2 | 2,153.19 |
| 755100 |  | 9/30/2009 | Amort UPAA | JU |  | Amortize Owenton Acquisition | -35.38 |
| 755201 |  | 9/30/2009 | Amort PS Exp w/ mandatory | JR | 1005 | AMORT PREFERRED STOCK EXP | 64.24 |
| 760400 |  | 9/30/2009 | Other Lobbying Expenses | JE |  | Accr for Inv Rec but not appr | 4,543.20 |
| 780100 |  | 9/30/2009 | SIT-Other Inc \& Ded Curr | JE |  | Q3 2009 TAX PROVISION | -2,509.00 |
| 790100 |  | 9/30/2009 | FIT-Oth Inc \& Ded-curr | JE |  | Q3 2009 TAX PROVISION | -15,653.00 |
| 810100 |  | 9/30/2009 | Int LTD-Outside Reg | JR | 30059977 | Amortize Gain on Loan Payoff | -10,875.79 |
| 810400 | AW46 | 9/30/2009 | Int LTD-Inside AW46 | JE | 105 | LTD PRINC \& INT PAYMENTS | 212,970.00 |
| 810400 | AW46 | 9/30/2009 | Int LTD-Inside AW46 | JE | 120912 | Recls Int Exp for BD 120027 | -236,406.25 |
| 810400 | AW46 | 9/30/2009 | Int LTD-Inside AW46 | JE | 120913 | Recls Int Exp for BD 120028 | -81,250.00 |
| 820100 |  | 9/30/2009 | Amort Debt Disc \& Exp | JR | 1003 | Amortize Debt Expense-OUTSIDE | 665.38 |
| 820110 | AW46 | 9/30/2009 | Amort DExp Inside AW46 | JR | 1007 | Amortize debt Exp Inside | 6,666.70 |
| 820110 | AW46 | 9/30/2009 | Amort DExp Inside AW46 | JR | 1008 | Amortize debt Exp Inside | 1,583.97 |
| 830100 | AW46 | 9/30/2009 | Interest STD Inside | JE |  | Rec'd Mthly Trans pd by AWCC | 13,934.61 |
| 850000 |  | 9/30/2009 | AFUDC Debt | F0 | 30899318 | AFUDC Debt | -86,063.74 |
| 860040 |  | 9/30/2009 | Div Dec PS-Out w/ mand | JE |  | LTD PRINC \& INT PAYMENTS | 95,287.50 |
| 860220 | AW02 | 9/30/2009 | Div Decl Com Stk In-AW02 | JE | 120919 | Accrue Common Dividends 09.09 | 2,006,260.48 |
| 401110 |  | 10/1/2009 | Res Sales Billed | JE | 30899089 | KY CIS POST GL BATCH | -312,133.51 |
| 401120 |  | 10/1/2009 | Res Sales Unbilled | JE | 120918 | Disc Unbilled Revenue Adj Sep | -219,016.00 |
| 401120 |  | 10/1/2009 | Res Sales Unbilled | JE | 30898569 | UNBILLED REVENUE | 2,190,167.13 |
| 401210 |  | 10/1/2009 | Com Sales Billed | JE | 30899089 | KY CIS POST GL BATCH | -134,963.98 |
| 401220 |  | 10/1/2009 | Com Sales Unbilled | JE | 120918 | Disc Unbilled Revenue Adj Sep | -117,553.00 |
| 401220 |  | 10/1/2009 | Com Sales Unbilled | JE | 30898569 | UNBILLED REVENUE | 1,175,528.97 |
| 401320 |  | 10/1/2009 | Ind Sales Unbilled | JE | 30898569 | UNBILLED REVENUE | 139,270.47 |
| 401460 |  | 10/1/2009 | Priv Fire Unbilled | JE | 120907 | Rev Unbilled Private Fire | -1,303.44 |
| 401460 |  | 10/1/2009 | Priv Fire Unbilled | JE | 30898569 | UNBILLED REVENUE | 1,303.44 |
| 401510 |  | 10/1/2009 | Pub Auth Billed | JE | 30899089 | KY CIS POST GL BATCH | -10,666.75 |
| 401520 |  | 10/1/2009 | Pub Auth Unbilled | JE | 30898569 | UNBILLED REVENUE | 377,982.18 |
| 401620 |  | 10/1/2009 | Sales for Resale Unbilled | JE | 30898569 | UNBILLED REVENUE | 151,408.50 |
| 402110 |  | 10/1/2009 | Dom WW Serv Billed | JE | 30899089 | KY CIS POST GL BATCH | -543.43 |
| 402210 |  | 10/1/2009 | Com WW Serv Billed | JE | 30899089 | KY CIS POST GL BATCH | 59.73 |
| 403102 |  | 10/1/2009 | Oth Rev-Rents Water Property | RR | 10133241 | Mcconathy, William - Remit | -95.00 |
| 403102 |  | 10/1/2009 | Oth Rev-Rents Water Property | RR | 10133243 | Cingular Wireless - El Paso, T | -2,546.99 |
| 403102 |  | 10/1/2009 | Oth Rev-Rents Water Property | RR | 10133375 | Sprint Nextel | -2,000.00 |
| 403104 |  | 10/1/2009 | Oth Rev-NSF Check Charge | JE | 30899089 | KY CIS POST GL BATCH | -204.00 |
| 403105 |  | 10/1/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30899089 | KY CIS POST GL BATCH | -4,810.00 |
| 403107 |  | 10/1/2009 | Oth Rev-Reconnection Charges | JE | 30899089 | KY CIS POST GL BATCH | -3,016.00 |
| 501200 | 16 | 10/1/2009 | Labor Oper AG | JE | 30898100 | Labor accrual Sept 2009 | -182,810.00 |
| 501200 | 1305 | 10/1/2009 | Labor Oper WT Super/Eng | JE | 30898100 | Labor accrual Sept 2009 | -7,312.40 |
| 501200 |  | 10/1/2009 | Labor Oper TD | JE | 30898100 | Labor accrual Sept 2009 | -7,312.40 |
| 501200 | 1405 | 10/1/2009 | Labor Oper TD Super/Eng | JE | 30898100 | Labor accrual Sept 2009 | -7,312.40 |



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| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 716121 |  | 10/5/2009 | M\&J Expenses-Outside | PV | 42335576 HG Wilson \& Sons Contractors I | 39.60 |
| 716121 |  | 10/5/2009 | M\&J Expenses-Outside | PV | 42335587 HG Wilson \& Sons Contractors I | 979.70 |
| 401110 |  | 10/6/2009 | Res Sales Billed | JE | 30899722 KY CIS POST GL BATCH | -154,305.63 |
| 401210 |  | 10/6/2009 | Com Sales Billed | JE | 30899722 KY CIS POST GL BATCH | -128,207.53 |
| 401310 |  | 10/6/2009 | Ind Sales Billed | JE | 30899722 KY CIS POST GL BATCH | -65,559.12 |
| 401510 |  | 10/6/2009 | Pub Auth Billed | JE | 30899722 KY CIS POST GL BATCH | -313,538.00 |
| 401610 |  | 10/6/2009 | SFR Billed | JE | 30899722 KY CIS POST GL BATCH | -38,125.49 |
| 402110 |  | 10/6/2009 | Dom WW Serv Billed | JE | 30899722 KY CIS POST GL BATCH | -13,384.90 |
| 402210 |  | 10/6/2009 | Com WW Serv Billed | JE | 30899722 KY CIS POST GL BATCH | -7,477.30 |
| 402510 |  | 10/6/2009 | Pub Auth WW Svc Billed | JE | 30899722 KY CIS POST GL BATCH | -276.35 |
| 403104 |  | 10/6/2009 | Oth Rev-NSF Check Charge | JE | 30899722 KY CIS POST GL BATCH | -60.00 |
| 403105 |  | 10/6/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30899722 KY CIS POST GL BATCH | -2,626.00 |
| 403107 |  | 10/6/2009 | Oth Rev-Reconnection Charges | JE | 30899722 KY CIS POST GL BATCH | -4,966.00 |
| 515100 | 14 | 10/6/2009 | Purch Power TD | EE | 3928634 OWEN ELECTRIC COOP INC | 19.86 |
| 515100 | 13 | 10/6/2009 | Purch Power WT | EE | 3929710 KENTUCKY UTILITIES COMPANY | 289,921.37 |
| 515100 | 14 | 10/6/2009 | Purch Power TD | EE | 3931696 KENTUCKY UTILITIES COMPANY | 22.89 |
| 535000 | 15 | 10/6/2009 | Contr Svc-Other Oper CA | TC | 30899395 Intelliwire | 14.95 |
| 541000 | 14 | 10/6/2009 | Rents-Real Prop Oper TD | PS | 42165010 CSX Transportation Inc-REMIT | -1,500.00 |
| 570100 | 15 | 10/6/2009 | Uncollectible Accounts | JE | 30899722 KY CIS POST GL BATCH | -336.88 |
| 575000 | 16 | 10/6/2009 | Misc Oper AG | PV | 42337068 Ferguson SAC - ALL USE REMIT | . 52 |
| 575320 | 13 | 10/6/2009 | Electricity WT | EE | 3928731 KENTUCKY UTILITIES COMPANY | 11.23 |
| 575320 | 14 | 10/6/2009 | Electricity TD | EE | 3931638 KENTUCKY UTILITIES COMPANY | 26.74 |
| 575320 | 16 | 10/6/2009 | Electricity AG | EE | 3931663 KENTUCKY UTILITIES COMPANY | 13.78 |
| 575320 | 14 | 10/6/2009 | Electricity TD | EE | 3931686 KENTUCKY UTILITIES COMPANY | 12.53 |
| 575320 | 13 | 10/6/2009 | Electricity WT | EE | 3931716 KENTUCKY UTILITIES COMPANY | 11.23 |
| 575480 | 16 | 10/6/2009 | Heat - Oil/Gas AG | EE | 3928823 COLUMBIA GAS OF KENTUCKY | 76.45 |
| 575480 | 14 | 10/6/2009 | Heat - Oil/Gas TD | EE | 3928968 COLUMBIA GAS OF KENTUCKY | 84.46 |
| 575740 | 15 | 10/6/2009 | Telephone CA | TC | 30899442 AT\&T | 1,981.67 |
| 685350 |  | 10/6/2009 | SUTA | PS | 42336922 Treasurer Kentucky Unemploy In | . 01 |
| 401110 |  | 10/7/2009 | Res Sales Billed | JE | 30899994 KY CIS POST GL BATCH | -147,965.05 |
| 401210 |  | 10/7/2009 | Com Sales Billed | JE | 30899994 KY CIS POST GL BATCH | -166,877.84 |
| 401310 |  | 10/7/2009 | Ind Sales Billed | JE | 30899994 KY CIS POST GL BATCH | -6,079.79 |
| 401450 |  | 10/7/2009 | Priv Fire Billed | JE | 30899994 KY CIS POST GL BATCH | -80.28 |
| 401510 |  | 10/7/2009 | Pub Auth Billed | JE | 30899994 KY CIS POST GL BATCH | -78,252.77 |
| 401610 |  | 10/7/2009 | SFR Billed | JE | 30899994 KY CIS POST GL BATCH | -92,290.45 |
| 402210 |  | 10/7/2009 | Com WW Serv Billed | JE | 30899994 KY CIS POST GL BATCH | -1,471.84 |
| 402510 |  | 10/7/2009 | Pub Auth WW Svc Billed | JE | 30899994 KY CIS POST GL BATCH | -325.81 |
| 403102 |  | 10/7/2009 | Oth Rev-Rents Water Property | RI | 10134430 T-Mobile USA Inc | -2,665.62 |
| 403104 |  | 10/7/2009 | Oth Rev-NSF Check Charge | JE | 30899994 KY CIS POST GL BATCH | -84.00 |
| 403105 |  | 10/7/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30899994 KY CIS POST GL BATCH | -1,976.00 |
| 403107 |  | 10/7/2009 | Oth Rev-Reconnection Charges | JE | 30899994 KY CIS POST GL BATCH | -2,912.00 |
| 504670 | 16 | 10/7/2009 | Training AG | RI | 10134458 KY Pipe Training Institute | -170.00 |
| 515100 | 12 | 10/7/2009 | Purch Power P | EE | 3931488 KENTUCKY UTILITIES COMPANY | 2,753.48 |
| 535001 | 15 | 10/7/2009 | Contr Svc-Temp Empl Oper CA | PV | 42337663 Volt Services Group | 566.19 |
| 535001 | 15 | 10/7/2009 | Contr Svc-Temp Empl Oper CA | PV | 42337664 Volt Services Group | 1,315.80 |
| 535001 | 15 | 10/7/2009 | Contr Svc-Temp Empl Oper CA | PV | 42337667 Volt Services Group | 2,254.47 |
| 570100 | 15 | 10/7/2009 | Uncollectible Accounts | JE | 30899994 KY CIS POST GL BATCH | -196.70 |
| 575000 | 14 | 10/7/2009 | Misc Oper TD | RI | 10134444 AT\&T | -10.96 |
| 575001 | 16 | 10/7/2009 | Misc Oper Exp AG Consol | PS | 42337791 Horton, Beverly Petty Cash | 121.00 |
| 575480 | 14 | 10/7/2009 | Heat - Oil/Gas TD | EE | 3933971 CLARK ENERGY COOP | 9.28 |
| 401110 |  | 10/8/2009 | Res Sales Billed | JE | 30900053 KY CIS POST GL BATCH | -173,857.81 |
| 401210 |  | 10/8/2009 | Com Sales Billed | JE | 30900053 KY CIS POST GL BATCH | -59,868.55 |
| 401310 |  | 10/8/2009 | Ind Sales Billed | JE | 30900053 KY CIS POST GL BATCH | -2,801.24 |
| 401510 |  | 10/8/2009 | Pub Auth Billed | JE | 30900053 KY CIS POST GL BATCH | -5,454.10 |
| 402110 |  | 10/8/2009 | Dom WW Serv Billed | JE | 30900053 KY CIS POST GL BATCH | -155.99 |
| 402210 |  | 10/8/2009 | Com WW Serv Billed | JE | 30900053 KY CIS POST GL BATCH | -22.97 |
| 403103 |  | 10/8/2009 | Oth Rev-Collect for Others | RI | 10134574 Lexington-Fayette Div Of Rev P | -92,864.93 |
| 403103 |  | 10/8/2009 | Oth Rev-Collect for Others | RI | 10134576 Sadieville City of - REMIT | -192.76 |
| 403103 |  | 10/8/2009 | Oth Rev-Collect for Others | PS | 42338324 Treehaven II LLC | -254.52 |
| 403103 |  | 10/8/2009 | Oth Rev-Collect for Others | PS | 42338325 Verna Hills Neighborhood Assoc | -222.92 |
| 403104 |  | 10/8/2009 | Oth Rev-NSF Check Charge | JE | 30900053 KY CIS POST GL BATCH | -96.00 |
| 403105 |  | 10/8/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30900053 KY CIS POST GL BATCH | -4,264.00 |
| 403107 |  | 10/8/2009 | Oth Rev-Reconnection Charges | JE | 30900053 KY CIS POST GL BATCH | -4,290.00 |
| 504500 | 16 | 10/8/2009 | Other Welf Oper AG | CC | 6413 KRISPY KREME LEXINGT | 34.92 |
| 504620 | 16 | 10/8/2009 | Employee Physical Exam AG | CC | 6413 NEW HORIZONS MEDICAL CENT | 148.00 |
| 504670 | 16 | 10/8/2009 | Training AG | CC | 6413 KYPIPE TRAINING INSTITUTE | 850.00 |
| 511100 | 13 | 10/8/2009 | Waste Disposal Exp WT | EE | 3934687 KENTUCKY UTILITIES COMPANY | 928.35 |
| 511100 | 13 | 10/8/2009 | Waste Disposal Exp WT | EE | 3934718 KENTUCKY UTILITIES COMPANY | 973.88 |
| 515100 | 12 | 10/8/2009 | Purch Power P | EE | 3934575 KENTUCKY UTILITIES COMPANY | 3,565.82 |
| 515100 | 12 | 10/8/2009 | Purch Power P | EE | 3934601 KENTUCKY UTILITIES COMPANY | 5,772.13 |
| 515100 | 14 | 10/8/2009 | Purch Power TD | EE | 3934629 KENTUCKY UTILITIES COMPANY | 475.76 |
| 515100 | 14 | 10/8/2009 | Purch Power TD | EE | 3934691 KENTUCKY UTILITIES COMPANY | 89.26 |
| 515100 | 13 | 10/8/2009 | Purch Power WT | EE | 3934741 KENTUCKY UTILITIES COMPANY | 2,980.49 |
| 515100 | 13 | 10/8/2009 | Purch Power WT | EE | 3934768 KENTUCKY UTILITIES COMPANY | 469.54 |
| 515100 | 12 | 10/8/2009 | Purch Power P | EE | 3936518 KENTUCKY UTILITIES COMPANY | 1,017.23 |
| 515100 | 14 | 10/8/2009 | Purch Power TD | EE | 3936527 KENTUCKY UTILITIES COMPANY | 26.20 |
| 515100 | 12 | 10/8/2009 | Purch Power P | EE | 3936540 KENTUCKY UTILITIES COMPANY | 62.18 |
| 515100 | 12 | 10/8/2009 | Purch Power P | EE | 3936557 KENTUCKY UTILITIES COMPANY | 1,073.06 |
| 515100 | 12 | 10/8/2009 | Purch Power P | EE | 3936589 KENTUCKY UTILITIES COMPANY | 363.46 |
| 515100 | 12 | 10/8/2009 | Purch Power P | EE | 3936595 KENTUCKY UTILITIES COMPANY | 942.54 |
| 515100 | 12 | 10/8/2009 | Purch Power P | EE | 3936609 KENTUCKY UTILITIES COMPANY | 6,805.34 |
| 515100 | 13 | 10/8/2009 | Purch Power WT | EE | 3936616 KENTUCKY UTILITIES COMPANY | 22,795.17 |
| 520100 | 16 | 10/8/2009 | M \& S Oper AG | CC | 6413 GROTT LOCKSMITH CENTER | 17.39 |
| 520100 | 13 | 10/8/2009 | M \& S Oper WT | CC | 6413 NEW HORIZONS DIVING CENTE | 59.63 |



| ACCOUNT | SUB | GL DATE | DESCRIPTION | DOC TYPE | DOC\# | EXPLANATION | AMOUNT |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 506100 | 1 | 10/9/2009 | Pension - Cap Credits | T1 | 34976 | Payroll Disbursement Entries | -73,555.53 |
| 506100 | 1 | 10/9/2009 | Pension - Cap Credits | T3 | 34978 | Actual Burden Journal Entries | 63,340.52 |
| 507100 | 16 | 10/9/2009 | 401k Oper AG | T3 | 34978 | Actual Burden Journal Entries | 4,114.73 |
| 508101 | 16 | 10/9/2009 | DCP Oper AG | T3 | 34978 | Actual Burden Journal Entries | 3,932.51 |
| 508102 | 16 | 10/9/2009 | Retiree Med Oper AG | T3 | 34978 | Actual Burden Journal Entries | 806.43 |
| 510100 | 11 | 10/9/2009 | Purchased Water-Outside | PV | 42338685 | Georgetown Municipal Water \& S | 9.33 |
| 520100 | 16 | 10/9/2009 | M \& S Oper AG | PV | 42338708 | Baumann Paper-PO/REMIT | 171.66 |
| 520100 | 16 | 10/9/2009 | M \& S Oper AG | PV | 42338761 | Grainger - ALL USE REMIT | 612.93 |
| 533000 | 16 | 10/9/2009 | Contr Svc-Legal Oper AG | PV | 42338804 | Stoll Keenon Ogden PLLC-PO/REM | 653.82 |
| 533000 | 16 | 10/9/2009 | Contr Svc-Legal Oper AG | PV | 42338826 | Stoll Keenon Ogden PLLC-PO/REM | 422.50 |
| 533000 | 16 | 10/9/2009 | Contr Svc-Legal Oper AG | PV | 42338828 | Stoll Keenon Ogden PLLC-PO/REM | 1,160.00 |
| 533000 | 16 | 10/9/2009 | Contr Svc-Legal Oper AG | PV | 42338829 | Greenebaum Doll \& McDonald PLL | 226.01 |
| 533000 | 16 | 10/9/2009 | Contr Svc-Legal Oper AG | PV | 42338830 | Greenebaum Doll \& McDonald PLL | 161.95 |
| 535000 | 14 | 10/9/2009 | Contr Svc-Other Oper TD | PV | 42338687 | Cobb, Rodney | 689.00 |
| 535000 | 16 | 10/9/2009 | Contr Svc-Other Oper AG | PV | 42338712 | Stephen Hillenmeyer Landscape | 650.00 |
| 535000 | 16 | 10/9/2009 | Contr Svc-Other Oper AG | PV | 42338714 | Pearce Blackburn Roofing Inc | 291.00 |
| 535000 | 16 | 10/9/2009 | Contr Svc-Other Oper AG | PV | 42338715 | Grott Locksmith Center Inc | 81.00 |
| 535000 | 14 | 10/9/2009 | Contr Svc-Other Oper TD | PV | 42338735 | Grasshopper Lawn Care | 4,745.00 |
| 541400 | 16 | 10/9/2009 | Rents-Equipment Oper AG | PV | 42338767 | Neopost Leasing | 213.57 |
| 550000 | 1 | 10/9/2009 | Trans - Cap Credits | T1 | 34976 | Payroll Disbursement Entries | -20,395.64 |
| 550000 | 1 | 10/9/2009 | Trans - Cap Credits | T3 | 34978 | Actual Burden Journal Entries | 17,041.96 |
| 558000 | 1 | 10/9/2009 | Ins Work Comp Cap Credits | T1 | 34976 | Payroll Disbursement Entries | -6,392.61 |
| 558000 | 1 | 10/9/2009 | Ins Work Comp Cap Credits | T3 | 34978 | Actual Burden Journal Entries | 5,341.49 |
| 570100 | 15 | 10/9/2009 | Uncollectible Accounts | JE | 30900181 | KY CIS POST GL BATCH | -997.52 |
| 575000 | 14 | 10/9/2009 | Misc Oper TD | PV | 42338691 | Wilson Equipment Co | 1,643.00 |
| 575000 | 14 | 10/9/2009 | Misc Oper TD | PV | 42338756 | Grainger - ALL USE REMIT | 1,244.78 |
| 575000 | 14 | 10/9/2009 | Misc Oper TD | PV | 42338758 | Grainger - ALL USE REMIT | 112.56 |
| 575000 | 14 | 10/9/2009 | Misc Oper TD | PV | 42338761 | Grainger - ALL USE REMIT | 463.83 |
| 575000 | 14 | 10/9/2009 | Misc Oper TD | PV | 42338764 | Grainger - ALL USE REMIT | 112.56 |
| 575275 | 16 | 10/9/2009 | Discounts Available | PK | 62057639 | US Pipe \& Foundry Co - REMIT | -41.56 |
| 575275 | 16 | 10/9/2009 | Discounts Available | PK | 62057652 | AY McDonald Mfg Co | -178.22 |
| 575275 | 16 | 10/9/2009 | Discounts Available | PK | 62057661 | Ferguson SAC - ALL USE REMIT | -191.72 |
| 575500 | 14 | 10/9/2009 | Janitorial TD | PV | 42338686 | Cobb, Rodney | 266.00 |
| 575545 | 13 | 10/9/2009 | Lab Supplies WT | PV | 42338689 | Hach Co-PO/Remit | 217.81 |
| 575545 | 13 | 10/9/2009 | Lab Supplies WT | PV | 42338690 | VWR International Inc-PO/REMIT | 127.89 |
| 575625 | 16 | 10/9/2009 | Overnight Shipping AG | PV | 42338727 | United Parcel Service | 30.52 |
| 575625 | 16 | 10/9/2009 | Overnight Shipping AG | PV | 42338729 | United Parcel Service | 42.21 |
| 620000 | 23 | 10/9/2009 | Mat and Sup Maint WT | PV | 42338688 | Ross Valve Manufacturing Co | 1,247.21 |
| 620000 | 21 | 10/9/2009 | Mat and Sup Maint SS | PV | 42338730 | Remote Automation Solutions - | 830.43 |
| 620000 | 24 | 10/9/2009 | Mat and Sup Maint TD | PV | 42338741 | US Pipe \& Foundry Co - REMIT | 2,202.68 |
| 620000 | 23 | 10/9/2009 | Mat and Sup Maint WT | PV | 42338752 | Remote Automation Solutions - | 793.20 |
| 635000 | 26 | 10/9/2009 | Contr Svc-Other Maint AG | PV | 42338769 | D C Elevator Co Inc-PO/REMIT | 230.00 |
| 635000 | 26 | 10/9/2009 | Contr Svc-Other Maint AG | PV | 42338771 | Stephen Hillenmeyer Landscape | 1,135.84 |
| 635000 | 26 | 10/9/2009 | Contr Svc-Other Maint AG | PV | 42338785 | Orkin Exterminating Co - Lexin | 53.46 |
| 675000 | 26 | 10/9/2009 | Misc Maint AG | PV | 42338704 | Canon Financial Svcs Inc-REMI | 4,159.55 |
| 675650 | 24 | 10/9/2009 | Paving/Backfill TD | PV | 42338784 | HG Wilson \& Sons Contractors 1 | 3,352.50 |
| 685320 |  | 10/9/2009 | FUTA | T3 | 34978 | Actual Burden Journal Entries | 16.13 |
| 685325 |  | 10/9/2009 | FICA | T3 | 34978 | Actual Burden Journal Entries | 18,722.17 |
| 685350 |  | 10/9/2009 | SUTA | T3 | 34978 | Actual Burden Journal Entries | 65.38 |
| 715111 |  | 10/9/2009 | M\&J Revenues-Outside | RI | 10134592 | Bluegrass Airport | -1,187.89 |
| 715111 |  | 10/9/2009 | M\&J Revenues-Outside | RI | 10134593 | Metropolitian Ins | -1,861.12 |
| 716121 |  | 10/9/2009 | M\&J Expenses-Outside | T2 | 34977 | Payroll Labor Distribution | 1,932.43 |
| 716121 |  | 10/9/2009 | M\&J Expenses-Outside | T3 | 34978 | Actual Burden Journal Entries | 1,046.58 |
| 401110 |  | 10/12/2009 | Res Sales Billed | JE | 30900375 | KY CIS POST GL BATCH | -108,005.83 |
| 401210 |  | 10/12/2009 | Com Sales Billed | JE | 30900375 | KY CIS POST GL BATCH | -72,572.84 |
| 401510 |  | 10/12/2009 | Pub Auth Billed | JE | 30900375 | KY CIS POST GL BATCH | -28,350.25 |
| 402110 |  | 10/12/2009 | Dom WW Serv Billed | JE | 30900375 | KY CIS POST GL BATCH | -15.91 |
| 402210 |  | 10/12/2009 | Com WW Serv Billed | JE | 30900375 | KY CIS POST GL BATCH | -489.19 |
| 403104 |  | 10/12/2009 | Oth Rev-NSF Check Charge | JE | 30900375 | KY CIS POST GL BATCH | -156.00 |
| 403105 |  | 10/12/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30900375 | KY CIS POST GL BATCH | -2,158.00 |
| 403107 |  | 10/12/2009 | Oth Rev-Reconnection Charges | JE | 30900375 | KY CIS POST GL BATCH | -2,860.00 |
| 504620 | 16 | 10/12/2009 | Employee Physical Exam AG | PV | 42341065 | Capital Family Physicians PSC | 25.00 |
| 504620 | 16 | 10/12/2009 | Employee Physical Exam AG | PV | 42341067 | BaptistWorx Business Office | 100.00 |
| 568010 | 16 | 10/12/2009 | Water Res Conservation | PV | 42341059 | Rupp Arena Sports \& Entertainm | 8,583.33 |
| 568010 | 16 | 10/12/2009 | Water Res Conservation | PV | 42341062 | Lamar Companies The -REMIT | 6,510.00 |
| 570100 | 15 | 10/12/2009 | Uncollectible Accounts | JE | 30900375 | KY CIS POST GL BATCH | -328.97 |
| 575220 | 16 | 10/12/2009 | Community Relations | PV | 42341047 | Identity Links Inc | 922.96 |
| 575275 | 16 | 10/12/2009 | Discounts Available | PK | 62057667 | US Pipe \& Foundry Co - REMIT | -17.31 |
| 401110 |  | 10/13/2009 | Res Sales Billed | JE | 30900436 | KY CIS POST GL BATCH | -168,136.78 |
| 401210 |  | 10/13/2009 | Com Sales Billed | JE | 30900436 | KY CIS POST GL BATCH | -54,340.50 |
| 401510 |  | 10/13/2009 | Pub Auth Billed | JE | 30900436 | KY CIS POST GL BATCH | -568.45 |
| 402110 |  | 10/13/2009 | Dom WW Serv Billed | JE | 30900436 | KY CIS POST GL BATCH | -26.51 |
| 403104 |  | 10/13/2009 | Oth Rev-NSF Check Charge | JE | 30900436 | KY CIS POST GL BATCH | 12.00 |
| 403105 |  | 10/13/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30900436 | KY CIS POST GL BATCH | -2,444.00 |
| 403107 |  | 10/13/2009 | Oth Rev-Reconnection Charges | JE | 30900436 | KY CIS POST GL BATCH | -2,730.00 |
| 501200 | 16 | 10/13/2009 | Labor Oper AG | RI | 10134681 | Travelers | -1,173.06 |
| 515100 | 14 | 10/13/2009 | Purch Power TD | EE | 3938896 | OWEN ELECTRIC COOP INC | 27.46 |
| 515100 | 13 | 10/13/2009 | Purch Power WT | EE | 3938898 | OWEN ELECTRIC COOP INC | 5,982.08 |
| 515100 | 13 | 10/13/2009 | Purch Power WT | EE | 3938900 | OWEN ELECTRIC COOP INC | 17.94 |
| 515100 | 14 | 10/13/2009 | Purch Power TD | EE | 3939677 | KENTUCKY UTILITIES COMPANY | 23.96 |
| 515100 | 14 | 10/13/2009 | Purch Power TD | EE | 3939678 | KENTUCKY UTILITIES COMPANY | 143.66 |
| 515100 | 14 | 10/13/2009 | Purch Power TD | EE | 3939681 | KENTUCKY UTILITIES COMPANY | 16.25 |
| 515100 | 14 | 10/13/2009 | Purch Power TD | EE | 3939686 | KENTUCKY UTILITIES COMPANY | 44.09 |
| 515100 | 12 | 10/13/2009 | Purch Power P | EE | 3939687 | KENTUCKY UTILITIES COMPANY | 493.95 |


| ACCOUNT | SUB | GL DATE | DESCRIPTION | DOC TYPE | DOC\# | EXPLANATION | AMOUNT |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 515100 | 14 | 10/13/2009 | Purch Power TD | EE | 3939689 | KENTUCKY UTILITIES COMPANY | 25.63 |
| 535000 | 16 | 10/13/2009 | Contr Svc-Other Oper AG | ST | 30900350 | SABRIX NO TAX CHARGED ACR | 4.86 |
| 568010 | 16 | 10/13/2009 | Water Res Conservation | ST | 30900350 | SABRIX NO TAX CHARGED ACR | 515.00 |
| 570100 | 15 | 10/13/2009 | Uncollectible Accounts | JE | 30900436 | KY CIS POST GL BATCH | -317.69 |
| 575000 | 14 | 10/13/2009 | Misc Oper TD | TC | 30900295 | AT\&T | 47.02 |
| 575220 | 16 | 10/13/2009 | Community Relations | ST | 30900350 | SABRIX NO TAX CHARGED ACR | 55.38 |
| 575275 | 16 | 10/13/2009 | Discounts Available | PK | 62057670 | Mueller Co - ALL USE PO/REMIT | -109.55 |
| 575320 | 14 | 10/13/2009 | Electricity TD | EE | 3939680 | KENTUCKY UTILITIES COMPANY | 151.68 |
| 575545 | 13 | 10/13/2009 | Lab Supplies WT | ST | 30900350 | SABRIX NO TAX CHARGED ACR | 13.06 |
| 575740 | 15 | 10/13/2009 | Telephone CA | TC | 30900332 | AT\&T | 1,106.09 |
| 760600 |  | 10/13/2009 | Non-Op Empl Exp Nondeduct | RI | 10134690 | Rowe, Nick O. | -89.02 |
| 401110 |  | 10/14/2009 | Res Sales Billed | JE | 30900548 | KY CIS POST GL BATCH | -99,689.67 |
| 401210 |  | 10/14/2009 | Com Sales Billed | JE | 30900548 | KY CIS POST GL BATCH | -55,591.28 |
| 401310 |  | 10/14/2009 | Ind Sales Billed | JE | 30900548 | KY CIS POST GL BATCH | -4,573.33 |
| 401510 |  | 10/14/2009 | Pub Auth Billed | JE | 30900548 | KY CIS POST GL BATCH | -9,985.54 |
| 401710 |  | 10/14/2009 | Misc Sales Billed | JE | 30900548 | KY CIS POST GL BATCH | -122.25 |
| 403104 |  | 10/14/2009 | Oth Rev-NSF Check Charge | JE | 30900548 | KY CIS POST GL BATCH | -72.00 |
| 403105 |  | 10/14/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30900548 | KY CIS POST GL BATCH | -2,444.00 |
| 403107 |  | 10/14/2009 | Oth Rev-Reconnection Charges | JE | 30900548 | KY CIS POST GL BATCH | -3,536.00 |
| 515100 | 12 | 10/14/2009 | Purch Power P | EE | 3940800 | CLARK ENERGY COOP | 689.29 |
| 515100 | 13 | 10/14/2009 | Purch Power WT | EE | 3940886 | KENTUCKY UTILITIES COMPANY | 4,222.93 |
| 515100 | 14 | 10/14/2009 | Purch Power TD | EE | 3940900 | KENTUCKY UTILITIES COMPANY | 20.03 |
| 570100 | 15 | 10/14/2009 | Uncollectible Accounts | JE | 30900548 | KY CIS POST GL BATCH | -69.95 |
| 575320 | 14 | 10/14/2009 | Electricity TD | EE | 3940884 | KENTUCKY UTILITIES COMPANY | 12.22 |
| 575320 | 13 | 10/14/2009 | Electricity WT | EE | 3940895 | KENTUCKY UTILITIES COMPANY | 13.39 |
| 575320 | 14 | 10/14/2009 | Electricity TD | EE | 3940902 | KENTUCKY UTILITIES COMPANY | 13.03 |
| 401110 |  | 10/15/2009 | Res Sales Billed | JE | 30900645 | KY CIS POST GL BATCH | -110,765.76 |
| 401210 |  | 10/15/2009 | Com Sales Billed | JE | 30900645 | KY CIS POST GL BATCH | -49,545.93 |
| 401310 |  | 10/15/2009 | Ind Sales Billed | JE | 30900645 | KY CIS POST GL BATCH | -1,042.39 |
| 401510 |  | 10/15/2009 | Pub Auth Billed | JE | 30900645 | KY CIS POST GL BATCH | -7,551.01 |
| 402110 |  | 10/15/2009 | Dom WW Serv Billed | JE | 30900645 | KY CIS POST GL BATCH | -9.79 |
| 403104 |  | 10/15/2009 | Oth Rev-NSF Check Charge | JE | 30900645 | KY CIS POST GL BATCH | -108.00 |
| 403105 |  | 10/15/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30900645 | KY CIS POST GL BATCH | -3,302.00 |
| 403107 |  | 10/15/2009 | Oth Rev-Reconnection Charges | JE | 30900645 | KY CIS POST GL BATCH | -4,446.00 |
| 403199 |  | 10/15/2009 | Oth Rev-Other Water Rev | PS | 42343874 | Kentucky Department of Revenue | -986.55 |
| 515100 | 14 | 10/15/2009 | Purch Power TD | EE | 3942654 | KENTUCKY UTILITIES COMPANY | 226.10 |
| 515100 | 13 | 10/15/2009 | Purch Power WT | EE | 3942662 | KENTUCKY UTILITIES COMPANY | 46.98 |
| 515100 | 14 | 10/15/2009 | Purch Power TD | EE | 3942675 | KENTUCKY UTILITIES COMPANY | 12.56 |
| 515100 | 14 | 10/15/2009 | Purch Power TD | EE | 3942687 | KENTUCKY UTILITIES COMPANY | 11.61 |
| 515100 | 14 | 10/15/2009 | Purch Power TD | EE | 3942697 | KENTUCKY UTILITIES COMPANY | 11.84 |
| 515100 | 14 | 10/15/2009 | Purch Power TD | EE | 3942702 | KENTUCKY UTILITIES COMPANY | 71.41 |
| 515100 | 13 | 10/15/2009 | Purch Power WT | EE | 3942705 | KENTUCKY UTILITIES COMPANY | 2,384.52 |
| 515100 | 14 | 10/15/2009 | Purch Power TD | EE | 3942716 | KENTUCKY UTILITIES COMPANY | 29.30 |
| 515100 | 14 | 10/15/2009 | Purch Power TD | EE | 3942789 | KENTUCKY UTILITIES COMPANY | 26.70 |
| 515100 | 12 | 10/15/2009 | Purch Power P | EE | 3942799 | KENTUCKY UTILITIES COMPANY | 27.24 |
| 515100 | 13 | 10/15/2009 | Purch Power WT | PS | 42343873 | Kentucky Department of Revenue | 2,335.82 |
| 515100 | 12 | 10/15/2009 | Purch Power P | PS | 42343874 | Kentucky Department of Revenue | 934.33 |
| 515100 | 13 | 10/15/2009 | Purch Power WT | PS | 42343874 | Kentucky Department of Revenue | 3,737.33 |
| 520100 | 16 | 10/15/2009 | M \& S Oper AG | CC | 6435 | W W GRAINGER | 202.76 |
| 520100 | 13 | 10/15/2009 | M \& S Oper WT | CC | 6435 | LEXINGTON QUARRY COMPANY | 576.38 |
| 520100 | 14 | 10/15/2009 | M \& S Oper TD | CC | 6435 | LOWES | 1,161.37 |
| 550000 | 16 | 10/15/2009 | Trans Oper AG | CC | 6435 | SOAPY JOES CAR WASH | 71.29 |
| 570100 | 15 | 10/15/2009 | Uncollectible Accounts | JE | 30900645 | KY CIS POST GL BATCH | 34.89 |
| 575000 | 16 | 10/15/2009 | Misc Oper AG | CC | 6435 | FTD ATKINSON'S/JUDY'S | 50.83 |
| 575000 | 14 | 10/15/2009 | Misc Oper TD | CC | 6435 | OWEN COUNTY BLDG SUPPLY | 334.69 |
| 575000 | 13 | 10/15/2009 | Misc Oper WT | CC | 6435 | SSC LEXINGTON BRANCH | 932.44 |
| 575002 | 16 | 10/15/2009 | Misc General Office | CC | 6435 | DOUGLAS TIRE SERVICE LLC | 1,440.69 |
| 575220 | 16 | 10/15/2009 | Community Relations | CC | 6442 | KROGER | 46.24 |
| 575275 | 16 | 10/15/2009 | Discounts Available | PK | 62057686 | US Pipe \& Foundry Co - REMIT | -898.20 |
| 575275 | 16 | 10/15/2009 | Discounts Available | PK | 62057688 | JCM Industries Inc - REMIT | -17.30 |
| 575280 | 16 | 10/15/2009 | Dues/Membership Deduct | CC | 6435 | AMER SOC CIVIL ENGINEERS | 225.00 |
| 575340 | 16 | 10/15/2009 | Employee Expenses AG | CC | 6435 | HILTON GARDEN INN | 273.21 |
| 575342 | 16 | 10/15/2009 | Empl Exp Conf/Registration AG | CC | 6435 | CUMBERLAND FALLS SRP | -662.74 |
| 575350 | 16 | 10/15/2009 | Meals Deduct | CC | 6435 | MCDONALD'S F | 172.29 |
| 575350 | 16 | 10/15/2009 | Meals Deduct | CC | 6442 | PANERA BREAD | 83.43 |
| 575350 | 16 | 10/15/2009 | Meals Deduct | RI | 10134823 | Young, Richard A. | -41.88 |
| 575480 | 14 | 10/15/2009 | Heat - Oil/Gas TD | EE | 3943718 | CARROLLTON UTILITIES | 17.77 |
| 575545 | 13 | 10/15/2009 | Lab Supplies WT | CC | 6435 | HACH COMPANY | 521.32 |
| 575620 | 15 | 10/15/2009 | Office \& Admin Supplies CA | CC |  | USPS | 4.40 |
| 575625 | 16 | 10/15/2009 | Overnight Shipping AG | CC | 6442 | UPS 00009XY | 55.12 |
| 575740 | 15 | 10/15/2009 | Telephone CA | TC | 30900468 | AT\&T | 1,697.04 |
| 575740 | 14 | 10/15/2009 | Telephone TD | TC | 30900511 | Cincinnati Bell | 18.75 |
| 575820 | 14 | 10/15/2009 | Uniforms TD | CC | 6435 | UFIRST LAUNDRY SVCS | 184.39 |
| 575998 | 16 | 10/15/2009 | PCard Undistributed | CC | 6435 | ORKIN, INC | 187.69 |
| 620000 | 23 | 10/15/2009 | Mat and Sup Maint WT | CC | 6435 | FERGUSON ENTERPRISES | 70.17 |
| 620000 | 21 | 10/15/2009 | Mat and Sup Maint SS | CC | 6435 | W W GRAINGER | 101.50 |
| 620000 | 24 | 10/15/2009 | Mat and Sup Maint TD | CC | 6435 | TYCO VALVES\&CONTROLS L | 696.41 |
| 620000 | 24 | 10/15/2009 | Mat and Sup Maint TD | IR | 562552 | Inventory Return | -23.77 |
| 620000 | 24 | 10/15/2009 | Mat and Sup Maint TD | IR | 562559 | Inventory Return | -27.40 |
| 620000 | 24 | 10/15/2009 | Mat and Sup Maint TD | IR | 562563 | Inventory Return | -80.76 |
| 620000 | 24 | 10/15/2009 | Mat and Sup Maint TD | IR | 562566 | Inventory Return | -36.50 |
| 620000 | 24 | 10/15/2009 | Mat and Sup Maint TD | IR | 562569 | Inventory Return | -22.03 |
| 620000 | 24 | 10/15/2009 | Mat and Sup Maint TD | IR | 562574 | Inventory Return | -25.35 |
| 620000 | 24 | 10/15/2009 | Mat and Sup Maint TD | IR | 562577 | Inventory Return | -128.75 |


| ACCOUNT | SUB | GL DATE | DESCRIPTION | DOC TYPE | DOC\# | EXPLANATION | AMOUNT |
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| 620000 | 24 | 10/15/2009 | Mat and Sup Maint TD | IR | 562586 | Inventory Return | -878.23 |
| 620000 | 24 | 10/15/2009 | Mat and Sup Maint TD | OV | 10280194 | Powerseal Pipeline Products Co | 1,365.34 |
| 635000 | 26 | 10/15/2009 | Contr Svc-Other Maint AG | CC | 6435 | UFIRST LAUNDRY SVCS | 82.04 |
| 675000 | 23 | 10/15/2009 | Misc Maint WT | CC | 6435 | BAVCO | 495.63 |
| 716121 |  | 10/15/2009 | M\&J Expenses-Outside | II | 562551 | Inventory Issue-Stk E \& D | 23.77 |
| 716121 |  | 10/15/2009 | M\&J Expenses-Outside | II | 562557 | Inventory Issue-Stk E \& D | 27.40 |
| 716121 |  | 10/15/2009 | M\&J Expenses-Outside | II | 562561 | Inventory Issue-Stk E \& D | 80.77 |
| 716121 |  | 10/15/2009 | M\&J Expenses-Outside | 11 | 562565 | Inventory Issue-Stk E \& D | 36.50 |
| 716121 |  | 10/15/2009 | M\&J Expenses-Outside | II | 562567 | Inventory Issue-Stk E \& D | 22.03 |
| 716121 |  | 10/15/2009 | M\&J Expenses-Outside | II | 562570 | Inventory Issue-Stk E \& D | 25.35 |
| 716121 |  | 10/15/2009 | M\&J Expenses-Outside | II | 562576 | Inventory Issue-Stk E \& D | 128.76 |
| 716121 |  | 10/15/2009 | M\&J Expenses-Outside | II | 562578 | Inventory Issue-Stk E \& D | 65.76 |
| 716121 |  | 10/15/2009 | M\&J Expenses-Outside | II | 562580 | Inventory Issue-Stk E \& D | 18.79 |
| 716121 |  | 10/15/2009 | M\&J Expenses-Outside | II | 562582 | Inventory Issue-Stk E \& D | 6.60 |
| 716121 |  | 10/15/2009 | M\&J Expenses-Outside | 11 | 562584 | Inventory Issue-Stk E \& D | 878.23 |
| 760100 |  | 10/15/2009 | Donations Deduct | PS | 42343173 | Urban League of Lexington-PO/R | 1,000.00 |
| 760200 |  | 10/15/2009 | Other Income Deductions | PS | 42343167 | Bluegrass Tomorrow-PO/REMIT | 750.00 |
| 401110 |  | 10/16/2009 | Res Sales Billed | JE | 30900708 | KY CIS POST GL BATCH | -101,087.26 |
| 401210 |  | 10/16/2009 | Com Sales Billed | JE | 30900708 | KY CIS POST GL BATCH | -41,398.95 |
| 401510 |  | 10/16/2009 | Pub Auth Billed | JE | 30900708 | KY CIS POST GL BATCH | -3,635.19 |
| 401710 |  | 10/16/2009 | Misc Sales Billed | JE | 30900708 | KY CIS POST GL BATCH | -429.56 |
| 403104 |  | 10/16/2009 | Oth Rev-NSF Check Charge | JE | 30900708 | KY CIS POST GL BATCH | -72.00 |
| 403105 |  | 10/16/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30900708 | KY CIS POST GL BATCH | -1,950.00 |
| 403107 |  | 10/16/2009 | Oth Rev-Reconnection Charges | JE | 30900708 | KY CIS POST GL BATCH | -3,276.00 |
| 403198 |  | 10/16/2009 | Oth Rev-Misc Service Rev | RI | 10135237 | Kentucky American Northern | -20.00 |
| 518000 | 13 | 10/16/2009 | Chemicals WT | PI | 46982 | Physical Inventory | 3,994.02 |
| 518000 | 13 | 10/16/2009 | Chemicals WT | PI | 46983 | Physical Inventory | 94.36 |
| 535000 | 15 | 10/16/2009 | Contr Svc-Other Oper CA | PV | 42344125 | Accenture, LLP-REMIT | 4,188.60 |
| 535001 | 14 | 10/16/2009 | Contr Svc-Temp Empl Oper TD | PV | 42344296 | Volt Services Group | 443.55 |
| 535001 | 13 | 10/16/2009 | Contr Svc-Temp Empl Oper WT | PV | 42344296 | Volt Services Group | 560.70 |
| 536000 | 13 | 10/16/2009 | Contr Svc-Lab Testing Oper WT | PV | 42344293 | Fouser Environmental Services | 90.00 |
| 536000 | 13 | 10/16/2009 | Contr Svc-Lab Testing Oper WT | PV | 42344294 | Fouser Environmental Services | 501.00 |
| 570100 | 15 | 10/16/2009 | Uncollectible Accounts | JE | 30900708 | KY CIS POST GL BATCH | 48.88 |
| 575275 | 16 | 10/16/2009 | Discounts Available | PK | 62057695 | US Pipe \& Foundry Co - REMIT | -349.70 |
| 575275 | 16 | 10/16/2009 | Discounts Available | PK | 62057700 | JCM Industries Inc - REMIT | -7.65 |
| 575275 | 16 | 10/16/2009 | Discounts Available | PK | 62057707 | Ferguson SAC - ALL USE REMIT | -90.06 |
| 575545 | 13 | 10/16/2009 | Lab Supplies WT | PV | 42344295 | LabChem Inc | 178.93 |
| 575625 | 16 | 10/16/2009 | Overnight Shipping AG | PV | 42344287 | United Parcel Service | 301.24 |
| 575711 | 16 | 10/16/2009 | Add'I Security Costs AG | PV | 42344281 | Murray Guard Inc-PO/REMIT | 715.20 |
| 575711 | 16 | 10/16/2009 | Add'I Security Costs AG | PV | 42344283 | Murray Guard Inc-PO/REMIT | 2,668.64 |
| 575711 | 16 | 10/16/2009 | Add'I Security Costs AG | PV | 42344285 | Murray Guard Inc-PO/REMIT | 715.20 |
| 575711 | 16 | 10/16/2009 | Add'I Security Costs AG | PV | 42344286 | Murray Guard Inc-PO/REMIT | 2,506.28 |
| 575711 | 16 | 10/16/2009 | Add'I Security Costs AG | PV | 42344288 | Murray Guard Inc-PO/REMIT | 715.20 |
| 575711 | 16 | 10/16/2009 | Add'I Security Costs AG | PV | 42344289 | Murray Guard Inc-PO/REMIT | 2,668.64 |
| 575711 | 16 | 10/16/2009 | Add'I Security Costs AG | PV | 42344290 | Murray Guard Inc-PO/REMIT | 715.20 |
| 575711 | 16 | 10/16/2009 | Add'I Security Costs AG | PV | 42344291 | Murray Guard Inc-PO/REMIT | 2,668.64 |
| 575740 | 16 | 10/16/2009 | Telephone AG | RI | 10135232 | AT\&T - ALL USE REMIT | -15.45 |
| 620000 | 24 | 10/16/2009 | Mat and Sup Maint TD | IR | 562729 | Inventory Return | -25.39 |
| 620000 | 24 | 10/16/2009 | Mat and Sup Maint TD | IR | 562730 | Inventory Return | -65.76 |
| 620000 | 24 | 10/16/2009 | Mat and Sup Maint TD | IR | 562731 | Inventory Return | -195.37 |
| 620000 | 24 | 10/16/2009 | Mat and Sup Maint TD | IR | 562735 | Inventory Return | -159.78 |
| 620000 | 24 | 10/16/2009 | Mat and Sup Maint TD | IR | 562736 | Inventory Return | -52.23 |
| 620000 | 24 | 10/16/2009 | Mat and Sup Maint TD | IR | 562737 | Inventory Return | -243.75 |
| 620000 | 24 | 10/16/2009 | Mat and Sup Maint TD | IR | 562748 | Inventory Return | -11.93 |
| 715111 |  | 10/16/2009 | M\&J Revenues-Outside | RI | 10135183 | State Farm Insurance | -2,736.61 |
| 715111 |  | 10/16/2009 | M\&J Revenues-Outside | RI | 10135238 | Garney Construction Inc-PO/REM | -118.59 |
| 716121 |  | 10/16/2009 | M\&J Expenses-Outside | 11 | 562733 | Inventory Issue-Stk E \& D | 52.23 |
| 716121 |  | 10/16/2009 | M\&J Expenses-Outside | 11 | 562747 | Inventory Issue-Stk E \& D | 11.93 |
| 575545 | 13 | 10/17/2009 | Lab Supplies WT | ST | 30900680 | SABRIX NO TAX CHARGED ACR | 10.74 |
| 501200 | 2410 | 10/18/2009 | Labor Maint TD Struct \& Imp | T2 | 35159 | Payroll Labor Distribution | 117.26 |
| 501200 | 24 | 10/18/2009 | Labor Maint TD | T2 | 35159 | Payroll Labor Distribution | 118.73 |
| 501200 | 2405 | 10/18/2009 | Labor Maint TD Super/Eng | T2 | 35159 | Payroll Labor Distribution | 398.27 |
| 501200 | 2415 | 10/18/2009 | Labor Maint TD Dist Res | T2 | 35159 | Payroll Labor Distribution | 590.46 |
| 501200 | 15 | 10/18/2009 | Labor Oper CA | T2 | 35159 | Payroll Labor Distribution | 745.49 |
| 501200 | 2305 | 10/18/2009 | Labor Maint WT Super/Eng | T2 | 35159 | Payroll Labor Distribution | 1,526.74 |
| 501200 | 23 | 10/18/2009 | Labor Maint WT | T2 | 35159 | Payroll Labor Distribution | 2,566.23 |
| 501200 | 22 | 10/18/2009 | Labor Maint P | T2 | 35159 | Payroll Labor Distribution | 3,270.24 |
| 501200 | 2435 | 10/18/2009 | Labor Maint TD Meters | T2 | 35159 | Payroll Labor Distribution | 3,906.12 |
| 501200 | 1405 | 10/18/2009 | Labor Oper TD Super/Eng | T2 | 35159 | Payroll Labor Distribution | 5,799.52 |
| 501200 | 1415 | 10/18/2009 | Labor Oper TD Lines | T2 | 35159 | Payroll Labor Distribution | 7,403.62 |
| 501200 | 2440 | 10/18/2009 | Labor Maint TD Hydrants | T2 | 35159 | Payroll Labor Distribution | 7,512.86 |
| 501200 | 2420 | 10/18/2009 | Labor Maint TD Mains | T2 | 35159 | Payroll Labor Distribution | 8,252.36 |
| 501200 | 1520 | 10/18/2009 | Labor Oper CA Cust Serv | T2 | 35159 | Payroll Labor Distribution | 9,824.48 |
| 501200 | 2430 | 10/18/2009 | Labor Maint TD Services | T2 | 35159 | Payroll Labor Distribution | 10,764.92 |
| 501200 | 1510 | 10/18/2009 | Labor Oper CA Mtr Read | T2 | 35159 | Payroll Labor Distribution | 20,530.06 |
| 501200 | 1305 | 10/18/2009 | Labor Oper WT Super/Eng | T2 | 35159 | Payroll Labor Distribution | 22,454.38 |
| 501200 | 1420 | 10/18/2009 | Labor Oper TD Meter | T2 | 35159 | Payroll Labor Distribution | 27,648.18 |
| 501200 | 13 | 10/18/2009 | Labor Oper WT | T2 | 35159 | Payroll Labor Distribution | 29,928.67 |
| 501200 | 16 | 10/18/2009 | Labor Oper AG | T2 | 35159 | Payroll Labor Distribution | 35,174.80 |
| 501200 | 14 | 10/18/2009 | Labor Oper TD | T2 | 35159 | Payroll Labor Distribution | 43,986.58 |
| 501200 | 13 | 10/18/2009 | Labor Oper WT | T3 | 35160 | Actual Burden Journal Entries | 24.00 |
| 501210 | 2440 | 10/18/2009 | Labor NS OT TD Hydrants | T2 | 35159 | Payroll Labor Distribution | 19.20 |
| 501210 | 15 | 10/18/2009 | Labor NS OT CA | T2 | 35159 | Payroll Labor Distribution | 58.65 |
| 501210 | 1405 | 10/18/2009 | Labor NS OT TD Super/Eng | T2 | 35159 | Payroll Labor Distribution | 59.16 |




| ACCOUNT | SUB | GL DATE | DESCRIPTION | DOC TYPE | DOC\# | EXPLANATION | AMOUNT |
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| 635000 | 26 | 10/22/2009 | Contr Svc-Other Maint AG | CC | 6454 | UFIRST LAUNDRY SVCS | 82.04 |
| 675000 | 23 | 10/22/2009 | Misc Maint WT | CC | 6454 | PLUMBERS SUPPLY LEXINGTON | 1,033.43 |
| 401110 |  | 10/23/2009 | Res Sales Billed | JE | 30901318 | KY CIS POST GL BATCH | -101,661.70 |
| 401210 |  | 10/23/2009 | Com Sales Billed | JE | 30901318 | KY CIS POST GL BATCH | -63,817.21 |
| 401310 |  | 10/23/2009 | Ind Sales Billed | JE | 30901318 | KY CIS POST GL BATCH | -1,817.27 |
| 401510 |  | 10/23/2009 | Pub Auth Billed | JE | 30901318 | KY CIS POST GL BATCH | -7,364.70 |
| 403104 |  | 10/23/2009 | Oth Rev-NSF Check Charge | JE | 30901318 | KY CIS POST GL BATCH | -60.00 |
| 403105 |  | 10/23/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30901318 | KY CIS POST GL BATCH | -1,586.00 |
| 403107 |  | 10/23/2009 | Oth Rev-Reconnection Charges | JE | 30901318 | KY CIS POST GL BATCH | -2,132.00 |
| 504100 | 1 | 10/23/2009 | Group Insurance - Cap Credits | T1 | 35158 | Payroll Disbursement Entries | -37,107.56 |
| 504100 | 16 | 10/23/2009 | Group Ins Oper AG | T1 | 35158 | Payroll Disbursement Entries | -9,011.09 |
| 505100 | 1 | 10/23/2009 | PBOP Cap Credits | T1 | 35158 | Payroll Disbursement Entries | -50,256.26 |
| 506100 | 1 | 10/23/2009 | Pension - Cap Credits | T1 | 35158 | Payroll Disbursement Entries | -72,982.37 |
| 550000 | 1 | 10/23/2009 | Trans - Cap Credits | T1 | 35158 | Payroll Disbursement Entries | -20,213.13 |
| 558000 | 1 | 10/23/2009 | Ins Work Comp Cap Credits | T1 | 35158 | Payroll Disbursement Entries | -6,335.47 |
| 570100 | 15 | 10/23/2009 | Uncollectible Accounts | JE | 30901318 | KY CIS POST GL BATCH | -213.59 |
| 575275 | 16 | 10/23/2009 | Discounts Available | PK | 62057753 | Smith Blair Inc 120001 - REMIT | -49.20 |
| 575275 | 16 | 10/23/2009 | Discounts Available | PK | 62057756 | Ferguson SAC - ALL USE REMIT | -160.72 |
| 575320 | 14 | 10/23/2009 | Electricity TD | EE | 3951624 | OWEN ELECTRIC COOP INC | 15.86 |
| 716121 |  | 10/23/2009 | M\&J Expenses-Outside | RI | 10135557 | Kentucky River Authority | -3,581.12 |
| 401110 |  | 10/26/2009 | Res Sales Billed | JE | 30901524 | KY CIS POST GL BATCH | -139,824.42 |
| 401210 |  | 10/26/2009 | Com Sales Billed | JE | 30901524 | KY CIS POST GL BATCH | -21,020.36 |
| 401510 |  | 10/26/2009 | Pub Auth Billed | JE | 30901524 | KY CIS POST GL BATCH | -3,964.82 |
| 402310 |  | 10/26/2009 | Ind WW Serv Billed | RI | 10135601 | Kentucky American Northern | -500.00 |
| 403101 |  | 10/26/2009 | Oth Rev-Forfeited Discounts | JE | 30901524 | KY CIS POST GL BATCH | 34.66 |
| 403104 |  | 10/26/2009 | Oth Rev-NSF Check Charge | JE | 30901524 | KY CIS POST GL BATCH | -72.00 |
| 403105 |  | 10/26/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30901524 | KY CIS POST GL BATCH | -2,496.00 |
| 403107 |  | 10/26/2009 | Oth Rev-Reconnection Charges | JE | 30901524 | KY CIS POST GL BATCH | -2,652.00 |
| 501200 | 14 | 10/26/2009 | Labor Oper TD | JE | 30901372 | BPCORR correction of wo number | 155.91 |
| 504670 | 16 | 10/26/2009 | Training AG | PV | 42350656 | WorkSmart LLC | 593.75 |
| 550001 | 16 | 10/26/2009 | Trans Oper AG Lease Cost | PV | 42350692 | Automotive Rentals Inc ACH/ALL | 173.20 |
| 550002 | 16 | 10/26/2009 | Trans Oper AG Lease Fuel | PV | 42350692 | Automotive Rentals Inc ACH/ALL | 11,481.18 |
| 550003 | 16 | 10/26/2009 | Trans Oper AG Lease Maint | PV | 42350692 | Automotive Rentals Inc ACH/ALL | 11,338.45 |
| 570100 | 15 | 10/26/2009 | Uncollectible Accounts | JE | 30901524 | KY CIS POST GL BATCH | -186.24 |
| 575275 | 16 | 10/26/2009 | Discounts Available | PK | 62057760 | Ferguson SAC - ALL USE REMIT | -1.80 |
| 575320 | 13 | 10/26/2009 | Electricity WT | EE | 3955126 | BLUE GRASS ENERGY | 37.44 |
| 715111 |  | 10/26/2009 | M\&J Revenues-Outside | RI | 10135577 | State Farm Insurance | -353.58 |
| 715111 |  | 10/26/2009 | M\&J Revenues-Outside | RI | 10135578 | Spartan Construction | -357.20 |
| 715111 |  | 10/26/2009 | M\&J Revenues-Outside | RI | 10135581 | Haymaker Development Co | -4,378.26 |
| 715111 |  | 10/26/2009 | M\&J Revenues-Outside | RI | 10135582 | Denham-Blythe Company, Inc - R | -445.27 |
| 715111 |  | 10/26/2009 | M\&J Revenues-Outside | RI | 10135584 | Geico Insurance Company | -988.20 |
| 715111 |  | 10/26/2009 | M\&J Revenues-Outside | RI | 10135586 | Spartan Construction | -168.51 |
| 715111 |  | 10/26/2009 | M\&J Revenues-Outside | RI | 10135588 | Senniger Plumbing | -437.28 |
| 715111 |  | 10/26/2009 | M\&J Revenues-Outside | RI | 10135593 | Spartan Construction | -136.82 |
| 715111 |  | 10/26/2009 | M\&J Revenues-Outside | RI | 10135595 | Woodall Construction Co | -87.86 |
| 715111 |  | 10/26/2009 | M\&J Revenues-Outside | RI | 10135596 | Dauenhauer Plumbing | -334.36 |
| 715111 |  | 10/26/2009 | M\&J Revenues-Outside | RI | 10135597 | Horn Association | -174.17 |
| 715111 |  | 10/26/2009 | M\&J Revenues-Outside | RI | 10135599 | McNevin, Dr Jim | -917.19 |
| 715111 |  | 10/26/2009 | M\&J Revenues-Outside | RI | 10135600 | Spartan Construction | -360.78 |
| 715111 |  | 10/26/2009 | M\&J Revenues-Outside | RI | 10135603 | Woodall Construction Co | -597.11 |
| 715111 |  | 10/26/2009 | M\&J Revenues-Outside | RI | 10135605 | Allen Company Inc | -230.74 |
| 401110 |  | 10/27/2009 | Res Sales Billed | JE | 30901673 | KY CIS POST GL BATCH | -139,205.19 |
| 401210 |  | 10/27/2009 | Com Sales Billed | JE | 30901673 | KY CIS POST GL BATCH | -22,886.60 |
| 401510 |  | 10/27/2009 | Pub Auth Billed | JE | 30901673 | KY CIS POST GL BATCH | -408.92 |
| 402110 |  | 10/27/2009 | Dom WW Serv Billed | JE | 30901673 | KY CIS POST GL BATCH | -13.14 |
| 403104 |  | 10/27/2009 | Oth Rev-NSF Check Charge | JE | 30901673 | KY CIS POST GL BATCH | -84.00 |
| 403105 |  | 10/27/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30901673 | KY CIS POST GL BATCH | -1,430.00 |
| 403107 |  | 10/27/2009 | Oth Rev-Reconnection Charges | JE | 30901673 | KY CIS POST GL BATCH | -1,040.00 |
| 403198 |  | 10/27/2009 | Oth Rev-Misc Service Rev | RI | 10135694 | Shrout, Ronald | -25.00 |
| 501200 | 16 | 10/27/2009 | Labor Oper AG | RI | 10135726 | Moore, David M. | -1,137.06 |
| 501200 | 16 | 10/27/2009 | Labor Oper AG | JE | 30901572 | BP 437678 transfer charges | 116.48 |
| 501200 | 16 | 10/27/2009 | Labor Oper AG | JE | 30901576 | BP 448830 transfer charges | 196.04 |
| 501200 | 16 | 10/27/2009 | Labor Oper AG | JE | 30901579 | BP 448279 transfer charges | 445.60 |
| 515100 | 14 | 10/27/2009 | Purch Power TD | EE | 3950646 | KENTUCKY UTILITIES COMPANY | 122.15 |
| 515100 | 14 | 10/27/2009 | Purch Power TD | EE | 3953730 | KENTUCKY UTILITIES COMPANY | 31.94 |
| 515100 | 14 | 10/27/2009 | Purch Power TD | EE | 3956849 | OWEN ELECTRIC COOP INC | 15.18 |
| 515100 | 14 | 10/27/2009 | Purch Power TD | EE | 3956852 | OWEN ELECTRIC COOP INC | 26.99 |
| 515100 | 14 | 10/27/2009 | Purch Power TD | EE | 3956857 | OWEN ELECTRIC COOP INC | 55.83 |
| 570100 | 15 | 10/27/2009 | Uncollectible Accounts | JE | 30901673 | KY CIS POST GL BATCH | -2.47 |
| 575000 | 16 | 10/27/2009 | Misc Oper AG | RI | 10135724 | Hack John Mark | -192.89 |
| 575000 | 16 | 10/27/2009 | Misc Oper AG | JE | 30901572 | BP 437678 transfer charges | 371.00 |
| 575000 | 16 | 10/27/2009 | Misc Oper AG | JE | 30901579 | BP 448279 transfer charges | 150.00 |
| 575000 | 16 | 10/27/2009 | Misc Oper AG | PV | 42351739 | Neptune Technology - ALL USE R | 67.10 |
| 575100 | 15 | 10/27/2009 | Bank Service Charges CA | PV | 42351436 | CheckFreePay Corporation | 7,977.44 |
| 575242 | 16 | 10/27/2009 | Co Dues Deduct AWWA | PV | 42351509 | American Water Works Assoc-PO( | 7,378.00 |
| 575275 | 16 | 10/27/2009 | Discounts Available | PK | 62057762 | Mueller Co - ALL USE PO/REMIT | -312.20 |
| 575275 | 16 | 10/27/2009 | Discounts Available | PK | 62057764 | Ferguson SAC - ALL USE REMIT | -18.68 |
| 575320 | 14 | 10/27/2009 | Electricity TD | EE | 3955295 | KENTUCKY UTILITIES COMPANY | 12.75 |
| 575320 | 14 | 10/27/2009 | Electricity TD | EE | 3956841 | OWEN ELECTRIC COOP INC | 18.51 |
| 575545 | 13 | 10/27/2009 | Lab Supplies WT | PV | 42351442 | IDEXX Distribution Inc | 301.04 |
| 575545 | 13 | 10/27/2009 | Lab Supplies WT | PV | 42351444 | LabChem Inc | 1,030.22 |
| 575545 | 13 | 10/27/2009 | Lab Supplies WT | PV | 42351447 | IDEXX Distribution Inc | 235.64 |
| 575625 | 16 | 10/27/2009 | Overnight Shipping AG | PV | 42351449 | United Parcel Service | 69.84 |
| 575625 | 16 | 10/27/2009 | Overnight Shipping AG | PV | 42351450 | United Parcel Service | 116.77 |


| ACCOUNT | SUB | GL DATE | DESCRIPTION | DOC TYPE | DOC\# EXPLANATION | AMOUNT |
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| 575740 | 15 | 10/27/2009 | Telephone CA | TC | 30901408 Windstream | 115.29 |
| 575740 | 16 | 10/27/2009 | Telephone AG | TC | 30901414 Idearc Media | 137.85 |
| 620000 | 21 | 10/27/2009 | Mat and Sup Maint SS | OV | 10281372 Neptune Technology Inc - PO ON | 75.68 |
| 620000 | 21 | 10/27/2009 | Mat and Sup Maint SS | OV | 10281376 Neptune Technology Inc - PO ON | 13,356.00 |
| 715111 |  | 10/27/2009 | M\&J Revenues-Outside | RI | 10135682 State Farm Insurance | -2,736.61 |
| 715111 |  | 10/27/2009 | M\&J Revenues-Outside | RI | 10135725 Central KY Sprinkler - PO/REMI | -897.00 |
| 716121 |  | 10/27/2009 | M\&J Expenses-Outside | RI | 10135680 State Farm Insurance | -3,818.93 |
| 760200 |  | 10/27/2009 | Other Income Deductions | PS | 42351136 IAAP Blue Grass Chapter | 500.00 |
| 401110 |  | 10/28/2009 | Res Sales Billed | JE | 30901849 KY CIS POST GL BATCH | -145,581.92 |
| 401210 |  | 10/28/2009 | Com Sales Billed | JE | 30901849 KY CIS POST GL BATCH | -12,699.43 |
| 401450 |  | 10/28/2009 | Priv Fire Billed | JE | 30901849 KY CIS POST GL BATCH | -24.45 |
| 401510 |  | 10/28/2009 | Pub Auth Billed | JE | 30901849 KY CIS POST GL BATCH | -710.88 |
| 402110 |  | 10/28/2009 | Dom WW Serv Billed | JE | 30901849 KY CIS POST GL BATCH | -18.49 |
| 403104 |  | 10/28/2009 | Oth Rev-NSF Check Charge | JE | 30901849 KY CIS POST GL BATCH | -108.00 |
| 403105 |  | 10/28/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30901849 KY CIS POST GL BATCH | -2,314.00 |
| 403107 |  | 10/28/2009 | Oth Rev-Reconnection Charges | JE | 30901849 KY CIS POST GL BATCH | -2,106.00 |
| 501200 | 1305 | 10/28/2009 | Labor Oper WT Super/Eng | JE | 30901678 Labor Accrual October 2009 | 9,060.00 |
| 501200 | 14 | 10/28/2009 | Labor Oper TD | JE | 30901678 Labor Accrual October 2009 | 9,060.00 |
| 501200 | 1405 | 10/28/2009 | Labor Oper TD Super/Eng | JE | 30901678 Labor Accrual October 2009 | 9,060.00 |
| 501200 | 16 | 10/28/2009 | Labor Oper AG | JE | 30901678 Labor Accrual October 2009 | 224,688.00 |
| 504610 | 16 | 10/28/2009 | Employee Awards AG | PV | 42352172 Tharpe Company Inc-REMIT | 84.95 |
| 508101 | 16 | 10/28/2009 | DCP Oper AG | JE | 30901672 DCP Accrual October 2009 | 5,073.32 |
| 515100 | 14 | 10/28/2009 | Purch Power TD | EE | 3957474 OWEN ELECTRIC COOP INC | 37.96 |
| 515100 | 14 | 10/28/2009 | Purch Power TD | EE | 3957486 OWEN ELECTRIC COOP INC | 29.97 |
| 515100 | 14 | 10/28/2009 | Purch Power TD | EE | 3957495 OWEN ELECTRIC COOP INC | 56.23 |
| 515100 | 14 | 10/28/2009 | Purch Power TD | EE | 3959113 KENTUCKY UTILITIES COMPANY | 43.56 |
| 515100 | 14 | 10/28/2009 | Purch Power TD | EE | 3959132 KENTUCKY UTILITIES COMPANY | 12.22 |
| 518000 | 13 | 10/28/2009 | Chemicals WT | PV | 42352098 Univar USA Inc - Chicago REMIT | 120.00 |
| 518000 | 13 | 10/28/2009 | Chemicals WT | PD | 42352126 Univar USA Inc - Chicago REMIT | -180.00 |
| 518001 | AWSI | 10/28/2009 | Chemicals Carbon AWSI | PV | 42352222 American Anglian Environmental | 3,872.29 |
| 518001 | AWSI | 10/28/2009 | Chemicals Carbon AWSI | PV | 42352225 American Anglian Environmental | 3,550.41 |
| 520100 | 14 | 10/28/2009 | M \& S Oper TD | PV | 42352161 Grainger - ALL USE REMIT | 85.48 |
| 533000 | 16 | 10/28/2009 | Contr Svc-Legal Oper AG | PV | 42352200 Stoll Keenon Ogden PLLC-PO/REM | 2,981.80 |
| 535000 | 15 | 10/28/2009 | Contr Svc-Other Oper CA | PV | 42352051 Volt Services Group | 759.80 |
| 535000 | 16 | 10/28/2009 | Contr Svc-Other Oper AG | PV | 42352145 Perfection Services-PO/REMIT | 168.00 |
| 535000 | 13 | 10/28/2009 | Contr Svc-Other Oper WT | PV | 42352226 Stephen Hillenmeyer Landscape | 2,426.00 |
| 535000 | 13 | 10/28/2009 | Contr Svc-Other Oper WT | PV | 42352227 Stephen Hillenmeyer Landscape | 1,706.00 |
| 535000 | 14 | 10/28/2009 | Contr Svc-Other Oper TD | PV | 42352261 Kentucky Underground Protectio | 2,407.05 |
| 535000 | 15 | 10/28/2009 | Contr Svc-Other Oper CA | PV | 42352290 Kings Helper Inc-REMIT | 158.00 |
| 535000 | 15 | 10/28/2009 | Contr Svc-Other Oper CA | PV | 42352299 Leak Eliminators LLC | 3,710.00 |
| 535000 | 15 | 10/28/2009 | Contr Svc-Other Oper CA | PV | 42352302 Scott Gross Co Inc | 999.56 |
| 535001 | 15 | 10/28/2009 | Contr Svc-Temp Empl Oper CA | PV | 42352038 Volt Services Group | 688.47 |
| 535001 | 15 | 10/28/2009 | Contr Svc-Temp Empl Oper CA | PV | 42352045 Volt Services Group | 486.50 |
| 535001 | 15 | 10/28/2009 | Contr Svc-Temp Empl Oper CA | PV | 42352053 Volt Services Group | 486.50 |
| 535001 | 15 | 10/28/2009 | Contr Svc-Temp Empl Oper CA | PV | 42352057 Volt Services Group | 617.14 |
| 535001 | 15 | 10/28/2009 | Contr Svc-Temp Empl Oper CA | PV | 42352059 Volt Services Group | 556.00 |
| 535001 | 15 | 10/28/2009 | Contr Svc-Temp Empl Oper CA | PV | 42352062 Volt Services Group | 2,375.86 |
| 535001 | 15 | 10/28/2009 | Contr Svc-Temp Empl Oper CA | PV | 42352067 Volt Services Group | 1,285.75 |
| 535001 | 15 | 10/28/2009 | Contr Svc-Temp Empl Oper CA | PV | 42352070 Volt Services Group | 1,718.95 |
| 536000 | 13 | 10/28/2009 | Contr Svc-Lab Testing Oper WT | PV | 42352228 Fouser Environmental Services | 80.00 |
| 541000 | 14 | 10/28/2009 | Rents-Real Prop Oper TD | PV | 42352285 R J Corman Railroad Co-REMIT | 200.00 |
| 550000 | 16 | 10/28/2009 | Trans Oper AG | PV | 42352204 Bridgestone Americas Inc | 799.70 |
| 550000 | 16 | 10/28/2009 | Trans Oper AG | PV | 42352207 Bridgestone Americas Inc | 501.02 |
| 550000 | 16 | 10/28/2009 | Trans Oper AG | PS | 42352344 Kentucky State Treasurer-PO/RE | . 42 |
| 550000 | 16 | 10/28/2009 | Trans Oper AG | PS | 42352867 Kentucky State Treasurer-PO/RE | . 42 |
| 570100 | 15 | 10/28/2009 | Uncollectible Accounts | JE | 30901849 KY CIS POST GL BATCH | -64.20 |
| 575000 | 16 | 10/28/2009 | Misc Oper AG | PV | 42352270 Neptune Technology - ALL USE R | 4.87 |
| 575545 | 13 | 10/28/2009 | Lab Supplies WT | ST | 30901604 SABRIX VENDOR TAX COMPARE | 3.58 |
| 575545 | 13 | 10/28/2009 | Lab Supplies WT | ST | 30901606 SABRIX NO TAX CHARGED ACR | 61.82 |
| 575545 | 13 | 10/28/2009 | Lab Supplies WT | PV | 42352166 Scott Gross Co Inc | 15.65 |
| 575780 | 11 | 10/28/2009 | Trash Removal SS | PV | 42352247 Allied Waste Services \#993 | 414.93 |
| 575780 | 14 | 10/28/2009 | Trash Removal TD | PV | 42352247 Allied Waste Services \#993 | 414.94 |
| 620000 | 24 | 10/28/2009 | Mat and Sup Maint TD | OV | 10281535 Hydraflo Inc -PO/REMIT | 2,720.81 |
| 620000 | 24 | 10/28/2009 | Mat and Sup Maint TD | JE | 30901659 BP non stock material to MJ | -47.95 |
| 620000 | 24 | 10/28/2009 | Mat and Sup Maint TD | JE | 30901660 BP non stock material to MJ | -270.34 |
| 620000 | 24 | 10/28/2009 | Mat and Sup Maint TD | JE | 30901661 BP non stock material to MJ | -121.20 |
| 620000 | 24 | 10/28/2009 | Mat and Sup Maint TD | JE | 30901662 BP non stock material to MJ | -43.64 |
| 620000 | 24 | 10/28/2009 | Mat and Sup Maint TD | JE | 30901663 BP non stock material to MJ | -52.08 |
| 620000 | 24 | 10/28/2009 | Mat and Sup Maint TD | JE | 30901665 BP non stock materials to MJ | -7.90 |
| 620000 | 24 | 10/28/2009 | Mat and Sup Maint TD | JE | 30901666 BP non stock materials to MJ | -383.10 |
| 620000 | 24 | 10/28/2009 | Mat and Sup Maint TD | JE | 30901667 BP non stock materials to MJ | -86.30 |
| 620000 | 24 | 10/28/2009 | Mat and Sup Maint TD | JE | 30901668 BP non stock materials to MJ | -149.60 |
| 620000 | 24 | 10/28/2009 | Mat and Sup Maint TD | JE | 30901669 BP non stock materials to MJ | -8.28 |
| 620000 | 24 | 10/28/2009 | Mat and Sup Maint TD | JE | 30901670 BP non stock materials to MJ | -186.70 |
| 620000 | 21 | 10/28/2009 | Mat and Sup Maint SS | PV | 42352270 Neptune Technology - ALL USE R | . 15 |
| 620000 | 24 | 10/28/2009 | Mat and Sup Maint TD | PV | 42352294 Lexington Quarry Co | 524.78 |
| 635000 | 26 | 10/28/2009 | Contr Svc-Other Maint AG | PV | 42352188 D C Elevator Co Inc-PO/REMIT | 186.25 |
| 675000 | 24 | 10/28/2009 | Misc Maint TD | PV | 42352239 Signal Boards Inc - REMIT | 47.70 |
| 675000 | 24 | 10/28/2009 | Misc Maint TD | PV | 42352254 Saf ti co Inc-PO/REMIT | 78.44 |
| 675000 | 24 | 10/28/2009 | Misc Maint TD | PV | 42352259 Fluid Conservation System Inc | 183.60 |
| 675000 | 24 | 10/28/2009 | Misc Maint TD | PV | 42352286 Saf ti co Inc - PO/REMIT | 68.90 |
| 715111 |  | 10/28/2009 | M\&J Revenues-Outside | RI | 10135800 Ball Homes | -358.87 |
| 715111 |  | 10/28/2009 | M\&J Revenues-Outside | RI | 10135801 Woodall Const Co | -39.44 |
| 716121 |  | 10/28/2009 | M\&J Expenses-Outside | JE | 30901659 BP non stock material to MJ | 47.95 |




| ACCOUNT | SUB | GL DATE | DESCRIPTION | DOC TYPE | DOC\# | EXPLANATION | AMOUNT |
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| 534655 | 16 | 10/31/2009 | Lab-Shrd Bus Srv Fees | JB | 30902941 | CP | 14,404.06 |
| 534665 | 16 | 10/31/2009 | BSC-Shrd Bus Srv Fees | JB | 30902941 |  | 3,978.40 |
| 534701 | 16 | 10/31/2009 | Mmgt Fees-Regulated Operations | JB | 30902941 |  | 77,339.31 |
| 535000 | 14 | 10/31/2009 | Contr Svc-Other Oper TD | JE |  | Accrue for Inv Rec'd not appro | -5,041.05 |
| 535000 | 13 | 10/31/2009 | Contr Svc-Other Oper WT | JE |  | Acc for goods/serv not yet inv | -7,850.00 |
| 535000 | 16 | 10/31/2009 | Contr Svc-Other Oper AG | JE |  | Acc for goods/serv not yet inv | -560.00 |
| 535000 | 14 | 10/31/2009 | Contr Svc-Other Oper TD | JE |  | Acc for goods/serv not yet inv | 2,067.00 |
| 535000 | 13 | 10/31/2009 | Contr Svc-Other Oper WT | CC | 6475 | SPRINT RETAIL | 354.96 |
| 535000 | 16 | 10/31/2009 | Contr Svc-Other Oper AG | CC | 6475 | SPRINT RETAIL | 395.05 |
| 535000 | 13 | 10/31/2009 | Contr Svc-Other Oper WT | JR | 30059979 | Hach Co. - Maintenance | 4,684.42 |
| 535000 | 14 | 10/31/2009 | Contr Svc-Other Oper TD | JE | 30902287 | Reclass P-card - Oct2009 | 65.79 |
| 535000 | 16 | 10/31/2009 | Contr Svc-Other Oper AG | JB | 30902941 |  | 164.87 |
| 535001 | 15 | 10/31/2009 | Contr Svc-Temp Empl Oper CA | JE |  | Accrue for Inv Rec'd not appro | -7,488.93 |
| 535001 | 14 | 10/31/2009 | Contr Svc-Temp Empl Oper TD | JE |  | Accrue for Inv Rec'd not appro | 351.48 |
| 535001 | 13 | 10/31/2009 | Contr Svc-Temp Empl Oper WT | JE |  | Accrue for Inv Rec'd not appro | 2,795.17 |
| 535001 | 15 | 10/31/2009 | Contr Svc-Temp Empl Oper CA | JE |  | Acc for goods/serv not yet inv | -1,221.47 |
| 535001 | 13 | 10/31/2009 | Contr Svc-Temp Empl Oper WT | JE | 30902942 | FASTR - ALLOCATION KY_ALLEXP2 | -2,134.01 |
| 535001 | 14 | 10/31/2009 | Contr Svc-Temp Empl Oper TD | JE | 30902942 | FASTR - ALLOCATION KY_ALLEXP2 | -1,012.63 |
| 536000 | 13 | 10/31/2009 | Contr Svc-Lab Testing Oper WT | JE | 30902942 | FASTR - ALLOCATION KY_ALLEXP2 | -501.00 |
| 541400 | 16 | 10/31/2009 | Rents-Equipment Oper AG | CC | 6475 | SPRINT RETAIL | 1,616.98 |
| 541400 | 16 | 10/31/2009 | Rents-Equipment Oper AG | JR | 30059976 | Dyntek Services | 161.47 |
| 550000 | 16 | 10/31/2009 | Trans Oper AG | JE | 130 | KY UNMAP PCARD ACCRUAL 1009 | 124.76 |
| 550000 | 16 | 10/31/2009 | Trans Oper AG | CC | 6475 | SPRINT RETAIL | 12.71 |
| 550000 | 16 | 10/31/2009 | Trans Oper AG | ST | 30902053 | SABRIX VENDOR TAX COMPARE | 8.88 |
| 550000 | 16 | 10/31/2009 | Trans Oper AG | ST | 30902058 | SABRIX NO TAX CHARGED ACR | 35.17 |
| 550002 | 16 | 10/31/2009 | Trans Oper AG Lease Fuel | JE |  | Accr ARI \& Addl 11 days Oct | 1,727.47 |
| 550003 | 16 | 10/31/2009 | Trans Oper AG Lease Maint | JE |  | Accr ARI \& Addl 11 days Oct | -13,427.25 |
| 556000 | 16 | 10/31/2009 | Ins Vehicle Oper AG | JR |  | Amortize Prepaid Insurance | 3,199.49 |
| 557000 | 16 | 10/31/2009 | Ins Gen Liab Oper AG | JR |  | Amortize Prepaid Insurance | 29,383.94 |
| 558000 | 16 | 10/31/2009 | Ins Work Comp AG | JR |  | Amortize Prepaid Insurance | 14,698.74 |
| 559000 | 16 | 10/31/2009 | Ins Other Oper AG | JR |  | Amortize Prepaid Insurance | 13,348.30 |
| 566100 | 16 | 10/31/2009 | Reg Comm Amort Rate Case | JR | 30059957 | Deferred Rate Case Expense | 12,443.21 |
| 566100 | 16 | 10/31/2009 | Reg Comm Amort Rate Case | JR | 30059987 | Deferred Rate Case Expense | 11,566.58 |
| 566200 | 16 | 10/31/2009 | Reg Comm Amort Depr Study | JR | 30059961 | DDA - Cost of Service Study | 798.49 |
| 566200 | 16 | 10/31/2009 | Reg Comm Amort Depr Study | JR | 30059971 | DDA - Depreciation Study | 500.09 |
| 568010 | 16 | 10/31/2009 | Water Res Conservation | JE |  | Acc for goods/serv not yet inv | -8,333.33 |
| 570100 | 15 | 10/31/2009 | Uncollectible Accounts | JE |  | Adj Allow for Dbttl Accts A/R | 34,145.27 |
| 570100 | 16 | 10/31/2009 | Uncollectible Accts-MI's | JE | 260 | Adj Allow for Dbtfl Accts Bal | 5,232.96 |
| 575000 | 12 | 10/31/2009 | Misc Oper P | JE | 130 | KY UNMAP PCARD ACCRUAL 1009 | 273.44 |
| 575000 | 14 | 10/31/2009 | Misc Oper TD | JE | 130 | KY UNMAP PCARD ACCRUAL 1009 | 1,549.98 |
| 575000 | 15 | 10/31/2009 | Misc Oper CA | JE | 130 | KY UNMAP PCARD ACCRUAL 1009 | 2,058.86 |
| 575000 | 13 | 10/31/2009 | Misc Oper WT | JE |  | KY UNMAP PCARD ACCRUAL 1009 | 3,744.64 |
| 575000 | 16 | 10/31/2009 | Misc Oper AG | JE |  | Accrue for Inv Rec'd not appro | 6,076.15 |
| 575000 | 14 | 10/31/2009 | Misc Oper TD | JE |  | Eastern Div Phone Exp Accr | -12.49 |
| 575000 | 12 | 10/31/2009 | Misc Oper P | CC | 6475 | SPRINT RETAIL | 25.00 |
| 575000 | 14 | 10/31/2009 | Misc Oper TD | CC | 6475 | SPRINT RETAIL | 38.26 |
| 575000 | 16 | 10/31/2009 | Misc Oper AG | CC | 6475 | SPRINT RETAIL | 418.62 |
| 575000 | 13 | 10/31/2009 | Misc Oper WT | CC | 6475 | SPRINT RETAIL | 469.41 |
| 575000 | 16 | 10/31/2009 | Misc Oper AG | ST | 30902045 | SABRIX NO TAX CHARGED ACR | . 87 |
| 575000 | 14 | 10/31/2009 | Misc Oper TD | ST | 30902058 | SABRIX NO TAX CHARGED ACR | 9.98 |
| 575000 | 16 | 10/31/2009 | Misc Oper AG | JE | 30902445 | BP To correct CWIP WorkOrders | 140.87 |
| 575030 | 16 | 10/31/2009 | Advertising | JE | 160 | Accrue for Inv Rec'd not appro | 3,650.00 |
| 575030 | 16 | 10/31/2009 | Advertising | CC | 6484 | PAYPAL INSTITUTEIN | 67.84 |
| 575100 | 16 | 10/31/2009 | Bank Service Charges AG | JE | 105 | LTD PRINC INT PAYMENTS | 17 |
| 575100 | 15 | 10/31/2009 | Bank Service Charges CA | JE | 140 | Mellon Bank Fee Accrual | -1,795.88 |
| 575100 | 15 | 10/31/2009 | Bank Service Charges CA | JE |  | CheckFree Bank Fee Accrual | 73.68 |
| 575200 | 15 | 10/31/2009 | Collection Agencies CA | JE |  | Accrue for Inv Rec'd not appro | 1,509.87 |
| 575200 | 15 | 10/31/2009 | Collection Agencies CA | JE | 31030 | To record GC services | 9,077.58 |
| 575240 | 16 | 10/31/2009 | Co Dues/Membership Deduct | JR | 30059962 | Amortize AWWA Research Fees | 1,517.61 |
| 575242 | 16 | 10/31/2009 | Co Dues Deduct AWWA | JE | 121013 | Reclss Annual AWWA Mem to Prep | -7,378.00 |
| 575242 | 16 | 10/31/2009 | Co Dues Deduct AWWA | JR | 30059969 | AWWA Membership dues | 614.83 |
| 575244 | 16 | 10/31/2009 | Co Dues Deduct NAWC | JR | 30059986 | NAWC Membership Dues | 3,141.70 |
| 575260 | 16 | 10/31/2009 | Credit Line Fees | JR | 30059966 | JPMorgan Credit Line Fees | 34.97 |
| 575261 | AW46 | 10/31/2009 | Credit Line Fees AW46 | JE |  | Rec'd Mthly Trans pd by AWCC | 5,801.97 |
| 575261 | AW46 | 10/31/2009 | Credit Line Fees AW46 | JE |  | ACCRUED CREDIT LINE FEES | 2,267.75 |
| 575261 | AW46 | 10/31/2009 | Credit Line Fees AW46 | JE | 130 | ADD'L ACCD CL FEE MOODY'S | 1,555.02 |
| 575261 | AW46 | 10/31/2009 | Credit Line Fees AW46 | JE |  | REVERSE ADD'L MOODY'S | -2,591.71 |
| 575280 | 16 | 10/31/2009 | Dues/Membership Deduct | JR | 30059978 | Commerce Lexington Member Dues | 416.67 |
| 575280 | 16 | 10/31/2009 | Dues/Membership Deduct | JR | 30059980 | Kentucky League of Cities | 125.00 |
| 575280 | 16 | 10/31/2009 | Dues/Membership Deduct | JR | 30059981 | Calence LLC | 341.51 |
| 575320 | 16 | 10/31/2009 | Electricity AG | JE | 155 | Eastern Div \& PA Power Accrual | -1,556.10 |
| 575320 | 14 | 10/31/2009 | Electricity TD | JE |  | Eastern Div \& PA Power Accrual | -358.85 |
| 575320 | 13 | 10/31/2009 | Electricity WT | JE |  | Eastern Div \& PA Power Accrual | -298.14 |
| 575320 | 13 | 10/31/2009 | Electricity WT | JE | 156 | Accrue Discr Power 10.09 | 63.26 |
| 575340 | 16 | 10/31/2009 | Employee Expenses AG | JE |  | KY UNMAP PCARD ACCRUAL 1009 | -2,400.43 |
| 575340 | 16 | 10/31/2009 | Employee Expenses AG | CC | 6475 | SPRINT RETAIL | 117.68 |
| 575340 | 16 | 10/31/2009 | Employee Expenses AG | CC | 6484 | PAYPAL INSTITUTEIN | 165.94 |
| 575340 | 16 | 10/31/2009 | Employee Expenses AG | JE | 30902287 | Reclass P-card - Oct2009 | 121.90 |
| 575342 | 16 | 10/31/2009 | Empl Exp Conf/Registration AG | CC | 6475 | SPRINT RETAIL | 99.00 |
| 575350 | 16 | 10/31/2009 | Meals Deduct | JE |  | KY UNMAP PCARD ACCRUAL 1009 | 11.35 |
| 575350 | 16 | 10/31/2009 | Meals Deduct | CC | 6475 | SPRINT RETAIL | 225.35 |
| 575350 | 16 | 10/31/2009 | Meals Deduct | CC | 6484 | PAYPAL INSTITUTEIN | 124.09 |
| 575350 | 16 | 10/31/2009 | Meals Deduct | JA | 30902922 | FASTR - ALLOC GAMTALLCO | -588.51 |
| 575351 | 16 | 10/31/2009 | Meals Non Deduct | JA | 30902922 | FASTR - ALLOC GAMTALLCO | 588.51 |




| ACCOUNT | SUB | GL DATE | DESCRIPTION | DOC TYPE | DOC\# ${ }^{\text {E }}$ - EXPLANATION | AMOUNT |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 575620 | 14 | 11/1/2009 | Office \& Admin Supplies TD | JE | 130 KY UNMAP PCARD ACCRUAL 1009 | -304.31 |
| 575740 | 15 | 11/1/2009 | Telephone CA | JE | 149 Record Add Tele Accrual | -377.55 |
| 575740 | 16 | 11/1/2009 | Telephone AG | JE | 149 Record Add Tele Accrual | -111.66 |
| 575740 | 15 | 11/1/2009 | Telephone CA | JE | 410 Eastern Div Phone Exp Accr | -1,830.07 |
| 575740 | 16 | 11/1/2009 | Telephone AG | JE | 410 Eastern Div Phone Exp Accr | -181.13 |
| 575741 | 16 | 11/1/2009 | Cell Phone AG | JE | 130 KY UNMAP PCARD ACCRUAL 1009 | -10.32 |
| 575741 | 13 | 11/1/2009 | Cell Phone WT | JE | 151 Record Add Telecom Acc Nextel | 79.50 |
| 575741 | 16 | 11/1/2009 | Cell Phone AG | JE | 151 Record Add Telecom Acc Nextel | 81.53 |
| 575741 | 16 | 11/1/2009 | Cell Phone AG | JE | 410 Eastern Div Phone Exp Accr | -400.35 |
| 575741 | 13 | 11/1/2009 | Cell Phone WT | JE | 410 Eastern Div Phone Exp Accr | -180.05 |
| 575741 | 14 | 11/1/2009 | Cell Phone TD | JE | 410 Eastern Div Phone Exp Accr | -90.50 |
| 575741 | 14 | 11/1/2009 | Cell Phone TD | JE | 18100926 Accrue Credits on Telecom Accr | -310.69 |
| 620000 | 23 | 11/1/2009 | Mat and Sup Maint WT | JE | 160 Accrue for Inv Rec'd not appro | -1,644.33 |
| 620000 | 23 | 11/1/2009 | Mat and Sup Maint WT | JE | 600 Acc for goods/serv not yet inv | -8,761.00 |
| 675000 | 24 | 11/1/2009 | Misc Maint TD | JE | 130 KY UNMAP PCARD ACCRUAL 1009 | -429.30 |
| 675000 | 23 | 11/1/2009 | Misc Maint WT | JE | 160 Accrue for Inv Rec'd not appro | -1,841.03 |
| 675650 | 24 | 11/1/2009 | Paving/Backfill TD | JE | 130 KY UNMAP PCARD ACCRUAL 1009 | -21.03 |
| 675650 | 24 | 11/1/2009 | Paving/Backfill TD | JE | 120910 Mthly Paving \& Sod Accrual | -33,459.00 |
| 685325 |  | 11/1/2009 | FICA | JE | 30902020 FICA Accrual for Oct 2009 | -36,096.47 |
| 690110 |  | 11/1/2009 | FIT-Current | JE | 705 OCT 2009 TAX PROVISION | -1,398,422.00 |
| 690210 |  | 11/1/2009 | SIT-Current | JE | 705 OCT 2009 TAX PROVISION | -541,119.00 |
| 690650 | 2 | 11/1/2009 | Def FIT-Other Liab | JE | 705 OCT 2009 TAX PROVISION | -3,818,254.00 |
| 690750 | 2 | 11/1/2009 | Def SIT-Other Liab | JE | 705 OCT 2009 TAX PROVISION | -414,210.00 |
| 715111 |  | 11/1/2009 | M\&J Revenues-Outside | RR | 10135004 Bluegrass Station Division-Rem | -8,784.17 |
| 715111 |  | 11/1/2009 | M\&J Revenues-Outside | RR | 10135171 Mr Barker | -150.00 |
| 716121 |  | 11/1/2009 | M\&J Expenses-Outside | JE | 120910 Mthly Paving \& Sod Accrual | -4,620.14 |
| 760200 |  | 11/1/2009 | Other Income Deductions | JE | 160 Accrue for Inv Rec'd not appro | -1,500.00 |
| 780100 |  | 11/1/2009 | SIT-Other Inc \& Ded Curr | JE | 705 OCT 2009 TAX PROVISION | 6,280.00 |
| 790100 |  | 11/1/2009 | FIT-Oth Inc \& Ded-curr | JE | 705 OCT 2009 TAX PROVISION | 17,441.00 |
| 860220 | AW02 | 11/1/2009 | Div Decl Com Stk In-AW02 | JE | 121014 Accrue Common Dividends | -2,006,260.48 |
| 401110 |  | 11/2/2009 | Res Sales Billed | JE | 30902397 KY CIS POST GL BATCH | -247,866.72 |
| 401210 |  | 11/2/2009 | Com Sales Billed | JE | 30902397 KY CIS POST GL BATCH | -120,068.99 |
| 401510 |  | 11/2/2009 | Pub Auth Billed | JE | 30902397 KY CIS POST GL BATCH | -7,697.57 |
| 401710 |  | 11/2/2009 | Misc Sales Billed | JE | 30902397 KY CIS POST GL BATCH | 892.22 |
| 402110 |  | 11/2/2009 | Dom WW Serv Billed | JE | 30902397 KY CIS POST GL BATCH | 20.75 |
| 403104 |  | 11/2/2009 | Oth Rev-NSF Check Charge | JE | 30902397 KY CIS POST GL BATCH | -288.00 |
| 403105 |  | 11/2/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30902397 KY CIS POST GL BATCH | -3,120.00 |
| 403107 |  | 11/2/2009 | Oth Rev-Reconnection Charges | JE | 30902397 KY CIS POST GL BATCH | -4,212.00 |
| 511100 | 13 | 11/2/2009 | Waste Disposal Exp WT | EE | 3963822 KENTUCKY UTILITIES COMPANY | 729.38 |
| 511100 | 13 | 11/2/2009 | Waste Disposal Exp WT | EE | 3963828 KENTUCKY UTILITIES COMPANY | 1,027.07 |
| 515100 | 13 | 11/2/2009 | Purch Power WT | EE | 3962295 KENTUCKY UTILITIES COMPANY | 13,435.61 |
| 515100 | 12 | 11/2/2009 | Purch Power P | EE | 3963775 KENTUCKY UTILITIES COMPANY | 73.72 |
| 515100 | 13 | 11/2/2009 | Purch Power WT | EE | 3963785 KENTUCKY UTILITIES COMPANY | 425.87 |
| 515100 | 13 | 11/2/2009 | Purch Power WT | EE | 3963788 KENTUCKY UTILITIES COMPANY | 2,992.35 |
| 515100 | 14 | 11/2/2009 | Purch Power TD | EE | 3963811 KENTUCKY UTILITIES COMPANY | 45.94 |
| 520100 | 14 | 11/2/2009 | M \& S Oper TD | EE | 3963811 KENTUCKY UTILITIES COMPANY | 10.00 |
| 535001 | 14 | 11/2/2009 | Contr Svc-Temp Empl Oper TD | PV | 42357197 Volt Services Group | 117.16 |
| 535001 | 13 | 11/2/2009 | Contr Svc-Temp Empl Oper WT | PV | 42357197 Volt Services Group | 954.04 |
| 535001 | 14 | 11/2/2009 | Contr Svc-Temp Empl Oper TD | PV | 42357198 Volt Services Group | 117.16 |
| 535001 | 13 | 11/2/2009 | Contr Svc-Temp Empl Oper WT | PV | 42357198 Volt Services Group | 937.30 |
| 535001 | 14 | 11/2/2009 | Contr Svc-Temp Empl Oper TD | PV | 42357199 Volt Services Group | 117.16 |
| 535001 | 13 | 11/2/2009 | Contr Svc-Temp Empl Oper WT | PV | 42357199 Volt Services Group | 903.83 |
| 535001 | 14 | 11/2/2009 | Contr Svc-Temp Empl Oper TD | PV | 42357200 Volt Services Group | 66.95 |
| 535001 | 13 | 11/2/2009 | Contr Svc-Temp Empl Oper WT | PV | 42357200 Volt Services Group | 569.08 |
| 570100 | 15 | 11/2/2009 | Uncollectible Accounts | JE | 30902397 KY CIS POST GL BATCH | -309.26 |
| 570100 | 15 | 11/2/2009 | Uncollectible Accounts | JE | 30902398 KY CIS POST GL BATCH | -80.19 |
| 575000 | 16 | 11/2/2009 | Misc Oper AG | PV | 42356793 Siemens Water Technologies PO/ | 10.87 |
| 575320 | 16 | 11/2/2009 | Electricity AG | EE | 3962298 KENTUCKY UTILITIES COMPANY | 3,020.27 |
| 575320 | 13 | 11/2/2009 | Electricity WT | EE | 3963781 KENTUCKY UTILITIES COMPANY | 25.46 |
| 575320 | 14 | 11/2/2009 | Electricity TD | EE | 3963804 KENTUCKY UTILITIES COMPANY | 551.29 |
| 575480 | 14 | 11/2/2009 | Heat - Oil/Gas TD | EE | 3963813 KENTUCKY UTILITIES COMPANY | 62.59 |
| 575480 | 14 | 11/2/2009 | Heat - Oil/Gas TD | EE | 3963818 KENTUCKY UTILITIES COMPANY | 403.28 |
| 575500 | 16 | 11/2/2009 | Janitorial AG | PR | 42357089 Hales Cleaning Service - ACH | 5,633.33 |
| 401110 |  | 11/3/2009 | Res Sales Billed | JE | 30902569 KY CIS POST GL BATCH | -120,430.16 |
| 401210 |  | 11/3/2009 | Com Sales Billed | JE | 30902569 KY CIS POST GL BATCH | -96,576.25 |
| 401510 |  | 11/3/2009 | Pub Auth Billed | JE | 30902569 KY CIS POST GL BATCH | -653.85 |
| 402110 |  | 11/3/2009 | Dom WW Serv Billed | JE | 30902569 KY CIS POST GL BATCH | -38.02 |
| 403104 |  | 11/3/2009 | Oth Rev-NSF Check Charge | JE | 30902569 KY CIS POST GL BATCH | -24.00 |
| 403105 |  | 11/3/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30902569 KY CIS POST GL BATCH | -3,068.00 |
| 403107 |  | 11/3/2009 | Oth Rev-Reconnection Charges | JE | 30902569 KY CIS POST GL BATCH | -3,744.00 |
| 515100 | 12 | 11/3/2009 | Purch Power $P$ | EE | 3963841 KENTUCKY UTILITIES COMPANY | 282.72 |
| 515100 | 12 | 11/3/2009 | Purch Power P | EE | 3963848 KENTUCKY UTILITIES COMPANY | 894.73 |
| 515100 | 12 | 11/3/2009 | Purch Power P | EE | 3963855 KENTUCKY UTILITIES COMPANY | 63.93 |
| 515100 | 12 | 11/3/2009 | Purch Power P | EE | 3963865 KENTUCKY UTILITIES COMPANY | 744.80 |
| 550002 | 16 | 11/3/2009 | Trans Oper AG Lease Fuel | PV | 42358674 Automotive Rentals Inc ACH/ALL | 10,362.11 |
| 550003 | 16 | 11/3/2009 | Trans Oper AG Lease Maint | PV | 42358674 Automotive Rentals Inc ACH/ALL | 6,512.44 |
| 570100 | 15 | 11/3/2009 | Uncollectible Accounts | JE | 30902569 KY CIS POST GL BATCH | -81.65 |
| 575320 | 13 | 11/3/2009 | Electricity WT | EE | 3963833 KENTUCKY UTILITIES COMPANY | 505.44 |
| 575480 | 16 | 11/3/2009 | Heat - Oil/Gas AG | EE | 3963903 COLUMBIA GAS OF KENTUCKY | 158.68 |
| 575480 | 14 | 11/3/2009 | Heat - Oil/Gas TD | EE | 3963916 COLUMBIA GAS OF KENTUCKY | 1,040.09 |
| 575740 | 16 | 11/3/2009 | Telephone AG | TC | 30902312 Berry | 108.16 |
| 760200 |  | 11/3/2009 | Other Income Deductions | PS | 42358940 Bluegrass Tours Inc | 670.00 |
| 401110 |  | 11/4/2009 | Res Sales Billed | JE | 30902929 KY CIS POST GL BATCH | -163,702.92 |
| 401210 |  | 11/4/2009 | Com Sales Billed | JE | 30902929 KY CIS POST GL BATCH | -51,163.39 |



| ACCOUNT | SUB | GL DATE | DESCRIPTION | DOC TYPE | DOC\# ${ }^{\text {E }}$ - EXPLANATION | AMOUNT |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 501200 | 24 | 11/6/2009 | Labor Maint TD | T2 | 35315 Payroll Labor Distribution | 408.04 |
| 501200 | 2405 | 11/6/2009 | Labor Maint TD Super/Eng | T2 | 35315 Payroll Labor Distribution | 531.03 |
| 501200 | 2415 | 11/6/2009 | Labor Maint TD Dist Res | T2 | 35315 Payroll Labor Distribution | 726.72 |
| 501200 | 2305 | 11/6/2009 | Labor Maint WT Super/Eng | T2 | 35315 Payroll Labor Distribution | 896.13 |
| 501200 | 23 | 11/6/2009 | Labor Maint WT | T2 | 35315 Payroll Labor Distribution | 2,305.07 |
| 501200 | 2435 | 11/6/2009 | Labor Maint TD Meters | T2 | 35315 Payroll Labor Distribution | 2,799.01 |
| 501200 | 15 | 11/6/2009 | Labor Oper CA | T2 | 35315 Payroll Labor Distribution | 3,053.88 |
| 501200 | 22 | 11/6/2009 | Labor Maint P | T2 | 35315 Payroll Labor Distribution | 3,429.21 |
| 501200 | 1405 | 11/6/2009 | Labor Oper TD Super/Eng | T2 | 35315 Payroll Labor Distribution | 5,577.58 |
| 501200 | 1415 | 11/6/2009 | Labor Oper TD Lines | T2 | 35315 Payroll Labor Distribution | 8,357.39 |
| 501200 | 2440 | 11/6/2009 | Labor Maint TD Hydrants | T2 | 35315 Payroll Labor Distribution | 8,401.21 |
| 501200 | 1520 | 11/6/2009 | Labor Oper CA Cust Serv | T2 | 35315 Payroll Labor Distribution | 9,089.46 |
| 501200 | 2420 | 11/6/2009 | Labor Maint TD Mains | T2 | 35315 Payroll Labor Distribution | 9,733.58 |
| 501200 | 2430 | 11/6/2009 | Labor Maint TD Services | T2 | 35315 Payroll Labor Distribution | 10,274.29 |
| 501200 | 1510 | 11/6/2009 | Labor Oper CA Mtr Read | T2 | 35315 Payroll Labor Distribution | 17,035.85 |
| 501200 | 1305 | 11/6/2009 | Labor Oper WT Super/Eng | T2 | 35315 Payroll Labor Distribution | 21,526.57 |
| 501200 | 1420 | 11/6/2009 | Labor Oper TD Meter | T2 | 35315 Payroll Labor Distribution | 30,338.68 |
| 501200 | 13 | 11/6/2009 | Labor Oper WT | T2 | 35315 Payroll Labor Distribution | 30,703.49 |
| 501200 | 16 | 11/6/2009 | Labor Oper AG | T2 | 35315 Payroll Labor Distribution | 36,368.28 |
| 501200 | 14 | 11/6/2009 | Labor Oper TD | T2 | 35315 Payroll Labor Distribution | 39,591.02 |
| 501200 | 13 | 11/6/2009 | Labor Oper WT | T3 | 35316 Actual Burden Journal Entries | 24.00 |
| 501210 | 2420 | 11/6/2009 | Labor NS OT TD Mains | T2 | 35315 Payroll Labor Distribution | 234.76 |
| 501210 | 2430 | 11/6/2009 | Labor NS OT TD Services | T2 | 35315 Payroll Labor Distribution | 295.62 |
| 501210 | 1415 | 11/6/2009 | Labor NS OT TD Lines | T2 | 35315 Payroll Labor Distribution | 652.56 |
| 501210 | 1420 | 11/6/2009 | Labor NS OT TD Meter | T2 | 35315 Payroll Labor Distribution | 653.17 |
| 501210 | 14 | 11/6/2009 | Labor NS OT TD | T2 | 35315 Payroll Labor Distribution | 760.14 |
| 501210 | 1305 | 11/6/2009 | Labor NS OT WT Super/Eng | T2 | 35315 Payroll Labor Distribution | 1,166.46 |
| 501210 | 1520 | 11/6/2009 | Labor NS OT CA Cust Serv | T2 | 35315 Payroll Labor Distribution | 1,595.43 |
| 501210 | 1510 | 11/6/2009 | Labor NS OT CA Mtr Read | T2 | 35315 Payroll Labor Distribution | 1,953.26 |
| 501210 | 13 | 11/6/2009 | Labor NS OT WT | T2 | 35315 Payroll Labor Distribution | 2,557.96 |
| 501711 |  | 11/6/2009 | IP-Off-Annual-P/R JE | T3 | 35316 Actual Burden Journal Entries | 10,805.72 |
| 504100 | 1 | 11/6/2009 | Group Insurance - Cap Credits | T1 | 35314 Payroll Disbursement Entries | -36,925.91 |
| 504100 | 16 | 11/6/2009 | Group Ins Oper AG | T1 | 35314 Payroll Disbursement Entries | -9,061.46 |
| 504100 | 16 | 11/6/2009 | Group Ins Oper AG | T3 | 35316 Actual Burden Journal Entries | 2,074.74 |
| 504100 | 1 | 11/6/2009 | Group Insurance - Cap Credits | T3 | 35316 Actual Burden Journal Entries | 30,897.13 |
| 505100 | 1 | 11/6/2009 | PBOP Cap Credits | T1 | 35314 Payroll Disbursement Entries | -49,944.23 |
| 505100 | 1 | 11/6/2009 | PBOP Cap Credits | T3 | 35316 Actual Burden Journal Entries | 42,130.78 |
| 506100 | 1 | 11/6/2009 | Pension - Cap Credits | T1 | 35314 Payroll Disbursement Entries | -72,529.29 |
| 506100 | 1 | 11/6/2009 | Pension - Cap Credits | T3 | 35316 Actual Burden Journal Entries | 61,182.57 |
| 507100 | 16 | 11/6/2009 | 401k Oper AG | T3 | 35316 Actual Burden Journal Entries | 4,165.20 |
| 508101 | 16 | 11/6/2009 | DCP Oper AG | T3 | 35316 Actual Burden Journal Entries | 3,971.68 |
| 508102 | 16 | 11/6/2009 | Retiree Med Oper AG | T3 | 35316 Actual Burden Journal Entries | 798.14 |
| 510100 | 11 | 11/6/2009 | Purchased Water-Outside | PV | 42360781 Georgetown Municipal Water \& S | 10.21 |
| 510100 | 11 | 11/6/2009 | Purchased Water-Outside | PV | 42360790 Georgetown Municipal Water \& S | 9.33 |
| 515100 | 12 | 11/6/2009 | Purch Power P | EE | 3971784 KENTUCKY UTILITIES COMPANY | 2,604.52 |
| 518000 | 13 | 11/6/2009 | Chemicals WT | PV | 42360824 Brenntag Mid South Inc - All U | -. 03 |
| 520100 | 16 | 11/6/2009 | M \& S Oper AG | PV | 42360765 Insight Direct (Peripherals) - | 200.09 |
| 520100 | 16 | 11/6/2009 | M \& S Oper AG | PV | 42360766 Insight Direct (Peripherals) - | 341.07 |
| 520100 | 16 | 11/6/2009 | M \& S Oper AG | PV | 42360784 Insight Direct (Peripherals) - | 157.77 |
| 520100 | 16 | 11/6/2009 | M \& S Oper AG | PV | 42360793 Yale Kentuckiana Inc | 34.45 |
| 520100 | 16 | 11/6/2009 | M \& S Oper AG | PV | 42360794 Grainger - ALL USE REMIT | 327.73 |
| 520100 | 16 | 11/6/2009 | M \& S Oper AG | PV | 42360811 Grainger - ALL USE REMIT | 78.31 |
| 520100 | 16 | 11/6/2009 | M \& S Oper AG | PV | 42360844 Media Library Inc-PO/REMIT | 200.00 |
| 520100 | 14 | 11/6/2009 | M \& S Oper TD | PV | 42360863 E H Wachs Co | 804.29 |
| 535000 | 16 | 11/6/2009 | Contr Svc-Other Oper AG | PV | 42360768 Laser Images Inc - PO/REMIT | 143.10 |
| 535000 | 14 | 11/6/2009 | Contr Svc-Other Oper TD | PV | 42360778 Cobb, Rodney | 589.00 |
| 535000 | 14 | 11/6/2009 | Contr Svc-Other Oper TD | PV | 42360779 Cobb, Rodney | 1,076.00 |
| 535000 | 16 | 11/6/2009 | Contr Svc-Other Oper AG | PV | 42360782 Randy Walker Electric-PO/REMIT | 370.39 |
| 535000 | 16 | 11/6/2009 | Contr Svc-Other Oper AG | PV | 42360783 Kentucky Underground Storage I | 186.00 |
| 535000 | 13 | 11/6/2009 | Contr Svc-Other Oper WT | PV | 42360785 Siemens Water Technologies Cor | 500.67 |
| 541400 | 16 | 11/6/2009 | Rents-Equipment Oper AG | PV | 42360856 Neopost Leasing | 213.33 |
| 550000 | 1 | 11/6/2009 | Trans - Cap Credits | T1 | 35314 Payroll Disbursement Entries | -20,114.20 |
| 550000 | 1 | 11/6/2009 | Trans - Cap Credits | T3 | 35316 Actual Burden Journal Entries | 16,830.27 |
| 550000 | 16 | 11/6/2009 | Trans Oper AG | PV | 42360813 Grainger - ALL USE REMIT | 20.73 |
| 558000 | 1 | 11/6/2009 | Ins Work Comp Cap Credits | T1 | 35314 Payroll Disbursement Entries | -6,304.39 |
| 558000 | 1 | 11/6/2009 | Ins Work Comp Cap Credits | T3 | 35316 Actual Burden Journal Entries | 5,275.11 |
| 568010 | 16 | 11/6/2009 | Water Res Conservation | PV | 42360842 WLXG-AM WGKS-FM WCDA-FM | 260.00 |
| 568010 | 16 | 11/6/2009 | Water Res Conservation | PV | 42360843 WLXG-AM WGKS-FM WCDA-FM | 240.00 |
| 570100 | 15 | 11/6/2009 | Uncollectible Accounts | JE | 30903270 KY CIS POST GL BATCH | -148.34 |
| 575000 | 16 | 11/6/2009 | Misc Oper AG | OV | 10282452 US Pipe \& Foundry Co LLC - PO | 80.64 |
| 575000 | 16 | 11/6/2009 | Misc Oper AG | PV | 42360767 Insight Direct (Peripherals) - | 266.75 |
| 575000 | 14 | 11/6/2009 | Misc Oper TD | PV | 42360794 Grainger - ALL USE REMIT | 425.11 |
| 575000 | 14 | 11/6/2009 | Misc Oper TD | PV | 42360811 Grainger - ALL USE REMIT | 519.66 |
| 575000 | 14 | 11/6/2009 | Misc Oper TD | PV | 42360812 Grainger - ALL USE REMIT | 572.40 |
| 575000 | 16 | 11/6/2009 | Misc Oper AG | PV | 42360861 Neptune Technology - ALL USE R | 67.10 |
| 575000 | 14 | 11/6/2009 | Misc Oper TD | PV | 42360876 USA Blue Book | 126.86 |
| 575000 | 14 | 11/6/2009 | Misc Oper TD | PV | 42360877 Grainger - ALL USE REMIT | 241.54 |
| 575000 | 14 | 11/6/2009 | Misc Oper TD | PV | 42360878 Grainger - ALL USE REMIT | 36.03 |
| 575002 | 16 | 11/6/2009 | Misc General Office | PV | 42360853 Lexington Herald Leader Co | 188.55 |
| 575030 | 16 | 11/6/2009 | Advertising | PV | 42360848 Lane Communications Group | 3,650.00 |
| 575220 | 16 | 11/6/2009 | Community Relations | PV | 42360847 Identity Links Inc | 235.26 |
| 575220 | 16 | 11/6/2009 | Community Relations | PV | 42360852 Kentucky Cty Judge Exec Assoc- | 807.00 |
| 575275 | 16 | 11/6/2009 | Discounts Available | PK | 62057873 US Pipe \& Foundry Co - REMIT | -2.94 |
| 575275 | 16 | 11/6/2009 | Discounts Available | PK | 62057892 Mueller Co - ALL USE PO/REMIT | -128.34 |


| ACCOUNT | SUB | GL DATE $\quad$ DESCRIPTION | DOC TYPE | DOC\# EXPLANATION | AMOUNT |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 575275 | 16 | 11/6/2009 Discounts Available | PK | 62057900 Ferguson SAC - ALL USE REMIT | -10.14 |
| 575280 | 16 | 11/6/2009 Dues/Membership Deduct | PV | 42360845 Winchester Clark County-PO/REM | 500.00 |
| 575320 | 14 | 11/6/2009 Electricity TD | EE | 3971779 KENTUCKY UTILITIES COMPANY | 12.49 |
| 575320 | 14 | 11/6/2009 Electricity TD | EE | 3972599 KENTUCKY UTILITIES COMPANY | 18.93 |
| 575320 | 14 | 11/6/2009 Electricity TD | PV | 42360777 KY Utilities | 14.05 |
| 575340 | 16 | 11/6/2009 Employee Expenses AG | T3 | 35316 Actual Burden Journal Entries | 131.80 |
| 575500 | 14 | 11/6/2009 Janitorial TD | PV | 42360780 Cobb, Rodney | 266.00 |
| 575625 | 16 | 11/6/2009 Overnight Shipping AG | PV | 42360786 United Parcel Service | 167.72 |
| 575625 | 16 | 11/6/2009 Overnight Shipping AG | PV | 42360787 United Parcel Service | 190.63 |
| 575625 | 13 | 11/6/2009 Overnight Shipping WT | PV | 42360788 United Parcel Service | 63.10 |
| 575711 | 16 | 11/6/2009 Add'I Security Costs AG | PV | 42360837 Murray Guard Inc-PO/REMIT | 715.20 |
| 575711 | 16 | 11/6/2009 Add'I Security Costs AG | PV | 42360838 Murray Guard Inc-PO/REMIT | 2,668.64 |
| 575711 | 16 | 11/6/2009 Add'I Security Costs AG | PV | 42360839 Murray Guard Inc-PO/REMIT | 715.20 |
| 575711 | 16 | 11/6/2009 Add'I Security Costs AG | PV | 42360841 Murray Guard Inc-PO/REMIT | 2,661.88 |
| 575780 | 11 | 11/6/2009 Trash Removal SS | PV | 42360666 Allied Waste Services \#993 | 187.83 |
| 620000 | 21 | 11/6/2009 Mat and Sup Maint SS | PV | 42360779 Cobb, Rodney | 354.91 |
| 620000 | 24 | 11/6/2009 Mat and Sup Maint TD | PV | 42360816 US Pipe \& Foundry Co - REMIT | 156.03 |
| 620000 | 24 | 11/6/2009 Mat and Sup Maint TD | PV | 42360835 Ferguson SAC - ALL USE REMIT | 81.62 |
| 620000 | 24 | 11/6/2009 Mat and Sup Maint TD | PV | 42360836 Ferguson SAC - ALL USE REMIT | 2,411.19 |
| 620000 | 24 | 11/6/2009 Mat and Sup Maint TD | PV | 42360871 Lexington Quarry Co | 540.67 |
| 635000 | 26 | 11/6/2009 Contr Svc-Other Maint AG | PV | 42360854 Stephen Hillenmeyer Landscape | 1,135.84 |
| 675000 | 26 | 11/6/2009 Misc Maint AG | PV | 42360776 Xerox Corp- REMIT | 237.10 |
| 675000 | 23 | 11/6/2009 Misc Maint WT | PV | 42360789 Grainger - ALL USE REMIT | 1,841.03 |
| 675000 | 24 | 11/6/2009 Misc Maint TD | PV | 42360864 Saf ti co Inc - PO/REMIT | 93.28 |
| 675000 | 24 | 11/6/2009 Misc Maint TD | PV | 42360865 Signal Boards Inc - REMIT | 47.70 |
| 675000 | 24 | 11/6/2009 Misc Maint TD | PV | 42360867 Saf ti co Inc - PO/REMIT | 131.44 |
| 675000 | 21 | 11/6/2009 Misc Maint SS | PV | 42360868 Signal Boards Inc - REMIT | 143.10 |
| 675650 | 24 | 11/6/2009 Paving/Backfill TD | PV | 42360858 HG Wilson \& Sons Contractors I | 2,201.90 |
| 685325 |  | 11/6/2009 FICA | T3 | 35316 Actual Burden Journal Entries | 17,971.98 |
| 716121 |  | 11/6/2009 M\&J Expenses-Outside | T2 | 35315 Payroll Labor Distribution | 631.01 |
| 716121 |  | 11/6/2009 M\&J Expenses-Outside | T3 | 35316 Actual Burden Journal Entries | 272.90 |
| 760100 |  | 11/6/2009 Donations Deduct | PV | 42360849 News-Herald Owenton | 225.00 |
| 760200 |  | 11/6/2009 Other Income Deductions | PV | 42360851 Dry Stone Conservancy | 1,500.00 |
| 520100 | 16 | 11/7/2009 M \& S Oper AG | ST | 30903252 SABRIX NO TAX CHARGED ACR | 12.00 |
| 575000 | 14 | 11/7/2009 Misc Oper TD | ST | 30903252 SABRIX NO TAX CHARGED ACR | 5.18 |
| 575002 | 16 | 11/7/2009 Misc General Office | ST | 30903252 SABRIX NO TAX CHARGED ACR | 11.31 |
| 575220 | 16 | 11/7/2009 Community Relations | ST | 30903252 SABRIX NO TAX CHARGED ACR | 14.12 |
| 675000 | 26 | 11/7/2009 Misc Maint AG | ST | 30903247 SABRIX VENDOR TAX COMPARE | 12.14 |
| 401110 |  | 11/9/2009 Res Sales Billed | JE | 30903350 KY CIS POST GL BATCH | -140,498.27 |
| 401210 |  | 11/9/2009 Com Sales Billed | JE | 30903350 KY CIS POST GL BATCH | -56,891.25 |
| 401310 |  | 11/9/2009 Ind Sales Billed | JE | 30903350 KY CIS POST GL BATCH | -13,378.10 |
| 401510 |  | 11/9/2009 Pub Auth Billed | JE | 30903350 KY CIS POST GL BATCH | -6,991.12 |
| 402510 |  | 11/9/2009 Pub Auth WW Svc Billed | JE | 30903350 KY CIS POST GL BATCH | -362.75 |
| 403103 |  | 11/9/2009 Oth Rev-Collect for Others | RI | 10136435 Sadieville City of - REMIT | -191.18 |
| 403103 |  | 11/9/2009 Oth Rev-Collect for Others | RI | 10136436 Lexington-Fayette Div Of Rev P | -93,120.85 |
| 403103 |  | 11/9/2009 Oth Rev-Collect for Others | PS | 42361720 Treehaven II LLC | -245.67 |
| 403104 |  | 11/9/2009 Oth Rev-NSF Check Charge | JE | 30903350 KY CIS POST GL BATCH | -144.00 |
| 403105 |  | 11/9/2009 Oth Rev-Appl/Initiate Serv Fee | JE | 30903350 KY CIS POST GL BATCH | -3,692.00 |
| 403107 |  | 11/9/2009 Oth Rev-Reconnection Charges | JE | 30903350 KY CIS POST GL BATCH | -3,718.00 |
| 570100 | 15 | 11/9/2009 Uncollectible Accounts | JE | 30903350 KY CIS POST GL BATCH | -125.88 |
| 575275 | 16 | 11/9/2009 Discounts Available | PK | 62057910 USA Blue Book | -1.27 |
| 575275 | 16 | 11/9/2009 Discounts Available | PK | 62057911 US Pipe \& Foundry Co - REMIT | -200.65 |
| 575625 | 16 | 11/9/2009 Overnight Shipping AG | PV | 42361879 United Parcel Service | 163.88 |
| 620000 | 21 | 11/9/2009 Mat and Sup Maint SS | OV | 10282565 Neptune Technology Inc - PO ON | 2,915.00 |
| 620000 | 21 | 11/9/2009 Mat and Sup Maint SS | OV | 10282566 Neptune Technology Inc - PO ON | 11,130.00 |
| 715111 |  | 11/9/2009 M\&J Revenues-Outside | RI | 10136413 Cleverger, Dennis | -527.90 |
| 401110 |  | 11/10/2009 Res Sales Billed | JE | 30903417 KY CIS POST GL BATCH | -22,603.75 |
| 401210 |  | 11/10/2009 Com Sales Billed | JE | 30903417 KY CIS POST GL BATCH | -14,924.60 |
| 401310 |  | 11/10/2009 Ind Sales Billed | JE | 30903417 KY CIS POST GL BATCH | -997.04 |
| 401510 |  | 11/10/2009 Pub Auth Billed | JE | 30903417 KY CIS POST GL BATCH | -10,696.28 |
| 401710 |  | 11/10/2009 Misc Sales Billed | JE | 30903417 KY CIS POST GL BATCH | -56.45 |
| 403104 |  | 11/10/2009 Oth Rev-NSF Check Charge | JE | 30903417 KY CIS POST GL BATCH | -24.00 |
| 403105 |  | 11/10/2009 Oth Rev-Appl/Initiate Serv Fee | JE | 30903417 KY CIS POST GL BATCH | -26.00 |
| 403107 |  | 11/10/2009 Oth Rev-Reconnection Charges | JE | 30903417 KY CIS POST GL BATCH | -286.00 |
| 501200 | 16 | 11/10/2009 Labor Oper AG | RI | 10136205 Moore, David M. | -568.53 |
| 515100 | 13 | 11/10/2009 Purch Power WT | EE | 3974992 KENTUCKY UTILITIES COMPANY | 4,556.70 |
| 515100 | 14 | 11/10/2009 Purch Power TD | EE | 3975019 KENTUCKY UTILITIES COMPANY | 102.53 |
| 515100 | 13 | 11/10/2009 Purch Power WT | EE | 3977176 OWEN ELECTRIC COOP INC | 17.72 |
| 515100 | 13 | 11/10/2009 Purch Power WT | EE | 3977186 OWEN ELECTRIC COOP INC | 4,673.89 |
| 515100 | 14 | 11/10/2009 Purch Power TD | EE | 3977191 OWEN ELECTRIC COOP INC | 34.25 |
| 535000 | 15 | 11/10/2009 Contr Svc-Other Oper CA | TC | 30903312 Language Services | 1,067.20 |
| 535000 | 15 | 11/10/2009 Contr Svc-Other Oper CA | TC | 30903330 Language Line Services | 170.65 |
| 570100 | 15 | 11/10/2009 Uncollectible Accounts | JE | 30903417 KY CIS POST GL BATCH | -83.85 |
| 575275 | 16 | 11/10/2009 Discounts Available | PK | 62057929 Ferguson SAC - ALL USE REMIT | -45.49 |
| 575320 | 13 | 11/10/2009 Electricity WT | EE | 3975006 KENTUCKY UTILITIES COMPANY | 13.09 |
| 575741 | 14 | 11/10/2009 Cell Phone TD | TC | 30903329 Verizon Wireless | 805.31 |
| 620000 | 24 | 11/10/2009 Mat and Sup Maint TD | IR | 567105 Inventory Return | -52.22 |
| 620000 | 24 | 11/10/2009 Mat and Sup Maint TD | IR | 567111 Inventory Return | -54.63 |
| 620000 | 24 | 11/10/2009 Mat and Sup Maint TD | IR | 567114 Inventory Return | -60.56 |
| 620000 | 24 | 11/10/2009 Mat and Sup Maint TD | IR | 567122 Inventory Return | -21.86 |
| 620000 | 24 | 11/10/2009 Mat and Sup Maint TD | IR | 567123 Inventory Return | -35.64 |
| 620000 | 24 | 11/10/2009 Mat and Sup Maint TD | IR | 567125 Inventory Return | -955.43 |
| 620000 | 24 | 11/10/2009 Mat and Sup Maint TD | IR | 567131 Inventory Return | -61.40 |
| 620000 | 24 | 11/10/2009 Mat and Sup Maint TD | IR | 567132 Inventory Return | -56.92 |


| ACCOUNT | SUB | GL DATE | DESCRIPTION | DOC TYPE | DOC\# | EXPLANATION | AMOUNT |
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| 620000 | 24 | 11/10/2009 | Mat and Sup Maint TD | IR | 567134 | Inventory Return | -76.07 |
| 620000 | 24 | 11/10/2009 | Mat and Sup Maint TD | IR | 567137 | Inventory Return | -109.85 |
| 716121 |  | 11/10/2009 | M\&J Expenses-Outside | 11 | 567106 | Inventory Issue-Stk E \& D | 52.22 |
| 716121 |  | 11/10/2009 | M\&J Expenses-Outside | 11 | 567109 | Inventory Issue-Stk E \& D | 54.63 |
| 716121 |  | 11/10/2009 | M\&J Expenses-Outside | 11 | 567117 | Inventory Issue-Stk E \& D | 60.56 |
| 716121 |  | 11/10/2009 | M\&J Expenses-Outside | 11 | 567119 | Inventory Issue-Stk E \& D | 21.86 |
| 716121 |  | 11/10/2009 | M\&J Expenses-Outside | 11 | 567124 | Inventory Issue-Stk E \& D | 35.64 |
| 716121 |  | 11/10/2009 | M\&J Expenses-Outside | 11 | 567130 | Inventory Issue-Stk E \& D | 61.40 |
| 716121 |  | 11/10/2009 | M\&J Expenses-Outside | 11 | 567133 | Inventory Issue-Stk E \& D | 56.92 |
| 716121 |  | 11/10/2009 | M\&J Expenses-Outside | 11 | 567135 | Inventory Issue-Stk E \& D | 76.07 |
| 401110 |  | 11/11/2009 | Res Sales Billed | JE | 30903715 | KY CIS POST GL BATCH | -326,550.82 |
| 401210 |  | 11/11/2009 | Com Sales Billed | JE | 30903715 | KY CIS POST GL BATCH | -112,681.03 |
| 401510 |  | 11/11/2009 | Pub Auth Billed | JE | 30903715 | KY CIS POST GL BATCH | -12,345.07 |
| 401710 |  | 11/11/2009 | Misc Sales Billed | JE | 30903715 | KY CIS POST GL BATCH | -172.44 |
| 402110 |  | 11/11/2009 | Dom WW Serv Billed | JE | 30903715 | KY CIS POST GL BATCH | -20.75 |
| 402210 |  | 11/11/2009 | Com WW Serv Billed | JE | 30903715 | KY CIS POST GL BATCH | -1,658.51 |
| 403104 |  | 11/11/2009 | Oth Rev-NSF Check Charge | JE | 30903715 | KY CIS POST GL BATCH | -132.00 |
| 403105 |  | 11/11/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30903715 | KY CIS POST GL BATCH | -6,630.00 |
| 403107 |  | 11/11/2009 | Oth Rev-Reconnection Charges | JE | 30903715 | KY CIS POST GL BATCH | -6,422.00 |
| 511100 | 13 | 11/11/2009 | Waste Disposal Exp WT | PV | 42364395 | Bonded Chemicals Inc-REMIT | 153.59 |
| 515100 | 12 | 11/11/2009 | Purch Power P | EE | 3977619 | CLARK ENERGY COOP | 812.66 |
| 515100 | 14 | 11/11/2009 | Purch Power TD | EE | 3978070 | KU | 30.70 |
| 515100 | 12 | 11/11/2009 | Purch Power P | EE | 3979431 |  | 35.11 |
| 515100 | 14 | 11/11/2009 | Purch Power TD | EE | 3979439 | KU | 30.78 |
| 515100 | 14 | 11/11/2009 | Purch Power TD | EE | 3979463 |  | 22.98 |
| 515100 | 14 | 11/11/2009 | Purch Power TD | EE | 3979469 | KU | 122.35 |
| 515100 | 14 | 11/11/2009 | Purch Power TD | EE | 3979476 | KU | 38.64 |
| 515100 | 14 | 11/11/2009 | Purch Power TD | EE | 3979482 | KU | 42.07 |
| 570100 | 15 | 11/11/2009 | Uncollectible Accounts | JE | 30903715 | KY CIS POST GL BATCH | -92.07 |
| 575000 | 16 | 11/11/2009 | Misc Oper AG | OV | 10282728 | US Pipe \& Foundry Co LLC - PO | 18.28 |
| 575000 | 16 | 11/11/2009 | Misc Oper AG | PV | 42364326 | US Pipe \& Foundry Co - REMIT | 1.65 |
| 575000 | 16 | 11/11/2009 | Misc Oper AG | PV | 42364328 | US Pipe \& Foundry Co - REMIT | 16.93 |
| 575200 | 15 | 11/11/2009 | Collection Agencies CA | PV | 42364670 | Penn Credit Corp | -8.06 |
| 575275 | 16 | 11/11/2009 | Discounts Available | PK | 62057932 | US Pipe \& Foundry Co - REMIT | -1,012.50 |
| 575275 | 16 | 11/11/2009 | Discounts Available | PK | 62057936 | Powerseal Pipeline Products Co | -44.32 |
| 575275 | 16 | 11/11/2009 | Discounts Available | PK | 62057938 | JCM Industries Inc | -47.08 |
| 575275 | 16 | 11/11/2009 | Discounts Available | PK | 62057939 | Mueller Co - ALL USE PO/REMIT | -386.64 |
| 575275 | 16 | 11/11/2009 | Discounts Available | PK | 62057940 | AY McDonald Mfg Co | -26.41 |
| 575320 | 14 | 11/11/2009 | Electricity TD | EE | 3978074 | KU | 23.80 |
| 575320 | 14 | 11/11/2009 | Electricity TD | EE | 3979449 | KU | 142.85 |
| 575480 | 14 | 11/11/2009 | Heat - Oil/Gas TD | EE | 3977621 | CLARK ENERGY COOP | 10.07 |
| 575480 | 14 | 11/11/2009 | Heat - Oil/Gas TD | EE | 3977625 | CLARK ENERGY COOP | 6.74 |
| 620000 | 24 | 11/11/2009 | Mat and Sup Maint TD | IR | 567142 | Inventory Return | -23.60 |
| 620000 | 24 | 11/11/2009 | Mat and Sup Maint TD | IR | 567144 | Inventory Return | -62.76 |
| 620000 | 24 | 11/11/2009 | Mat and Sup Maint TD | IR | 567145 | Inventory Return | -188.18 |
| 620000 | 24 | 11/11/2009 | Mat and Sup Maint TD | IR | 567148 | Inventory Return | -109.27 |
| 620000 | 24 | 11/11/2009 | Mat and Sup Maint TD | IR | 567149 | Inventory Return | -83.96 |
| 716121 |  | 11/11/2009 | M\&J Expenses-Outside | 11 | 567141 | Inventory Issue-Stk E \& D | 23.60 |
| 716121 |  | 11/11/2009 | M\&J Expenses-Outside | 11 | 567147 | Inventory Issue-Stk E \& D | 109.27 |
| 401110 |  | 11/12/2009 | Res Sales Billed | JE | 30903836 | KY CIS POST GL BATCH | -110,078.54 |
| 401210 |  | 11/12/2009 | Com Sales Billed | JE | 30903836 | KY CIS POST GL BATCH | -42,429.40 |
| 401310 |  | 11/12/2009 | Ind Sales Billed | JE | 30903836 | KY CIS POST GL BATCH | -4,624.99 |
| 401450 |  | 11/12/2009 | Priv Fire Billed | JE | 30903836 | KY CIS POST GL BATCH | 107.59 |
| 401510 |  | 11/12/2009 | Pub Auth Billed | JE | 30903836 | KY CIS POST GL BATCH | -6,555.64 |
| 401710 |  | 11/12/2009 | Misc Sales Billed | JE | 30903836 | KY CIS POST GL BATCH | -610.73 |
| 402110 |  | 11/12/2009 | Dom WW Serv Billed | JE | 30903836 | KY CIS POST GL BATCH | -176.52 |
| 403105 |  | 11/12/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30903836 | KY CIS POST GL BATCH | -2,028.00 |
| 403107 |  | 11/12/2009 | Oth Rev-Reconnection Charges | JE | 30903836 | KY CIS POST GL BATCH | -2,782.00 |
| 501200 | 16 | 11/12/2009 | Labor Oper AG | RI | 10136357 | Moore, David M. | -520.25 |
| 501200 | 16 | 11/12/2009 | Labor Oper AG | RI | 10136363 | Arvin, William P. | -65.00 |
| 515100 | 14 | 11/12/2009 | Purch Power TD | EE | 3979457 | KU | 59.78 |
| 515100 | 12 | 11/12/2009 | Purch Power P | EE | 3980102 | KU | 560.82 |
| 520100 | 12 | 11/12/2009 | M \& S Oper P | CC | 6520 | W W GRAINGER | 58.36 |
| 520100 | 13 | 11/12/2009 | M \& S Oper WT | CC | 6520 | W W GRAINGER | 155.01 |
| 520100 | 16 | 11/12/2009 | M \& S Oper AG | CC | 6520 | GROTT LOCKSMITH CENTER | 632.54 |
| 520100 | 14 | 11/12/2009 | M \& S Oper TD | CC | 6520 | ADVANCE AUTO PARTS | 2,756.54 |
| 533000 | 16 | 11/12/2009 | Contr Svc-Legal Oper AG | PV | 42365117 | Stoll Keenon Ogden PLLC-PO/REM | 2,516.08 |
| 533000 | 16 | 11/12/2009 | Contr Svc-Legal Oper AG | PV | 42365129 | Stoll Keenon Ogden PLLC-PO/REM | 5,381.50 |
| 535000 | 15 | 11/12/2009 | Contr Svc-Other Oper CA | CC | 6520 | POP A LOCK OF LEXINGTON | 45.00 |
| 535000 | 14 | 11/12/2009 | Contr Svc-Other Oper TD | CC | 6520 | ORKIN, INC | 65.79 |
| 535001 | 15 | 11/12/2009 | Contr Svc-Temp Empl Oper CA | PV | 42365132 | Volt Services Group | 556.00 |
| 550000 | 16 | 11/12/2009 | Trans Oper AG | CC | 6520 | SHELL OIL | 748.49 |
| 570100 | 15 | 11/12/2009 | Uncollectible Accounts | JE | 30903836 | KY CIS POST GL BATCH | -393.48 |
| 575000 | 14 | 11/12/2009 | Misc Oper TD | CC | 6520 | NATIONAL WORKWEAR INC | 111.30 |
| 575000 | 15 | 11/12/2009 | Misc Oper CA | CC | 6520 | WAL-MART | 167.43 |
| 575000 | 13 | 11/12/2009 | Misc Oper WT | CC | 6520 | CENTRAL EQUIPMENT CO INC | 246.81 |
| 575000 | 16 | 11/12/2009 | Misc Oper AG | CC | 6520 | FTD KREATIONS BY KAREN | 247.78 |
| 575000 | 16 | 11/12/2009 | Misc Oper AG | OV | 10282942 | US Pipe \& Foundry Co LLC - PO | 21.64 |
| 575000 | 16 | 11/12/2009 | Misc Oper AG | PV | 42365487 | US Pipe \& Foundry Co - REMIT | -2.94 |
| 575000 | 16 | 11/12/2009 | Misc Oper AG | PV | 42365495 | US Pipe \& Foundry Co - REMIT | . 04 |
| 575275 | 16 | 11/12/2009 | Discounts Available | PK | 62057951 | Mueller Co - ALL USE PO/REMIT | -9.46 |
| 575320 | 14 | 11/12/2009 | Electricity TD | EE | 3980097 |  | 12.14 |
| 575340 | 16 | 11/12/2009 | Employee Expenses AG | CC | 6520 | AMEXFEE | 447.90 |
| 575340 | 16 | 11/12/2009 | Employee Expenses AG | PS | 42365573 | Kentucky State Treasurer-REMIT | 90.00 |




| ACCOUNT | SUB | GL DATE $\quad$ DESCRIPTION | DOC TYPE | DOC\# | AMOUNT |
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| 402110 |  | 11/18/2009 Dom WW Serv Billed | JE | 30904401 KY CIS POST GL BATCH | -1,627.50 |
| 402210 |  | 11/18/2009 Com WW Serv Billed | JE | 30904401 KY CIS POST GL BATCH | -328.09 |
| 402310 |  | 11/18/2009 Ind WW Serv Billed | JE | 30904401 KY CIS POST GL BATCH | -68.73 |
| 403104 |  | 11/18/2009 Oth Rev-NSF Check Charge | JE | 30904401 KY CIS POST GL BATCH | -120.00 |
| 403105 |  | 11/18/2009 Oth Rev-Appl/Initiate Serv Fee | JE | 30904401 KY CIS POST GL BATCH | -2,626.00 |
| 403107 |  | 11/18/2009 Oth Rev-Reconnection Charges | JE | 30904401 KY CIS POST GL BATCH | -2,548.00 |
| 504620 | 16 | 11/18/2009 Employee Physical Exam AG | PV | 42369208 BaptistWorx Business Office | 50.00 |
| 504620 | 16 | 11/18/2009 Employee Physical Exam AG | PV | 42369325 BaptistWorx Business Office | 70.00 |
| 515100 | 14 | 11/18/2009 Purch Power TD | EE | 3985223 OWEN ELECTRIC COOP INC | 23.98 |
| 515100 | 14 | 11/18/2009 Purch Power TD | EE | 3985356 KU | 103.23 |
| 515100 | 14 | 11/18/2009 Purch Power TD | EE | 3985357 KU | 60.92 |
| 515100 | 14 | 11/18/2009 Purch Power TD | EE | 3985358 KU | 26.15 |
| 515100 | 14 | 11/18/2009 Purch Power TD | EE | 3985359 KU | 13.38 |
| 515100 | 14 | 11/18/2009 Purch Power TD | EE | 3985360 KU | 97.00 |
| 515100 | 14 | 11/18/2009 Purch Power TD | EE | 3985362 KU | 12.47 |
| 515100 | 14 | 11/18/2009 Purch Power TD | EE | 3985363 KU | 11.62 |
| 515100 | 13 | 11/18/2009 Purch Power WT | EE | 3985365 KU | 137.64 |
| 515100 | 14 | 11/18/2009 Purch Power TD | EE | 3985367 KU | 32.57 |
| 515100 | 14 | 11/18/2009 Purch Power TD | EE | 3986253 KU | 75.15 |
| 515100 | 14 | 11/18/2009 Purch Power TD | EE | 3986255 KU | 50.32 |
| 515100 | 14 | 11/18/2009 Purch Power TD | EE | 3986256 KU | 11.92 |
| 515100 | 13 | 11/18/2009 Purch Power WT | EE | 3986257 KU | 2,397.39 |
| 515100 | 12 | 11/18/2009 Purch Power P | EE | 3986306 KU | 777.41 |
| 535001 | 15 | 11/18/2009 Contr Svc-Temp Empl Oper CA | PV | 42369295 Volt Services Group | 556.00 |
| 536000 | 13 | 11/18/2009 Contr Svc-Lab Testing Oper WT | PV | 42369264 Fouser Environmental Services | 730.00 |
| 570100 | 15 | 11/18/2009 Uncollectible Accounts | JE | 30904401 KY CIS POST GL BATCH | -312.94 |
| 575000 | 14 | 11/18/2009 Misc Oper TD | PV | 42369315 Grainger - ALL USE REMIT | 114.23 |
| 575000 | 14 | 11/18/2009 Misc Oper TD | PV | 42369318 Grainger - ALL USE REMIT | 201.98 |
| 575000 | 14 | 11/18/2009 Misc Oper TD | PV | 42369322 Grainger - ALL USE REMIT | 834.11 |
| 575000 | 14 | 11/18/2009 Misc Oper TD | PV | 42369324 Grainger - ALL USE REMIT | 214.43 |
| 575275 | 16 | 11/18/2009 Discounts Available | PK | 62057999 US Pipe \& Foundry Co - REMIT | -1.56 |
| 575275 | 16 | 11/18/2009 Discounts Available | PK | 62058002 Mueller Co - ALL USE PO/REMIT | -47.95 |
| 575320 | 14 | 11/18/2009 Electricity TD | EE | 3985355 KU | 23.01 |
| 575320 | 14 | 11/18/2009 Electricity TD | EE | 3985361 KU | 25.56 |
| 575320 | 14 | 11/18/2009 Electricity TD | EE | 3986247 KU | 192.79 |
| 575320 | 14 | 11/18/2009 Electricity TD | EE | 3986763 KU | 21.51 |
| 575340 | 16 | 11/18/2009 Employee Expenses AG | JE | 30904232 Reclass P-Card Errors | -250.72 |
| 575420 | 15 | 11/18/2009 Forms CA | PV | 42369814 Regulus Integrated Solutions L | 11,192.99 |
| 575545 | 13 | 11/18/2009 Lab Supplies WT | PV | 42369257 VWR International Inc-PO/REMIT | 369.57 |
| 575545 | 13 | 11/18/2009 Lab Supplies WT | PV | 42369259 Chemtrac Systems - PO/REMIT | 645.00 |
| 575620 | 14 | 11/18/2009 Office \& Admin Supplies TD | PV | 42369239 Insight Direct (Peripherals) - | 152.09 |
| 575620 | 14 | 11/18/2009 Office \& Admin Supplies TD | PV | 42369242 Laser Images Inc - PO/REMIT | 253.34 |
| 575998 | 16 | 11/18/2009 PCard Undistributed | JE | 30904232 Reclass P-Card Errors | -1,220.41 |
| 620000 | 24 | 11/18/2009 Mat and Sup Maint TD | IR | 568861 Inventory Return | -741.89 |
| 620000 | 24 | 11/18/2009 Mat and Sup Maint TD | IR | 568862 Inventory Return | -329.90 |
| 620000 | 24 | 11/18/2009 Mat and Sup Maint TD | IR | 568864 Inventory Return | -169.86 |
| 620000 | 24 | 11/18/2009 Mat and Sup Maint TD | IR | 568866 Inventory Return | -441.09 |
| 635000 | 26 | 11/18/2009 Contr Svc-Other Maint AG | PV | 42369229 Lexington Fayette Urban County | 132.55 |
| 675000 | 26 | 11/18/2009 Misc Maint AG | PV | 42369231 Perfection Services-PO/REMIT | 805.75 |
| 675000 | 26 | 11/18/2009 Misc Maint AG | PV | 42369234 Perfection Services-PO/REMIT | 415.66 |
| 675000 | 23 | 11/18/2009 Misc Maint WT | PV | 42369255 Grainger - ALL USE REMIT | 408.31 |
| 716121 |  | 11/18/2009 M\&J Expenses-Outside | PV | 42369202 HDR Engineering Inc - ALL USE | 1,449.50 |
| 760100 |  | 11/18/2009 Donations Deduct | PS | 42369068 Owen County Historical Society | 500.00 |
| 760200 |  | 11/18/2009 Other Income Deductions | PV | 42369288 StudioLink Inc | 7,557.50 |
| 760400 |  | 11/18/2009 Other Lobbying Expenses | PV | 42369380 McCarthy Strategic Solutions L | 4,559.74 |
| 401110 |  | 11/19/2009 Res Sales Billed | JE | 30904492 KY CIS POST GL BATCH | -286,563.88 |
| 401210 |  | 11/19/2009 Com Sales Billed | JE | 30904492 KY CIS POST GL BATCH | -135,006.79 |
| 401450 |  | 11/19/2009 Priv Fire Billed | JE | 30904492 KY CIS POST GL BATCH | 16.07 |
| 401510 |  | 11/19/2009 Pub Auth Billed | JE | 30904492 KY CIS POST GL BATCH | -5,233.61 |
| 402110 |  | 11/19/2009 Dom WW Serv Billed | JE | 30904492 KY CIS POST GL BATCH | -103.75 |
| 403104 |  | 11/19/2009 Oth Rev-NSF Check Charge | JE | 30904492 KY CIS POST GL BATCH | -168.00 |
| 403105 |  | 11/19/2009 Oth Rev-Appl/Initiate Serv Fee | JE | 30904492 KY CIS POST GL BATCH | -5,902.00 |
| 403107 |  | 11/19/2009 Oth Rev-Reconnection Charges | JE | 30904492 KY CIS POST GL BATCH | -7,072.00 |
| 403198 |  | 11/19/2009 Oth Rev-Misc Service Rev | RI | 10137023 Kentucky American Northern | -80.00 |
| 504500 | 16 | 11/19/2009 Other Welf Oper AG | CC | 6543 WALGREENS | 47.67 |
| 504670 | 16 | 11/19/2009 Training AG | CC | 6543 SKILLPATH SEMINARS MAIN | 331.20 |
| 510100 | 11 | 11/19/2009 Purchased Water-Outside | PV | 42370544 Carroll Co Water Dist 1 | 2,726.55 |
| 510100 | 11 | 11/19/2009 Purchased Water-Outside | PV | 42370964 Winchester Municipal Utilities | 6.48 |
| 510100 | 11 | 11/19/2009 Purchased Water-Outside | PV | 42370968 Winchester Municipal Utilities | 108.30 |
| 520100 | 16 | 11/19/2009 M \& S Oper AG | CC | 6543 KENTUCKY LIGHTING AND SU | 41.27 |
| 520100 | 13 | 11/19/2009 M \& S Oper WT | CC | 6543 HACH COMPANY | 166.80 |
| 520100 | 14 | 11/19/2009 M \& S Oper TD | CC | 6543 W W GRAINGER | 532.62 |
| 520100 | 16 | 11/19/2009 M \& S Oper AG | PV | 42370729 Sams Club | 263.84 |
| 535000 | 16 | 11/19/2009 Contr Svc-Other Oper AG | CC | 6543 GROTT LOCKSMITH CENTER | 603.76 |
| 535000 | 14 | 11/19/2009 Contr Svc-Other Oper TD | PV | 42370541 Cobb, Rodney | 689.00 |
| 535000 | 14 | 11/19/2009 Contr Svc-Other Oper TD | PV | 42370554 Grasshopper Lawn Care | 4,160.00 |
| 535001 | 14 | 11/19/2009 Contr Svc-Temp Empl Oper TD | PV | 42370556 Volt Services Group | 117.16 |
| 535001 | 13 | 11/19/2009 Contr Svc-Temp Empl Oper WT | PV | 42370556 Volt Services Group | 903.83 |
| 536000 | 13 | 11/19/2009 Contr Svc-Lab Testing Oper WT | CC | 6543 GREEN WATER LABORATORIES | 750.00 |
| 541400 | 16 | 11/19/2009 Rents-Equipment Oper AG | CC | 6543 LASER IMAGES PRINT MANAGE | -1,164.36 |
| 550000 | 16 | 11/19/2009 Trans Oper AG | CC | 6543 CLEAN SWEEP ON BROADWAY | 806.23 |
| 550000 | 16 | 11/19/2009 Trans Oper AG | PS | 42352867 Kentucky State Treasurer-PO/RE | -. 42 |
| 570100 | 15 | 11/19/2009 Uncollectible Accounts | JE | 30904492 KY CIS POST GL BATCH | -219.04 |
| 575000 | 16 | 11/19/2009 Misc Oper AG | CC | 6543 FTD KREATIONS BY KAREN | 306.56 |


| ACCOUNT | SUB | GL DATE | DESCRIPTION | DOC TYPE | DOC\# | EXPLANATION | AMOUNT |
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| 575000 | 14 | 11/19/2009 | Misc Oper TD | CC | 6543 | NATIONAL WORKWEAR INC | 809.54 |
| 575000 | 13 | 11/19/2009 | Misc Oper WT | CC | 6543 | W W GRAINGER | 1,632.71 |
| 575000 | 16 | 11/19/2009 | Misc Oper AG | CC | 6555 | FTD KREATIONS BY KAREN | 358.41 |
| 575000 | 14 | 11/19/2009 | Misc Oper TD | TC | 30904294 | Granite | 106.34 |
| 575000 | 14 | 11/19/2009 | Misc Oper TD | ST | 30904376 | SABRIX VENDOR TAX COMPARE | 1.06 |
| 575000 | 14 | 11/19/2009 | Misc Oper TD | PV | 42370942 | Grainger - ALL USE REMIT | 464.90 |
| 575002 | 16 | 11/19/2009 | Misc General Office | CC | 6555 | OWENTON NEWS | 37.10 |
| 575030 | 16 | 11/19/2009 | Advertising | CC | 6543 | JOBTARGET LLC | 524.00 |
| 575275 | 16 | 11/19/2009 | Discounts Available | PK | 62058007 | US Pipe \& Foundry Co - REMIT | -101.24 |
| 575275 | 16 | 11/19/2009 | Discounts Available | PK | 62058020 | Ferguson SAC - ALL USE REMIT | -36.51 |
| 575340 | 16 | 11/19/2009 | Employee Expenses AG | CC | 6543 | KRISPY KREME LEXINGT | 92.57 |
| 575342 | 16 | 11/19/2009 | Empl Exp Conf/Registration AG | CC | 6543 | RITA WRIGHT | 400.00 |
| 575350 | 16 | 11/19/2009 | Meals Deduct | CC | 6543 | BURGER KING | 460.13 |
| 575350 | 16 | 11/19/2009 | Meals Deduct | CC | 6555 | CHICK-FIL-A | 123.59 |
| 575500 | 14 | 11/19/2009 | Janitorial TD | PV | 42370526 | Cobb, Rodney | 399.00 |
| 575545 | 13 | 11/19/2009 | Lab Supplies WT | CC | 6543 | VWR INTERNATIONAL INC | 909.74 |
| 575545 | 13 | 11/19/2009 | Lab Supplies WT | ST | 30904381 | SABRIX NO TAX CHARGED ACR | 38.70 |
| 575620 | 14 | 11/19/2009 | Office \& Admin Supplies TD | CC | 6543 | USPS | 172.34 |
| 575620 | 16 | 11/19/2009 | Office \& Admin Supplies AG | CC | 6543 | OFFICEMAX CT IN | 323.35 |
| 575620 | 13 | 11/19/2009 | Office \& Admin Supplies WT | CC | 6543 | OFFICEMAX CT IN | 420.01 |
| 575620 | 14 | 11/19/2009 | Office \& Admin Supplies TD | PV | 42370549 | Duplicator Sales \& Service Inc | 67.50 |
| 575625 | 16 | 11/19/2009 | Overnight Shipping AG | PV | 42370616 | United Parcel Service | 37.71 |
| 575625 | 16 | 11/19/2009 | Overnight Shipping AG | PV | 42370619 | United Parcel Service | 43.47 |
| 575625 | 13 | 11/19/2009 | Overnight Shipping WT | PV | 42370621 | United Parcel Service | 108.78 |
| 575625 | 16 | 11/19/2009 | Overnight Shipping AG | PV | 42370954 | United Parcel Service | 133.85 |
| 575711 | 16 | 11/19/2009 | Add'I Security Costs AG | PV | 42370518 | Murray Guard Inc-PO/REMIT | 715.20 |
| 575711 | 16 | 11/19/2009 | Add'I Security Costs AG | PV | 42370521 | Murray Guard Inc-PO/REMIT | 2,668.64 |
| 575715 | 16 | 11/19/2009 | Software Licenses \& Support | JE | 121101 | True Up Versytec Pro | -1,566.25 |
| 575740 | 16 | 11/19/2009 | Telephone AG | TC | 30904294 | Granite | 103.22 |
| 575740 | 14 | 11/19/2009 | Telephone TD | TC | 30904294 | Granite | 113.50 |
| 575740 | 15 | 11/19/2009 | Telephone CA | TC | 30904303 | Windstream | 269.13 |
| 575740 | 15 | 11/19/2009 | Telephone CA | TC | 30904304 | Windstream | 1,143.41 |
| 575740 | 15 | 11/19/2009 | Telephone CA | TC | 30904305 | Windstream | 108.50 |
| 575740 | 15 | 11/19/2009 | Telephone CA | TC | 30904306 | Windstream | 146.82 |
| 575740 | 15 | 11/19/2009 | Telephone CA | TC | 30904307 | Windstream | 2,483.87 |
| 575740 | 16 | 11/19/2009 | Telephone AG | TC | 30904337 | AT\&T | 108.47 |
| 575740 | 16 | 11/19/2009 | Telephone AG | TC | 30904338 | AT\&T | 223.10 |
| 575740 | 16 | 11/19/2009 | Telephone AG | TC | 30904339 | AT\&T | 1,393.96 |
| 575741 | 13 | 11/19/2009 | Cell Phone WT | TC | 30904350 | Verizon Wireless | 320.58 |
| 575741 | 16 | 11/19/2009 | Cell Phone AG | TC | 30904350 | Verizon Wireless | 5,274.84 |
| 575741 | 16 | 11/19/2009 | Cell Phone AG | TC | 30904356 | Verizon Wireless | 243.05 |
| 575780 | 16 | 11/19/2009 | Trash Removal AG | PV | 42370545 | Rumpke of Ind LLC-REMIT-ALL AC | 80.23 |
| 575820 | 13 | 11/19/2009 | Uniforms WT | CC | 6543 | UFIRST LAUNDRY SVCS | 159.78 |
| 575820 | 14 | 11/19/2009 | Uniforms TD | CC | 6543 | NATIONAL WORKWEAR INC | 720.22 |
| 575998 | 16 | 11/19/2009 | PCard Undistributed | CC | 6543 | CATTLEMAN'S RH FRANKFORT | 108.28 |
| 620000 | 24 | 11/19/2009 | Mat and Sup Maint TD | CC | 6543 | TRIPLE A FASTENER CO | 76.32 |
| 620000 | 21 | 11/19/2009 | Mat and Sup Maint SS | CC | 6543 | OWEN COUNTY BLDG SUPPLY | 1,375.87 |
| 620000 | 23 | 11/19/2009 | Mat and Sup Maint WT | CC | 6543 | THE C I THORNBURG CO INC | 2,343.72 |
| 620000 | 24 | 11/19/2009 | Mat and Sup Maint TD | 11 | 568979 | 1235 Natlin Slaten | 197.11 |
| 620000 | 24 | 11/19/2009 | Mat and Sup Maint TD | 11 | 568983 | 7530 Hwy 127 N | 34.16 |
| 620000 | 24 | 11/19/2009 | Mat and Sup Maint TD | II | 568985 | 2470 Hwy 127S Brad Allnutt | 34.16 |
| 620000 | 24 | 11/19/2009 | Mat and Sup Maint TD | 11 | 568987 | 2710 Hammonds School Rd | 7.24 |
| 620000 | 24 | 11/19/2009 | Mat and Sup Maint TD | IR | 569183 | Inventory Return | -79.67 |
| 620000 | 24 | 11/19/2009 | Mat and Sup Maint TD | IR | 569184 | Inventory Return | -710.54 |
| 635000 | 26 | 11/19/2009 | Contr Svc-Other Maint AG | CC | 6543 | UFIRST LAUNDRY SVCS | 82.04 |
| 635000 | 26 | 11/19/2009 | Contr Svc-Other Maint AG | PV | 42370962 | D C Elevator Co Inc-PO/REMIT | 186.25 |
| 675000 | 23 | 11/19/2009 | Misc Maint WT | CC | 6543 | HACH COMPANY | 90.95 |
| 675000 | 26 | 11/19/2009 | Misc Maint AG | PV | 42370958 | Perfection Services-PO/REMIT | 986.54 |
| 716121 |  | 11/19/2009 | M\&J Expenses-Outside | CC | 6543 | LOWES | 42.09 |
| 716121 |  | 11/19/2009 | M\&J Expenses-Outside | II | 569179 | Inventory Issue-Stk E \& D | 710.54 |
| 716121 |  | 11/19/2009 | M\&J Expenses-Outside | II | 569182 | Inventory Issue-Stk E \& D | 79.67 |
| 401110 |  | 11/20/2009 | Res Sales Billed | JE | 30904633 | KY CIS POST GL BATCH | -94,926.88 |
| 401210 |  | 11/20/2009 | Com Sales Billed | JE | 30904633 | KY CIS POST GL BATCH | -50,469.74 |
| 401310 |  | 11/20/2009 | Ind Sales Billed | JE | 30904633 | KY CIS POST GL BATCH | -1,559.36 |
| 401410 |  | 11/20/2009 | Pub Fire Billed | JE | 30904633 | KY CIS POST GL BATCH | 9.12 |
| 401510 |  | 11/20/2009 | Pub Auth Billed | JE | 30904633 | KY CIS POST GL BATCH | -6,428.23 |
| 403104 |  | 11/20/2009 | Oth Rev-NSF Check Charge | JE | 30904633 | KY CIS POST GL BATCH | -204.00 |
| 403105 |  | 11/20/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30904633 | KY CIS POST GL BATCH | -936.00 |
| 403107 |  | 11/20/2009 | Oth Rev-Reconnection Charges | JE | 30904633 | KY CIS POST GL BATCH | -2,496.00 |
| 501200 | 14 | 11/20/2009 | Labor Oper TD | JN | 30904516 | BPCORR R/C LEAK DETECT CHGS | -32,322.59 |
| 504100 |  | 11/20/2009 | Group Insurance - Cap Credits | T1 | 35463 | Payroll Disbursement Entries | -59,891.45 |
| 504100 | 16 | 11/20/2009 | Group Ins Oper AG | T1 | 35463 | Payroll Disbursement Entries | -8,915.53 |
| 505100 |  | 11/20/2009 | PBOP Cap Credits | T1 | 35463 | Payroll Disbursement Entries | -84,690.50 |
| 506100 |  | 11/20/2009 | Pension - Cap Credits | T1 | 35463 | Payroll Disbursement Entries | -123,051.37 |
| 508200 | 16 | 11/20/2009 | ESPP Oper AG | JE | 30904503 | Accrue ESPP Expense Nov 2009 | 319.26 |
| 515100 | 14 | 11/20/2009 | Purch Power TD | EE | 3989810 |  | 31.16 |
| 535000 | 14 | 11/20/2009 | Contr Svc-Other Oper TD | JN | 30904516 | BPCORR R/C LEAK DETECT CHGS | -11,296.00 |
| 535000 | 15 | 11/20/2009 | Contr Svc-Other Oper CA | PV | 42371388 | Accenture, LLP-REMIT | 4,188.60 |
| 550000 |  | 11/20/2009 | Trans - Cap Credits | T1 | 35463 | Payroll Disbursement Entries | -18,428.10 |
| 550002 | 16 | 11/20/2009 | Trans Oper AG Lease Fuel | PV | 42371485 | Automotive Rentals Inc ACH/ALL | 15,844.38 |
| 550003 | 16 | 11/20/2009 | Trans Oper AG Lease Maint | PV | 42371485 | Automotive Rentals Inc ACH/ALL | 10,209.62 |
| 558000 |  | 11/20/2009 | Ins Work Comp Cap Credits | T1 | 35463 | Payroll Disbursement Entries | -10,749.70 |
| 570100 | 15 | 11/20/2009 | Uncollectible Accounts | JE | 30904633 | KY CIS POST GL BATCH | -180.22 |
| 575000 | 16 | 11/20/2009 | Misc Oper AG | JE | 30904496 | NOV09 INV WRITE OFF | -430.00 |



| ACCOUNT | SUB | GL DATE | DESCRIPTION | DOC TYPE | DOC\# | EXPLANATION | AMOUNT |
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| 575000 | 16 | 11/24/2009 | Misc Oper AG | IA | 47569 | PI ADJUSTMENT | 160.31 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IA | 47570 | PI ADJUSTMENT | 14.01 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IA | 47571 | PI ADJUSTMENT | -424.51 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IA | 47572 | PI ADJUSTMENT | -259.42 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IA | 47573 | PI ADJUSTMENT | 362.02 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IA | 47574 | PI ADJUSTMENT | 96.39 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IA | 47575 | PI ADJUSTMENT | -622.93 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IA | 47576 | PI ADJUSTMENT | 131.35 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IA | 47577 | PI ADJUSTMENT | -55.92 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IA | 47578 | PI ADJUSTMENT | 150.88 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IA | 47579 | PI ADJUSTMENT | 680.85 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IA | 47580 | PI ADJUSTMENT | 225.37 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IA | 47581 | PI ADJUSTMENT | 53.77 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IA | 47582 | PI ADJUSTMENT | 42.98 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IA | 47583 | PI ADJUSTMENT | -46.01 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IA | 47584 | PI ADJUSTMENT | -85.67 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IA | 47585 | PI ADJUSTMENT | 39.30 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IA | 47586 | PI ADJUSTMENTS | 6.47 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IB | 30904846 | Inventory Cost Change | -587.60 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IB | 30904847 | Inventory Cost Change | -785.66 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IB | 30904848 | Inventory Cost Change | -57.81 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IB | 30904849 | Inventory Cost Change | -305.57 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IB | 30904850 | Inventory Cost Change | -297.31 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IB | 30904851 | Inventory Cost Change | -470.75 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IB | 30904852 | Inventory Cost Change | -379.90 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IB | 30904853 | Inventory Cost Change | -528.56 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IB | 30904854 | Inventory Cost Change | -619.40 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IB | 30904855 | Inventory Cost Change | -561.59 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IB | 30904856 | Inventory Cost Change | -792.84 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IB | 30904857 | Inventory Cost Change | -1,065.37 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IB | 30904858 | Inventory Cost Change | -941.49 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IB | 30904859 | Inventory Cost Change | -553.33 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IB | 30904860 | Inventory Cost Change | -132.06 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IB | 30904888 | Inventory Cost Change | -1,323.44 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IB | 30904889 | Inventory Cost Change | -5,567.15 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IB | 30904890 | Inventory Cost Change | -3,342.72 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IB | 30904891 | Inventory Cost Change | -1,968.60 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IB | 30904892 | Inventory Cost Change | -40.28 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IB | 30904893 | Inventory Cost Change | -120.14 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IB | 30904894 | Inventory Cost Change | -687.13 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IB | 30904895 | Inventory Cost Change | -4,809.93 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IB | 30904896 | Inventory Cost Change | -8,932.73 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IB | 30904897 | Inventory Cost Change | -780.72 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IB | 30904903 | Inventory Cost Change | -484.53 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IB | 30904904 | Inventory Cost Change | -352.98 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IB | 30904908 | Inventory Cost Change | -145.00 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IB | 30904910 | Inventory Cost Change | -170.63 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IB | 30904912 | Inventory Cost Change | -428.24 |
| 575000 | 16 | 11/24/2009 | Misc Oper AG | IB | 30904913 | Inventory Cost Change | -476.73 |
| 575000 | 14 | 11/24/2009 | Misc Oper TD | PV | 42374767 | Grainger - ALL USE REMIT | 580.00 |
| 575000 | 14 | 11/24/2009 | Misc Oper TD | PV | 42374772 | Grainger - ALL USE REMIT | 38.90 |
| 575000 | 14 | 11/24/2009 | Misc Oper TD | PV | 42374999 | Grainger - ALL USE REMIT | 211.98 |
| 575000 | 14 | 11/24/2009 | Misc Oper TD | PV | 42375000 | USA Blue Book | 343.99 |
| 575275 | 16 | 11/24/2009 | Discounts Available | PK | 62058050 | USA Blue Book | -5.77 |
| 575320 | 14 | 11/24/2009 | Electricity TD | EE | 3991993 |  | 19.97 |
| 575320 | 14 | 11/24/2009 | Electricity TD | EE | 3991997 | KU | 12.49 |
| 575340 | 16 | 11/24/2009 | Employee Expenses AG | PV | 42374883 | Rotary Club of Owenton | 110.50 |
| 575545 | 13 | 11/24/2009 | Lab Supplies WT | PV | 42374787 | LabChem Inc | 121.27 |
| 575545 | 13 | 11/24/2009 | Lab Supplies WT | PV | 42374793 | VWR International Inc-PO/REMIT | 198.13 |
| 575545 | 13 | 11/24/2009 | Lab Supplies WT | PV | 42374872 | VWR International Inc-PO/REMIT | 85.63 |
| 575545 | 13 | 11/24/2009 | Lab Supplies WT | PV | 42374873 | Hach Co - PO/Remit | 163.24 |
| 575545 | 13 | 11/24/2009 | Lab Supplies WT | PV | 42374886 | Scott Gross Co Inc | 17.68 |
| 575545 | 13 | 11/24/2009 | Lab Supplies WT | PV | 42375028 | Siemens Water Technologies Cor | 367.96 |
| 575620 | 14 | 11/24/2009 | Office \& Admin Supplies TD | PV | 42374739 | Contemporary Graphics | 60.26 |
| 575740 | 15 | 11/24/2009 | Telephone CA | TC | 30904762 | Windstream | 115.29 |
| 575740 | 16 | 11/24/2009 | Telephone AG | PV | 42375012 | Idearc Media Corp | 137.85 |
| 620000 | 24 | 11/24/2009 | Mat and Sup Maint TD | IR | 570139 | Inventory Return | -3,371.76 |
| 620000 | 24 | 11/24/2009 | Mat and Sup Maint TD | JE | 30904867 | bp non stock material to MJ | -401.16 |
| 620000 | 24 | 11/24/2009 | Mat and Sup Maint TD | JE | 30904872 | bp-non stock material to MJ | -69.77 |
| 620000 | 24 | 11/24/2009 | Mat and Sup Maint TD | JE | 30904881 | BP-non stock material to MJ | -63.04 |
| 620000 | 24 | 11/24/2009 | Mat and Sup Maint TD | JE | 30904902 | BP-non stock material to MJ | -8.58 |
| 620000 | 24 | 11/24/2009 | Mat and Sup Maint TD | JE | 30904906 | BP-non stock material to MJ | -144.98 |
| 620000 | 24 | 11/24/2009 | Mat and Sup Maint TD | JE | 30904909 | BP-non stock material to MJ | -44.26 |
| 620000 | 24 | 11/24/2009 | Mat and Sup Maint TD | JE | 30904934 | BP-non stock material to MJ | -36.04 |
| 620000 | 24 | 11/24/2009 | Mat and Sup Maint TD | JE | 30904989 | BP-non stock material to MJ | -234.24 |
| 620000 | 24 | 11/24/2009 | Mat and Sup Maint TD | JE | 30904990 | BP-non stock material to MJ | -117.12 |
| 620000 | 21 | 11/24/2009 | Mat and Sup Maint SS | PV | 42374687 | Neptune Technology - ALL USE R | 4,096.80 |
| 620000 | 21 | 11/24/2009 | Mat and Sup Maint SS | PV | 42374734 | Neptune Technology - ALL USE R | 1,064.53 |
| 620000 | 21 | 11/24/2009 | Mat and Sup Maint SS | PV | 42374737 | Neptune Technology - ALL USE R | 3,883.10 |
| 620000 | 24 | 11/24/2009 | Mat and Sup Maint TD | PV | 42374765 | Ferguson SAC - ALL USE REMIT | 2,686.66 |
| 675000 | 24 | 11/24/2009 | Misc Maint TD | PV | 42374679 | E H Wachs Co | 216.42 |
| 675000 | 24 | 11/24/2009 | Misc Maint TD | PV | 42374682 | Neptune Equipment Company-AP/P | 757.01 |
| 675000 | 26 | 11/24/2009 | Misc Maint AG | PV | 42374775 | Canon Financial Svcs Inc -REMI | 151.11 |
| 675000 | 26 | 11/24/2009 | Misc Maint AG | PV | 42374778 | Canon Financial Svcs Inc-REMI | 138.90 |



| ACCOUNT | SUB | GL DATE | DESCRIPTION | DOC TYPE | DOC\# | EXPLANATION | AMOUNT |
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| 401120 |  | 11/30/2009 | Res Sales Unbilled | JE | 121113 | Disc Unbill Revenue Adj 11.09 | 261,367.00 |
| 401120 |  | 11/30/2009 | Res Sales Unbilled | JE | 30905392 | UNBILLED REVENUE | -2,139,252.12 |
| 401220 |  | 11/30/2009 | Com Sales Unbilled | JE | 30905392 | UNBILLED REVENUE | -1,119,468.60 |
| 401310 |  | 11/30/2009 | Ind Sales Billed | JE | 121106 | Rev Billing Credit Adj SquareD | 13,261.12 |
| 401320 |  | 11/30/2009 | Ind Sales Unbilled | JE | 30905392 | UNBILLED REVENUE | -121,979.36 |
| 401420 |  | 11/30/2009 | Pub Fire Unbilled | JE | 121120 | Reverse Unbill Public Fire | 251,984.00 |
| 401420 |  | 11/30/2009 | Pub Fire Unbilled | JE | 30905392 | UNBILLED REVENUE | -251,983.50 |
| 401460 |  | 11/30/2009 | Priv Fire Unbilled | JE | 121102 | Reverse Unbilled Private Fire | 95,401.76 |
| 401460 |  | 11/30/2009 | Priv Fire Unbilled | JE | 30905392 | UNBILLED REVENUE | -95,401.76 |
| 401520 |  | 11/30/2009 | Pub Auth Unbilled | JE | 30905392 | UNBILLED REVENUE | -299,209.36 |
| 401620 |  | 11/30/2009 | Sales for Resale Unbilled | JE | 30905392 | UNBILLED REVENUE | -155,951.84 |
| 401630 | AW12 | 11/30/2009 | Sale for Resale AW09 | JE | 121107 | Owenton Wastewater Purc Water | -1,327.59 |
| 403003 | AW03 | 11/30/2009 | Oth Rev-Interco Rent | JE | 30905895 | 11/09 rent FRCC and Svc Co emp | -17,822.20 |
| 403102 |  | 11/30/2009 | Oth Rev-Rents Water Property | RI | 10137207 | T-Mobile USA Inc | -2,665.62 |
| 403103 |  | 11/30/2009 | Oth Rev-Collect for Others | JE | 50 | Accrue Sewer \& Landfill Rev | -254.34 |
| 501200 | 2410 | 11/30/2009 | Labor Maint TD Struct \& Imp | T2 | 35620 | Payroll Labor Distribution | 181.17 |
| 501200 | 24 | 11/30/2009 | Labor Maint TD | T2 | 35620 | Payroll Labor Distribution | 279.99 |
| 501200 | 2405 | 11/30/2009 | Labor Maint TD Super/Eng | T2 | 35620 | Payroll Labor Distribution | 464.65 |
| 501200 | 2415 | 11/30/2009 | Labor Maint TD Dist Res | T2 | 35620 | Payroll Labor Distribution | 643.23 |
| 501200 | 2305 | 11/30/2009 | Labor Maint WT Super/Eng | T2 | 35620 | Payroll Labor Distribution | 1,294.41 |
| 501200 | 2435 | 11/30/2009 | Labor Maint TD Meters | T2 | 35620 | Payroll Labor Distribution | 1,356.62 |
| 501200 | 23 | 11/30/2009 | Labor Maint WT | T2 | 35620 | Payroll Labor Distribution | 1,999.85 |
| 501200 | 22 | 11/30/2009 | Labor Maint P | T2 | 35620 | Payroll Labor Distribution | 2,409.17 |
| 501200 | 15 | 11/30/2009 | Labor Oper CA | T2 | 35620 | Payroll Labor Distribution | 3,753.99 |
| 501200 | 1405 | 11/30/2009 | Labor Oper TD Super/Eng | T2 | 35620 | Payroll Labor Distribution | 5,085.73 |
| 501200 | 1415 | 11/30/2009 | Labor Oper TD Lines | T2 | 35620 | Payroll Labor Distribution | 5,583.62 |
| 501200 | 1520 | 11/30/2009 | Labor Oper CA Cust Serv | T2 | 35620 | Payroll Labor Distribution | 6,121.63 |
| 501200 | 2440 | 11/30/2009 | Labor Maint TD Hydrants | T2 | 35620 | Payroll Labor Distribution | 6,201.15 |
| 501200 | 2420 | 11/30/2009 | Labor Maint TD Mains | T2 | 35620 | Payroll Labor Distribution | 7,005.80 |
| 501200 | 2430 | 11/30/2009 | Labor Maint TD Services | T2 | 35620 | Payroll Labor Distribution | 7,538.82 |
| 501200 | 1510 | 11/30/2009 | Labor Oper CA Mtr Read | T2 | 35620 | Payroll Labor Distribution | 15,802.47 |
| 501200 | 1305 | 11/30/2009 | Labor Oper WT Super/Eng | T2 | 35620 | Payroll Labor Distribution | 21,852.89 |
| 501200 | 1420 | 11/30/2009 | Labor Oper TD Meter | T2 | 35620 | Payroll Labor Distribution | 22,014.60 |
| 501200 | 16 | 11/30/2009 | Labor Oper AG | T2 | 35620 | Payroll Labor Distribution | 35,975.81 |
| 501200 | 13 | 11/30/2009 | Labor Oper WT | T2 | 35620 | Payroll Labor Distribution | 36,374.36 |
| 501200 | 14 | 11/30/2009 | Labor Oper TD | T2 | 35620 | Payroll Labor Distribution | 66,450.17 |
| 501200 | 13 | 11/30/2009 | Labor Oper WT | T3 | 35621 | Actual Burden Journal Entries | 37.80 |
| 501200 | 14 | 11/30/2009 | Labor Oper TD | 11 | 570984 | Inventory Issue-Stk E \& D | 175.66 |
| 501200 | 16 | 11/30/2009 | Labor Oper AG | RI | 10137267 | Arvin, William P. | -910.00 |
| 501200 | 16 | 11/30/2009 | Labor Oper AG | JE | 30905849 | Rcls PR charges from KY to IN | -1,639.18 |
| 501200 | 1305 | 11/30/2009 | Labor Oper WT Super/Eng | JE | 30906290 | FASTR - ALLOCATION KY_ALLEXP2 | -448.35 |
| 501200 | 13 | 11/30/2009 | Labor Oper WT | JE | 30906290 | FASTR - ALLOCATION KY_ALLEXP2 | -45.42 |
| 501210 | 1405 | 11/30/2009 | Labor NS OT TD Super/Eng | T2 | 35620 | Payroll Labor Distribution | 59.16 |
| 501210 | 2420 | 11/30/2009 | Labor NS OT TD Mains | T2 | 35620 | Payroll Labor Distribution | 234.36 |
| 501210 | 2430 | 11/30/2009 | Labor NS OT TD Services | T2 | 35620 | Payroll Labor Distribution | 234.42 |
| 501210 | 14 | 11/30/2009 | Labor NS OT TD | T2 | 35620 | Payroll Labor Distribution | 281.68 |
| 501210 | 1420 | 11/30/2009 | Labor NS OT TD Meter | T2 | 35620 | Payroll Labor Distribution | 291.62 |
| 501210 | 16 | 11/30/2009 | Labor NS OT AG | T2 | 35620 | Payroll Labor Distribution | 319.62 |
| 501210 | 2415 | 11/30/2009 | Labor NS OT TD Dist Res | T2 | 35620 | Payroll Labor Distribution | 643.68 |
| 501210 | 1520 | 11/30/2009 | Labor NS OT CA Cust Serv | T2 | 35620 | Payroll Labor Distribution | 772.28 |
| 501210 | 1415 | 11/30/2009 | Labor NS OT TD Lines | T2 | 35620 | Payroll Labor Distribution | 988.76 |
| 501210 | 1305 | 11/30/2009 | Labor NS OT WT Super/Eng | T2 | 35620 | Payroll Labor Distribution | 1,016.74 |
| 501210 | 1510 | 11/30/2009 | Labor NS OT CA Mtr Read | T2 | 35620 | Payroll Labor Distribution | 1,125.80 |
| 501210 | 13 | 11/30/2009 | Labor NS OT WT | T2 | 35620 | Payroll Labor Distribution | 3,311.06 |
| 501211 | 16 | 11/30/2009 | Labor OT AG | T2 | 35620 | Payroll Labor Distribution | 547.92 |
| 501211 | 13 | 11/30/2009 | Labor OT WT | T2 | 35620 | Payroll Labor Distribution | 4,308.96 |
| 501711 |  | 11/30/2009 | IP-Off-Annual-P/R JE | T3 | 35621 | Actual Burden Journal Entries | 10,805.72 |
| 501716 | 16 | 11/30/2009 | Comp Exp-Options | JE | 30905682 | Accrue RSU\&Opt Exp Nov09 | 619.00 |
| 501718 | 16 | 11/30/2009 | Comp Exp-RSU's | JE | 30905682 | Accrue RSU\&Opt Exp Nov09 | 552.00 |
| 504100 | 16 | 11/30/2009 | Group Ins Oper AG | JE |  | Retiree Reductions Nov 2009 | -2,720.50 |
| 504100 | 16 | 11/30/2009 | Group Ins Oper AG | JE |  | Allmerica Payment Nov 2009 | -365.20 |
| 504100 |  | 11/30/2009 | Group Insurance - Cap Credits | T1 | 35619 | Payroll Disbursement Entries | -60,538.12 |
| 504100 | 16 | 11/30/2009 | Group Ins Oper AG | T1 | 35619 | Payroll Disbursement Entries | -7,740.97 |
| 504100 | 16 | 11/30/2009 | Group Ins Oper AG | T3 | 35621 | Actual Burden Journal Entries | 2,398.78 |
| 504100 |  | 11/30/2009 | Group Insurance - Cap Credits | T3 | 35621 | Actual Burden Journal Entries | 51,200.10 |
| 504100 | 16 | 11/30/2009 | Group Ins Oper AG | JE | 30905849 | Rcls PR charges from KY to IN | -305.54 |
| 504100 | 16 | 11/30/2009 | Group Ins Oper AG | JE | 30905873 | Accrued Ins Nov 09 | -7,301.76 |
| 504100 | 1 | 11/30/2009 | Group Insurance - Cap Credits | JE | 30906458 | Capital OH TrueUp Nov2009 | 12,859.84 |
| 504620 | 16 | 11/30/2009 | Employee Physical Exam AG | JE | 121119 | Add'I PTP5 Accrual 11.09 | 3,843.00 |
| 504670 | 16 | 11/30/2009 | Training AG | CC | 6563 | DCA CERTIFICATION PROG | 60.00 |
| 505100 |  | 11/30/2009 | PBOP Cap Credits | T1 | 35619 | Payroll Disbursement Entries | -84,568.16 |
| 505100 |  | 11/30/2009 | PBOP Cap Credits | T3 | 35621 | Actual Burden Journal Entries | 72,160.27 |
| 505100 | 16 | 11/30/2009 | PBOP Oper AG | JE | 30905849 | Rcls PR charges from KY to IN | -226.21 |
| 505100 | 1 | 11/30/2009 | PBOP Cap Credits | JE | 30906458 | Capital OH TrueUp Nov2009 | -6,528.83 |
| 506100 | 16 | 11/30/2009 | Pension Oper AG | JR | 2002 | PENSION COST ALLOCATION | 139,476.59 |
| 506100 | 1 | 11/30/2009 | Pension - Cap Credits | T1 | 35619 | Payroll Disbursement Entries | -122,873.59 |
| 506100 |  | 11/30/2009 | Pension - Cap Credits | T3 | 35621 | Actual Burden Journal Entries | 104,845.49 |
| 506100 | 16 | 11/30/2009 | Pension Oper AG | JE | 30905849 | Rcls PR charges from KY to IN | -243.75 |
| 506100 |  | 11/30/2009 | Pension - Cap Credits | JE | 30906458 | Capital OH TrueUp Nov2009 | -11,443.29 |
| 507100 | 16 | 11/30/2009 | 401k Oper AG | T3 | 35621 | Actual Burden Journal Entries | 4,585.41 |
| 507100 | 16 | 11/30/2009 | 401k Oper AG | JE | 30905849 | Rcls PR charges from KY to IN | -162.61 |
| 507100 | 16 | 11/30/2009 | 401k Oper AG | JE | 30906290 | FASTR - ALLOCATION KY_ALLEXP2 | -7.38 |
| 508101 | 16 | 11/30/2009 | DCP Oper AG | T3 | 35621 | Actual Burden Journal Entries | 4,376.68 |
| 508102 | 16 | 11/30/2009 | Retiree Med Oper AG | T3 | 35621 | Actual Burden Journal Entries | 794.90 |






| ACCOUNT | SUB | GL DATE | DESCRIPTION | DOC TYPE | DOC\# | EXPLANATION | AMOUNT |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 820110 | AW46 | 11/30/2009 | Amort DExp Inside AW46 | JR | 1007 | Amortize debt Exp Inside | 6,666.70 |
| 820110 | AW46 | 11/30/2009 | Amort DExp Inside AW46 | JR |  | Amortize debt Exp Inside | 1,699.18 |
| 820110 | AW46 | 11/30/2009 | Amort DExp Inside AW46 | JR |  | Amortize debt Exp Inside | 921.99 |
| 830100 | AW46 | 11/30/2009 | Interest STD Inside | JE |  | Rec'd Mthly Trans pd by AWCC | 9,735.04 |
| 840000 |  | 11/30/2009 | Other Interest Expense | JE | 121103 | Recls Tax Var from Commw of KY | 765.04 |
| 850000 |  | 11/30/2009 | AFUDC Debt | F0 | 30906207 | AFUDC Debt | -91,385.76 |
| 860040 |  | 11/30/2009 | Div Dec PS-Out w/ mand | JE | 103 | Nov09 Interest Accrual | 31,762.50 |
| 860100 |  | 11/30/2009 | Div Dec Pref Stk-Outside | JE | 103 | Nov09 Interest Accrual | 6,510.50 |
| 860220 | AW02 | 11/30/2009 | Div Decl Com Stk In-AW02 | JE | 121114 | Accrue Common Dividends 11.09 | 2,006,260.48 |
| 401110 |  | 12/1/2009 | Res Sales Billed | JE | 30905812 | KY CIS POST GL BATCH | -229,640.44 |
| 401120 |  | 12/1/2009 | Res Sales Unbilled | JE | 121113 | Disc Unbill Revenue Adj 11.09 | -261,367.00 |
| 401120 |  | 12/1/2009 | Res Sales Unbilled | JE | 30905392 | UNBILLED REVENUE | 2,139,252.12 |
| 401210 |  | 12/1/2009 | Com Sales Billed | JE | 30905812 | KY CIS POST GL BATCH | -119,747.80 |
| 401220 |  | 12/1/2009 | Com Sales Unbilled | JE | 30905392 | UNBILLED REVENUE | 1,119,468.60 |
| 401310 |  | 12/1/2009 | Ind Sales Billed | JE | 121106 | Rev Billing Credit Adj SquareD | -13,261.12 |
| 401320 |  | 12/1/2009 | Ind Sales Unbilled | JE | 30905392 | UNBILLED REVENUE | 121,979.36 |
| 401420 |  | 12/1/2009 | Pub Fire Unbilled | JE | 121120 | Reverse Unbill Public Fire | -251,984.00 |
| 401420 |  | 12/1/2009 | Pub Fire Unbilled | JE | 30905392 | UNBILLED REVENUE | 251,983.50 |
| 401460 |  | 12/1/2009 | Priv Fire Unbilled | JE | 121102 | Reverse Unbilled Private Fire | -95,401.76 |
| 401460 |  | 12/1/2009 | Priv Fire Unbilled | JE | 30905392 | UNBILLED REVENUE | 95,401.76 |
| 401510 |  | 12/1/2009 | Pub Auth Billed | JE | 30905812 | KY CIS POST GL BATCH | -4,742.31 |
| 401520 |  | 12/1/2009 | Pub Auth Unbilled | JE | 30905392 | UNBILLED REVENUE | 299,209.36 |
| 401620 |  | 12/1/2009 | Sales for Resale Unbilled | JE | 30905392 | UNBILLED REVENUE | 155,951.84 |
| 402110 |  | 12/1/2009 | Dom WW Serv Billed | JE | 30905812 | KY CIS POST GL BATCH | -49.99 |
| 403102 |  | 12/1/2009 | Oth Rev-Rents Water Property | RR | 10136661 | Mcconathy, William - Remit | -95.00 |
| 403102 |  | 12/1/2009 | Oth Rev-Rents Water Property | RR | 10136663 | Cingular Wireless - El Paso, T | -2,546.99 |
| 403102 |  | 12/1/2009 | Oth Rev-Rents Water Property | RR | 10136806 | Sprint Nextel | -2,000.00 |
| 403104 |  | 12/1/2009 | Oth Rev-NSF Check Charge | JE | 30905812 | KY CIS POST GL BATCH | -672.00 |
| 403105 |  | 12/1/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30905812 | KY CIS POST GL BATCH | -2,782.00 |
| 403107 |  | 12/1/2009 | Oth Rev-Reconnection Charges | JE | 30905812 | KY CIS POST GL BATCH | -3,224.00 |
| 501200 | 16 | 12/1/2009 | Labor Oper AG | JE | 30905173 | labor accrual November 2009 | -22,141.23 |
| 501200 | 1305 | 12/1/2009 | Labor Oper WT Super/Eng | JE | 30905173 | labor accrual November 2009 | -900.05 |
| 501200 | 14 | 12/1/2009 | Labor Oper TD | JE | 30905173 | labor accrual November 2009 | -900.05 |
| 501200 | 1405 | 12/1/2009 | Labor Oper TD Super/Eng | JE | 30905173 | labor accrual November 2009 | -900.05 |
| 504100 | 16 | 12/1/2009 | Group Ins Oper AG | RR | 10136542 | Stokley, Susie | -128.34 |
| 504100 | 16 | 12/1/2009 | Group Ins Oper AG | RR | 10136543 | Bailey, Dorothy - Remit | -395.00 |
| 504100 | 16 | 12/1/2009 | Group Ins Oper AG | RR | 10136583 | White, Joe C. | -150.50 |
| 504100 | 16 | 12/1/2009 | Group Ins Oper AG | RR | 10136584 | Brown, Barbara K. | -50.00 |
| 504100 | 16 | 12/1/2009 | Group Ins Oper AG | RR | 10136677 | Allen, Euvonnia L. | -395.00 |
| 504100 | 16 | 12/1/2009 | Group Ins Oper AG | RR | 10136686 | Gooch, Wilma J. | -395.00 |
| 504100 | 16 | 12/1/2009 | Group Ins Oper AG | RR | 10136828 | Jones, Gene A. | -625.84 |
| 504100 | 16 | 12/1/2009 | Group Ins Oper AG | RI | 10137692 | Kinley, Victor E. | -141.00 |
| 504100 | 1 | 12/1/2009 | Group Insurance - Cap Credits | JE | 30906458 | Capital OH TrueUp Nov2009 | -12,859.84 |
| 504620 | 16 | 12/1/2009 | Employee Physical Exam AG | JE | 121119 | Add'I PTP5 Accrual 11.09 | -3,843.00 |
| 505100 | 1 | 12/1/2009 | PBOP Cap Credits | JE | 30906458 | Capital OH TrueUp Nov2009 | 6,528.83 |
| 506100 | 1 | 12/1/2009 | Pension - Cap Credits | JE | 30906458 | Capital OH TrueUp Nov2009 | 11,443.29 |
| 507100 | 16 | 12/1/2009 | 401k Oper AG | JE | 30904976 | 401(K) Accrual November 2009 | -538.73 |
| 508101 | 16 | 12/1/2009 | DCP Oper AG | JE | 30905193 | DCP Accrual for Nov 2009 | -504.24 |
| 511100 | 13 | 12/1/2009 | Waste Disposal Exp WT | JE | 156 | Accrue Discretion Power 11.09 | 177.89 |
| 515100 | 14 | 12/1/2009 | Purch Power TD | JE |  | Accrue Discretion Power 11.09 | 131.69 |
| 515100 | 13 | 12/1/2009 | Purch Power WT | JE |  | Accrue Discretion Power 11.09 | 1,023.19 |
| 515100 | 12 | 12/1/2009 | Purch Power P | JE | 156 | Accrue Discretion Power 11.09 | 2,159.49 |
| 520100 | 14 | 12/1/2009 | M \& S Oper TD | JE | 156 | Accrue Discretion Power 11.09 | 2.38 |
| 520100 | 14 | 12/1/2009 | M \& S Oper TD | ST | 30905511 | SABRIX VENDOR TAX COMPARE | . 33 |
| 533000 | 16 | 12/1/2009 | Contr Svc-Legal Oper AG | JE |  | Acc for Inv Rec'd but not appr | -6,015.05 |
| 550000 | 1 | 12/1/2009 | Trans - Cap Credits | JE | 30906458 | Capital OH TrueUp Nov2009 | -43,509.33 |
| 550001 | 16 | 12/1/2009 | Trans Oper AG Lease Cost | JE |  | ACCR ARI 11.09 \&6 ADDL DAYS | -3,558.12 |
| 558000 | 1 | 12/1/2009 | Ins Work Comp Cap Credits | JE | 30906458 | Capital OH TrueUp Nov2009 | -410.19 |
| 568010 | 16 | 12/1/2009 | Water Res Conservation | JE |  | Acc for Inv Rec'd but not appr | -8,710.00 |
| 570100 | 15 | 12/1/2009 | Uncollectible Accounts | JE | 30905812 | KY CIS POST GL BATCH | -260.30 |
| 575000 | 16 | 12/1/2009 | Misc Oper AG | JE |  | KY UNMAPPED PCARD ACCRUAL 1109 | -9.21 |
| 575000 | 16 | 12/1/2009 | Misc Oper AG | JE | 30906162 | FACORR:ACCRUAL FOR PI | 20,928.53 |
| 575002 | 16 | 12/1/2009 | Misc General Office | JE |  | Acc Goods/Serv Rend not invoic | -149.77 |
| 575030 | 16 | 12/1/2009 | Advertising | JE |  | KY UNMAPPED PCARD ACCRUAL 1109 | -669.00 |
| 575130 | 16 | 12/1/2009 | Brochures and Handouts | JE |  | Acc Goods/Serv Rend not invoic | -1,824.00 |
| 575200 | 15 | 12/1/2009 | Collection Agencies CA | JE | 31133 | GC Services November Accrual | -9,642.38 |
| 575220 | 16 | 12/1/2009 | Community Relations | JE |  | Acc Goods/Serv Rend not invoic | -200.00 |
| 575275 | 16 | 12/1/2009 | Discounts Available | PK | 62058119 | Mueller Co - ALL USE PO/REMIT | -256.95 |
| 575275 | 16 | 12/1/2009 | Discounts Available | PK | 62058121 | Ferguson SAC - ALL USE REMIT | -52.10 |
| 575280 | 16 | 12/1/2009 | Dues/Membership Deduct | JE |  | KY UNMAPPED PCARD ACCRUAL 1109 | -10.00 |
| 575320 | 13 | 12/1/2009 | Electricity WT | JE | 156 | Accrue Discretion Power 11.09 | 59.11 |
| 575320 | 14 | 12/1/2009 | Electricity TD | JE |  | Accrue Discretion Power 11.09 | 94.76 |
| 575320 | 16 | 12/1/2009 | Electricity AG | JE |  | Accrue Discretion Power 11.09 | 307.01 |
| 575320 | 13 | 12/1/2009 | Electricity WT | EE | 3997056 | BLUE GRASS ENERGY | 38.52 |
| 575320 | 14 | 12/1/2009 | Electricity TD | EE | 3999327 | OWEN ELECTRIC COOP INC | 9.06 |
| 575351 | 16 | 12/1/2009 | Meals Non Deduct | JE |  | KY UNMAPPED PCARD ACCRUAL 1109 | -198.28 |
| 575480 | 16 | 12/1/2009 | Heat - Oil/Gas AG | JE |  | Accrue Discretion Power 11.09 | 10.98 |
| 575480 | 14 | 12/1/2009 | Heat - Oil/Gas TD | JE |  | Accrue Discretion Power 11.09 | 127.35 |
| 575545 | 13 | 12/1/2009 | Lab Supplies WT | JE |  | Acc for Inv Rec'd but not appr | -2,220.65 |
| 575545 | 13 | 12/1/2009 | Lab Supplies WT | JE |  | Acc Goods/Serv Rend not invoic | -1,000.00 |
| 575625 | 16 | 12/1/2009 | Overnight Shipping AG | ST | 30905514 | SABRIX NO TAX CHARGED ACR | 2.06 |
| 575670 | 16 | 12/1/2009 | Relocation Expenses | JE | 121118 | Accr Inv from NEI Global 11.09 | -11,370.43 |
| 575711 | 16 | 12/1/2009 | Add'I Security Costs AG | JE |  | Acc for Inv Rec'd but not appr | -2,665.26 |
| 575715 | 16 | 12/1/2009 | Software Licenses \& Support | JE |  | KY UNMAPPED PCARD ACCRUAL 1109 | -2,294.90 |




| ACCOUNT | SUB | GL DATE ${ }^{\text {deSCRIPTION }}$ | DOC TYPE | DOC\# ${ }^{\text {E }}$ EXPLANATION | AMOUNT |
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| 403104 |  | 12/8/2009 Oth Rev-NSF Check Charge | JE | 30906732 KY CIS POST GL BATCH | -108.00 |
| 403105 |  | 12/8/2009 Oth Rev-Appl/Initiate Serv Fee | JE | 30906732 KY CIS POST GL BATCH | -3,848.00 |
| 403107 |  | 12/8/2009 Oth Rev-Reconnection Charges | JE | 30906732 KY CIS POST GL BATCH | -4,186.00 |
| 504100 | 16 | 12/8/2009 Group Ins Oper AG | RI | 10127475 Jones, Gene A. | 296.00 |
| 504100 | 16 | 12/8/2009 Group Ins Oper AG | RR | 10127833 Jones, Gene A. | 148.00 |
| 504100 | 16 | 12/8/2009 Group Ins Oper AG | RR | 10128264 Jones, Gene A. | 148.00 |
| 504100 | 16 | 12/8/2009 Group Ins Oper AG | RR | 10130496 Jones, Gene A. | 148.00 |
| 504100 | 16 | 12/8/2009 Group Ins Oper AG | RR | 10131946 Jones, Gene A. | 148.00 |
| 504100 | 16 | 12/8/2009 Group Ins Oper AG | RR | 10133397 Jones, Gene A. | 148.00 |
| 504100 | 16 | 12/8/2009 Group Ins Oper AG | RR | 10135144 Jones, Gene A. | 148.00 |
| 504660 | 16 | 12/8/2009 Tuition Aid AG | PS | 42386202 Columbia Southern University | 1,404.00 |
| 515100 | 14 | 12/8/2009 Purch Power TD | EE | 4008147 KU | 748.69 |
| 515100 | 12 | 12/8/2009 Purch Power P | EE | 4008148 KU | 1,107.86 |
| 515100 | 12 | 12/8/2009 Purch Power P | EE | 4008150 KU | 1,044.81 |
| 515100 | 12 | 12/8/2009 Purch Power P | EE | 4008152 KU | 3,769.56 |
| 515100 | 12 | 12/8/2009 Purch Power P | EE | 4008153 KU | 12,717.77 |
| 515100 | 12 | 12/8/2009 Purch Power P | EE | 4008154 KU | 103.94 |
| 515100 | 12 | 12/8/2009 Purch Power P | EE | 4008158 KU | 446.06 |
| 515100 | 14 | 12/8/2009 Purch Power TD | EE | 4008159 KU | 571.22 |
| 515100 | 12 | 12/8/2009 Purch Power P | EE | 4008162 KU | 7,024.29 |
| 515100 | 12 | 12/8/2009 Purch Power P | EE | 4008164 KU | 957.10 |
| 570100 | 15 | 12/8/2009 Uncollectible Accounts | JE | 30906732 KY CIS POST GL BATCH | -548.85 |
| 575275 | 16 | 12/8/2009 Discounts Available | PK | 62058175 Mueller Co - ALL USE PO/REMIT | -103.75 |
| 575320 | 13 | 12/8/2009 Electricity WT | EE | 4007935 KU | 11.09 |
| 575320 | 14 | 12/8/2009 Electricity TD | EE | 4007942 KU | 12.33 |
| 575480 | 14 | 12/8/2009 Heat - Oil/Gas TD | EE | 4009828 CLARK ENERGY COOP | 9.07 |
| 575480 | 14 | 12/8/2009 Heat - Oil/Gas TD | EE | 4009832 CLARK ENERGY COOP | 6.49 |
| 575740 | 15 | 12/8/2009 Telephone CA | TC | 30906583 Windstream | 66.95 |
| 575740 | 15 | 12/8/2009 Telephone CA | TC | 30906584 Windstream | 48.94 |
| 715111 |  | 12/8/2009 M\&J Revenues-Outside | RI | 10137586 Penrod Lumber \& Fence | -6,367.54 |
| 715111 |  | 12/8/2009 M\&J Revenues-Outside | RI | 10137587 Pro Build Homes | -726.44 |
| 715111 |  | 12/8/2009 M\&J Revenues-Outside | RI | 10137617 Nationwide Insurance | -1,391.48 |
| 715111 |  | 12/8/2009 M\&J Revenues-Outside | RI | 10137618 Alfa Insurance | -2,087.89 |
| 401110 |  | 12/9/2009 Res Sales Billed | JE | 30906940 KY CIS POST GL BATCH | -99,919.41 |
| 401210 |  | 12/9/2009 Com Sales Billed | JE | 30906940 KY CIS POST GL BATCH | -28,067.00 |
| 401310 |  | 12/9/2009 Ind Sales Billed | JE | 30906940 KY CIS POST GL BATCH | -1,715.98 |
| 401510 |  | 12/9/2009 Pub Auth Billed | JE | 30906940 KY CIS POST GL BATCH | -1,863.95 |
| 401710 |  | 12/9/2009 Misc Sales Billed | JE | 30906940 KY CIS POST GL BATCH | -4.82 |
| 402110 |  | 12/9/2009 Dom WW Serv Billed | JE | 30906940 KY CIS POST GL BATCH | -173.59 |
| 402210 |  | 12/9/2009 Com WW Serv Billed | JE | 30906940 KY CIS POST GL BATCH | -1,301.20 |
| 402510 |  | 12/9/2009 Pub Auth WW Svc Billed | JE | 30906940 KY CIS POST GL BATCH | -353.93 |
| 403104 |  | 12/9/2009 Oth Rev-NSF Check Charge | JE | 30906940 KY CIS POST GL BATCH | -108.00 |
| 403105 |  | 12/9/2009 Oth Rev-Appl/Initiate Serv Fee | JE | 30906940 KY CIS POST GL BATCH | -1,534.00 |
| 403107 |  | 12/9/2009 Oth Rev-Reconnection Charges | JE | 30906940 KY CIS POST GL BATCH | -1,404.00 |
| 504610 | 16 | 12/9/2009 Employee Awards AG | PV | 42386422 Tharpe Company Inc-REMIT | 799.90 |
| 510100 | 11 | 12/9/2009 Purchased Water-Outside | PV | 42386454 Gallatin County Water District | 854.39 |
| 511100 | 13 | 12/9/2009 Waste Disposal Exp WT | EE | 4010614 KU | 1,193.50 |
| 511100 | 13 | 12/9/2009 Waste Disposal Exp WT | EE | 4010616 KU | 2,085.97 |
| 515100 | 13 | 12/9/2009 Purch Power WT | EE | 4010618 KU | 7,495.67 |
| 515100 | 13 | 12/9/2009 Purch Power WT | EE | 4010621 KU | 4,777.47 |
| 515100 | 14 | 12/9/2009 Purch Power TD | EE | 4010624 KU | 28.78 |
| 515100 | 13 | 12/9/2009 Purch Power WT | EE | 4010626 KU | 727.94 |
| 515100 | 14 | 12/9/2009 Purch Power TD | EE | 4010628 KU | 134.26 |
| 515100 | 14 | 12/9/2009 Purch Power TD | EE | 4010629 KU | 75.18 |
| 515100 | 14 | 12/9/2009 Purch Power TD | EE | 4010634 KU | 80.89 |
| 515100 | 14 | 12/9/2009 Purch Power TD | EE | 4012537 KU | 33.35 |
| 520100 | 16 | 12/9/2009 M \& S Oper AG | PV | 42386459 Vital Records Control | 869.32 |
| 535000 | 14 | 12/9/2009 Contr Svc-Other Oper TD | PV | 42386447 Miller Septic Service | 200.00 |
| 535000 | 14 | 12/9/2009 Contr Svc-Other Oper TD | PV | 42386450 Cobb, Rodney | 656.35 |
| 535000 | 14 | 12/9/2009 Contr Svc-Other Oper TD | PV | 42386452 Cobb, Rodney | 589.00 |
| 535000 | 16 | 12/9/2009 Contr Svc-Other Oper AG | PV | 42386458 Happy's General Contracting- R | 2,327.50 |
| 535000 | 13 | 12/9/2009 Contr Svc-Other Oper WT | PV | 42386470 Siemens Water Technologies Cor | 367.96 |
| 535000 | 16 | 12/9/2009 Contr Svc-Other Oper AG | PV | 42386474 Grott Locksmith Center Inc | 142.24 |
| 535001 | 14 | 12/9/2009 Contr Svc-Temp Empl Oper TD | PV | 42386439 Volt Services Group | 217.58 |
| 535001 | 13 | 12/9/2009 Contr Svc-Temp Empl Oper WT | PV | 42386439 Volt Services Group | 954.05 |
| 535001 | 14 | 12/9/2009 Contr Svc-Temp Empl Oper TD | PV | 42386441 Volt Services Group | 217.58 |
| 535001 | 13 | 12/9/2009 Contr Svc-Temp Empl Oper WT | PV | 42386441 Volt Services Group | 1,071.21 |
| 541400 | 16 | 12/9/2009 Rents-Equipment Oper AG | PV | 42386465 Neopost Leasing | 213.33 |
| 550001 | 16 | 12/9/2009 Trans Oper AG Lease Cost | PV | 42386498 Automotive Rentals Inc ACH/ALL | 2,490.69 |
| 550002 | 16 | 12/9/2009 Trans Oper AG Lease Fuel | PV | 42386498 Automotive Rentals Inc ACH/ALL | 11,185.63 |
| 550003 | 16 | 12/9/2009 Trans Oper AG Lease Maint | PV | 42386498 Automotive Rentals Inc ACH/ALL | 9,947.32 |
| 570100 | 15 | 12/9/2009 Uncollectible Accounts | JE | 30906940 KY CIS POST GL BATCH | -346.21 |
| 575000 | 14 | 12/9/2009 Misc Oper TD | PV | 42386423 Model Apparel | 126.72 |
| 575320 | 14 | 12/9/2009 Electricity TD | EE | 4010623 KU | 869.07 |
| 575320 | 13 | 12/9/2009 Electricity WT | EE | 4010625 KU | 571.95 |
| 575320 | 14 | 12/9/2009 Electricity TD | EE | 4010627 KU | 165.90 |
| 575320 | 14 | 12/9/2009 Electricity TD | EE | 4010630 KU | 24.22 |
| 575320 | 13 | 12/9/2009 Electricity WT | EE | 4010632 KU | 52.16 |
| 575320 | 14 | 12/9/2009 Electricity TD | EE | 4010633 KU | 20.50 |
| 575350 | 16 | 12/9/2009 Meals Deduct | JE | 30906741 Reclass P-Card Errors | -108.28 |
| 575480 | 14 | 12/9/2009 Heat - Oil/Gas TD | EE | 4010631 KU | 89.03 |
| 575500 | 14 | 12/9/2009 Janitorial TD | PV | 42386451 Cobb, Rodney | 266.00 |
| 575545 | 13 | 12/9/2009 Lab Supplies WT | PV | 42386444 IDEXX Distribution Inc | 2,220.65 |
| 575545 | 13 | 12/9/2009 Lab Supplies WT | PV | 42386445 LabChem Inc | 119.61 |



| ACCOUNT | SUB | GL DATE | DESCRIPTION | DOC TYPE | DOC\# | EXPLANATION | AMOUNT |
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| 575000 | 16 | 12/12/2009 | Misc Oper AG | IB | 30907038 | Inventory Cost Change | -172.23 |
| 575000 | 16 | 12/12/2009 | Misc Oper AG | IB | 30907039 | Inventory Cost Change | -24.60 |
| 575000 | 16 | 12/12/2009 | Misc Oper AG | IB | 30907040 | Inventory Cost Change | -104.16 |
| 575000 | 16 | 12/12/2009 | Misc Oper AG | IB | 30907041 | Inventory Cost Change | -301.32 |
| 501200 | 2410 | 12/13/2009 | Labor Maint TD Struct \& Imp | T2 | 35813 | Payroll Labor Distribution | 21.96 |
| 501200 | 24 | 12/13/2009 | Labor Maint TD | T2 | 35813 | Payroll Labor Distribution | 399.80 |
| 501200 | 2415 | 12/13/2009 | Labor Maint TD Dist Res | T2 | 35813 | Payroll Labor Distribution | 467.80 |
| 501200 | 2405 | 12/13/2009 | Labor Maint TD Super/Eng | T2 | 35813 | Payroll Labor Distribution | 597.42 |
| 501200 | 2305 | 12/13/2009 | Labor Maint WT Super/Eng | T2 | 35813 | Payroll Labor Distribution | 1,792.26 |
| 501200 | 22 | 12/13/2009 | Labor Maint P | T2 | 35813 | Payroll Labor Distribution | 2,572.90 |
| 501200 | 23 | 12/13/2009 | Labor Maint WT | T2 | 35813 | Payroll Labor Distribution | 3,181.04 |
| 501200 | 2435 | 12/13/2009 | Labor Maint TD Meters | T2 | 35813 | Payroll Labor Distribution | 3,362.31 |
| 501200 | 1405 | 12/13/2009 | Labor Oper TD Super/Eng | T2 | 35813 | Payroll Labor Distribution | 4,396.46 |
| 501200 | 15 | 12/13/2009 | Labor Oper CA | T2 | 35813 | Payroll Labor Distribution | 5,189.35 |
| 501200 | 2440 | 12/13/2009 | Labor Maint TD Hydrants | T2 | 35813 | Payroll Labor Distribution | 5,373.04 |
| 501200 | 2430 | 12/13/2009 | Labor Maint TD Services | T2 | 35813 | Payroll Labor Distribution | 5,822.69 |
| 501200 | 1415 | 12/13/2009 | Labor Oper TD Lines | T2 | 35813 | Payroll Labor Distribution | 6,625.25 |
| 501200 | 1520 | 12/13/2009 | Labor Oper CA Cust Serv | T2 | 35813 | Payroll Labor Distribution | 8,106.85 |
| 501200 | 2420 | 12/13/2009 | Labor Maint TD Mains | T2 | 35813 | Payroll Labor Distribution | 10,809.43 |
| 501200 | 1510 | 12/13/2009 | Labor Oper CA Mtr Read | T2 | 35813 | Payroll Labor Distribution | 20,863.70 |
| 501200 | 1305 | 12/13/2009 | Labor Oper WT Super/Eng | T2 | 35813 | Payroll Labor Distribution | 22,888.07 |
| 501200 | 1420 | 12/13/2009 | Labor Oper TD Meter | T2 | 35813 | Payroll Labor Distribution | 30,321.45 |
| 501200 | 13 | 12/13/2009 | Labor Oper WT | T2 | 35813 | Payroll Labor Distribution | 30,648.54 |
| 501200 | 16 | 12/13/2009 | Labor Oper AG | T2 | 35813 | Payroll Labor Distribution | 35,699.00 |
| 501200 | 14 | 12/13/2009 | Labor Oper TD | T2 | 35813 | Payroll Labor Distribution | 39,483.83 |
| 501210 | 2415 | 12/13/2009 | Labor NS OT TD Dist Res | T2 | 35813 | Payroll Labor Distribution | 35.54 |
| 501210 | 1405 | 12/13/2009 | Labor NS OT TD Super/Eng | T2 | 35813 | Payroll Labor Distribution | 58.59 |
| 501210 | 15 | 12/13/2009 | Labor NS OT CA | T2 | 35813 | Payroll Labor Distribution | 140.46 |
| 501210 | 2430 | 12/13/2009 | Labor NS OT TD Services | T2 | 35813 | Payroll Labor Distribution | 274.71 |
| 501210 | 1420 | 12/13/2009 | Labor NS OT TD Meter | T2 | 35813 | Payroll Labor Distribution | 349.40 |
| 501210 | 2420 | 12/13/2009 | Labor NS OT TD Mains | T2 | 35813 | Payroll Labor Distribution | 589.66 |
| 501210 | 14 | 12/13/2009 | Labor NS OT TD | T2 | 35813 | Payroll Labor Distribution | 706.27 |
| 501210 | 1305 | 12/13/2009 | Labor NS OT WT Super/Eng | T2 | 35813 | Payroll Labor Distribution | 765.02 |
| 501210 | 1415 | 12/13/2009 | Labor NS OT TD Lines | T2 | 35813 | Payroll Labor Distribution | 1,208.55 |
| 501210 | 1520 | 12/13/2009 | Labor NS OT CA Cust Serv | T2 | 35813 | Payroll Labor Distribution | 2,009.51 |
| 501210 | 1510 | 12/13/2009 | Labor NS OT CA Mtr Read | T2 | 35813 | Payroll Labor Distribution | 2,896.69 |
| 501210 | 13 | 12/13/2009 | Labor NS OT WT | T2 | 35813 | Payroll Labor Distribution | 5,090.76 |
| 501711 |  | 12/13/2009 | IP-Off-Annual-P/R JE | T3 | 35814 | Actual Burden Journal Entries | 10,779.17 |
| 504100 | 16 | 12/13/2009 | Group Ins Oper AG | T3 | 35814 | Actual Burden Journal Entries | 1,972.12 |
| 504100 | 1 | 12/13/2009 | Group Insurance - Cap Credits | T3 | 35814 | Actual Burden Journal Entries | 37,383.27 |
| 505100 | 1 | 12/13/2009 | PBOP Cap Credits | T3 | 35814 | Actual Burden Journal Entries | 31,484.71 |
| 506100 | 1 | 12/13/2009 | Pension - Cap Credits | T3 | 35814 | Actual Burden Journal Entries | 43,532.55 |
| 507100 | 16 | 12/13/2009 | 401k Oper AG | T3 | 35814 | Actual Burden Journal Entries | 4,182.00 |
| 508101 | 16 | 12/13/2009 | DCP Oper AG | T3 | 35814 | Actual Burden Journal Entries | 4,028.71 |
| 550000 | 1 | 12/13/2009 | Trans - Cap Credits | T3 | 35814 | Actual Burden Journal Entries | 32,518.51 |
| 558000 | 1 | 12/13/2009 | Ins Work Comp Cap Credits | T3 | 35814 | Actual Burden Journal Entries | 4,864.90 |
| 575340 | 16 | 12/13/2009 | Employee Expenses AG | T3 | 35814 | Actual Burden Journal Entries | 456.33 |
| 575350 | 16 | 12/13/2009 | Meals Deduct | T3 | 35814 | Actual Burden Journal Entries | 35.00 |
| 685325 |  | 12/13/2009 | FICA | T3 | 35814 | Actual Burden Journal Entries | 18,083.61 |
| 716121 |  | 12/13/2009 | M\&J Expenses-Outside | T2 | 35813 | Payroll Labor Distribution | 10,877.66 |
| 716121 |  | 12/13/2009 | M\&J Expenses-Outside | T3 | 35814 | Actual Burden Journal Entries | 4,499.05 |
| 401110 |  | 12/14/2009 | Res Sales Billed | JE | 30907319 | KY CIS POST GL BATCH | -92,590.39 |
| 401210 |  | 12/14/2009 | Com Sales Billed | JE | 30907319 | KY CIS POST GL BATCH | -42,786.78 |
| 401310 |  | 12/14/2009 | Ind Sales Billed | JE | 30907319 | KY CIS POST GL BATCH | -3,457.87 |
| 401510 |  | 12/14/2009 | Pub Auth Billed | JE | 30907319 | KY CIS POST GL BATCH | -3,864.18 |
| 403103 |  | 12/14/2009 | Oth Rev-Collect for Others | RI | 10138503 | Sadieville City of - REMIT | -184.86 |
| 403103 |  | 12/14/2009 | Oth Rev-Collect for Others | RI | 10138504 | Lexington-Fayette Div Of Rev P | -92,929.65 |
| 403104 |  | 12/14/2009 | Oth Rev-NSF Check Charge | JE | 30907319 | KY CIS POST GL BATCH | -168.00 |
| 403105 |  | 12/14/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30907319 | KY CIS POST GL BATCH | -2,314.00 |
| 403107 |  | 12/14/2009 | Oth Rev-Reconnection Charges | JE | 30907319 | KY CIS POST GL BATCH | -2,314.00 |
| 504100 | 16 | 12/14/2009 | Group Ins Oper AG | RI | 10138474 | Kinley, Victor E. | -141.00 |
| 535000 | 16 | 12/14/2009 | Contr Svc-Other Oper AG | ST | 30907267 | SABRIX VENDOR TAX COMPARE | 5.10 |
| 570100 | 15 | 12/14/2009 | Uncollectible Accounts | JE | 30907319 | KY CIS POST GL BATCH | -297.87 |
| 575480 | 14 | 12/14/2009 | Heat - Oil/Gas TD | EE | 4017170 | CARROLLTON MUNICIPAL UTILITIES | 209.30 |
| 575545 | 13 | 12/14/2009 | Lab Supplies WT | ST | 30907267 | SABRIX VENDOR TAX COMPARE | 4.77 |
| 575545 | 13 | 12/14/2009 | Lab Supplies WT | ST | 30907273 | SABRIX NO TAX CHARGED ACR | 7.18 |
| 575620 | 16 | 12/14/2009 | Office \& Admin Supplies AG | JE | 30907178 | Reclass P-Card Errors | 73.16 |
| 575660 | 16 | 12/14/2009 | Postage AG | ST | 30907273 | SABRIX NO TAX CHARGED ACR | 81.34 |
| 575998 | 16 | 12/14/2009 | PCard Undistributed | JE | 30907178 | Reclass P-Card Errors | -289.72 |
| 620000 | 21 | 12/14/2009 | Mat and Sup Maint SS | ST | 30907273 | SABRIX NO TAX CHARGED ACR | 8.26 |
| 675000 | 26 | 12/14/2009 | Misc Maint AG | ST | 30907267 | SABRIX VENDOR TAX COMPARE | 8.90 |
| 675000 | 26 | 12/14/2009 | Misc Maint AG | PV | 42389430 | Versytec LLC | 1,566.20 |
| 675000 | 26 | 12/14/2009 | Misc Maint AG | PV | 42389457 | Vertex Business Services - Wir | 1.34 |
| 675000 | 26 | 12/14/2009 | Misc Maint AG | PV | 42389463 | Vertex Business Services - Wir | 1.34 |
| 715111 |  | 12/14/2009 | M\&J Revenues-Outside | RI | 10138190 | Century Account Services Inc- | -457.65 |
| 715111 |  | 12/14/2009 | M\&J Revenues-Outside | RI | 10138484 | Metropolitian Insurance | -338.56 |
| 401110 |  | 12/15/2009 | Res Sales Billed | JE | 30907405 | KY CIS POST GL BATCH | -99,250.02 |
| 401210 |  | 12/15/2009 | Com Sales Billed | JE | 30907405 | KY CIS POST GL BATCH | -38,246.75 |
| 401510 |  | 12/15/2009 | Pub Auth Billed | JE | 30907405 | KY CIS POST GL BATCH | -6,808.00 |
| 403104 |  | 12/15/2009 | Oth Rev-NSF Check Charge | JE | 30907405 | KY CIS POST GL BATCH | -156.00 |
| 403105 |  | 12/15/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30907405 | KY CIS POST GL BATCH | -3,406.00 |
| 403107 |  | 12/15/2009 | Oth Rev-Reconnection Charges | JE | 30907405 | KY CIS POST GL BATCH | -2,704.00 |
| 504620 | 16 | 12/15/2009 | Employee Physical Exam AG | PV | 42391015 | BaptistWorx Business Office | 35.00 |
| 510100 |  | 12/15/2009 | Purchased Water-Outside | PV | 42391226 | Winchester Municipal Utilities | 5,005.92 |


| ACCOUNT | SUB | GL DATE | DESCRIPTION | DOC TYPE | DOC\# ${ }^{\text {EXPLANATION }}$ | AMOUNT |
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| 515100 | 13 | 12/15/2009 | Purch Power WT | PS | 42391026 Kentucky Department of Revenue | 2,335.83 |
| 520100 | 16 | 12/15/2009 | M \& S Oper AG | PV | 42390853 Grainger - ALL USE REMIT | 1,720.99 |
| 533000 | 16 | 12/15/2009 | Contr Svc-Legal Oper AG | PV | 42391069 Stoll Keenon Ogden PLLC-PO/REM | 2,137.50 |
| 535000 | 15 | 12/15/2009 | Contr Svc-Other Oper CA | TC | 30907196 Intelliwire | 14.95 |
| 535000 | 15 | 12/15/2009 | Contr Svc-Other Oper CA | TC | 30907222 Language Services | 924.60 |
| 535000 | 16 | 12/15/2009 | Contr Svc-Other Oper AG | PV | 42390824 Dixon Electric Inc-PO/REMIT | 260.19 |
| 535000 | 16 | 12/15/2009 | Contr Svc-Other Oper AG | PV | 42391034 Lexington Tree Service Inc-PO/ | 306.00 |
| 535001 | 14 | 12/15/2009 | Contr Svc-Temp Empl Oper TD | PV | 42391040 Volt Services Group | 117.16 |
| 535001 | 13 | 12/15/2009 | Contr Svc-Temp Empl Oper WT | PV | 42391040 Volt Services Group | 937.30 |
| 535001 | 15 | 12/15/2009 | Contr Svc-Temp Empl Oper CA | PV | 42391210 VeBridge | 950.00 |
| 550000 | 16 | 12/15/2009 | Trans Oper AG | PV | 42391020 Bridgestone Americas Inc | 22.50 |
| 550000 | 16 | 12/15/2009 | Trans Oper AG | PV | 42391024 Bridgestone Americas Inc | 553.12 |
| 550000 | 16 | 12/15/2009 | Trans Oper AG | PV | 42391032 Bridgestone Americas Inc | 22.50 |
| 570100 | 15 | 12/15/2009 | Uncollectible Accounts | JE | 30907405 KY CIS POST GL BATCH | -110.76 |
| 575000 | 14 | 12/15/2009 | Misc Oper TD | PV | 42390844 Grainger - ALL USE REMIT | 310.61 |
| 575000 | 14 | 12/15/2009 | Misc Oper TD | PV | 42390847 Grainger - ALL USE REMIT | 488.17 |
| 575000 | 14 | 12/15/2009 | Misc Oper TD | PV | 42390876 USA Blue Book | 460.68 |
| 575275 | 16 | 12/15/2009 | Discounts Available | PK | 62058232 USA Blue Book | -4.61 |
| 575275 | 16 | 12/15/2009 | Discounts Available | PK | 62058235 Ford Meter Box Co Inc - ALL US | -313.68 |
| 575340 | 16 | 12/15/2009 | Employee Expenses AG | PV | 42391047 Contemporary Graphics Inc | 52.92 |
| 575350 | 16 | 12/15/2009 | Meals Deduct | PV | 42391202 Commerce Lexington-PO/REMIT | 50.00 |
| 575620 | 13 | 12/15/2009 | Office \& Admin Supplies WT | PV | 42391035 Contemporary Graphics Inc | 52.92 |
| 575620 | 16 | 12/15/2009 | Office \& Admin Supplies AG | PV | 42391072 United Parcel Service | 39.54 |
| 575620 | 16 | 12/15/2009 | Office \& Admin Supplies AG | PV | 42391089 United Parcel Service | 370.32 |
| 575620 | 16 | 12/15/2009 | Office \& Admin Supplies AG | PV | 42391198 United Parcel Service | 86.28 |
| 575711 | 16 | 12/15/2009 | Add'l Security Costs AG | PV | 42391216 Murray Guard Inc-PO/REMIT | 715.20 |
| 575711 | 16 | 12/15/2009 | Add'I Security Costs AG | PV | 42391220 Murray Guard Inc-PO/REMIT | 2,485.99 |
| 575740 | 14 | 12/15/2009 | Telephone TD | TC | 30907243 Cincinnati Bell | 18.75 |
| 575741 | 14 | 12/15/2009 | Cell Phone TD | TC | 30907250 Verizon Wireless | 74.31 |
| 575741 | 16 | 12/15/2009 | Cell Phone AG | TC | 30907253 Nextel Communications | 76.71 |
| 575780 | 16 | 12/15/2009 | Trash Removal AG | PV | 42390822 Lexington Fayette Urban County | 132.55 |
| 575780 | 16 | 12/15/2009 | Trash Removal AG | PV | 42391033 Allied Waste Services \#993 | 188.91 |
| 575780 | 16 | 12/15/2009 | Trash Removal AG | PV | 42391036 Rumpke of Ind LLC-REMIT-ALL AC | 80.82 |
| 575830 | 11 | 12/15/2009 | Wtr \& Waste Wtr Exp SS | PV | 42391038 Kentucky American Water | 3,472.53 |
| 620000 | 24 | 12/15/2009 | Mat and Sup Maint TD | PV | 42390862 Mueller Co - ALL USE PO/REMIT | 178.42 |
| 620000 | 24 | 12/15/2009 | Mat and Sup Maint TD | PV | 42390880 Grainger - ALL USE REMIT | 94.86 |
| 620000 | 23 | 12/15/2009 | Mat and Sup Maint WT | PV | 42391044 Airgas Mid America-REMIT | 100.59 |
| 675650 | 24 | 12/15/2009 | Paving/Backfill TD | PV | 42390902 HG Wilson \& Sons Contractors I | 7,458.00 |
| 760400 |  | 12/15/2009 | Other Lobbying Expenses | PV | 42391498 McCarthy Strategic Solutions L | 4,622.45 |
| 401110 |  | 12/16/2009 | Res Sales Billed | JE | 30907616 KY CIS POST GL BATCH | -103,608.28 |
| 401210 |  | 12/16/2009 | Com Sales Billed | JE | 30907616 KY CIS POST GL BATCH | -39,591.72 |
| 401310 |  | 12/16/2009 | Ind Sales Billed | JE | 30907616 KY CIS POST GL BATCH | -9,980.72 |
| 401450 |  | 12/16/2009 | Priv Fire Billed | JE | 30907616 KY CIS POST GL BATCH | 66.99 |
| 401510 |  | 12/16/2009 | Pub Auth Billed | JE | 30907616 KY CIS POST GL BATCH | -3,016.28 |
| 402110 |  | 12/16/2009 | Dom WW Serv Billed | JE | 30907616 KY CIS POST GL BATCH | -14.80 |
| 403104 |  | 12/16/2009 | Oth Rev-NSF Check Charge | JE | 30907616 KY CIS POST GL BATCH | -72.00 |
| 403105 |  | 12/16/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30907616 KY CIS POST GL BATCH | -1,768.00 |
| 403107 |  | 12/16/2009 | Oth Rev-Reconnection Charges | JE | 30907616 KY CIS POST GL BATCH | -1,612.00 |
| 515100 | 12 | 12/16/2009 | Purch Power P | EE | 4019558 KU | 570.79 |
| 515100 | 14 | 12/16/2009 | Purch Power TD | EE | 4019564 KU | 22.73 |
| 515100 | 14 | 12/16/2009 | Purch Power TD | EE | 4019574 KU | 62.54 |
| 515100 | 14 | 12/16/2009 | Purch Power TD | EE | 4019580 KU | 25.09 |
| 515100 | 14 | 12/16/2009 | Purch Power TD | EE | 4020570 KU | 24.36 |
| 515100 | 13 | 12/16/2009 | Purch Power WT | EE | 4020574 KU | 235.92 |
| 515100 | 14 | 12/16/2009 | Purch Power TD | EE | 4020577 KU | 32.38 |
| 515100 | 14 | 12/16/2009 | Purch Power TD | EE | 4020591 KU | 12.57 |
| 515100 | 13 | 12/16/2009 | Purch Power WT | EE | 4020647 KU | 2,532.74 |
| 515100 | 14 | 12/16/2009 | Purch Power TD | EE | 4020659 KU | 67.62 |
| 515100 | 14 | 12/16/2009 | Purch Power TD | EE | 4020668 KU | 84.83 |
| 550000 | 16 | 12/16/2009 | Trans Oper AG | ST | 30907375 SABRIX VENDOR TAX COMPARE | 4.44 |
| 550000 | 16 | 12/16/2009 | Trans Oper AG | ST | 30907379 SABRIX NO TAX CHARGED ACR | 2.70 |
| 570100 | 15 | 12/16/2009 | Uncollectible Accounts | JE | 30907616 KY CIS POST GL BATCH | -1,814.08 |
| 575000 | 16 | 12/16/2009 | Misc Oper AG | IA | 47573 PI ADJUSTMENT | -362.02 |
| 575000 | 16 | 12/16/2009 | Misc Oper AG | IA | 47576 PI ADJUSTMENT | -131.35 |
| 575000 | 16 | 12/16/2009 | Misc Oper AG | IA | 47578 PI ADJUSTMENT | -150.88 |
| 575000 | 16 | 12/16/2009 | Misc Oper AG | IA | 47581 PI ADJUSTMENT | -53.77 |
| 575000 | 16 | 12/16/2009 | Misc Oper AG | IA | 47585 PI ADJUSTMENT | -39.30 |
| 575000 | 16 | 12/16/2009 | Misc Oper AG | IA | 47586 PI ADJUSTMENTS | -12.21 |
| 575000 | 14 | 12/16/2009 | Misc Oper TD | ST | 30907379 SABRIX NO TAX CHARGED ACR | 27.64 |
| 575000 | 16 | 12/16/2009 | Misc Oper AG | IB | 30907420 Inventory Cost Change | -523.35 |
| 575000 | 16 | 12/16/2009 | Misc Oper AG | IB | 30907421 Inventory Cost Change | -423.83 |
| 575000 | 16 | 12/16/2009 | Misc Oper AG | IB | 30907422 Inventory Cost Change | -498.04 |
| 575000 | 16 | 12/16/2009 | Misc Oper AG | IB | 30907423 Inventory Cost Change | -397.34 |
| 575000 | 16 | 12/16/2009 | Misc Oper AG | IB | 30907424 Inventory Cost Change | -34.65 |
| 575000 | 16 | 12/16/2009 | Misc Oper AG | IB | 30907436 Inventory Cost Change | -445.97 |
| 575000 | 16 | 12/16/2009 | Misc Oper AG | IB | 30907438 Inventory Cost Change | 445.97 |
| 575000 | 16 | 12/16/2009 | Misc Oper AG | IB | 30907440 Inventory Cost Change | -462.49 |
| 575000 | 16 | 12/16/2009 | Misc Oper AG | IB | 30907443 Inventory Cost Change | -173.43 |
| 575000 | 16 | 12/16/2009 | Misc Oper AG | IB | 30907444 Inventory Cost Change | -175.98 |
| 575000 | 16 | 12/16/2009 | Misc Oper AG | IB | 30907449 Inventory Cost Change | -145.25 |
| 575000 | 16 | 12/16/2009 | Misc Oper AG | IB | 30907453 Inventory Cost Change | -165.17 |
| 575000 | 16 | 12/16/2009 | Misc Oper AG | IB | 30907454 Inventory Cost Change | -203.71 |
| 575000 | 16 | 12/16/2009 | Misc Oper AG | IB | 30907458 Inventory Cost Change | -132.14 |
| 575000 | 16 | 12/16/2009 | Misc Oper AG | IB | 30907459 Inventory Cost Change | -105.63 |


| ACCOUNT | SUB | GL DATE | DESCRIPTION | DOC TYPE | DOC\# ${ }^{\text {E }}$ - EXPLANATION | AMOUNT |
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| 575000 | 16 | 12/16/2009 | Misc Oper AG | IB | 30907460 Inventory Cost Change | -85.83 |
| 575000 | 16 | 12/16/2009 | Misc Oper AG | IB | 30907461 Inventory Cost Change | -82.59 |
| 575000 | 16 | 12/16/2009 | Misc Oper AG | IB | 30907463 Inventory Cost Change | -66.02 |
| 575000 | 16 | 12/16/2009 | Misc Oper AG | IB | 30907464 Inventory Cost Change | -167.23 |
| 575000 | 16 | 12/16/2009 | Misc Oper AG | IB | 30907466 Inventory Cost Change | -105.35 |
| 575000 | 16 | 12/16/2009 | Misc Oper AG | IB | 30907467 Inventory Cost Change | -107.89 |
| 575000 | 16 | 12/16/2009 | Misc Oper AG | IB | 30907468 Inventory Cost Change | -57.81 |
| 575000 | 16 | 12/16/2009 | Misc Oper AG | IB | 30907469 Inventory Cost Change | -33.03 |
| 575000 | 16 | 12/16/2009 | Misc Oper AG | IB | 30907470 Inventory Cost Change | -19.81 |
| 575000 | 16 | 12/16/2009 | Misc Oper AG | IB | 30907471 Inventory Cost Change | -97.82 |
| 575000 | 16 | 12/16/2009 | Misc Oper AG | IB | 30907472 Inventory Cost Change | -6.60 |
| 575000 | 16 | 12/16/2009 | Misc Oper AG | IB | 30907473 Inventory Cost Change | -8.26 |
| 575000 | 16 | 12/16/2009 | Misc Oper AG | IB | 30907474 Inventory Cost Change | -26.41 |
| 575000 | 16 | 12/16/2009 | Misc Oper AG | IB | 30907475 Inventory Cost Change | -190.53 |
| 575000 | 16 | 12/16/2009 | Misc Oper AG | IB | 30907476 Inventory Cost Change | -622.40 |
| 575275 | 16 | 12/16/2009 | Discounts Available | PK | 62058245 Mueller Co - ALL USE PO/REMIT | -188.01 |
| 575320 | 14 | 12/16/2009 | Electricity TD | EE | 4019568 KU | 12.23 |
| 575340 | 16 | 12/16/2009 | Employee Expenses AG | ST | 30907379 SABRIX NO TAX CHARGED ACR | 3.18 |
| 575420 | 15 | 12/16/2009 | Forms CA | PV | 42391728 Regulus Integrated Solutions L | 1,518.24 |
| 575420 | 15 | 12/16/2009 | Forms CA | PV | 42391736 Regulus Integrated Solutions L | 11,034.27 |
| 575420 | 15 | 12/16/2009 | Forms CA | PV | 42391741 Regulus Integrated Solutions L | 2,511.18 |
| 575620 | 13 | 12/16/2009 | Office \& Admin Supplies WT | ST | 30907379 SABRIX NO TAX CHARGED ACR | 3.18 |
| 575830 | 11 | 12/16/2009 | Wtr \& Waste Wtr Exp SS | ST | 30907379 SABRIX NO TAX CHARGED ACR | 208.35 |
| 620000 | 24 | 12/16/2009 | Mat and Sup Maint TD | 11 | 5689773635 Rockdale | 16.30 |
| 620000 | 24 | 12/16/2009 | Mat and Sup Maint TD | II | 5689872710 Hammonds School Rd | 16.41 |
| 620000 | 24 | 12/16/2009 | Mat and Sup Maint TD | 11 | 569354632 Village Ln. New Liberty | 16.41 |
| 620000 | 24 | 12/16/2009 | Mat and Sup Maint TD | 11 | 570240140 New Liberty | 6.60 |
| 620000 | 24 | 12/16/2009 | Mat and Sup Maint TD | 11 | 5702427515 Hwy 127N | 8.15 |
| 620000 | 24 | 12/16/2009 | Mat and Sup Maint TD | 11 | 5722213635 Jonesville Rd. | 26.26 |
| 620000 | 24 | 12/16/2009 | Mat and Sup Maint TD | 11 | 57369450 Elmer Davis lake | 55.22 |
| 620000 | 24 | 12/16/2009 | Mat and Sup Maint TD | IR | 573844 Inventory Return | -7.30 |
| 620000 | 24 | 12/16/2009 | Mat and Sup Maint TD | 11 | 573845 Inventory Issue-Stk E \& D | 199.53 |
| 620000 | 24 | 12/16/2009 | Mat and Sup Maint TD | IR | 573848 Inventory Return | -2.66 |
| 620000 | 24 | 12/16/2009 | Mat and Sup Maint TD | IR | 573850 Inventory Return | -239.82 |
| 620000 | 24 | 12/16/2009 | Mat and Sup Maint TD | IR | 573852 Inventory Return | -34.19 |
| 620000 | 24 | 12/16/2009 | Mat and Sup Maint TD | IR | 573854 Inventory Return | -40.69 |
| 620000 | 24 | 12/16/2009 | Mat and Sup Maint TD | IR | 573856 Inventory Return | -25.56 |
| 620000 | 24 | 12/16/2009 | Mat and Sup Maint TD | IR | 573858 Inventory Return | -625.21 |
| 620000 | 24 | 12/16/2009 | Mat and Sup Maint TD | IR | 573860 Inventory Return | -73.85 |
| 620000 | 24 | 12/16/2009 | Mat and Sup Maint TD | IR | 573862 Inventory Return | -38.10 |
| 620000 | 24 | 12/16/2009 | Mat and Sup Maint TD | ST | 30907379 SABRIX NO TAX CHARGED ACR | 10.71 |
| 716121 |  | 12/16/2009 | M\&J Expenses-Outside | II | 573843 Inventory Issue-Stk E \& D | 7.30 |
| 716121 |  | 12/16/2009 | M\&J Expenses-Outside | 11 | 573849 Inventory Issue-Stk E \& D | 239.83 |
| 716121 |  | 12/16/2009 | M\&J Expenses-Outside | 11 | 573851 Inventory Issue-Stk E \& D | 34.19 |
| 716121 |  | 12/16/2009 | M\&J Expenses-Outside | 11 | 573853 Inventory Issue-Stk E \& D | 40.69 |
| 716121 |  | 12/16/2009 | M\&J Expenses-Outside | 11 | 573855 Inventory Issue-Stk E \& D | 25.56 |
| 716121 |  | 12/16/2009 | M\&J Expenses-Outside | II | 573857 Inventory Issue-Stk E \& D | 625.21 |
| 716121 |  | 12/16/2009 | M\&J Expenses-Outside | 11 | 573861 Inventory Issue-Stk E \& D | 38.10 |
| 401110 |  | 12/17/2009 | Res Sales Billed | JE | 30907731 KY CIS POST GL BATCH | -68,194.13 |
| 401210 |  | 12/17/2009 | Com Sales Billed | JE | 30907731 KY CIS POST GL BATCH | -26,048.91 |
| 401510 |  | 12/17/2009 | Pub Auth Billed | JE | 30907731 KY CIS POST GL BATCH | -11,187.67 |
| 402110 |  | 12/17/2009 | Dom WW Serv Billed | JE | 30907731 KY CIS POST GL BATCH | -6.91 |
| 403104 |  | 12/17/2009 | Oth Rev-NSF Check Charge | JE | 30907731 KY CIS POST GL BATCH | -132.00 |
| 403105 |  | 12/17/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30907731 KY CIS POST GL BATCH | -1,014.00 |
| 403107 |  | 12/17/2009 | Oth Rev-Reconnection Charges | JE | 30907731 KY CIS POST GL BATCH | -702.00 |
| 504100 | 16 | 12/17/2009 | Group Ins Oper AG | RI | 10138500 Mays, Eric A. | -524.04 |
| 510100 | 11 | 12/17/2009 | Purchased Water-Outside | PV | 42392963 Carroll Co Water Dist 1 | 2,808.89 |
| 515100 | 13 | 12/17/2009 | Purch Power WT | PS | 42393198 KENTUCKY STATE TREASURER - AP | 380.95 |
| 520100 | 13 | 12/17/2009 | M \& S Oper WT | CC | 6633 NEW HORIZONS DIVING CENTE | 613.91 |
| 520100 | 14 | 12/17/2009 | M \& S Oper TD | PV | 42015618 Harbor Steel \& Supply Corp | -149.34 |
| 520100 | 16 | 12/17/2009 | M \& S Oper AG | PV | 42392910 Vital Records Control | 910.58 |
| 520100 | 16 | 12/17/2009 | M \& S Oper AG | PV | 42392914 Media Library Inc-PO/REMIT | 200.00 |
| 535000 | 13 | 12/17/2009 | Contr Svc-Other Oper WT | CC | 6633 SIEMENS WATER TECHNOLOGY | -612.96 |
| 535000 | 14 | 12/17/2009 | Contr Svc-Other Oper TD | PV | 42392935 Grasshopper | 1,785.00 |
| 535000 | 16 | 12/17/2009 | Contr Svc-Other Oper AG | PV | 42393070 Accenture, LLP-REMIT | 4,246.95 |
| 550000 | 16 | 12/17/2009 | Trans Oper AG | CC | 6633 PREMIER CAR WASH. | 154.97 |
| 557000 | 16 | 12/17/2009 | Ins Gen Liab Oper AG | PV | 42392966 City of Owenton City Clerk | 649.91 |
| 568010 | 16 | 12/17/2009 | Water Res Conservation | PV | 42392919 Lamar Companies The -REMIT | 8,710.00 |
| 570100 | 15 | 12/17/2009 | Uncollectible Accounts | JE | 30907731 KY CIS POST GL BATCH | -114.09 |
| 575000 | 13 | 12/17/2009 | Misc Oper WT | CC | 6633 BEST BUY MHT | 608.13 |
| 575000 | 16 | 12/17/2009 | Misc Oper AG | CC | 6642 FTD FTD.COM | 59.37 |
| 575002 | 16 | 12/17/2009 | Misc General Office | PV | 42392930 Lexington Herald Leader Co | 188.55 |
| 575130 | 16 | 12/17/2009 | Brochures and Handouts | PV | 42392925 Imaging Group LLC | 1,375.00 |
| 575275 | 16 | 12/17/2009 | Discounts Available | PK | 62058251 Mueller Co - ALL USE PO/REMIT | -38.05 |
| 575320 | 14 | 12/17/2009 | Electricity TD | EE | 4022348 OWEN ELECTRIC COOP INC | 21.49 |
| 575320 | 14 | 12/17/2009 | Electricity TD | EE | 4022353 OWEN ELECTRIC COOP INC | 15.36 |
| 575340 | 16 | 12/17/2009 | Employee Expenses AG | CC | 6633 KROGER | 452.93 |
| 575340 | 16 | 12/17/2009 | Employee Expenses AG | CC | 6642 GOLD SHIELD TRANSPORTA | 990.54 |
| 575342 | 16 | 12/17/2009 | Empl Exp Conf/Registration AG | CC | 6642 NARUC | 495.00 |
| 575350 | 16 | 12/17/2009 | Meals Deduct | CC | 6633 CHICK-FIL-A | 1,871.01 |
| 575350 | 16 | 12/17/2009 | Meals Deduct | CC | 6642 GEORGE MARTIN | 845.26 |
| 575545 | 13 | 12/17/2009 | Lab Supplies WT | CC | 6633 HACH COMPANY | 3,863.11 |
| 575545 | 13 | 12/17/2009 | Lab Supplies WT | PV | 42392956 LabChem Inc | 289.83 |
| 575545 | 13 | 12/17/2009 | Lab Supplies WT | PV | 42392969 Scott Gross Co Inc | 17.68 |





| ACCOUNT | SUB | GL DATE | DESCRIPTION | DOC TYPE | DOC\# EXPLANATION | AMOUNT |
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| 403107 |  | 12/28/2009 | Oth Rev-Reconnection Charges | JE | 30908807 KY CIS POST GL BATCH | -1,092.00 |
| 403198 |  | 12/28/2009 | Oth Rev-Misc Service Rev | RI | 10138780 Kentucky American Water - Nort | -40.00 |
| 508102 | 16 | 12/28/2009 | Retiree Med Oper AG | JE | 309085282009 Q4 RMRA True-Up | -791.83 |
| 508200 | 16 | 12/28/2009 | ESPP Oper AG | JE | 30908503 Accrue ESPP Expense Dec 2009 | 481.89 |
| 515100 | 14 | 12/28/2009 | Purch Power TD | EE | 4030891 OWEN ELECTRIC COOP INC | 24.76 |
| 515100 | 14 | 12/28/2009 | Purch Power TD | EE | 4030893 OWEN ELECTRIC COOP INC | 14.16 |
| 570100 | 15 | 12/28/2009 | Uncollectible Accounts | JE | 30908807 KY CIS POST GL BATCH | -143.04 |
| 575275 | 16 | 12/28/2009 | Discounts Available | PK | 62058326 US Pipe \& Foundry Co - REMIT | -3.34 |
| 575275 | 16 | 12/28/2009 | Discounts Available | PK | 62058334 Powerseal Pipeline Products Co | -61.55 |
| 575275 | 16 | 12/28/2009 | Discounts Available | PK | 62058337 Mueller Co - ALL USE PO/REMIT | -110.16 |
| 575275 | 16 | 12/28/2009 | Discounts Available | PK | 62058342 Ferguson SAC - ALL USE REMIT | -11.33 |
| 575275 | 16 | 12/28/2009 | Discounts Available | PK | 62058345 Water Works Supplies Ferguson- | -11.40 |
| 575320 | 14 | 12/28/2009 | Electricity TD | EE | 4030895 OWEN ELECTRIC COOP INC | 17.32 |
| 575320 | 14 | 12/28/2009 | Electricity TD | EE | 4030923 KU | 48.73 |
| 401110 |  | 12/29/2009 | Res Sales Billed | JE | 30909018 KY CIS POST GL BATCH | -2,031.48 |
| 401210 |  | 12/29/2009 | Com Sales Billed | JE | 30909018 KY CIS POST GL BATCH | -7,692.86 |
| 403104 |  | 12/29/2009 | Oth Rev-NSF Check Charge | JE | 30909018 KY CIS POST GL BATCH | -132.00 |
| 403105 |  | 12/29/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30909018 KY CIS POST GL BATCH | -208.00 |
| 403107 |  | 12/29/2009 | Oth Rev-Reconnection Charges | JE | 30909018 KY CIS POST GL BATCH | -78.00 |
| 501200 | 1305 | 12/29/2009 | Labor Oper WT Super/Eng | JE | 30908939 Payroll Accrual December 2009 | 2,904.00 |
| 501200 | 14 | 12/29/2009 | Labor Oper TD | JE | 30908939 Payroll Accrual December 2009 | 3,630.00 |
| 501200 | 1405 | 12/29/2009 | Labor Oper TD Super/Eng | JE | 30908939 Payroll Accrual December 2009 | 3,630.00 |
| 501200 | 16 | 12/29/2009 | Labor Oper AG | JE | 30908939 Payroll Accrual December 2009 | 90,024.00 |
| 504660 | 16 | 12/29/2009 | Tuition Aid AG | PS | 42401246 Midway College-PO/REMIT | 2,400.00 |
| 507100 | 16 | 12/29/2009 | 401k Oper AG | JE | 30908858 Record 401k Forfeiture | -2,962.29 |
| 515100 | 14 | 12/29/2009 | Purch Power TD | EE | 4032206 KU | 49.23 |
| 520100 | 16 | 12/29/2009 | M \& S Oper AG | PV | 42400647 American Red Cross | 270.00 |
| 520100 | 16 | 12/29/2009 | M \& S Oper AG | PV | 42400652 American Red Cross | 270.00 |
| 568010 | 16 | 12/29/2009 | Water Res Conservation | PV | 42401319 Rupp Arena Sports \& Entertainm | 8,583.33 |
| 570100 | 15 | 12/29/2009 | Uncollectible Accounts | JE | 30909018 KY CIS POST GL BATCH | -89.76 |
| 575000 | 16 | 12/29/2009 | Misc Oper AG | OV | 10286775 US Pipe \& Foundry Co LLC - PO | 160.75 |
| 575000 | 16 | 12/29/2009 | Misc Oper AG | PV | 42401789 US Pipe \& Foundry Co - REMIT | -1.72 |
| 575002 | 16 | 12/29/2009 | Misc General Office | PV | 42401320 Bourbon County Citizen - PO/RE | 22.00 |
| 575030 | 16 | 12/29/2009 | Advertising | PV | 42401321 Slam Dunk Sports Marketing LLC | 1,500.00 |
| 575130 | 16 | 12/29/2009 | Brochures and Handouts | PV | 42401313 Creative Co Op LLC | 925.00 |
| 575130 | 16 | 12/29/2009 | Brochures and Handouts | PV | 42401317 Windrunner Advertising | 475.00 |
| 575200 | 15 | 12/29/2009 | Collection Agencies CA | PV | 42401002 GC Services Limited Parnership | 5,310.45 |
| 575200 | 15 | 12/29/2009 | Collection Agencies CA | PV | 42401575 GC Services Limited Parnership | 4,735.90 |
| 575270 | 16 | 12/29/2009 | Directors Fees | PS | 42401247 Freibert, Patricia Anne | 500.00 |
| 575270 | 16 | 12/29/2009 | Directors Fees | PS | 42401248 Sisson, William G | 500.00 |
| 575270 | 16 | 12/29/2009 | Directors Fees | PS | 42401249 Martin, Wayne M | 500.00 |
| 575320 | 14 | 12/29/2009 | Electricity TD | EE | 4032243 KU | 12.76 |
| 575320 | 13 | 12/29/2009 | Electricity WT | EE | 4033729 BLUE GRASS ENERGY | 36.23 |
| 575500 | 14 | 12/29/2009 | Janitorial TD | PV | 42401318 Cobb, Rodney | 399.00 |
| 575740 | 16 | 12/29/2009 | Telephone AG | TC | 30908644 Berry | 108.16 |
| 575740 | 16 | 12/29/2009 | Telephone AG | TC | 30908658 AT\&T | . 14 |
| 575740 | 16 | 12/29/2009 | Telephone AG | TC | 30908659 AT\&T | 3.69 |
| 575740 | 16 | 12/29/2009 | Telephone AG | TC | 30908662 AT\&T | . 14 |
| 575740 | 16 | 12/29/2009 | Telephone AG | TC | 30908663 AT\&T | -. 19 |
| 575740 | 16 | 12/29/2009 | Telephone AG | TC | 30908664 AT\&T | 29 |
| 575740 | 16 | 12/29/2009 | Telephone AG | TC | 30908667 AT\&T | . 24 |
| 575740 | 16 | 12/29/2009 | Telephone AG | TC | 30908668 AT\&T | . 59 |
| 575740 | 15 | 12/29/2009 | Telephone CA | TC | 30908681 Windstream | 115.29 |
| 575740 | 16 | 12/29/2009 | Telephone AG | TC | 30908683 AT\&T | 227.80 |
| 575740 | 15 | 12/29/2009 | Telephone CA | TC | 30908683 AT\&T | 784.78 |
| 575740 | 16 | 12/29/2009 | Telephone AG | TC | 30908706 Idearc | 137.85 |
| 575741 | 13 | 12/29/2009 | Cell Phone WT | TC | 30908724 Verizon Wireless | 105.17 |
| 575741 | 16 | 12/29/2009 | Cell Phone AG | TC | 30908724 Verizon Wireless | 5,542.80 |
| 575741 | 16 | 12/29/2009 | Cell Phone AG | TC | 30908734 Verizon Wireless | 243.05 |
| 620000 | 24 | 12/29/2009 | Mat and Sup Maint TD | IR | 575670 Inventory Return | -1.03 |
| 620000 | 24 | 12/29/2009 | Mat and Sup Maint TD | IR | 575916 Inventory Return | -60.38 |
| 620000 | 24 | 12/29/2009 | Mat and Sup Maint TD | IR | 575920 Inventory Return | -. 51 |
| 620000 | 24 | 12/29/2009 | Mat and Sup Maint TD | IR | 575925 Inventory Return | -239.86 |
| 620000 | 24 | 12/29/2009 | Mat and Sup Maint TD | IR | 575931 Inventory Return | -712.96 |
| 620000 | 24 | 12/29/2009 | Mat and Sup Maint TD | IR | 575935 Inventory Return | -2.66 |
| 620000 | 24 | 12/29/2009 | Mat and Sup Maint TD | PV | 42401315 City Electric Motor Co of Lex- | 1,700.93 |
| 675000 | 23 | 12/29/2009 | Misc Maint WT | PV | 42401651 GE Analytical Instruments Inc | 128.15 |
| 716121 |  | 12/29/2009 | M\&J Expenses-Outside | II | 575915 Inventory Issue-Stk E \& D | 60.39 |
| 401110 |  | 12/30/2009 | Res Sales Billed | JE | 30909357 KY CIS POST GL BATCH | -158,058.60 |
| 401210 |  | 12/30/2009 | Com Sales Billed | JE | 30909357 KY CIS POST GL BATCH | -7,166.19 |
| 401450 |  | 12/30/2009 | Priv Fire Billed | JE | 30909357 KY CIS POST GL BATCH | 231.97 |
| 401510 |  | 12/30/2009 | Pub Auth Billed | JE | 30909357 KY CIS POST GL BATCH | -671.33 |
| 402110 |  | 12/30/2009 | Dom WW Serv Billed | JE | 30909357 KY CIS POST GL BATCH | -10.94 |
| 403104 |  | 12/30/2009 | Oth Rev-NSF Check Charge | JE | 30909357 KY CIS POST GL BATCH | -252.00 |
| 403105 |  | 12/30/2009 | Oth Rev-Appl/Initiate Serv Fee | JE | 30909357 KY CIS POST GL BATCH | -2,106.00 |
| 403107 |  | 12/30/2009 | Oth Rev-Reconnection Charges | JE | 30909357 KY CIS POST GL BATCH | -2,418.00 |
| 504610 | 16 | 12/30/2009 | Employee Awards AG | PV | 42403632 Tharpe Company Inc-REMIT | 219.76 |
| 508101 | 16 | 12/30/2009 | DCP Oper AG | JE | 30909014 DCP Accrual for Dec 2009 | 2,108.60 |
| 511100 | 13 | 12/30/2009 | Waste Disposal Exp WT | ID | 576008 CHEM ISSUES KRS DEC 2009 | 5,314.14 |
| 518000 | 13 | 12/30/2009 | Chemicals WT | ID | 576008 CHEM ISSUES KRS DEC 2009 | 76,055.80 |
| 518000 | 13 | 12/30/2009 | Chemicals WT | ID | 576248 Owenton Water Dec 09 | 15,937.69 |
| 518000 | 13 | 12/30/2009 | Chemicals WT | ID | 576256 Owenton WWTP Dec 09 | 917.28 |
| 532100 | 16 | 12/30/2009 | Contr Svc-Audit Fees Oper AG | JE | 201 Exp PWC Out of Pocket Fees | 295.00 |
| 533000 | 16 | 12/30/2009 | Contr Svc-Legal Oper AG | PV | 42403549 Stoll Keenon Ogden PLLC-PO/REM | 2,386.99 |



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| 504500 | 15 | 12/31/2009 | Other Welf Oper CA | CC | 6664 | A P SUGGINS BAR \& GRILL | 40.00 |
| 504500 | 16 | 12/31/2009 | Other Welf Oper AG | CC | 6664 | A P SUGGINS BAR \& GRILL | 760.14 |
| 504670 | 16 | 12/31/2009 | Training AG | PV | 42405055 | John Wiley \& Sons Inc | 758.31 |
| 505100 | 16 | 12/31/2009 | PBOP Oper AG | JE | 2001 | 2009 FAS 106 for OPEB | 100,637.00 |
| 505100 | 1 | 12/31/2009 | PBOP Cap Credits | T1 | 35991 | Payroll Disbursement Entries | -37,435.85 |
| 505100 | 1 | 12/31/2009 | PBOP Cap Credits | T3 | 35993 | Actual Burden Journal Entries | 32,439.39 |
| 505100 | 1 | 1 12/31/2009 | PBOP Cap Credits | JE | 30910614 | capital OH true up Dec 2009 | -2,568.17 |
| 506100 | 16 | 12/31/2009 | Pension Oper AG | JR | 2002 | Dec Pension Cost Allocation | 139,476.59 |
| 506100 | 1 | 12/31/2009 | Pension - Cap Credits | T1 | 35991 | Payroll Disbursement Entries | -51,760.77 |
| 506100 | 1 | 12/31/2009 | Pension - Cap Credits | T3 | 35993 | Actual Burden Journal Entries | 44,852.48 |
| 506100 | 1 | 1 12/31/2009 | Pension - Cap Credits | JE | 30910614 | capital OH true up Dec 2009 | -3,594.37 |
| 507100 | 16 | 12/31/2009 | 401k Oper AG | T3 | 35993 | Actual Burden Journal Entries | 4,477.10 |
| 507100 | 16 | 12/31/2009 | 401k Oper AG | JE | 30909416 | 401(K) Co Match Accr Dec 2009 | 2,173.69 |
| 507100 | 16 | 12/31/2009 | 401k Oper AG | JE | 30910311 | FASTR - ALLOCATION KY_ALLEXP2 | -10.06 |
| 508101 | 16 | 12/31/2009 | DCP Oper AG | T3 | 35993 | Actual Burden Journal Entries | 4,242.38 |
| 508101 | 16 | 12/31/2009 | DCP Oper AG | JE | 30910311 | FASTR - ALLOCATION KY_ALLEXP2 | -3.07 |
| 510100 | 11 | 12/31/2009 | Purchased Water-Outside | JE |  | KY Purch Water Accrual Dec 09 | -6,168.00 |
| 510110 | AW12 | 12/31/2009 | Purch Water AW12 | JE | 121203 | Owenton Wastewater Purch Water | 1,207.09 |
| 511100 | 13 | 12/31/2009 | Waste Disposal Exp WT | JE |  | Power Accrual-Dec 09 | -226.60 |
| 511100 | 13 | 12/31/2009 | Waste Disposal Exp WT | ID | 576804 | Chemical Issues RRS Dec 2009 | 1,746.78 |
| 511100 | 13 | 12/31/2009 | Waste Disposal Exp WT | JR | 30059984 | Periodic Waste Disposal Accrua | 4,167.00 |
| 511200 | 13 | 12/31/2009 | Amort Waste Disp Exp | JR | 30059991 | Amortize Waste Disposal KY Riv | 7,692.79 |
| 515100 | 12 | 12/31/2009 | Purch Power P | JE |  | Power Accrual-Dec 09 | -5,771.57 |
| 515100 | 14 | 12/31/2009 | Purch Power TD | JE | 155 | Power Accrual-Dec 09 | 104.62 |
| 515100 | 13 | 12/31/2009 | Purch Power WT | JE | 155 | Power Accrual-Dec 09 | 227,289.14 |
| 515100 | 13 | 12/31/2009 | Purch Power WT | JE |  | Manual Power Accr Adj Dec 09 | -266,975.54 |
| 518000 | 13 | 12/31/2009 | Chemicals WT | ID | 576798 | Cemical Issues Rockwel Dec 09 | 394.58 |
| 518000 | 13 | 12/31/2009 | Chemicals WT | ID | 576804 | Chemical Issues RRS Dec 2009 | 48,253.80 |
| 520100 | 16 | 12/31/2009 | M \& S Oper AG | JE |  | KY UNMAPPED PCARD ACCRUAL 1209 | -425.69 |
| 520100 | 14 | 12/31/2009 | M \& S Oper TD | JE |  | KY UNMAPPED PCARD ACCRUAL 1209 | -265.06 |
| 520100 | 13 | 12/31/2009 | M \& S Oper WT | JE | 130 | KY UNMAPPED PCARD ACCRUAL 1209 | 511.30 |
| 520100 | 14 | 12/31/2009 | M \& S Oper TD | JE | 155 | Power Accrual-Dec 09 | 78.47 |
| 520100 | 16 | 12/31/2009 | M \& S Oper AG | CC | 6655 | GROTT LOCKSMITH CENTER | 198.30 |
| 520100 | 13 | 12/31/2009 | M \& S Oper WT | CC | 6655 | HACH COMPANY | 625.53 |
| 520100 | 14 | 12/31/2009 | M \& S Oper TD | CC | 6655 | OFFICEMAX CT IN | 2,345.58 |
| 520100 | 14 | 12/31/2009 | M \& S Oper TD | JE | 30909851 | Reclass P-Card Err-12-09 | 812.36 |
| 520100 | 16 | 12/31/2009 | M \& S Oper AG | PV | 42405236 | Sams Club | 100.99 |
| 532100 | 16 | 12/31/2009 | Contr Svc-Audit Fees Oper AG | JR |  | Amort PWC Audit Fee 09-10 | 8,849.58 |
| 533000 | 16 | 12/31/2009 | Contr Svc-Legal Oper AG | JE |  | Accrue for Unbilled Legal Fees | -2,683.84 |
| 533000 | 16 | 12/31/2009 | Contr Svc-Legal Oper AG | JR | 30059967 | King \& Spalding Legal Fees | 34.07 |
| 534600 | 16 | 12/31/2009 | Mmgt Fees-Corporate | JB | 30910623 | CP | 10,140.00 |
| 534601 | 16 | 12/31/2009 | Mmgt Fees-External Affairs/Com | JB | 30910623 | CP | 23,969.85 |
| 534602 | 16 | 12/31/2009 | Mmgt Fees-Finance | JB | 30910623 | CP | 60,361.31 |
| 534603 | 16 | 12/31/2009 | Mmgt Fees-Human Resources | JB | 30910623 | CP | 38,880.74 |
| 534604 | 16 | 12/31/2009 | Mmgt Fees-Legal | JB | 30910623 | CP | 29,159.12 |
| 534605 | 16 | 12/31/2009 | Mmgt Fees-Operations Svcs | JB | 30910623 | CP | 29,442.66 |
| 534606 | 16 | 12/31/2009 | Mmgt Fees-Property | JB | 30910623 |  | 46,471.67 |
| 534607 | 16 | 12/31/2009 | Mmgt Fees-Business Development | JB | 30910623 |  | 15,298.34 |
| 534608 | 16 | 12/31/2009 | Mmgt Fees-Bus Transformation | JB | 30910623 | CP | -127.19 |
| 534609 | 16 | 12/31/2009 | Mmgt Fees-Audit | JB | 30910623 |  | 7,927.32 |
| 534610 | 16 | 12/31/2009 | Mmgt Fees-Regulatory | JB | 30910623 |  | 1,851.66 |
| 534611 | 16 | 12/31/2009 | Mmgt Fees-Inv Relations | JB | 30910623 | CP | 2,066.88 |
| 534615 | 16 | 12/31/2009 | SSC-Shrd Bus Srv Fees | JB | 30910623 |  | 51,545.63 |
| 534625 | 16 | 12/31/2009 | CSC-Shrd Bus Srv Fees | JB | 30910623 | CP | 177,217.80 |
| 534635 | 16 | 12/31/2009 | ITS-Shrd Bus Srv Fees | JB | 30910623 | CP | 209,389.41 |
| 534645 | 16 | 12/31/2009 | Procure-Shrd Bus Srv Fees | JB | 30910623 | CP | 7,943.81 |
| 534655 | 16 | 12/31/2009 | Lab-Shrd Bus Srv Fees | JB | 30910623 | CP | 13,617.47 |
| 534665 | 16 | 12/31/2009 | BSC-Shrd Bus Srv Fees | JB | 30910623 | CP | 4,426.10 |
| 534701 | 16 | 12/31/2009 | Mmgt Fees-Regulated Operations | JB | 30910623 |  | 82,091.26 |
| 535000 | 15 | 12/31/2009 | Contr Svc-Other Oper CA | JE |  | December 2009 Telecom Accrual | -78.83 |
| 535000 | 14 | 12/31/2009 | Contr Svc-Other Oper TD | JE |  | Accr for Goods/Ser Rec not inv | -816.55 |
| 535000 | 16 | 12/31/2009 | Contr Svc-Other Oper AG | JE |  | Accr for Goods/Ser Rec not inv | 690.55 |
| 535000 | 13 | 12/31/2009 | Contr Svc-Other Oper WT | JE |  | Accr for Goods/Ser Rec not inv | 1,737.00 |
| 535000 | 14 | 12/31/2009 | Contr Svc-Other Oper TD | CC | 6655 | ORKIN, INC | 65.79 |
| 535000 | 13 | 12/31/2009 | Contr Svc-Other Oper WT | JE | 121207 | Siemans Inv Chg to Wrong Acct | 367.96 |
| 535000 | 13 | 12/31/2009 | Contr Svc-Other Oper WT | JR | 30059979 | Hach Co. - Maintenance | 4,684.42 |
| 535000 | 15 | 12/31/2009 | Contr Svc-Other Oper CA | JE | 30908102 | Accrue Tact Serv Qual survey | 4,277.20 |
| 535000 | 15 | 12/31/2009 | Contr Svc-Other Oper CA | JE | 30910267 | Acc RKM Cust Satis Survey | 5,679.63 |
| 535000 | 16 | 12/31/2009 | Contr Svc-Other Oper AG | JB | 30910623 | CP | 108.63 |
| 535000 | 16 | 12/31/2009 | Contr Svc-Other Oper AG | PV | 42404689 | WorkSmart LLC | 260.00 |
| 535000 | 15 | 12/31/2009 | Contr Svc-Other Oper CA | PV | 42405134 | Garda CL Central Inc | 497.55 |
| 535000 | 16 | 12/31/2009 | Contr Svc-Other Oper AG | PV | 42405198 | Computershare | 738.41 |
| 535000 | 15 | 12/31/2009 | Contr Svc-Other Oper CA | PV | 42405401 | Kings Helper Inc-REMIT | 230.67 |
| 535000 | 14 | 12/31/2009 | Contr Svc-Other Oper TD | PV | 42405426 | Kentucky Underground Protectio | 2,847.65 |
| 535000 | 15 | 12/31/2009 | Contr Svc-Other Oper CA | PV | 42405448 | Kings Helper Inc-REMIT | 76.00 |
| 535000 | 15 | 12/31/2009 | Contr Svc-Other Oper CA | PV | 42405451 | Saf ti co Inc-PO/REMIT | 26.29 |
| 535000 | 15 | 12/31/2009 | Contr Svc-Other Oper CA | PV | 42405489 | Kings Helper Inc-REMIT | 134.20 |
| 535001 | 14 | 12/31/2009 | Contr Svc-Temp Empl Oper TD | JE |  | Accr Inv Rec'd but not approv | -594.20 |
| 535001 | 13 | 12/31/2009 | Contr Svc-Temp Empl Oper WT | JE |  | Accr Inv Rec'd but not approv | 661.14 |
| 535001 | 13 | 12/31/2009 | Contr Svc-Temp Empl Oper WT | JE | 30910311 | FASTR - ALLOCATION KY_ALLEXP2 | -1,774.16 |
| 535001 | 14 | 12/31/2009 | Contr Svc-Temp Empl Oper TD | JE | 30910311 | FASTR - ALLOCATION KY_ALLEXP2 | 41.88 |
| 535001 | 15 | 12/31/2009 | Contr Svc-Temp Empl Oper CA | PV | 42405662 | Volt Services Group | 451.75 |
| 536000 | 13 | 12/31/2009 | Contr Svc-Lab Testing Oper WT | JE | 30910311 | FASTR - ALLOCATION KY_ALLEXP2 | -620.00 |
| 541000 | 14 | 12/31/2009 | Rents-Real Prop Oper TD | PV | 42404170 | Marsh USA Inc | 101.50 |




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| 620000 | 24 | 12/31/2009 | Mat and Sup Maint TD | JE |  | KY UNMAPPED PCARD ACCRUAL 1209 | 17.36 |
| 620000 | 23 | 12/31/2009 | Mat and Sup Maint WT | JE |  | KY UNMAPPED PCARD ACCRUAL 1209 | 3,372.36 |
| 620000 | 24 | 12/31/2009 | Mat and Sup Maint TD | JE |  | Accr for Goods/Ser Rec not inv | -869.00 |
| 620000 | 21 | 12/31/2009 | Mat and Sup Maint SS | JE |  | Accr for Goods/Ser Rec not inv | -580.00 |
| 620000 | 24 | 12/31/2009 | Mat and Sup Maint TD | CC | 6655 | TRIPLE A FASTENER CO | 95.40 |
| 620000 | 21 | 12/31/2009 | Mat and Sup Maint SS | CC |  | MINCH HARDWARE APPLIANCE | 1,704.12 |
| 620000 | 23 | 12/31/2009 | Mat and Sup Maint WT | CC | 6655 | PNEU-DRAULICS | 3,055.92 |
| 620000 | 26 | 12/31/2009 | Mat and Sup Maint AG | JR | 30009705 | Amort Microsoft License \& Main | 2,485.83 |
| 620000 | 24 | 12/31/2009 | Mat and Sup Maint TD | JE | 30909133 | BP non stock material to MJ | -7.01 |
| 620000 | 24 | 12/31/2009 | Mat and Sup Maint TD | JE | 30909135 | BP non stock material to MJ | -30.92 |
| 620000 | 24 | 12/31/2009 | Mat and Sup Maint TD | JE | 30909140 | BP non stock material to MJ | -48.60 |
| 620000 | 24 | 12/31/2009 | Mat and Sup Maint TD | JE | 30909144 | BP non stock material to MJ | -125.26 |
| 620000 | 21 | 12/31/2009 | Mat and Sup Maint SS | ST | 30909318 | SABRIX NO TAX CHARGED ACR | 2,249.29 |
| 620000 | 24 | 12/31/2009 | Mat and Sup Maint TD | JE | 30909801 | BP non stock material to MJ | -144.81 |
| 620000 | 24 | 12/31/2009 | Mat and Sup Maint TD | JE | 30909807 | BP non stock material to MJ | -8.16 |
| 620000 | 24 | 12/31/2009 | Mat and Sup Maint TD | PV | 42405408 | Lexington Quarry Co | 526.15 |
| 620000 | 24 | 12/31/2009 | Mat and Sup Maint TD | PV | 42405457 | Mago Construction Company LLC | 567.13 |
| 620000 | 24 | 12/31/2009 | Mat and Sup Maint TD | PV | 42405468 | Mago Construction Company LLC | 1,484.73 |
| 620000 | 24 | 12/31/2009 | Mat and Sup Maint TD | PV | 42405475 | Lexington Quarry Co | 448.20 |
| 620000 | 24 | 12/31/2009 | Mat and Sup Maint TD | PV | 42405505 | Mago Construction Company LLC | 700.02 |
| 620000 | 24 | 12/31/2009 | Mat and Sup Maint TD | PV | 42405539 | Lexington Quarry Co | 448.10 |
| 635000 | 26 | 12/31/2009 | Contr Svc-Other Maint AG | JE |  | KY UNMAPPED PCARD ACCRUAL 1209 | 164.08 |
| 635000 | 26 | 12/31/2009 | Contr Svc-Other Maint AG | CC |  | UFIRST LAUNDRY SVCS | 82.04 |
| 675000 | 24 | 12/31/2009 | Misc Maint TD | JE |  | KY UNMAPPED PCARD ACCRUAL 1209 | 119.57 |
| 675000 | 23 | 12/31/2009 | Misc Maint WT | CC | 6655 | FERGUSON ENTERPRISES | 29.99 |
| 675000 | 24 | 12/31/2009 | Misc Maint TD | CC | 6655 | SCOTT GROSS COMPANY-NEWTO | 87.19 |
| 675000 | 26 | 12/31/2009 | Misc Maint AG | JE | 121213 | Recls Amort for Calence | 4,098.12 |
| 675000 | 26 | 12/31/2009 | Misc Maint AG | JR | 30059974 | Amortize ECIS Extended Support | 3,580.00 |
| 675000 | 24 | 12/31/2009 | Misc Maint TD | PV | 42405485 | Saf ti co Inc-PO/REMIT | 93.28 |
| 675000 | 24 | 12/31/2009 | Misc Maint TD | PV | 42405493 | Signal Boards Inc - REMIT | 47.70 |
| 675000 | 24 | 12/31/2009 | Misc Maint TD | PV | 42405503 | Safti co Inc - PO/REMIT | 159.00 |
| 675000 | 24 | 12/31/2009 | Misc Maint TD | PV | 42405513 | Saf ti co Inc-PO/REMIT | 131.44 |
| 675000 | 24 | 12/31/2009 | Misc Maint TD | PV | 42405533 | Saftico Inc-PO/REMIT | 127.20 |
| 675000 | 24 | 12/31/2009 | Misc Maint TD | PV | 42405610 | E H Wachs Co | 135.81 |
| 675000 | 24 | 12/31/2009 | Misc Maint TD | PV | 42405638 | Commonwealth Communications Sy | 50.00 |
| 675000 | 24 | 12/31/2009 | Misc Maint TD | PV | 42405643 | Commonwealth Communications Sy | 50.00 |
| 675000 | 24 | 12/31/2009 | Misc Maint TD | PV | 42405647 | Commonwealth Communications Sy | 50.00 |
| 675000 | 24 | 12/31/2009 | Misc Maint TD | PV | 42405650 | Commonwealth Communications Sy | 50.00 |
| 675000 | 24 | 12/31/2009 | Misc Maint TD | PV | 42405653 | Commonwealth Communications Sy | 50.00 |
| 675000 | 24 | 12/31/2009 | Misc Maint TD | PV | 42405656 | Commonwealth Communications Sy | 50.00 |
| 675000 | 24 | 12/31/2009 | Misc Maint TD | PV | 42405666 | Commonwealth Communications Sy | 50.00 |
| 675000 | 24 | 12/31/2009 | Misc Maint TD | PV | 42405672 | Commonwealth Communications Sy | 50.00 |
| 675000 | 24 | 12/31/2009 | Misc Maint TD | PV | 42405680 | Commonwealth Communications Sy | 50.00 |
| 675000 | 24 | 12/31/2009 | Misc Maint TD | PV | 42405684 | Commonwealth Communications Sy | 50.00 |
| 675050 | 23 | 12/31/2009 | Amort Def Maint WT | JR | 30009642 | amtz m959 | 137.65 |
| 675050 | 23 | 12/31/2009 | Amort Def Maint WT | JR | 30009644 | amtz m965 | 685.80 |
| 675050 | 23 | 12/31/2009 | Amort Def Maint WT | JR | 30009649 | amtz m1039 | 1,281.93 |
| 675050 | 23 | 12/31/2009 | Amort Def Maint WT | JR | 30009653 | amtz hydro \#8 | 1,131.92 |
| 675050 | 23 | 12/31/2009 | Amort Def Maint WT | JR | 30009657 | amtz prog maint | 1,076.39 |
| 675050 | 24 | 12/31/2009 | Amort Def Maint TD | JR | 30009659 | amort M1061 Hume Rd Tank | 2,149.90 |
| 675050 | 23 | 12/31/2009 | Amort Def Maint WT | JR | 30009660 | AMTZ HYDROTR \#3 | 1,000.67 |
| 675050 | 23 | 12/31/2009 | Amort Def Maint WT | JR | 30009670 | M1011 AMTZ HYDROTREATER \#5 | 1,004.87 |
| 675050 | 24 | 12/31/2009 | Amort Def Maint TD | JR | 30009688 | Paint Hydrotreator \#1 | 1,469.26 |
| 675050 | 24 | 12/31/2009 | Amort Def Maint TD | JR | 30009689 | Paint Hydrotreator \#2 | 1,800.99 |
| 675050 | 24 | 12/31/2009 | Amort Def Maint TD | JR | 30009691 | Repair Cox Street Tank | 416.66 |
| 675050 | 24 | 12/31/2009 | Amort Def Maint TD | JR | 30009697 | Amtz York Street Tank M1104 | 276.13 |
| 675050 | 23 | 12/31/2009 | Amort Def Maint WT | JR | 30009753 | M1038 Paint Hydro Treater | 1,244.41 |
| 675050 | 23 | 12/31/2009 | Amort Def Maint WT | JR | 30059958 | Amortize Programmed Maint | 1,530.40 |
| 675050 | 24 | 12/31/2009 | Amort Def Maint TD | JR | 30059988 | Amortize Programmed Maint | 7,172.91 |
| 675050 | 23 | 12/31/2009 | Amort Def Maint WT | JR | 30059989 | Amortize Programmed Maint | 2,858.27 |
| 675110 | 26 | 12/31/2009 | Maint Exp ARO/Net Neg Sal AG | DP | 30907697 | Monthly Depreciation Expense | 129,783.54 |
| 675650 | 24 | 12/31/2009 | Paving/Backfill TD | JE |  | Accr Inv Rec'd but not approv | 4,274.65 |
| 675650 | 24 | 12/31/2009 | Paving/Backfill TD | JE | 121206 | Monthly Paving and Sod Dec 09 | 41,670.63 |
| 675650 | 24 | 12/31/2009 | Paving/Backfill TD | JE | 121215 | Rev Paving Exp accr in Work Ba | -17,123.50 |
| 675650 | 24 | 12/31/2009 | Paving/Backfill TD | PV | 42405600 | HG Wilson \& Sons Contractors I | 1,174.80 |
| 680110 |  | 12/31/2009 | Depr Exp-General | DP | 30907697 | Monthly Depreciation Expense | 623,452.30 |
| 680120 |  | 12/31/2009 | Depr Exp-Amort CIAC Tax | DP | 30907697 | Monthly Depreciation Expense | -23,559.44 |
| 680125 |  | 12/31/2009 | Depr Exp-Amort CIAC Non Tax | DP | 30907697 | Monthly Depreciation Expense | -94,814.39 |
| 680300 |  | 12/31/2009 | Amortization of UPAA | JU |  | Amort Tri Village/Elk Lake | 697.33 |
| 680300 |  | 12/31/2009 | Amortization of UPAA | JU | 30009706 | Amtz of Util Plant Acquis Adj | 16.06 |
| 680300 |  | 12/31/2009 | Amortization of UPAA | JU | 30022689 | Amort UPAA Boonesboro | 1,087.57 |
| 680540 |  | 12/31/2009 | Amort-Reg Asset AFUDC | JU | 30092822 | AMORTIZE AFUDC EQUITY | 6,332.12 |
| 680600 |  | 12/31/2009 | Amort-Prop Losses | JR |  | Amort source of supply project | 4,756.67 |
| 680600 |  | 12/31/2009 | Amort-Prop Losses | JR | 30009687 | Bluegrass Water Project | 29,592.34 |
| 680620 |  | 12/31/2009 | Amort-Reg Asset | JU | 30092823 | UPA AMORTIZATION REG ASSET | 575.00 |
| 685100 |  | 12/31/2009 | Utility Reg Assessment Fee | JH |  | Amortize KY Prepaid PSC Fees | 7,700.97 |
| 685200 |  | 12/31/2009 | Property Taxes | JH |  | Accrue KY Property Tax | 229,073.01 |
| 685320 |  | 12/31/2009 | FUTA | T3 | 35993 | Actual Burden Journal Entries | 27.69 |
| 685325 |  | 12/31/2009 | FICA | T3 | 35993 | Actual Burden Journal Entries | 19,888.56 |
| 685325 |  | 12/31/2009 | FICA | JE | 30910178 | December 2009 FICA Accrual | 27,213.26 |
| 685325 |  | 12/31/2009 | FICA | JE | 30910311 | FASTR - ALLOCATION KY_ALLEXP2 | -45.84 |
| 685350 |  | 12/31/2009 | SUTA | T3 | 35993 | Actual Burden Journal Entries | 48.46 |
| 685440 |  | 12/31/2009 | Gross Receipts Tax | JE | 121217 | Liab Adj for 2009 Gross Receip | 57,549.00 |
| 690110 |  | 12/31/2009 | FIT-Current | JE | 121220 | Rev Pre Stock Adj booked in Q1 | 254,634.00 |





| ACCOUNT | SUB | GL DATE ${ }^{\text {deSCRIPTION }}$ | DOC TYPE | DOC\# EXPLANATION | AMOUNT |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 520100 | 13 | 1/7/2010 M \& S Oper WT | CC | 6683 UFIRST LAUNDRY SVCS | 653.19 |
| 535000 | 16 | 1/7/2010 Contr Svc-Other Oper AG | TC | 30910393 Insight | 192.91 |
| 550000 | 16 | 1/7/2010 Trans Oper AG | CC | 6683 NAPA AUTO PARTS | 888.80 |
| 570100 | 15 | 1/7/2010 Uncollectible Accounts | JE | 30910824 KY CIS POST GL BATCH | -166.26 |
| 575000 | 15 | 1/7/2010 Misc Oper CA | CC | 6683 WALGREENS | 54.41 |
| 575000 | 14 | 1/7/2010 Misc Oper TD | CC | 6683 NATIONAL WORKWEAR INC | 222.60 |
| 575000 | 13 | 1/7/2010 Misc Oper WT | CC | 6683 NATIONAL WORKWEAR INC | 847.60 |
| 575000 | 16 | 1/7/2010 Misc Oper AG | CC | 6693 YOUR FRAME OF MIND | 198.64 |
| 575000 | 14 | 1/7/2010 Misc Oper TD | PV | 42409753 Grainger - ALL USE REMIT | 364.32 |
| 575002 | 16 | 1/7/2010 Misc General Office | CC | 6683 MARSHALL'S REPAIR | 656.88 |
| 575130 | 16 | 1/7/2010 Brochures and Handouts | ST | 30910446 SABRIX NO TAX CHARGED ACR | 82.53 |
| 575275 | 16 | 1/7/2010 Discounts Available | PK | 62058446 Mueller Co - ALL USE PO/REMIT | -7.13 |
| 575280 | 16 | 1/7/2010 Dues/Membership Deduct | CC | 6683 AMERICAN WATERWORKS | 185.00 |
| 575320 | 13 | 1/7/2010 Electricity WT | EE | 4043210 KU | 57.75 |
| 575320 | 14 | 1/7/2010 Electricity TD | EE | 4043228 KU | 107.52 |
| 575320 | 14 | 1/7/2010 Electricity TD | EE | 4043236 KU | 715.97 |
| 575320 | 13 | 1/7/2010 Electricity WT | EE | 4043244 KU | 631.58 |
| 575320 | 13 | 1/7/2010 Electricity WT | EE | 4043267 KU | 11.10 |
| 575320 | 16 | 1/7/2010 Electricity AG | EE | 4043471 KU | 4,430.52 |
| 575340 | 16 | 1/7/2010 Employee Expenses AG | CC | 6683 FUELAND FOOD | 94.01 |
| 575340 | 16 | 1/7/2010 Employee Expenses AG | CC | 6693 NORTHWOODS BP | 270.20 |
| 575350 | 16 | 1/7/2010 Meals Deduct | CC | 6683 CULVERS OF LEXINGTON | 380.56 |
| 575350 | 16 | 1/7/2010 Meals Deduct | CC | 6693 APPLEBEES | 23.68 |
| 575480 | 14 | 1/7/2010 Heat - Oil/Gas TD | EE | 4043260 KU | 978.75 |
| 575480 | 14 | 1/7/2010 Heat - Oil/Gas TD | EE | 4043263 KU | 80.35 |
| 575480 | 14 | 1/7/2010 Heat - Oil/Gas TD | EE | 4043709 COLUMBIA GAS OF KENTUCKY | 1,633.50 |
| 575480 | 16 | 1/7/2010 Heat - Oil/Gas AG | EE | 4043711 COLUMBIA GAS OF KENTUCKY | 1,088.25 |
| 575545 | 13 | 1/7/2010 Lab Supplies WT | CC | 6683 VWR INTERNATIONAL INC | 1,106.23 |
| 575620 | 14 | 1/7/2010 Office \& Admin Supplies TD | CC | 6683 OFFICE MAX | 55.64 |
| 575620 | 13 | 1/7/2010 Office \& Admin Supplies WT | CC | 6683 OFFICE MAX | 137.72 |
| 575620 | 16 | 1/7/2010 Office \& Admin Supplies AG | CC | 6683 OFFICEMAX CT IN | 914.85 |
| 575660 | 16 | 1/7/2010 Postage AG | CC | 6683 THE MAILROOM | 15.07 |
| 575741 | 16 | 1/7/2010 Cell Phone AG | CC | 6683 VERIZON WRLS M4911- | 5.54 |
| 575820 | 14 | 1/7/2010 Uniforms TD | CC | 6683 SSC OWENTON COOP | 254.90 |
| 575820 | 13 | 1/7/2010 Uniforms WT | CC | 6683 UFIRST LAUNDRY SVCS | 428.53 |
| 620000 | 24 | 1/7/2010 Mat and Sup Maint TD | CC | 6683 OWEN COUNTY BLDG SUPPLY | 17.36 |
| 620000 | 21 | 1/7/2010 Mat and Sup Maint SS | CC | 6683 KENTUCKY MOTOR SERVICE W | 2,199.75 |
| 620000 | 23 | 1/7/2010 Mat and Sup Maint WT | CC | 6683 DIVISIONS OF BW ROGERS | 5,903.08 |
| 620000 | 24 | 1/7/2010 Mat and Sup Maint TD | PV | 42409750 CI Thornburg Co Inc | 57.05 |
| 620000 | 24 | 1/7/2010 Mat and Sup Maint TD | PV | 42409758 Ferguson SAC - ALL USE REMIT | 923.98 |
| 635000 | 26 | 1/7/2010 Contr Svc-Other Maint AG | CC | 6683 UFIRST LAUNDRY SVCS | 164.08 |
| 635000 | 26 | 1/7/2010 Contr Svc-Other Maint AG | PV | 42409748 Stephen Hillenmeyer Landscape | 1,135.83 |
| 675000 | 24 | 1/7/2010 Misc Maint TD | CC | 6683 LEXINGTON TRAILER AND HIT | 119.57 |
| 716121 |  | 1/7/2010 M\&J Expenses-Outside | CC | 6683 INFILCO DEGREMONT INC | 2,150.60 |
| 401110 |  | 1/8/2010 Res Sales Billed | JE | 30911031 KY CIS POST GL BATCH | -120,790.41 |
| 401210 |  | 1/8/2010 Com Sales Billed | JE | 30911031 KY CIS POST GL BATCH | -220,671.10 |
| 401310 |  | 1/8/2010 Ind Sales Billed | JE | 30911031 KY CIS POST GL BATCH | -39,649.34 |
| 401450 |  | 1/8/2010 Priv Fire Billed | JE | 30911031 KY CIS POST GL BATCH | -2,423.66 |
| 401510 |  | 1/8/2010 Pub Auth Billed | JE | 30911031 KY CIS POST GL BATCH | -168,286.11 |
| 401610 |  | 1/8/2010 SFR Billed | JE | 30911031 KY CIS POST GL BATCH | -125,313.72 |
| 403103 |  | 1/8/2010 Oth Rev-Collect for Others | PS | 42410382 Treehaven II LLC | -244.91 |
| 403103 |  | 1/8/2010 Oth Rev-Collect for Others | PS | 42410383 Verna Hills Neighborhood Assoc | -201.70 |
| 403104 |  | 1/8/2010 Oth Rev-NSF Check Charge | JE | 30911031 KY CIS POST GL BATCH | -132.00 |
| 403105 |  | 1/8/2010 Oth Rev-Appl/Initiate Serv Fee | JE | 30911031 KY CIS POST GL BATCH | -3,588.00 |
| 403107 |  | 1/8/2010 Oth Rev-Reconnection Charges | JE | 30911031 KY CIS POST GL BATCH | -1,768.00 |
| 403198 |  | 1/8/2010 Oth Rev-Misc Service Rev | RI | 10139167 Kentucky American Northern | -100.00 |
| 504100 | 16 | 1/8/2010 Group Ins Oper AG | PS | 42410019 Wachovia Bank National Associa | 145,325.98 |
| 568010 | 16 | 1/8/2010 Water Res Conservation | PV | 42410420 Lamar Companies The -REMIT | 6,510.00 |
| 568010 | 16 | 1/8/2010 Water Res Conservation | PV | 42410421 Creative Co Op LLC | 750.00 |
| 570100 | 15 | 1/8/2010 Uncollectible Accounts | JE | 30911031 KY CIS POST GL BATCH | -231.48 |
| 575030 | 16 | 1/8/2010 Advertising | PV | 42410419 Creative Co Op LLC | 450.00 |
| 575030 | 16 | 1/8/2010 Advertising | PV | 42410422 Creative Co Op LLC | 525.00 |
| 575130 | 16 | 1/8/2010 Brochures and Handouts | PV | 42410423 Creative Co Op LLC | 1,725.00 |
| 575275 | 16 | 1/8/2010 Discounts Available | PK | 62058455 US Pipe \& Foundry Co - REMIT | -33.73 |
| 575275 | 16 | 1/8/2010 Discounts Available | PK | 62058472 AY McDonald Mfg Co | -323.86 |
| 575275 | 16 | 1/8/2010 Discounts Available | PK | 62058480 Ferguson SAC - ALL USE REMIT | -477.74 |
| 575280 | 16 | 1/8/2010 Dues/Membership Deduct | PV | 42410418 Commerce Lexington-PO/REMIT | 5,000.00 |
| 575350 | 16 | 1/8/2010 Meals Deduct | PS | 42410443 Friends of McConnell Springs-R | 15.00 |
| 620000 | 24 | 1/8/2010 Mat and Sup Maint TD | OV | 10287497 Powerseal Pipeline Products Co | 2,461.32 |
| 504100 | 16 | 1/9/2010 Group Ins Oper AG | RI | 10139646 Bault, Hope Y. | -77.00 |
| 501200 | 2410 | 1/10/2010 Labor Maint TD Struct \& Imp | T2 | 36190 Payroll Labor Distribution | 239.29 |
| 501200 | 24 | 1/10/2010 Labor Maint TD | T2 | 36190 Payroll Labor Distribution | 316.50 |
| 501200 | 2405 | 1/10/2010 Labor Maint TD Super/Eng | T2 | 36190 Payroll Labor Distribution | 607.85 |
| 501200 | 23 | 1/10/2010 Labor Maint WT | T2 | 36190 Payroll Labor Distribution | 748.48 |
| 501200 | 2305 | 1/10/2010 Labor Maint WT Super/Eng | T2 | 36190 Payroll Labor Distribution | 1,823.64 |
| 501200 | 2435 | 1/10/2010 Labor Maint TD Meters | T2 | 36190 Payroll Labor Distribution | 3,181.04 |
| 501200 | 15 | 1/10/2010 Labor Oper CA | T2 | 36190 Payroll Labor Distribution | 3,660.62 |
| 501200 | 2440 | 1/10/2010 Labor Maint TD Hydrants | T2 | 36190 Payroll Labor Distribution | 3,985.97 |
| 501200 | 22 | 1/10/2010 Labor Maint P | T2 | 36190 Payroll Labor Distribution | 4,303.76 |
| 501200 | 1415 | 1/10/2010 Labor Oper TD Lines | T2 | 36190 Payroll Labor Distribution | 4,860.14 |
| 501200 | 1405 | 1/10/2010 Labor Oper TD Super/Eng | T2 | 36190 Payroll Labor Distribution | 5,689.07 |
| 501200 | 1520 | 1/10/2010 Labor Oper CA Cust Serv | T2 | 36190 Payroll Labor Distribution | 8,144.35 |
| 501200 | 2420 | 1/10/2010 Labor Maint TD Mains | T2 | 36190 Payroll Labor Distribution | 8,228.87 |
| 501200 | 2430 | 1/10/2010 Labor Maint TD Services | T2 | 36190 Payroll Labor Distribution | 9,726.23 |


| ACCOUNT | SUB | GL DATE ${ }^{\text {deSCRIPTION }}$ | DOC TYPE | DOC\# ${ }^{\text {E }}$ - EXPLANATION | AMOUNT |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 501200 | 1510 | 1/10/2010 Labor Oper CA Mtr Read | T2 | 36190 Payroll Labor Distribution | 17,716.56 |
| 501200 | 1420 | 1/10/2010 Labor Oper TD Meter | T2 | 36190 Payroll Labor Distribution | 21,363.25 |
| 501200 | 1305 | 1/10/2010 Labor Oper WT Super/Eng | T2 | 36190 Payroll Labor Distribution | 23,243.98 |
| 501200 | 13 | 1/10/2010 Labor Oper WT | T2 | 36190 Payroll Labor Distribution | 31,134.76 |
| 501200 | 16 | 1/10/2010 Labor Oper AG | T2 | 36190 Payroll Labor Distribution | 39,365.87 |
| 501200 | 14 | 1/10/2010 Labor Oper TD | T2 | 36190 Payroll Labor Distribution | 50,187.10 |
| 501210 | 2410 | 1/10/2010 Labor NS OT TD Struct \& Imp | T2 | 36190 Payroll Labor Distribution | 16.47 |
| 501210 | 2440 | 1/10/2010 Labor NS OT TD Hydrants | T2 | 36190 Payroll Labor Distribution | 31.25 |
| 501210 | 16 | 1/10/2010 Labor NS OT AG | T2 | 36190 Payroll Labor Distribution | 127.27 |
| 501210 | 1405 | 1/10/2010 Labor NS OT TD Super/Eng | T2 | 36190 Payroll Labor Distribution | 230.74 |
| 501210 | 15 | 1/10/2010 Labor NS OT CA | T2 | 36190 Payroll Labor Distribution | 448.12 |
| 501210 | 14 | 1/10/2010 Labor NS OT TD | T2 | 36190 Payroll Labor Distribution | 1,531.82 |
| 501210 | 2430 | 1/10/2010 Labor NS OT TD Services | T2 | 36190 Payroll Labor Distribution | 1,552.54 |
| 501210 | 1520 | 1/10/2010 Labor NS OT CA Cust Serv | T2 | 36190 Payroll Labor Distribution | 1,612.61 |
| 501210 | 1415 | 1/10/2010 Labor NS OT TD Lines | T2 | 36190 Payroll Labor Distribution | 1,633.21 |
| 501210 | 1305 | 1/10/2010 Labor NS OT WT Super/Eng | T2 | 36190 Payroll Labor Distribution | 1,839.24 |
| 501210 | 1510 | 1/10/2010 Labor NS OT CA Mtr Read | T2 | 36190 Payroll Labor Distribution | 1,887.07 |
| 501210 | 13 | 1/10/2010 Labor NS OT WT | T2 | 36190 Payroll Labor Distribution | 4,276.94 |
| 501210 | 1420 | 1/10/2010 Labor NS OT TD Meter | T2 | 36190 Payroll Labor Distribution | 6,031.48 |
| 501210 | 2420 | 1/10/2010 Labor NS OT TD Mains | T2 | 36190 Payroll Labor Distribution | 7,653.60 |
| 501211 | 13 | 1/10/2010 Labor OT WT | T2 | 36190 Payroll Labor Distribution | 2,834.04 |
| 501711 |  | 1/10/2010 IP-Off-Annual-P/R JE | T3 | 36191 Actual Burden Journal Entries | 11,579.13 |
| 504100 | 16 | 1/10/2010 Group Ins Oper AG | T3 | 36191 Actual Burden Journal Entries | 5,211.44 |
| 504100 | 1 | 1/10/2010 Group Insurance - Cap Credits | T3 | 36191 Actual Burden Journal Entries | 43,743.87 |
| 505100 | 1 | 1/10/2010 PBOP Cap Credits | T3 | 36191 Actual Burden Journal Entries | 29,757.17 |
| 506100 | 1 | 1/10/2010 Pension - Cap Credits | T3 | 36191 Actual Burden Journal Entries | 42,198.12 |
| 507100 | 16 | 1/10/2010 401k Oper AG | T3 | 36191 Actual Burden Journal Entries | 4,710.28 |
| 508101 | 16 | 1/10/2010 DCP Oper AG | T3 | 36191 Actual Burden Journal Entries | 4,077.45 |
| 508102 | 16 | 1/10/2010 Retiree Med Oper AG | T3 | 36191 Actual Burden Journal Entries | 693.43 |
| 550000 | 1 | 1/10/2010 Trans - Cap Credits | T3 | 36191 Actual Burden Journal Entries | 22,681.97 |
| 558000 | 1 | 1/10/2010 Ins Work Comp Cap Credits | T3 | 36191 Actual Burden Journal Entries | 4,860.40 |
| 685320 |  | 1/10/2010 FUTA | T3 | 36191 Actual Burden Journal Entries | 2,097.34 |
| 685325 |  | 1/10/2010 FICA | T3 | 36191 Actual Burden Journal Entries | 20,054.83 |
| 685350 |  | 1/10/2010 SUTA | T3 | 36191 Actual Burden Journal Entries | 3,792.09 |
| 715111 |  | 1/10/2010 M\&J Revenues-Outside | RI | 10139707 McDonough, William | -2,748.01 |
| 715111 |  | 1/10/2010 M\&J Revenues-Outside | RI | 10139708 Kentucky Farm Bureau | -1,814.79 |
| 715111 |  | 1/10/2010 M\&J Revenues-Outside | RI | 10139709 Blue Grass Energy - PO/REMIT | -1,242.25 |
| 715111 |  | 1/10/2010 M\&J Revenues-Outside | RI | 10139710 Whitt, Joshua | -1,164.20 |
| 715111 |  | 1/10/2010 M\&J Revenues-Outside | RI | 10139711 Bi Comm | -2,229.16 |
| 715111 |  | 1/10/2010 M\&J Revenues-Outside | RI | 10139712 John T Cannon Company | -1,484.14 |
| 716121 |  | 1/10/2010 M\&J Expenses-Outside | T2 | 36190 Payroll Labor Distribution | 1,562.31 |
| 716121 |  | 1/10/2010 M\&J Expenses-Outside | T3 | 36191 Actual Burden Journal Entries | 517.77 |
| 716122 |  | 1/10/2010 M\&J Expenses-Inside | T2 | 36190 Payroll Labor Distribution | 614.53 |
| 716122 |  | 1/10/2010 M\&J Expenses-Inside | T3 | 36191 Actual Burden Journal Entries | 342.25 |
| 401110 |  | 1/11/2010 Res Sales Billed | JE | 30911257 KY CIS POST GL BATCH | -153,002.06 |
| 401210 |  | 1/11/2010 Com Sales Billed | JE | 30911257 KY CIS POST GL BATCH | -59,544.91 |
| 401310 |  | 1/11/2010 Ind Sales Billed | JE | 30911257 KY CIS POST GL BATCH | -340.54 |
| 401510 |  | 1/11/2010 Pub Auth Billed | JE | 30911257 KY CIS POST GL BATCH | -3,443.94 |
| 402110 |  | 1/11/2010 Dom WW Serv Billed | JE | 30911257 KY CIS POST GL BATCH | -302.18 |
| 403104 |  | 1/11/2010 Oth Rev-NSF Check Charge | JE | 30911257 KY CIS POST GL BATCH | -144.00 |
| 403105 |  | 1/11/2010 Oth Rev-Appl/Initiate Serv Fee | JE | 30911257 KY CIS POST GL BATCH | -3,302.00 |
| 403107 |  | 1/11/2010 Oth Rev-Reconnection Charges | JE | 30911257 KY CIS POST GL BATCH | -3,328.00 |
| 504660 | 16 | 1/11/2010 Tuition Aid AG | PS | 42412021 Indiana Wesleyan University | 660.00 |
| 510100 | 11 | 1/11/2010 Purchased Water-Outside | PV | 42412015 Gallatin County Water District | 960.10 |
| 510100 | 11 | 1/11/2010 Purchased Water-Outside | PV | 42412016 Carroll Co Water Dist 1 | 2,299.60 |
| 515100 | 12 | 1/11/2010 Purch Power P | EE | 4049865 KU | 3,615.64 |
| 535001 | 14 | 1/11/2010 Contr Svc-Temp Empl Oper TD | PV | 42412013 Volt Services Group | 200.85 |
| 535001 | 13 | 1/11/2010 Contr Svc-Temp Empl Oper WT | PV | 42412013 Volt Services Group | 1,054.46 |
| 541400 | 16 | 1/11/2010 Rents-Equipment Oper AG | RI | 10139561 CIT Technology Financial Servi | -579.35 |
| 570100 | 15 | 1/11/2010 Uncollectible Accounts | JE | 30911257 KY CIS POST GL BATCH | -187.58 |
| 575200 | 15 | 1/11/2010 Collection Agencies CA | PV | 42411215 Penn Credit Corp | 1,748.69 |
| 575275 | 16 | 1/11/2010 Discounts Available | PK | 62058493 Ferguson SAC - ALL USE REMIT | -45.30 |
| 575280 | 16 | 1/11/2010 Dues/Membership Deduct | PS | 42412020 Bluegrass Cross Connection - P | 462.00 |
| 575545 | 13 | 1/11/2010 Lab Supplies WT | PV | 42412017 IDEXX Distribution Inc | 7,352.66 |
| 575620 | 14 | 1/11/2010 Office \& Admin Supplies TD | PV | 42412014 Duplicator Sales \& Service Inc | 67.50 |
| 575998 | 16 | 1/11/2010 PCard Undistributed | JN | 30911023 BPCORR 451085 reclass charges | -721.37 |
| 620000 | 24 | 1/11/2010 Mat and Sup Maint TD | OV | 10287616 Smith Blair Inc - PO Box 5337 | 2,078.83 |
| 620000 | 23 | 1/11/2010 Mat and Sup Maint WT | PV | 42412025 Airgas Mid America-REMIT | 103.95 |
| 675000 | 26 | 1/11/2010 Misc Maint AG | PV | 42411122 Perfection Services-PO/REMIT | 867.00 |
| 760200 |  | 1/11/2010 Other Income Deductions | PV | 42411326 Creative Co Op LLC | 1,000.00 |
| 760200 |  | 1/11/2010 Other Income Deductions | PV | 42411328 Creative Co Op LLC | 1,500.00 |
| 760200 |  | 1/11/2010 Other Income Deductions | PV | 42411330 Creative Co Op LLC | 6,000.00 |
| 760200 |  | 1/11/2010 Other Income Deductions | PV | 42412012 Creative Co Op LLC | 2,800.00 |
| 401110 |  | 1/12/2010 Res Sales Billed | JE | 30911332 KY CIS POST GL BATCH | -88,312.75 |
| 401210 |  | 1/12/2010 Com Sales Billed | JE | 30911332 KY CIS POST GL BATCH | -28,281.10 |
| 401310 |  | 1/12/2010 Ind Sales Billed | JE | 30911332 KY CIS POST GL BATCH | -2,076.39 |
| 401450 |  | 1/12/2010 Priv Fire Billed | JE | 30911332 KY CIS POST GL BATCH | 124.76 |
| 401510 |  | 1/12/2010 Pub Auth Billed | JE | 30911332 KY CIS POST GL BATCH | -17,349.29 |
| 403104 |  | 1/12/2010 Oth Rev-NSF Check Charge | JE | 30911332 KY CIS POST GL BATCH | -192.00 |
| 403105 |  | 1/12/2010 Oth Rev-Appl/Initiate Serv Fee | JE | 30911332 KY CIS POST GL BATCH | -1,716.00 |
| 403107 |  | 1/12/2010 Oth Rev-Reconnection Charges | JE | 30911332 KY CIS POST GL BATCH | -1,976.00 |
| 504100 | 16 | 1/12/2010 Group Ins Oper AG | RI | 10139597 Kinley, Victor E. | -7.62 |
| 515100 | 14 | 1/12/2010 Purch Power TD | EE | 4049878 KU | 35.28 |
| 515100 | 13 | 1/12/2010 Purch Power WT | EE | 4049883 KU | 4,869.84 |




| ACCOUNT | SUB | GL DATE | DESCRIPTION | DOC TYPE\| | DOC\# | EXPLANATION | AMOUNT |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 403104 |  | 1/18/2010 | Oth Rev-NSF Check Charge | JE | 30911759 | KY CIS POST GL BATCH | -180.00 |
| 403105 |  | 1/18/2010 | Oth Rev-Appl/Initiate Serv Fee | JE | 30911759 | KY CIS POST GL BATCH | -2,600.00 |
| 403107 |  | 1/18/2010 | Oth Rev-Reconnection Charges | JE | 30911759 | KY CIS POST GL BATCH | -2,483.00 |
| 403199 |  | 1/18/2010 | Oth Rev-Other Water Rev | PS | 42416688 | Kentucky Department of Revenue | -969.15 |
| 504620 | 16 | 1/18/2010 | Employee Physical Exam AG | PV | 42416142 | BaptistWorx Business Office | 70.00 |
| 510100 | 11 | 1/18/2010 | Purchased Water-Outside | PV | 42415872 | Winchester Municipal Utilities | 5,061.24 |
| 515100 | 12 | 1/18/2010 | Purch Power P | EE | 4057809 | KU | 55.80 |
| 515100 | 14 | 1/18/2010 | Purch Power TD | EE | 4057815 | KU | 625.91 |
| 515100 | 12 | 1/18/2010 | Purch Power P | PS | 42416688 | Kentucky Department of Revenue | 934.33 |
| 515100 | 13 | 1/18/2010 | Purch Power WT | PS | 42416688 | Kentucky Department of Revenue | 3,737.33 |
| 515100 | 13 | 1/18/2010 | Purch Power WT | PS | 42416689 | Kentucky Department of Revenue | 2,335.83 |
| 520100 | 16 | 1/18/2010 | M \& S Oper AG | PV | 42416056 | Grainger - ALL USE REMIT | 56.00 |
| 535000 | 15 | 1/18/2010 | Contr Svc-Other Oper CA | PV | 42416073 | Garda CL Central Inc | 497.55 |
| 535000 | 15 | 1/18/2010 | Contr Svc-Other Oper CA | PV | 42416091 | Garda CL Central Inc | 59.51 |
| 535001 | 15 | 1/18/2010 | Contr Svc-Temp Empl Oper CA | PV | 42416104 | VeBridge | 1,050.00 |
| 536000 | 13 | 1/18/2010 | Contr Svc-Lab Testing Oper WT | PV | 42416481 | Fouser Environmental Services | 80.00 |
| 570100 | 15 | 1/18/2010 | Uncollectible Accounts | JE | 30911759 | KY CIS POST GL BATCH | -61.66 |
| 575000 | 16 | 1/18/2010 | Misc Oper AG | OV | 10288117 | US Pipe \& Foundry Co LLC - PO | 197.05 |
| 575000 | 14 | 1/18/2010 | Misc Oper TD | PV | 42416040 | USA Blue Book | 206.42 |
| 575000 | 14 | 1/18/2010 | Misc Oper TD | PV | 42416047 | Grainger - ALL USE REMIT | 997.00 |
| 575000 | 14 | 1/18/2010 | Misc Oper TD | PV | 42416051 | Grainger - ALL USE REMIT | 62.12 |
| 575000 | 14 | 1/18/2010 | Misc Oper TD | PV | 42416056 | Grainger - ALL USE REMIT | 119.19 |
| 575000 | 14 | 1/18/2010 | Misc Oper TD | PV | 42416063 | Grainger - ALL USE REMIT | 523.41 |
| 575000 | 16 | 1/18/2010 | Misc Oper AG | PV | 42416802 | US Pipe \& Foundry Co - REMIT | 2.59 |
| 575545 | 13 | 1/18/2010 | Lab Supplies WT | PV | 42416812 | Scott Gross Co Inc | 15.94 |
| 575620 | 16 | 1/18/2010 | Office \& Admin Supplies AG | PV | 42416095 | United Parcel Service | 55.12 |
| 575620 | 16 | 1/18/2010 | Office \& Admin Supplies AG | PV | 42416096 | United Parcel Service | 127.32 |
| 575620 | 16 | 1/18/2010 | Office \& Admin Supplies AG | PV | 42416114 | United Parcel Service | 88.89 |
| 575625 | 16 | 1/18/2010 | Overnight Shipping AG | PV | 42416134 | United Parcel Service | 91.14 |
| 575625 | 16 | 1/18/2010 | Overnight Shipping AG | PV | 42416137 | United Parcel Service | 92.66 |
| 575625 | 16 | 1/18/2010 | Overnight Shipping AG | PV | 42416483 | United Parcel Service | 43.25 |
| 575711 | 16 | 1/18/2010 | Add'l Security Costs AG | PV | 42416115 | Murray Guard Inc-PO/REMIT | 715.20 |
| 575711 | 16 | 1/18/2010 | Add'l Security Costs AG | PV | 42416117 | Murray Guard Inc-PO/REMIT | 2,506.28 |
| 575780 | 16 | 1/18/2010 | Trash Removal AG | PV | 42416120 | Rumpke of Ind LLC-REMIT-ALL AC | 82.46 |
| 575830 | 16 | 1/18/2010 | Wtr \& Waste Wtr Exp AG | PV | 42416076 | Kentucky American Water | 4.25 |
| 575830 | 16 | 1/18/2010 | Wtr \& Waste Wtr Exp AG | PV | 42416078 | Kentucky American Water | 10.65 |
| 575830 | 16 | 1/18/2010 | Wtr \& Waste Wtr Exp AG | PV | 42416084 | Kentucky American Water | 6.07 |
| 575830 | 16 | 1/18/2010 | Wtr \& Waste Wtr Exp AG | PV | 42416087 | Kentucky American Water | 111.40 |
| 575830 | 16 | 1/18/2010 | Wtr \& Waste Wtr Exp AG | PV | 42416099 | Kentucky American Water | 176.18 |
| 575830 | 16 | 1/18/2010 | Wtr \& Waste Wtr Exp AG | PV | 42416108 | Kentucky American Water | 19.81 |
| 575830 | 16 | 1/18/2010 | Wtr \& Waste Wtr Exp AG | PV | 42416111 | Kentucky American Water | 930.55 |
| 620000 | 24 | 1/18/2010 | Mat and Sup Maint TD | PV | 42416043 | Ford Meter Box Co Inc - ALL US | 291.00 |
| 620000 | 24 | 1/18/2010 | Mat and Sup Maint TD | PV | 42416066 | CI Thornburg Co Inc | 506.42 |
| 760400 |  | 1/18/2010 | Other Lobbying Expenses | PV | 42416811 | McCarthy Strategic Solutions L | 4,509.13 |
| 401110 |  | 1/19/2010 | Res Sales Billed | JE | 30911821 | KY CIS POST GL BATCH | -162,776.36 |
| 401210 |  | 1/19/2010 | Com Sales Billed | JE | 30911821 | KY CIS POST GL BATCH | -73,972.36 |
| 401510 |  | 1/19/2010 | Pub Auth Billed | JE | 30911821 | KY CIS POST GL BATCH | -11,857.42 |
| 402110 |  | 1/19/2010 | Dom WW Serv Billed | JE | 30911821 | KY CIS POST GL BATCH | -5.76 |
| 403105 |  | 1/19/2010 | Oth Rev-Appl/Initiate Serv Fee | JE | 30911821 | KY CIS POST GL BATCH | -1,976.00 |
| 403107 |  | 1/19/2010 | Oth Rev-Reconnection Charges | JE | 30911821 | KY CIS POST GL BATCH | -3,198.00 |
| 504100 | 16 | 1/19/2010 | Group Ins Oper AG | PS | 42417124 | White, Joe C. | 160.00 |
| 515100 | 12 | 1/19/2010 | Purch Power P | EE | 4059234 | KU | 540.46 |
| 515100 | 14 | 1/19/2010 | Purch Power TD | EE | 4059236 | KU | 73.25 |
| 515100 | 14 | 1/19/2010 | Purch Power TD | RI | 10139863 | Owen Electric - PO/REMIT | -347.20 |
| 535000 | 14 | 1/19/2010 | Contr Svc-Other Oper TD | PV | 42417334 | Kentucky Underground Protectio | 2,358.30 |
| 535000 | 16 | 1/19/2010 | Contr Svc-Other Oper AG | PV | 42417725 | Randy Walker Electric-PO/REMIT | 65.12 |
| 535000 | 16 | 1/19/2010 | Contr Svc-Other Oper AG | PV | 42417727 | Kentucky Underground Storage I | 168.00 |
| 535001 | 14 | 1/19/2010 | Contr Svc-Temp Empl Oper TD | PV | 42417719 | Volt Services Group | 351.48 |
| 535001 | 13 | 1/19/2010 | Contr Svc-Temp Empl Oper WT | PV | 42417719 | Volt Services Group | 1,757.44 |
| 550000 | 16 | 1/19/2010 | Trans Oper AG | PV | 42417808 | Bridgestone Americas Inc | 645.09 |
| 550002 | 16 | 1/19/2010 | Trans Oper AG Lease Fuel | PV | 42417345 | Automotive Rentals Inc ACH/ALL | 8,409.40 |
| 550003 | 16 | 1/19/2010 | Trans Oper AG Lease Maint | PV | 42417345 | Automotive Rentals Inc ACH/ALL | 6,918.55 |
| 570100 | 15 | 1/19/2010 | Uncollectible Accounts | JE | 30911821 | KY CIS POST GL BATCH | -664.08 |
| 575000 | 14 | 1/19/2010 | Misc Oper TD | ST | 30911733 | SABRIX NO TAX CHARGED ACR | 12.39 |
| 575275 | 16 | 1/19/2010 | Discounts Available | PK | 62058548 | USA Blue Book | -2.06 |
| 575275 | 16 | 1/19/2010 | Discounts Available | PK | 62058553 | Ford Meter Box Co Inc - ALL US | -294.48 |
| 575275 | 16 | 1/19/2010 | Discounts Available | PK | 62058567 | Mueller Co - ALL USE PO/REMIT | -10.47 |
| 575780 | 16 | 1/19/2010 | Trash Removal AG | PV | 42417810 | Lexington Fayette Urban County | 132.55 |
| 620000 | 24 | 1/19/2010 | Mat and Sup Maint TD | IR | 579436 | Inventory Return | -468.75 |
| 620000 | 24 | 1/19/2010 | Mat and Sup Maint TD | IR | 579438 | Inventory Return | -91.88 |
| 620000 | 24 | 1/19/2010 | Mat and Sup Maint TD | IR | 579445 | Inventory Return | -46.62 |
| 620000 | 24 | 1/19/2010 | Mat and Sup Maint TD | IR | 579449 | Inventory Return | -48.97 |
| 620000 | 24 | 1/19/2010 | Mat and Sup Maint TD | ST | 30911733 | SABRIX NO TAX CHARGED ACR | 17.46 |
| 716121 |  | 1/19/2010 | M\&J Expenses-Outside | 11 | 579448 | Inventory Issue-Stk E \& D | 46.62 |
| 716121 |  | 1/19/2010 | M\&J Expenses-Outside | 11 | 579450 | Inventory Issue-Stk E \& D | 48.97 |
| 401110 |  | 1/20/2010 | Res Sales Billed | JE | 30911898 | KY CIS POST GL BATCH | -79,606.21 |
| 401210 |  | 1/20/2010 | Com Sales Billed | JE | 30911898 | KY CIS POST GL BATCH | -79,332.31 |
| 401310 |  | 1/20/2010 | Ind Sales Billed | JE | 30911898 | KY CIS POST GL BATCH | -117.42 |
| 401510 |  | 1/20/2010 | Pub Auth Billed | JE | 30911898 | KY CIS POST GL BATCH | -3,360.62 |
| 402310 |  | 1/20/2010 | Ind WW Serv Billed | RI | 10139874 | Kentucky American Northern | -500.00 |
| 403104 |  | 1/20/2010 | Oth Rev-NSF Check Charge | JE | 30911898 | KY CIS POST GL BATCH | -192.00 |
| 403105 |  | 1/20/2010 | Oth Rev-Appl/Initiate Serv Fee | JE | 30911898 | KY CIS POST GL BATCH | -1,196.00 |
| 403107 |  | 1/20/2010 | Oth Rev-Reconnection Charges | JE | 30911898 | KY CIS POST GL BATCH | -2,054.00 |
| 515100 | 12 | 1/20/2010 | Purch Power P | EE | 4059655 |  | 846.52 |


| ACCOUNT | SUB | GL DATE $\quad$ DESCRIPTION | DOC TYPE | DOC\# $\quad$ EXPLANATION | AMOUNT |
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| 515100 | 14 | 1/20/2010 Purch Power TD | EE | 4059660 KU | 23.42 |
| 515100 | 14 | 1/20/2010 Purch Power TD | EE | 4059663 KU | 12.78 |
| 515100 | 14 | 1/20/2010 Purch Power TD | EE | 4059720 KU | 12.28 |
| 515100 | 14 | 1/20/2010 Purch Power TD | EE | 4059723 KU | 177.65 |
| 515100 | 14 | 1/20/2010 Purch Power TD | EE | 4059727 KU | 42.57 |
| 515100 | 14 | 1/20/2010 Purch Power TD | EE | 4059757 OWEN ELECTRIC COOP INC | 23.34 |
| 515100 | 14 | 1/20/2010 Purch Power TD | EE | 4059807 KU | 95.13 |
| 515100 | 14 | 1/20/2010 Purch Power TD | EE | 4059809 KU | 22.45 |
| 515100 | 13 | 1/20/2010 Purch Power WT | EE | 4059816 KU | 382.30 |
| 515100 | 14 | 1/20/2010 Purch Power TD | EE | 4059829 KU | 85.48 |
| 515100 | 13 | 1/20/2010 Purch Power WT | EE | 4059887 KU | 2,401.31 |
| 515100 | 14 | 1/20/2010 Purch Power TD | EE | 4059888 KU | 13.49 |
| 520100 | 14 | 1/20/2010 M \& S Oper TD | EE | 4059663 KU | 10.00 |
| 520100 | 16 | 1/20/2010 M \& S Oper AG | PV | 42418536 Sams Club | 250.32 |
| 520100 | 16 | 1/20/2010 M \& S Oper AG | PV | 42418546 Media Library Inc-PO/REMIT | 200.00 |
| 535001 | 14 | 1/20/2010 Contr Svc-Temp Empl Oper TD | PV | 42418527 Volt Services Group | 259.42 |
| 535001 | 13 | 1/20/2010 Contr Svc-Temp Empl Oper WT | PV | 42418527 Volt Services Group | 1,749.08 |
| 550000 | 16 | 1/20/2010 Trans Oper AG | ST | 30911797 SABRIX VENDOR TAX COMPARE | 4.44 |
| 570100 | 15 | 1/20/2010 Uncollectible Accounts | JE | 30911898 KY CIS POST GL BATCH | -154.58 |
| 575280 | 16 | 1/20/2010 Dues/Membership Deduct | PV | 42418549 Cynthiana Harrison | 350.00 |
| 575320 | 14 | 1/20/2010 Electricity TD | EE | 4059714 KU | 525.87 |
| 760100 |  | 1/20/2010 Donations Deduct | PV | 42418540 News-Herald Owenton | 225.00 |
| 401110 |  | 1/21/2010 Res Sales Billed | JE | 30912245 KY CIS POST GL BATCH | -169,218.98 |
| 401210 |  | 1/21/2010 Com Sales Billed | JE | 30912245 KY CIS POST GL BATCH | -58,015.58 |
| 401310 |  | 1/21/2010 Ind Sales Billed | JE | 30912245 KY CIS POST GL BATCH | -295.51 |
| 401510 |  | 1/21/2010 Pub Auth Billed | JE | 30912245 KY CIS POST GL BATCH | -886.33 |
| 401610 |  | 1/21/2010 SFR Billed | JE | 30912245 KY CIS POST GL BATCH | -89.61 |
| 402110 |  | 1/21/2010 Dom WW Serv Billed | JE | 30912245 KY CIS POST GL BATCH | -1,684.03 |
| 402210 |  | 1/21/2010 Com WW Serv Billed | JE | 30912245 KY CIS POST GL BATCH | -265.84 |
| 402310 |  | 1/21/2010 Ind WW Serv Billed | JE | 30912245 KY CIS POST GL BATCH | -82.99 |
| 403104 |  | 1/21/2010 Oth Rev-NSF Check Charge | JE | 30912245 KY CIS POST GL BATCH | -216.00 |
| 403105 |  | 1/21/2010 Oth Rev-Appl/Initiate Serv Fee | JE | 30912245 KY CIS POST GL BATCH | -1,144.00 |
| 403107 |  | 1/21/2010 Oth Rev-Reconnection Charges | JE | 30912245 KY CIS POST GL BATCH | -1,300.00 |
| 515100 | 14 | 1/21/2010 Purch Power TD | EE | 4052799 KU | 30.47 |
| 515100 | 12 | 1/21/2010 Purch Power P | EE | 4061232 KU | 1,026.66 |
| 520100 | 16 | 1/21/2010 M \& S Oper AG | PV | 42419177 Grainger - ALL USE REMIT | 1,559.50 |
| 533000 | 16 | 1/21/2010 Contr Svc-Legal Oper AG | PV | 42418963 Stoll Keenon Ogden PLLC-PO/REM | 2,040.48 |
| 535000 | 16 | 1/21/2010 Contr Svc-Other Oper AG | PV | 42419147 Computershare | 361.08 |
| 541000 | 14 | 1/21/2010 Rents-Real Prop Oper TD | PV | 42419171 Norfolk Southern Corporation | 150.00 |
| 541000 | 14 | 1/21/2010 Rents-Real Prop Oper TD | PV | 42419172 Norfolk Southern Corporation | 150.00 |
| 541000 | 14 | 1/21/2010 Rents-Real Prop Oper TD | PV | 42419173 Norfolk Southern Corporation | 150.00 |
| 541000 | 14 | 1/21/2010 Rents-Real Prop Oper TD | PV | 42419174 Norfolk Southern Corporation | 150.00 |
| 550000 | 16 | 1/21/2010 Trans Oper AG | PV | 42419070 C Store Partners - REMIT | 101.75 |
| 550000 | 16 | 1/21/2010 Trans Oper AG | PV | 42419072 Thoroughbred Energy LLC | 356.83 |
| 570100 | 15 | 1/21/2010 Uncollectible Accounts | JE | 30912245 KY CIS POST GL BATCH | -385.44 |
| 575000 | 14 | 1/21/2010 Misc Oper TD | TC | 30911972 Granite | 73.70 |
| 575000 | 16 | 1/21/2010 Misc Oper AG | PV | 42418873 Ferguson SAC - ALL USE REMIT | -1.45 |
| 575000 | 14 | 1/21/2010 Misc Oper TD | PV | 42419168 Grainger - ALL USE REMIT | 21.42 |
| 575000 | 14 | 1/21/2010 Misc Oper TD | PV | 42419170 Grainger - ALL USE REMIT | 30.03 |
| 575000 | 14 | 1/21/2010 Misc Oper TD | PV | 42419178 Grainger - ALL USE REMIT | 682.45 |
| 575000 | 14 | 1/21/2010 Misc Oper TD | PV | 42419179 Grainger - ALL USE REMIT | 15.56 |
| 575000 | 14 | 1/21/2010 Misc Oper TD | PV | 42419180 Grainger - ALL USE REMIT | 650.70 |
| 575000 | 14 | 1/21/2010 Misc Oper TD | PV | 42419181 Grainger - ALL USE REMIT | 301.25 |
| 575000 | 14 | 1/21/2010 Misc Oper TD | PV | 42419182 Grainger - ALL USE REMIT | 72.10 |
| 575000 | 14 | 1/21/2010 Misc Oper TD | PV | 42419183 Grainger - ALL USE REMIT | 592.25 |
| 575275 | 16 | 1/21/2010 Discounts Available | PK | 62058588 US Pipe \& Foundry Co - REMIT | -491.28 |
| 575320 | 14 | 1/21/2010 Electricity TD | EE | 4061251 KU | 25.92 |
| 575320 | 14 | 1/21/2010 Electricity TD | EE | 4061253 KU | 55.50 |
| 575320 | 14 | 1/21/2010 Electricity TD | EE | 4061257 KU | 40.40 |
| 575320 | 14 | 1/21/2010 Electricity TD | EE | 4062741 OWEN ELECTRIC COOP INC | 15.29 |
| 575740 | 16 | 1/21/2010 Telephone AG | TC | 30911972 Granite | 97.27 |
| 575740 | 14 | 1/21/2010 Telephone TD | TC | 30911972 Granite | 119.45 |
| 620000 | 24 | 1/21/2010 Mat and Sup Maint TD | OV | 10288392 Bingham \& Taylor Corp | 714.44 |
| 620000 | 24 | 1/21/2010 Mat and Sup Maint TD | PV | 42419166 Hydraflo Inc -PO/REMIT | 453.12 |
| 620000 | 24 | 1/21/2010 Mat and Sup Maint TD | PV | 42419176 Hydraflo Inc -PO/REMIT | 883.20 |
| 685350 |  | 1/21/2010 SUTA | PS | 42419190 Treasurer Kentucky Unemploy In | . 01 |
| 716121 |  | 1/21/2010 M\&J Expenses-Outside | PV | 42418965 HDR Engineering Inc - ALL USE | 306.00 |
| 401110 |  | 1/22/2010 Res Sales Billed | JE | 30912435 KY CIS POST GL BATCH | -285,617.25 |
| 401210 |  | 1/22/2010 Com Sales Billed | JE | 30912435 KY CIS POST GL BATCH | -129,013.84 |
| 401310 |  | 1/22/2010 Ind Sales Billed | JE | 30912435 KY CIS POST GL BATCH | -2,529.66 |
| 401510 |  | 1/22/2010 Pub Auth Billed | JE | 30912435 KY CIS POST GL BATCH | -4,957.88 |
| 402210 |  | 1/22/2010 Com WW Serv Billed | JE | 30912435 KY CIS POST GL BATCH | -17.16 |
| 403104 |  | 1/22/2010 Oth Rev-NSF Check Charge | JE | 30912435 KY CIS POST GL BATCH | -216.00 |
| 403105 |  | 1/22/2010 Oth Rev-Appl/Initiate Serv Fee | JE | 30912435 KY CIS POST GL BATCH | -3,744.00 |
| 403107 |  | 1/22/2010 Oth Rev-Reconnection Charges | JE | 30912435 KY CIS POST GL BATCH | -5,564.00 |
| 515100 | 14 | 1/22/2010 Purch Power TD | EE | 4064636 OWEN ELECTRIC COOP INC | 66.55 |
| 515100 | 14 | 1/22/2010 Purch Power TD | EE | 4064641 OWEN ELECTRIC COOP INC | 71.84 |
| 541400 | 16 | 1/22/2010 Rents-Equipment Oper AG | PV | 42419504 Canon Financial Svcs Inc -REMI | 1,226.31 |
| 541400 | 16 | 1/22/2010 Rents-Equipment Oper AG | PV | 42419507 Canon Financial Svcs Inc -REMI | 156.20 |
| 541400 | 16 | 1/22/2010 Rents-Equipment Oper AG | PV | 42419509 Canon Financial Svcs Inc -REMI | 149.50 |
| 550000 | 16 | 1/22/2010 Trans Oper AG | ST | 30912227 SABRIX NO TAX CHARGED ACR | 27.52 |
| 550000 | 16 | 1/22/2010 Trans Oper AG | PV | 42419525 Bridgestone Americas Inc | 572.45 |
| 570100 | 15 | 1/22/2010 Uncollectible Accounts | JE | 30912435 KY CIS POST GL BATCH | -399.59 |
| 575030 | 16 | 1/22/2010 Advertising | PV | 42419494 Henry Clay High School | 160.00 |


| ACCOUNT | SUB | GL DATE ${ }^{\text {deSCRIPTION }}$ | DOC TYPE | DOC\# ${ }^{\text {E }}$ - EXPLANATION | AMOUNT |
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| 575100 | 15 | 1/22/2010 Bank Service Charges CA | PV | 42419302 CheckFreePay Corporation | 8,453.76 |
| 575275 | 16 | 1/22/2010 Discounts Available | PK | 62058606 Mueller Co - ALL USE PO/REMIT | -13.07 |
| 575275 | 16 | 1/22/2010 Discounts Available | PK | 62058612 Ferguson SAC - ALL USE REMIT | -17.43 |
| 575280 | 16 | 1/22/2010 Dues/Membership Deduct | PS | 42419286 Kentucky Chamber of Commerce-P | 5,500.00 |
| 575620 | 16 | 1/22/2010 Office \& Admin Supplies AG | PV | 42419522 United Parcel Service | 389.97 |
| 575711 | 16 | 1/22/2010 Add'I Security Costs AG | PV | 42419514 Murray Guard Inc-PO/REMIT | 2,506.28 |
| 575711 | 16 | 1/22/2010 Add'I Security Costs AG | PV | 42419517 Murray Guard Inc-PO/REMIT | 715.20 |
| 575740 | 16 | 1/22/2010 Telephone AG | TC | 30912115 Genesys | 5.96 |
| 575740 | 16 | 1/22/2010 Telephone AG | TC | 30912175 AT\&T | 116.45 |
| 575740 | 16 | 1/22/2010 Telephone AG | TC | 30912176 AT\&T | 223.10 |
| 575740 | 16 | 1/22/2010 Telephone AG | TC | 30912177 AT\&T | 1,398.36 |
| 620000 | 24 | 1/22/2010 Mat and Sup Maint TD | ST | 30912227 SABRIX NO TAX CHARGED ACR | 80.18 |
| 675000 | 26 | 1/22/2010 Misc Maint AG | PV | 42419520 Commonwealth Communications of | 3,813.00 |
| 550000 | 16 | 1/23/2010 Trans Oper AG | ST | 30912399 SABRIX VENDOR TAX COMPARE | 4.44 |
| 575030 | 16 | 1/23/2010 Advertising | ST | 30912400 SABRIX NO TAX CHARGED ACR | 9.60 |
| 715111 |  | 1/23/2010 M\&J Revenues-Outside | RI | 10140305 CJ Hughes Construction Co Inc | -245.48 |
| 715111 |  | 1/23/2010 M\&J Revenues-Outside | RI | 10140306 Bluegrass Station - Robert Hun | -11,097.10 |
| 501200 | 24 | 1/24/2010 Labor Maint TD | T2 | 36401 Payroll Labor Distribution | 142.74 |
| 501200 | 2405 | 1/24/2010 Labor Maint TD Super/Eng | T2 | 36401 Payroll Labor Distribution | 607.86 |
| 501200 | 2305 | 1/24/2010 Labor Maint WT Super/Eng | T2 | 36401 Payroll Labor Distribution | 1,958.72 |
| 501200 | 2435 | 1/24/2010 Labor Maint TD Meters | T2 | 36401 Payroll Labor Distribution | 3,555.28 |
| 501200 | 22 | 1/24/2010 Labor Maint P | T2 | 36401 Payroll Labor Distribution | 3,742.40 |
| 501200 | 2440 | 1/24/2010 Labor Maint TD Hydrants | T2 | 36401 Payroll Labor Distribution | 4,453.26 |
| 501200 | 1415 | 1/24/2010 Labor Oper TD Lines | T2 | 36401 Payroll Labor Distribution | 5,255.73 |
| 501200 | 15 | 1/24/2010 Labor Oper CA | T2 | 36401 Payroll Labor Distribution | 5,719.15 |
| 501200 | 1520 | 1/24/2010 Labor Oper CA Cust Serv | T2 | 36401 Payroll Labor Distribution | 6,634.87 |
| 501200 | 1405 | 1/24/2010 Labor Oper TD Super/Eng | T2 | 36401 Payroll Labor Distribution | 7,673.24 |
| 501200 | 2430 | 1/24/2010 Labor Maint TD Services | T2 | 36401 Payroll Labor Distribution | 8,971.34 |
| 501200 | 2420 | 1/24/2010 Labor Maint TD Mains | T2 | 36401 Payroll Labor Distribution | 9,079.74 |
| 501200 | 1510 | 1/24/2010 Labor Oper CA Mtr Read | T2 | 36401 Payroll Labor Distribution | 22,949.57 |
| 501200 | 1305 | 1/24/2010 Labor Oper WT Super/Eng | T2 | 36401 Payroll Labor Distribution | 24,529.62 |
| 501200 | 1420 | 1/24/2010 Labor Oper TD Meter | T2 | 36401 Payroll Labor Distribution | 27,205.99 |
| 501200 | 14 | 1/24/2010 Labor Oper TD | T2 | 36401 Payroll Labor Distribution | 27,415.23 |
| 501200 | 13 | 1/24/2010 Labor Oper WT | T2 | 36401 Payroll Labor Distribution | 30,381.32 |
| 501200 | 16 | 1/24/2010 Labor Oper AG | T2 | 36401 Payroll Labor Distribution | 39,477.70 |
| 501200 | 14 | 1/24/2010 Labor Oper TD | T2 | 36435 Payroll Labor Distribution | 2,500.00 |
| 501200 | 14 | 1/24/2010 Labor Oper TD | T3 | 36436 Actual Burden Journal Entries | 1,385.00 |
| 501210 | 16 | 1/24/2010 Labor NS OT AG | T2 | 36401 Payroll Labor Distribution | 550.94 |
| 501210 | 15 | 1/24/2010 Labor NS OT CA | T2 | 36401 Payroll Labor Distribution | 792.62 |
| 501210 | 1415 | 1/24/2010 Labor NS OT TD Lines | T2 | 36401 Payroll Labor Distribution | 1,470.59 |
| 501210 | 2430 | 1/24/2010 Labor NS OT TD Services | T2 | 36401 Payroll Labor Distribution | 1,707.82 |
| 501210 | 1305 | 1/24/2010 Labor NS OT WT Super/Eng | T2 | 36401 Payroll Labor Distribution | 1,721.48 |
| 501210 | 1520 | 1/24/2010 Labor NS OT CA Cust Serv | T2 | 36401 Payroll Labor Distribution | 1,734.86 |
| 501210 | 14 | 1/24/2010 Labor NS OT TD | T2 | 36401 Payroll Labor Distribution | 2,127.41 |
| 501210 | 1510 | 1/24/2010 Labor NS OT CA Mtr Read | T2 | 36401 Payroll Labor Distribution | 3,358.62 |
| 501210 | 13 | 1/24/2010 Labor NS OT WT | T2 | 36401 Payroll Labor Distribution | 3,379.81 |
| 501210 | 2420 | 1/24/2010 Labor NS OT TD Mains | T2 | 36401 Payroll Labor Distribution | 6,627.58 |
| 501210 | 1420 | 1/24/2010 Labor NS OT TD Meter | T2 | 36401 Payroll Labor Distribution | 6,834.36 |
| 501211 | 13 | 1/24/2010 Labor OT WT | T2 | 36401 Payroll Labor Distribution | -297.96 |
| 501211 | 14 | 1/24/2010 Labor OT TD | T2 | 36401 Payroll Labor Distribution | 472.95 |
| 501211 | 2430 | 1/24/2010 Labor OT TD Services | T2 | 36401 Payroll Labor Distribution | 962.83 |
| 501211 | 2420 | 1/24/2010 Labor OT TD Mains | T2 | 36401 Payroll Labor Distribution | 1,852.96 |
| 501711 |  | 1/24/2010 IP-Off-Annual-P/R JE | T3 | 36402 Actual Burden Journal Entries | 11,813.75 |
| 504100 | 16 | 1/24/2010 Group Ins Oper AG | T3 | 36402 Actual Burden Journal Entries | 5,809.26 |
| 504100 | 1 | 1/24/2010 Group Insurance - Cap Credits | T3 | 36402 Actual Burden Journal Entries | 42,614.20 |
| 505100 | 1 | 1/24/2010 PBOP Cap Credits | T3 | 36402 Actual Burden Journal Entries | 28,320.02 |
| 506100 | 1 | 1/24/2010 Pension - Cap Credits | T3 | 36402 Actual Burden Journal Entries | 40,160.15 |
| 507100 | 16 | 1/24/2010 401k Oper AG | T3 | 36402 Actual Burden Journal Entries | 4,486.94 |
| 508101 | 16 | 1/24/2010 DCP Oper AG | T3 | 36402 Actual Burden Journal Entries | 3,762.03 |
| 550000 | 1 | 1/24/2010 Trans - Cap Credits | T3 | 36402 Actual Burden Journal Entries | 22,096.17 |
| 558000 | 1 | 1/24/2010 Ins Work Comp Cap Credits | T3 | 36402 Actual Burden Journal Entries | 4,735.04 |
| 685320 |  | 1/24/2010 FUTA | T3 | 36402 Actual Burden Journal Entries | 1,984.07 |
| 685320 |  | 1/24/2010 FUTA | T3 | 36436 Actual Burden Journal Entries | 31.08 |
| 685325 |  | 1/24/2010 FICA | T3 | 36402 Actual Burden Journal Entries | 19,535.72 |
| 685325 |  | 1/24/2010 FICA | T3 | 36436 Actual Burden Journal Entries | 297.21 |
| 685350 |  | 1/24/2010 SUTA | T3 | 36402 Actual Burden Journal Entries | 3,629.93 |
| 685350 |  | 1/24/2010 SUTA | T3 | 36436 Actual Burden Journal Entries | 54.39 |
| 715111 |  | 1/24/2010 M\&J Revenues-Outside | RI | 10140233 Kentucky Farm Bureau | -481.22 |
| 715111 |  | 1/24/2010 M\&J Revenues-Outside | RI | 10140234 K Hayes Limited | -259.28 |
| 715111 |  | 1/24/2010 M\&J Revenues-Outside | RI | 10140235 Kentucky River Authority | -2,603.84 |
| 715111 |  | 1/24/2010 M\&J Revenues-Outside | RI | 10140236 Ball Homes | -1,678.68 |
| 715111 |  | 1/24/2010 M\&J Revenues-Outside | RI | 10140237 Kentucky River Authority | -2,403.07 |
| 715111 |  | 1/24/2010 M\&J Revenues-Outside | RI | 10140238 Lighthouse Ministries | -181.74 |
| 715111 |  | 1/24/2010 M\&J Revenues-Outside | RI | 10140239 CJ Hughes Construction Co Inc | -183.19 |
| 715111 |  | 1/24/2010 M\&J Revenues-Outside | RI | 10140243 Board of Education | -267.97 |
| 715111 |  | 1/24/2010 M\&J Revenues-Outside | RI | 10140244 Stanley Pipeline Inc | -471.24 |
| 716121 |  | 1/24/2010 M\&J Expenses-Outside | T2 | 36401 Payroll Labor Distribution | 5,214.82 |
| 716121 |  | 1/24/2010 M\&J Expenses-Outside | T3 | 36402 Actual Burden Journal Entries | 2,345.71 |
| 401110 |  | 1/25/2010 Res Sales Billed | JE | 30912617 KY CIS POST GL BATCH | -121,876.67 |
| 401210 |  | 1/25/2010 Com Sales Billed | JE | 30912617 KY CIS POST GL BATCH | -69,902.48 |
| 401310 |  | 1/25/2010 Ind Sales Billed | JE | 30912617 KY CIS POST GL BATCH | -1,176.72 |
| 401510 |  | 1/25/2010 Pub Auth Billed | JE | 30912617 KY CIS POST GL BATCH | -6,688.59 |
| 403104 |  | 1/25/2010 Oth Rev-NSF Check Charge | JE | 30912617 KY CIS POST GL BATCH | -168.00 |
| 403105 |  | 1/25/2010 Oth Rev-Appl/Initiate Serv Fee | JE | 30912617 KY CIS POST GL BATCH | -1,846.00 |


| ACCOUNT | SUB | GL DATE $\quad$ DESCRIPTION | DOC TYPE | DOC\# ${ }^{\text {E }}$ - EXPLANATION | AMOUNT |
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| 403107 |  | 1/25/2010 Oth Rev-Reconnection Charges | JE | 30912617 KY CIS POST GL BATCH | -1,872.00 |
| 515100 | 14 | 1/25/2010 Purch Power TD | EE | 4066603 OWEN ELECTRIC COOP INC | 41.64 |
| 515100 | 14 | 1/25/2010 Purch Power TD | EE | 4066612 OWEN ELECTRIC COOP INC | 236.52 |
| 518001 |  | 1/25/2010 Chemicals Carbon AWSI | PV | 42421116 American Anglian Environmental | 3,550.41 |
| 518001 | AWSI | 1/25/2010 Chemicals Carbon AWSI | PV | 42421136 American Anglian Environmental | 3,872.29 |
| 520100 | 14 | 1/25/2010 M \& S Oper TD | PV | 42421141 Cobb, Rodney | 705.68 |
| 535000 | 13 | 1/25/2010 Contr Svc-Other Oper WT | PV | 42421146 Siemens Water Technologies Cor | 186.56 |
| 536000 | 13 | 1/25/2010 Contr Svc-Lab Testing Oper WT | PV | 42421110 Fouser Environmental Services | 100.00 |
| 536000 | 13 | 1/25/2010 Contr Svc-Lab Testing Oper WT | PV | 42421113 Fouser Environmental Services | 410.00 |
| 550000 | 16 | 1/25/2010 Trans Oper AG | PS | 42421022 Kentucky State Treasurer-PO/RE | 3.22 |
| 570100 | 15 | 1/25/2010 Uncollectible Accounts | JE | 30912617 KY CIS POST GL BATCH | -474.15 |
| 575200 | 15 | 1/25/2010 Collection Agencies CA | PV | 42421057 Penn Credit Corp | -4.21 |
| 575275 | 16 | 1/25/2010 Discounts Available | PV | 42421091 JCM Industries Inc | 28.61 |
| 575320 | 14 | 1/25/2010 Electricity TD | PV | 42421138 KY Utilities | 14.33 |
| 575500 | 14 | 1/25/2010 Janitorial TD | PV | 42421140 Cobb, Rodney | 399.00 |
| 575625 | 16 | 1/25/2010 Overnight Shipping AG | PV | 42421137 United Parcel Service | 88.69 |
| 575625 | 13 | 1/25/2010 Overnight Shipping WT | PV | 42421143 United Parcel Service | 57.83 |
| 620000 | 24 | 1/25/2010 Mat and Sup Maint TD | IR | 580534 Inventory Return | -. 93 |
| 620000 | 24 | 1/25/2010 Mat and Sup Maint TD | OV | 10288738 Smith Blair Inc - PO Box 5337 | 1,776.89 |
| 620000 | 26 | 1/25/2010 Mat and Sup Maint AG | PV | 42420523 Neopost Inc | 168.53 |
| 401110 |  | 1/26/2010 Res Sales Billed | JE | 30912686 KY CIS POST GL BATCH | -148,727.50 |
| 401210 |  | 1/26/2010 Com Sales Billed | JE | 30912686 KY CIS POST GL BATCH | -16,726.66 |
| 401510 |  | 1/26/2010 Pub Auth Billed | JE | 30912686 KY CIS POST GL BATCH | -2,511.01 |
| 402110 |  | 1/26/2010 Dom WW Serv Billed | JE | 30912686 KY CIS POST GL BATCH | -11.51 |
| 403104 |  | 1/26/2010 Oth Rev-NSF Check Charge | JE | 30912686 KY CIS POST GL BATCH | -192.00 |
| 403105 |  | 1/26/2010 Oth Rev-Appl/Initiate Serv Fee | JE | 30912686 KY CIS POST GL BATCH | -1,248.00 |
| 403107 |  | 1/26/2010 Oth Rev-Reconnection Charges | JE | 30912686 KY CIS POST GL BATCH | -1,508.00 |
| 504610 | 16 | 1/26/2010 Employee Awards AG | PV | 42421447 Tharpe Company Inc-REMIT | 132.45 |
| 515100 | 14 | 1/26/2010 Purch Power TD | EE | 4067951 OWEN ELECTRIC COOP INC | 26.10 |
| 515100 | 14 | 1/26/2010 Purch Power TD | EE | 4067955 OWEN ELECTRIC COOP INC | 14.63 |
| 520100 | 16 | 1/26/2010 M \& S Oper AG | PV | 42421662 Grainger - ALL USE REMIT | 52.79 |
| 535000 | 13 | 1/26/2010 Contr Svc-Other Oper WT | PV | 42421536 Christopher Excavating | 872.28 |
| 535000 | 13 | 1/26/2010 Contr Svc-Other Oper WT | PV | 42421540 Christopher Excavating | 3,227.36 |
| 535000 | 16 | 1/26/2010 Contr Svc-Other Oper AG | PV | 42421678 Overhead Door Co of Lexington | 118.00 |
| 535000 | 16 | 1/26/2010 Contr Svc-Other Oper AG | PV | 42421680 SimplexGrinnell - CH 10320 RE | 413.72 |
| 535000 | 16 | 1/26/2010 Contr Svc-Other Oper AG | PV | 42422066 Computershare | 1,545.68 |
| 535000 | 15 | 1/26/2010 Contr Svc-Other Oper CA | PV | 42422227 Accenture, LLP-REMIT | 4,246.95 |
| 536000 | 13 | 1/26/2010 Contr Svc-Lab Testing Oper WT | PV | 42421687 Fouser Environmental Services | 231.00 |
| 541000 | 14 | 1/26/2010 Rents-Real Prop Oper TD | PV | 42421586 R J Corman Railroad Co-REMIT | 200.00 |
| 550000 | 14 | 1/26/2010 Trans Oper TD | PV | 42421433 Commonwealth Communications Sy | 344.81 |
| 550000 | 14 | 1/26/2010 Trans Oper TD | PV | 42421437 Commonwealth Communications Sy | 304.00 |
| 550000 | 14 | 1/26/2010 Trans Oper TD | PV | 42421442 Wilson Equipment Co | 102.30 |
| 570100 | 15 | 1/26/2010 Uncollectible Accounts | JE | 30912686 KY CIS POST GL BATCH | -433.42 |
| 575000 | 16 | 1/26/2010 Misc Oper AG | JE | 30912607 Correct Inventory Receipts | -5.91 |
| 575000 | 14 | 1/26/2010 Misc Oper TD | PV | 42421644 A \& H Safety Supply Co - PO/RE | 1,434.85 |
| 575000 | 14 | 1/26/2010 Misc Oper TD | PV | 42421648 USA Blue Book | 218.78 |
| 575000 | 14 | 1/26/2010 Misc Oper TD | PV | 42421650 Grainger - ALL USE REMIT | 778.46 |
| 575000 | 14 | 1/26/2010 Misc Oper TD | PV | 42421658 Grainger - ALL USE REMIT | 117.48 |
| 575000 | 14 | 1/26/2010 Misc Oper TD | PV | 42421671 Grainger - ALL USE REMIT | 55.26 |
| 575000 | 14 | 1/26/2010 Misc Oper TD | PV | 42421673 Grainger - ALL USE REMIT | 1,493.80 |
| 575000 | 14 | 1/26/2010 Misc Oper TD | PV | 42421675 USA Blue Book | 71.93 |
| 575275 | 16 | 1/26/2010 Discounts Available | ST | 30912548 SABRIX NO TAX CHARGED ACR | 1.72 |
| 575275 | 16 | 1/26/2010 Discounts Available | PK | 62058623 USA Blue Book | -2.19 |
| 575320 | 13 | 1/26/2010 Electricity WT | EE | 4068051 BLUE GRASS ENERGY | 35.98 |
| 575740 | 16 | 1/26/2010 Telephone AG | TC | 30912467 Genesys | 26.29 |
| 575740 | 15 | 1/26/2010 Telephone CA | TC | 30912483 Windstream | 115.29 |
| 575740 | 15 | 1/26/2010 Telephone CA | TC | 30912484 Windstream | 269.25 |
| 575740 | 15 | 1/26/2010 Telephone CA | TC | 30912485 Windstream | 1,148.05 |
| 575740 | 15 | 1/26/2010 Telephone CA | TC | 30912486 Windstream | 107.61 |
| 575740 | 15 | 1/26/2010 Telephone CA | TC | 30912487 Windstream | 147.75 |
| 575740 | 15 | 1/26/2010 Telephone CA | TC | 30912488 Windstream | 2,396.71 |
| 575740 | 16 | 1/26/2010 Telephone AG | TC | 30912492 Idearc | 137.85 |
| 575741 | 16 | 1/26/2010 Cell Phone AG | TC | 30912467 Genesys | 1.28 |
| 575780 | 11 | 1/26/2010 Trash Removal SS | PV | 42421533 Allied Waste Services \#993 | 102.58 |
| 575780 | 11 | 1/26/2010 Trash Removal SS | PV | 42421582 Allied Waste Services \#993 | 3.68 |
| 575780 | 14 | 1/26/2010 Trash Removal TD | PV | 42421582 Allied Waste Services \#993 | 3.68 |
| 620000 | 24 | 1/26/2010 Mat and Sup Maint TD | JE | 30912591 BP non stock material to MJ | -11.45 |
| 620000 | 24 | 1/26/2010 Mat and Sup Maint TD | JE | 30912596 BP non stock material to MJ | -174.19 |
| 620000 | 24 | 1/26/2010 Mat and Sup Maint TD | JE | 30912611 BP non stock material to MJ | -5.81 |
| 620000 | 24 | 1/26/2010 Mat and Sup Maint TD | JE | 30912612 JAN10 Non-Inventory Write Off | -607.22 |
| 620000 | 24 | 1/26/2010 Mat and Sup Maint TD | PV | 42421631 Lexington Quarry Co | 568.52 |
| 620000 | 23 | 1/26/2010 Mat and Sup Maint WT | PV | 42421682 Remote Automation Solutions - | 203.74 |
| 620000 | 21 | 1/26/2010 Mat and Sup Maint SS | PV | 42421684 Kentucky Service Co Inc | 1,362.92 |
| 620000 | 23 | 1/26/2010 Mat and Sup Maint WT | PV | 42421686 CCI Power Supplies LLC | 570.61 |
| 675000 | 24 | 1/26/2010 Misc Maint TD | PV | 42421599 Signal Boards Inc - REMIT | 47.70 |
| 675000 | 24 | 1/26/2010 Misc Maint TD | PV | 42421610 Signal Boards Inc-REMIT | 95.40 |
| 675000 | 24 | 1/26/2010 Misc Maint TD | PV | 42421616 Saf ti co Inc - PO/REMIT | 100.70 |
| 675000 | 24 | 1/26/2010 Misc Maint TD | PV | 42421619 Saf ti co Inc - PO/REMIT | 79.50 |
| 675000 | 26 | 1/26/2010 Misc Maint AG | PV | 42422009 Vertex Business Services - Wir | 1.34 |
| 716121 |  | 1/26/2010 M\&J Expenses-Outside | JE | 30912591 BP non stock material to MJ | 11.45 |
| 716121 |  | 1/26/2010 M\&J Expenses-Outside | JE | 30912596 BP non stock material to MJ | 174.19 |
| 716121 |  | 1/26/2010 M\&J Expenses-Outside | JE | 30912611 BP non stock material to MJ | 5.81 |
| 760200 |  | 1/26/2010 Other Income Deductions | PV | 42421451 Harperprints Inc | 4,297.07 |
| 760200 |  | 1/26/2010 Other Income Deductions | PV | 42421457 Harperprints Inc | 2,002.00 |


| ACCOUNT | SUB | GL DATE ${ }^{\text {d }}$ DESCRIPTION | DOC TYPE | DOC\# ${ }^{\text {a }}$ - EXPLANATION | AMOUNT |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 760200 |  | 1/26/2010 Other Income Deductions | PV | 42421468 Identity Links Inc | 1,534.89 |
| 760200 |  | 1/26/2010 Other Income Deductions | PV | 42421475 CJ Advertising | 91,759.00 |
| 760200 |  | 1/26/2010 Other Income Deductions | PV | 42421489 Creative Co Op LLC | 12,268.75 |
| 760200 |  | 1/26/2010 Other Income Deductions | PV | 42421493 Creative Co Op LLC | 9,600.00 |
| 760200 |  | 1/26/2010 Other Income Deductions | PV | 42421497 Creative Co Op LLC | 5,000.00 |
| 760200 |  | 1/26/2010 Other Income Deductions | PV | 42421500 Creative Co Op LLC | 9,300.00 |
| 760200 |  | 1/26/2010 Other Income Deductions | PV | 42421503 Creative Co Op LLC | 5,025.00 |
| 760200 |  | 1/26/2010 Other Income Deductions | PV | 42421507 Windrunner Advertising | 145.00 |
| 760200 |  | 1/26/2010 Other Income Deductions | PV | 42421510 Unglaub, Jean Elizabeth | 800.00 |
| 401110 |  | 1/27/2010 Res Sales Billed | JE | 30912932 KY CIS POST GL BATCH | -147,519.15 |
| 401210 |  | 1/27/2010 Com Sales Billed | JE | 30912932 KY CIS POST GL BATCH | -22,461.56 |
| 401450 |  | 1/27/2010 Priv Fire Billed | JE | 30912932 KY CIS POST GL BATCH | -39.85 |
| 401510 |  | 1/27/2010 Pub Auth Billed | JE | 30912932 KY CIS POST GL BATCH | -402.80 |
| 402110 |  | 1/27/2010 Dom WW Serv Billed | JE | 30912932 KY CIS POST GL BATCH | -7.61 |
| 403104 |  | 1/27/2010 Oth Rev-NSF Check Charge | JE | 30912932 KY CIS POST GL BATCH | -120.00 |
| 403105 |  | 1/27/2010 Oth Rev-Appl/Initiate Serv Fee | JE | 30912932 KY CIS POST GL BATCH | -988.00 |
| 403107 |  | 1/27/2010 Oth Rev-Reconnection Charges | JE | 30912932 KY CIS POST GL BATCH | -1,248.00 |
| 501200 | 16 | 1/27/2010 Labor Oper AG | RI | 10140087 Arvin, William P. | -1,338.96 |
| 515100 | 14 | 1/27/2010 Purch Power TD | EE | 4070361 KU | 117.47 |
| 515100 | 14 | 1/27/2010 Purch Power TD | EE | 4070438 KU | 318.64 |
| 550000 | 14 | 1/27/2010 Trans Oper TD | ST | 30912657 SABRIX VENDOR TAX COMPARE | 18.24 |
| 550000 | 14 | 1/27/2010 Trans Oper TD | ST | 30912661 SABRIX NO TAX CHARGED ACR | 18.24 |
| 550000 | 16 | 1/27/2010 Trans Oper AG | PV | 42423261 Automotive Rentals Inc ACH/ALL | . 50 |
| 550000 | 16 | 1/27/2010 Trans Oper AG | PV | 42423265 Automotive Rentals Inc ACH/ALL | . 50 |
| 570100 | 15 | 1/27/2010 Uncollectible Accounts | JE | 30912932 KY CIS POST GL BATCH | -61.52 |
| 575000 | 14 | 1/27/2010 Misc Oper TD | ST | 30912661 SABRIX NO TAX CHARGED ACR | 17.45 |
| 575000 | 13 | 1/27/2010 Misc Oper WT | PS | 42423293 Kentucky State Treasurer-Water | 2,700.00 |
| 575000 | 14 | 1/27/2010 Misc Oper TD | PD | 42423374 Grainger - ALL USE REMIT | -51.61 |
| 575000 | 16 | 1/27/2010 Misc Oper AG | PV | 42423421 Backtrack Employment Screening | 172.00 |
| 575130 | 16 | 1/27/2010 Brochures and Handouts | PV | 42422899 Harperprints Inc | 343.28 |
| 575240 | 16 | 1/27/2010 Co Dues/Membership Deduct | PS | 42423292 Rotary Club of Owenton | 130.50 |
| 575275 | 16 | 1/27/2010 Discounts Available | PK | 62058639 Mueller Co - ALL USE PO/REMIT | -67.99 |
| 575320 | 14 | 1/27/2010 Electricity TD | EE | 4067959 OWEN ELECTRIC COOP INC | 18.40 |
| 575320 | 14 | 1/27/2010 Electricity TD | EE | 4070372 KU | 78.60 |
| 575350 | 16 | 1/27/2010 Meals Deduct | PS | 42422628 Bluegrass Catering - PO/REMIT | 1,397.02 |
| 575500 | 16 | 1/27/2010 Janitorial AG | PV | 42422838 Happy's General Contracting- R | 495.00 |
| 620000 | 24 | 1/27/2010 Mat and Sup Maint TD | ST | 30912661 SABRIX NO TAX CHARGED ACR | 34.11 |
| 675000 | 24 | 1/27/2010 Misc Maint TD | ST | 30912661 SABRIX NO TAX CHARGED ACR | 5.72 |
| 675000 | 26 | 1/27/2010 Misc Maint AG | PV | 42422407 Vertex Business Services - Wir | 25.06 |
| 760200 |  | 1/27/2010 Other Income Deductions | ST | 30912661 SABRIX NO TAX CHARGED ACR | 140.09 |
| 401110 |  | 1/28/2010 Res Sales Billed | JE | 30913087 KY CIS POST GL BATCH | -144,375.69 |
| 401210 |  | 1/28/2010 Com Sales Billed | JE | 30913087 KY CIS POST GL BATCH | -8,174.66 |
| 401310 |  | 1/28/2010 Ind Sales Billed | JE | 30913087 KY CIS POST GL BATCH | -33,013.45 |
| 401510 |  | 1/28/2010 Pub Auth Billed | JE | 30913087 KY CIS POST GL BATCH | -552.73 |
| 402210 |  | 1/28/2010 Com WW Serv Billed | JE | 30913087 KY CIS POST GL BATCH | -61.23 |
| 403104 |  | 1/28/2010 Oth Rev-NSF Check Charge | JE | 30913087 KY CIS POST GL BATCH | -72.00 |
| 403105 |  | 1/28/2010 Oth Rev-Appl/Initiate Serv Fee | JE | 30913087 KY CIS POST GL BATCH | -1,170.00 |
| 403107 |  | 1/28/2010 Oth Rev-Reconnection Charges | JE | 30913087 KY CIS POST GL BATCH | -1,664.00 |
| 501200 | 1305 | 1/28/2010 Labor Oper WT Super/Eng | JE | 30913017 Labor Accrual January 2010 | 3,710.80 |
| 501200 | 14 | 1/28/2010 Labor Oper TD | JE | 30913017 Labor Accrual January 2010 | 4,638.50 |
| 501200 | 1405 | 1/28/2010 Labor Oper TD Super/Eng | JE | 30913017 Labor Accrual January 2010 | 4,638.50 |
| 501200 | 16 | 1/28/2010 Labor Oper AG | JE | 30913017 Labor Accrual January 2010 | 115,962.50 |
| 508101 | 16 | 1/28/2010 DCP Oper AG | JE | 30913039 DCP Accrual Jan 2010 | 2,562.82 |
| 510100 | 11 | 1/28/2010 Purchased Water-Outside | PV | 42424468 Georgetown Municipal Water \& S | 9.33 |
| 510100 | 11 | 1/28/2010 Purchased Water-Outside | PV | 42424475 Georgetown Municipal Water \& S | 9.33 |
| 511100 | 13 | 1/28/2010 Waste Disposal Exp WT | ID | 581515 CHEM ISSUES KRS JAN 2010 | 6,642.44 |
| 515100 | 14 | 1/28/2010 Purch Power TD | EE | 4070918 KU | 110.41 |
| 515100 | 12 | 1/28/2010 Purch Power P | EE | 4070926 KU | 1,784.85 |
| 518000 | 13 | 1/28/2010 Chemicals WT | ID | 581349 Owenton WWTP Jan 2010 | 1,031.97 |
| 518000 | 13 | 1/28/2010 Chemicals WT | ID | 581366 Owenton Water Jan 2010 | 13,234.27 |
| 518000 | 13 | 1/28/2010 Chemicals WT | ID | 581515 CHEM ISSUES KRS JAN 2010 | 80,481.01 |
| 535000 | 13 | 1/28/2010 Contr Svc-Other Oper WT | PV | 42424464 Siemens Water Technologies Cor | 196.53 |
| 535000 | 16 | 1/28/2010 Contr Svc-Other Oper AG | PV | 42424469 Christopher Excavating | 480.00 |
| 535000 | 14 | 1/28/2010 Contr Svc-Other Oper TD | PV | 42424469 Christopher Excavating | 2,160.00 |
| 535000 | 13 | 1/28/2010 Contr Svc-Other Oper WT | PV | 42424469 Christopher Excavating | 7,080.00 |
| 535000 | 16 | 1/28/2010 Contr Svc-Other Oper AG | PV | 42424472 Christopher Excavating | 480.00 |
| 535000 | 14 | 1/28/2010 Contr Svc-Other Oper TD | PV | 42424472 Christopher Excavating | 2,160.00 |
| 535000 | 13 | 1/28/2010 Contr Svc-Other Oper WT | PV | 42424472 Christopher Excavating | 7,080.00 |
| 570100 | 15 | 1/28/2010 Uncollectible Accounts | JE | 30913087 KY CIS POST GL BATCH | 52,933.67 |
| 575000 | 14 | 1/28/2010 Misc Oper TD | PV | 42424843 C E Construction | 487.71 |
| 575030 | 16 | 1/28/2010 Advertising | PS | 42424919 Historic KY Inc | 595.00 |
| 575130 | 16 | 1/28/2010 Brochures and Handouts | ST | 30912901 SABRIX NO TAX CHARGED ACR | 20.60 |
| 575275 | 16 | 1/28/2010 Discounts Available | PV | 42424477 Ford Meter Box Co Inc - ALL US | 294.48 |
| 575275 | 16 | 1/28/2010 Discounts Available | PK | 62058646 Ford Meter Box Co Inc - ALL US | -5.89 |
| 575275 | 16 | 1/28/2010 Discounts Available | PK | 62058647 Mueller Co - ALL USE PO/REMIT | -13.86 |
| 575320 | 14 | 1/28/2010 Electricity TD | EE | 4070907 KU | 12.80 |
| 575500 | 13 | 1/28/2010 Janitorial WT | PV | 42424469 Christopher Excavating | 2,112.50 |
| 575500 | 13 | 1/28/2010 Janitorial WT | PV | 42424472 Christopher Excavating | 2,112.50 |
| 575820 | 13 | 1/28/2010 Uniforms WT | PV | 42424466 Model Apparel | 220.09 |
| 620000 | 24 | 1/28/2010 Mat and Sup Maint TD | IR | 581531 Inventory Return | -237.80 |
| 620000 | 24 | 1/28/2010 Mat and Sup Maint TD | 11 | 581540 Inventory Issue-Stk E \& D | 6,644.34 |
| 620000 | 21 | 1/28/2010 Mat and Sup Maint SS | PV | 42424846 City Electric Motor Co of Lex- | 1,563.44 |
| 760100 |  | 1/28/2010 Donations Deduct | PS | 42424914 University of Kentucky | 1,000.00 |
| 403103 |  | 1/29/2010 Oth Rev-Collect for Others | RI | 10140246 Lexington Fayette Urban Cnty G | -93,200.22 |


| ACCOUNT | SUB | GL DATE ${ }^{\text {d }}$ DESCRIPTION | DOC TYPE | DOC\# ${ }^{\text {E }}$ - EXPLANATION | AMOUNT |
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| 403103 |  | 1/29/2010 Oth Rev-Collect for Others | RI | 10140247 Sadieville City of - REMIT | -183.28 |
| 504100 | 1 | 1/29/2010 Group Insurance - Cap Credits | T1 | 36400 Payroll Disbursement Entries | -52,725.15 |
| 504100 | 16 | 1/29/2010 Group Ins Oper AG | T1 | 36400 Payroll Disbursement Entries | -10,015.35 |
| 504640 | 16 | 1/29/2010 Safety Incentive | CC | 6729 WW GRAINGER | 345.58 |
| 505100 | 1 | 1/29/2010 PBOP Cap Credits | T1 | 36400 Payroll Disbursement Entries | -34,036.83 |
| 506100 | 1 | 1/29/2010 Pension - Cap Credits | T1 | 36400 Payroll Disbursement Entries | -48,266.94 |
| 507100 | 16 | 1/29/2010 401k Oper AG | JE | 30913133 401K Co Match Accr Jan 2010 | 2,919.00 |
| 511100 | 13 | 1/29/2010 Waste Disposal Exp WT | ID | 581952 Chemical issues RRS Jan 2010 | 1,439.76 |
| 518000 | 13 | 1/29/2010 Chemicals WT | ID | 581594 Cemical issues RW Jan 2010 | 198.55 |
| 518000 | 13 | 1/29/2010 Chemicals WT | ID | 581952 Chemical issues RRS Jan 2010 | 36,330.82 |
| 520100 | 16 | 1/29/2010 M \& S Oper AG | CC | 6729 CLEAN SWEEP CAR WASH | 962.84 |
| 520100 | 13 | 1/29/2010 M \& S Oper WT | CC | 6729 WW GRAINGER | 1,250.10 |
| 520100 | 14 | 1/29/2010 M \& S Oper TD | CC | 6729 UFIRST LAUNDRY SVCS | 3,212.23 |
| 535000 | 14 | 1/29/2010 Contr Svc-Other Oper TD | CC | 6729 ORKIN, INC | 65.79 |
| 535000 | 16 | 1/29/2010 Contr Svc-Other Oper AG | CC | 6729 DICKERSONS REFRIDGERATION | 858.90 |
| 535000 | 15 | 1/29/2010 Contr Svc-Other Oper CA | PV | 42426816 RKM Research \& Communications | 5,679.63 |
| 550000 | 16 | 1/29/2010 Trans Oper AG | CC | 6724 SHAMMY'S CAR WASH | 8.00 |
| 550000 | 14 | 1/29/2010 Trans Oper TD | CC | 6729 MR SPARKLE SOUTHLAND | 13.00 |
| 550000 | 16 | 1/29/2010 Trans Oper AG | CC | 6729 NAPA AUTO PARTS | 1,373.81 |
| 550000 | 1 | 1/29/2010 Trans - Cap Credits | T1 | 36400 Payroll Disbursement Entries | -27,339.00 |
| 550001 | 16 | 1/29/2010 Trans Oper AG Lease Cost | RI | 10140199 Chrysler LLC | -3,250.00 |
| 558000 | 1 | 1/29/2010 Ins Work Comp Cap Credits | T1 | 36400 Payroll Disbursement Entries | -5,858.43 |
| 570100 | 15 | 1/29/2010 Uncollectible Accounts | JE | 30913225 KY CIS POST GL BATCH | -504.98 |
| 575000 | 11 | 1/29/2010 Misc Oper SS | CC | 6729 RECORDER CHARTS AND PENS | 97.81 |
| 575000 | 12 | 1/29/2010 Misc Oper P | CC | 6729 NATIONAL WORKWEAR INC | 112.34 |
| 575000 | 16 | 1/29/2010 Misc Oper AG | CC | 6729 FTD KREATIONS BY KAREN | 381.69 |
| 575000 | 14 | 1/29/2010 Misc Oper TD | CC | 6729 NATIONAL WORKWEAR INC | 760.68 |
| 575000 | 13 | 1/29/2010 Misc Oper WT | CC | 6729 W W GRAINGER | 1,567.95 |
| 575000 | 16 | 1/29/2010 Misc Oper AG | IA | 48578 Xfer fr Old to New Parts | 738.79 |
| 575000 | 16 | 1/29/2010 Misc Oper AG | IA | 48579 Xfer fr Old to New Parts | -738.79 |
| 575002 | 16 | 1/29/2010 Misc General Office | CC | 6729 FEDEX KINKO'S | 11.66 |
| 575030 | 16 | 1/29/2010 Advertising | CC | 6724 ADCOLOR | 75.58 |
| 575242 | 16 | 1/29/2010 Co Dues Deduct AWWA | CC | 6729 AMERICAN WATERWORKS | 182.00 |
| 575275 | 16 | 1/29/2010 Discounts Available | ST | 30913048 SABRIX NO TAX CHARGED ACR | 17.67 |
| 575275 | 16 | 1/29/2010 Discounts Available | PK | 62058659 USA Blue Book | -. 72 |
| 575275 | 16 | 1/29/2010 Discounts Available | PK | 62058661 US Pipe \& Foundry Co - REMIT | -43.61 |
| 575275 | 16 | 1/29/2010 Discounts Available | PK | 62058667 Mueller Co - ALL USE PO/REMIT | -20.62 |
| 575275 | 16 | 1/29/2010 Discounts Available | PK | 62058672 Ferguson SAC - ALL USE REMIT | -51.02 |
| 575280 | 16 | 1/29/2010 Dues/Membership Deduct | CC | 6729 GREATER LEXINGTON APARTME | 725.00 |
| 575320 | 14 | 1/29/2010 Electricity TD | EE | 4073515 OWEN ELECTRIC COOP INC | 8.70 |
| 575340 | 16 | 1/29/2010 Employee Expenses AG | CC | 6724 EUFRATES.COM, LLC | 250.00 |
| 575340 | 16 | 1/29/2010 Employee Expenses AG | CC | 6729 THE CHOP HOUSE | 292.06 |
| 575342 | 16 | 1/29/2010 Empl Exp Conf/Registration AG | CC | 6729 KENTUCKY RURAL WATE | 245.00 |
| 575350 | 16 | 1/29/2010 Meals Deduct | CC | 6724 RAMSEY'S | 37.64 |
| 575350 | 16 | 1/29/2010 Meals Deduct | CC | 6729 GAINSWAY CAFE | 1,034.91 |
| 575545 | 13 | 1/29/2010 Lab Supplies WT | CC | 6729 STRATEGIC DIAGNOSTICS | 3,015.11 |
| 575620 | 15 | 1/29/2010 Office \& Admin Supplies CA | CC | 6729 ORKIN INC | 57.00 |
| 575620 | 13 | 1/29/2010 Office \& Admin Supplies WT | CC | 6729 OFFICEMAX CT IN | 509.42 |
| 575620 | 16 | 1/29/2010 Office \& Admin Supplies AG | CC | 6729 OFFICEMAX CT IN | 1,141.60 |
| 575620 | 14 | 1/29/2010 Office \& Admin Supplies TD | CC | 6729 OFFICEMAX CT IN | 1,470.72 |
| 575820 | 13 | 1/29/2010 Uniforms WT | CC | 6729 UFIRST LAUNDRY SVCS | 237.76 |
| 575820 | 14 | 1/29/2010 Uniforms TD | CC | 6729 SSC OWENTON COOP | 298.79 |
| 575820 | 13 | 1/29/2010 Uniforms WT | ST | 30913048 SABRIX NO TAX CHARGED ACR | 13.21 |
| 620000 | 26 | 1/29/2010 Mat and Sup Maint AG | CC | 6729 SERVICE ELECTRONICS SUPPL | 42.38 |
| 620000 | 21 | 1/29/2010 Mat and Sup Maint SS | CC | 6729 THE HOME DEPOT | 457.78 |
| 620000 | 24 | 1/29/2010 Mat and Sup Maint TD | CC | 6729 TRIPLE A FASTENER CO | 1,873.20 |
| 620000 | 23 | 1/29/2010 Mat and Sup Maint WT | CC | 6729 THE HOME DEPOT | 3,935.80 |
| 620000 | 24 | 1/29/2010 Mat and Sup Maint TD | JE | 30913159 BP non stock material to MJ | -144.83 |
| 620000 | 24 | 1/29/2010 Mat and Sup Maint TD | JE | 30913160 BP non stock material to MJ | -43.64 |
| 620000 | 24 | 1/29/2010 Mat and Sup Maint TD | JE | 30913167 BP non stock material to MJ | -269.24 |
| 635000 | 26 | 1/29/2010 Contr Svc-Other Maint AG | CC | 6729 UFIRST LAUNDRY SVCS | 164.08 |
| 716121 |  | 1/29/2010 M\&J Expenses-Outside | CC | 6729 HAMPTON INN AND SUITES | 359.01 |
| 716121 |  | 1/29/2010 M\&J Expenses-Outside | JE | 30913159 BP non stock material to MJ | 144.83 |
| 716121 |  | 1/29/2010 M\&J Expenses-Outside | JE | 30913160 BP non stock material to MJ | 43.64 |
| 716121 |  | 1/29/2010 M\&J Expenses-Outside | JE | 30913167 BP non stock material to MJ | 269.24 |
| 760200 |  | 1/29/2010 Other Income Deductions | CC | 6724 COSI RESTAURANT | 99.72 |
| 760200 |  | 1/29/2010 Other Income Deductions | CC | 6729 SHELL OIL | 153.42 |
| 505100 | 16 | 1/30/2010 PBOP Oper AG | JR | 2001 OPEB Cost Allocation | 92,811.08 |
| 556000 | 16 | 1/30/2010 Ins Vehicle Oper AG | JR | 115 PPI Auto Liability | 2,918.16 |
| 690110 |  | 1/30/2010 FIT-Current | JE | 30914548 Income Tax Provision | 425,480.40 |
| 690210 |  | 1/30/2010 SIT-Current | JE | 30914548 Income Tax Provision | 77,595.21 |
| 690650 | 2 | 1/30/2010 Def FIT-Other Liab | JE | 30914548 Income Tax Provision | -26,879.74 |
| 690750 | 2 | 1/30/2010 Def SIT-Other Liab | JE | 30914548 Income Tax Provision | -4,902.07 |
| 780100 |  | 1/30/2010 SIT-Other Inc \& Ded Curr | JE | 30914548 Income Tax Provision | -6,248.94 |
| 790100 |  | 1/30/2010 FIT-Oth Inc \& Ded-curr | JE | 30914548 Income Tax Provision | -34,265.02 |
| 401120 |  | 1/31/2010 Res Sales Unbilled | JE | 30913098 UNBILLED REVENUE | -1,606,299.06 |
| 401220 |  | 1/31/2010 Com Sales Unbilled | JE | 30913098 UNBILLED REVENUE | -845,754.98 |
| 401310 |  | 1/31/2010 Ind Sales Billed | JE | 120102 Rev Billing Credit Adust | 15,238.24 |
| 401320 |  | 1/31/2010 Ind Sales Unbilled | JE | 30913098 UNBILLED REVENUE | -77,365.40 |
| 401520 |  | 1/31/2010 Pub Auth Unbilled | JE | 30913098 UNBILLED REVENUE | -236,481.15 |
| 401620 |  | 1/31/2010 Sales for Resale Unbilled | JE | 30913098 UNBILLED REVENUE | -92,807.64 |
| 401630 | AW12 | 1/31/2010 Sale for Resale AW09 | JE | 120101 Owenton Wastewater Pur Water | -1,433.29 |
| 403003 | AW03 | 1/31/2010 Oth Rev-Interco Rent | JE | 30913693 1/10 rent FRCC and Svc Co emp | -18,517.88 |
| 403103 |  | 1/31/2010 Oth Rev-Collect for Others | JE | 50 Accr Sewer \& Landfill Rev 1.10 | -268.99 |




| ACCOUNT | SUB | GL DATE ${ }^{\text {d }}$ DESCRIPTION | DOC TYPE | DOC\# EXPLANATION | AMOUNT |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 675050 | 24 | 1/31/2010 Amort Def Maint TD | JR | 30059988 Amortize Programmed Maint | 7,172.91 |
| 675050 | 23 | 1/31/2010 Amort Def Maint WT | JR | 30059989 Amortize Programmed Maint | 2,858.27 |
| 675110 | 26 | 1/31/2010 Maint Exp ARO/Net Neg Sal AG | DP | 30912958 Depreciation/COR Expense | 130,102.79 |
| 675650 | 24 | 1/31/2010 Paving/Backfill TD | JE | 160 Accr for Inv Rec'd but not app | -15,050.50 |
| 675650 | 24 | 1/31/2010 Paving/Backfill TD | JE | 120108 Mthly Paving Accrual 01.10 | 42,033.83 |
| 680110 |  | 1/31/2010 Depr Exp-General | DP | 30912958 Depreciation/COR Expense | 625,450.77 |
| 680120 |  | 1/31/2010 Depr Exp-Amort CIAC Tax | DP | 30912958 Depreciation/COR Expense | -23,607.13 |
| 680125 |  | 1/31/2010 Depr Exp-Amort CIAC Non Tax | DP | 30912958 Depreciation/COR Expense | -95,627.38 |
| 680300 |  | 1/31/2010 Amortization of UPAA | JU | 907 Amort Tri Village/Elk Lake | 697.33 |
| 680300 |  | 1/31/2010 Amortization of UPAA | JU | 30009706 Amtz of Util Plant Acquis Adj | 16.06 |
| 680300 |  | 1/31/2010 Amortization of UPAA | JU | 30022689 Amort UPAA Boonesboro | 1,087.57 |
| 680540 |  | 1/31/2010 Amort-Reg Asset AFUDC | JU | 30092822 AMORTIZE AFUDC EQUITY | 6,687.26 |
| 680600 |  | 1/31/2010 Amort-Prop Losses | JR | 156 Amort source of supply project | 4,756.67 |
| 680600 |  | 1/31/2010 Amort-Prop Losses | JR | 30009687 Bluegrass Water Project | 29,592.34 |
| 680620 |  | 1/31/2010 Amort-Reg Asset | JU | 30092823 UPA AMORTIZATION REG ASSET | 575.00 |
| 685100 |  | 1/31/2010 Utility Reg Assessment Fee | JH | 4 Amortize KY Prepaid PSC Fees | 7,700.97 |
| 685200 |  | 1/31/2010 Property Taxes | JH | 6 Accrue KY Property Tax | 229,073.01 |
| 685320 |  | 1/31/2010 FUTA | JE | 30913526 January 2010 FUTA Accrual | 1,013.73 |
| 685320 |  | 1/31/2010 FUTA | JE | 30914275 FASTR - ALLOCATION KY_ALLEXP2 | -1.25 |
| 685325 |  | 1/31/2010 FICA | JE | 30913412 January 2010 FICA Accrual | 41,707.78 |
| 685325 |  | 1/31/2010 FICA | JE | 30914275 FASTR - ALLOCATION KY_ALLEXP2 | -11.86 |
| 685350 |  | 1/31/2010 SUTA | JE | 30913624 January 2010 SUTA Accrual | 1,805.30 |
| 685350 |  | 1/31/2010 SUTA | JE | 30914275 FASTR - ALLOCATION KY_ALLEXP2 | -2.25 |
| 685440 |  | 1/31/2010 Gross Receipts Tax | JT | 30910607 KY Gross Receipts Accrual | 10,000.00 |
| 690630 | 2 | 1/31/2010 Def FIT-Reg Liab | JT | 30092822 CY2 Rec Amor Reg Asset/Lia | -12,287.74 |
| 690630 | 1 | 1/31/2010 Def FIT-Reg Asset | JT | 30092822 CY2 Rec Amor Reg Asset/Lia | 32,787.22 |
| 690730 | 2 | 1/31/2010 Def SIT-Reg Liab | JT | 30092822 CY2 Rec Amor Reg Asset/Lia | -5,246.50 |
| 690730 | 1 | 1/31/2010 Def SIT-Reg Asset | JT | 30092822 CY2 Rec Amor Reg Asset/Lia | 5,979.78 |
| 695220 |  | 1/31/2010 ITC Restored - 3\% | JT | 30092822 CY2 Rec Amor Reg Asset/Lia | -637.67 |
| 695230 |  | 1/31/2010 ITC Restored - 4\% | JT | 30092822 CY2 Rec Amor Reg Asset/Lia | -525.42 |
| 695240 |  | 1/31/2010 ITC Restored - 10\% | JT | 30092822 CY2 Rec Amor Reg Asset/Lia | -5,903.33 |
| 705100 |  | 1/31/2010 AFUDC - Equity | F6 | 30913810 AFUDC Equity | -208,494.64 |
| 716121 |  | 1/31/2010 M\&J Expenses-Outside | JE | 120105 Recls Exp Outside Bluegrs Cont | -3,150.00 |
| 716121 |  | 1/31/2010 M\&J Expenses-Outside | JE | 120108 Mthly Paving Accrual 01.10 | 5,072.71 |
| 716122 |  | 1/31/2010 M\&J Expenses-Inside | JE | 30914275 FASTR - ALLOCATION KY_ALLEXP2 | 9,133.24 |
| 755100 |  | 1/31/2010 Amort UPAA | JU | 908 Amortize Owenton Acquisition | -35.38 |
| 755201 |  | 1/31/2010 Amort PS Exp w/ mandatory | JR | 1005 AMORT PREFERRED STOCK EXP | 64.24 |
| 760200 |  | 1/31/2010 Other Income Deductions | JE | 160 Accr for Inv Rec'd but not app | 82,379.75 |
| 760200 |  | 1/31/2010 Other Income Deductions | JE | 600 Accr for Good/Serv Rec not inv | 20,095.31 |
| 760200 |  | 1/31/2010 Other Income Deductions | JE | 120112 Reverse Accr for CJ Advertisin | -204,595.00 |
| 810100 |  | 1/31/2010 Int LTD-Outside Reg | JE | 103 INTEREST ACCRL | 137,712.50 |
| 810100 |  | 1/31/2010 Int LTD-Outside Reg | JR | 30059977 Amortize Gain on Loan Payoff | -10,875.79 |
| 810400 | AW46 | 1/31/2010 Int LTD-Inside AW46 | JE | 103 INTEREST ACCRL | 652,002.09 |
| 810400 | AW46 | 1/31/2010 Int LTD-Inside AW46 | JE | 120109 Recls Int Exp for BD 120027 | -236,406.25 |
| 810400 | AW46 | 1/31/2010 Int LTD-Inside AW46 | JE | 120110 Recls Inter Exp for BD120028 | -121,875.00 |
| 820100 |  | 1/31/2010 Amort Debt Disc \& Exp | JR | 1003 Amortize Debt Expense-OUTSIDE | 665.38 |
| 820110 | AW46 | 1/31/2010 Amort DExp Inside AW46 | JR | 1007 Amortize debt Exp Inside | 6,666.70 |
| 820110 | AW46 | 1/31/2010 Amort DExp Inside AW46 | JR | 1008 Amortize debt Exp Inside | 1,699.18 |
| 820110 | AW46 | 1/31/2010 Amort DExp Inside AW46 | JR | 1009 Amortize debt Exp Inside | 1,076.70 |
| 830100 | AW46 | 1/31/2010 Interest STD Inside | JE | 125 Rec'd Monthly Trans pd by AWCC | 7,411.46 |
| 850000 |  | 1/31/2010 AFUDC Debt | F0 | 30913809 AFUDC Debt | -104,159.41 |
| 860040 |  | 1/31/2010 Div Dec PS-Out w/ mand | JE | 103 INTEREST ACCRL | 31,762.50 |
| 860100 |  | 1/31/2010 Div Dec Pref Stk-Outside | JE | 103 INTEREST ACCRL | -13,021.00 |
| 860100 |  | 1/31/2010 Div Dec Pref Stk-Outside | JE | 105 LTD PRINC \& INT PAYMENTS | 19,531.50 |
| 860220 | AW02 | 1/31/2010 Div Decl Com Stk In-AW02 | JE | 120111 Accrue Common Dividends 01.10 | 2,006,260.48 |
| 401110 |  | 2/1/2010 Res Sales Billed | JE | 30913534 KY CIS POST GL BATCH | -229,416.38 |
| 401120 |  | 2/1/2010 Res Sales Unbilled | JE | 30913098 UNBILLED REVENUE | 1,606,299.06 |
| 401210 |  | 2/1/2010 Com Sales Billed | JE | 30913534 KY CIS POST GL BATCH | -118,060.41 |
| 401220 |  | 2/1/2010 Com Sales Unbilled | JE | 30913098 UNBILLED REVENUE | 845,754.98 |
| 401310 |  | 2/1/2010 Ind Sales Billed | JE | 120102 Rev Billing Credit Adust | -15,238.24 |
| 401320 |  | 2/1/2010 Ind Sales Unbilled | JE | 30913098 UNBILLED REVENUE | 77,365.40 |
| 401510 |  | 2/1/2010 Pub Auth Billed | JE | 30913534 KY CIS POST GL BATCH | -8,112.61 |
| 401520 |  | 2/1/2010 Pub Auth Unbilled | JE | 30913098 UNBILLED REVENUE | 236,481.15 |
| 401620 |  | 2/1/2010 Sales for Resale Unbilled | JE | 30913098 UNBILLED REVENUE | 92,807.64 |
| 403102 |  | 2/1/2010 Oth Rev-Rents Water Property | RR | 10139304 Mcconathy, William - Remit | -95.00 |
| 403102 |  | 2/1/2010 Oth Rev-Rents Water Property | RR | 10139498 Sprint/Nextel | -2,000.00 |
| 403102 |  | 2/1/2010 Oth Rev-Rents Water Property | RR | 10139531 Cingular Wireless | -2,546.99 |
| 403104 |  | 2/1/2010 Oth Rev-NSF Check Charge | JE | 30913534 KY CIS POST GL BATCH | -504.00 |
| 403105 |  | 2/1/2010 Oth Rev-Appl/Initiate Serv Fee | JE | 30913534 KY CIS POST GL BATCH | -3,042.00 |
| 403107 |  | 2/1/2010 Oth Rev-Reconnection Charges | JE | 30913534 KY CIS POST GL BATCH | -3,380.00 |
| 501200 | 16 | 2/1/2010 Labor Oper AG | JE | 30913017 Labor Accrual January 2010 | -115,962.50 |
| 501200 | 14 | 2/1/2010 Labor Oper TD | JE | 30913017 Labor Accrual January 2010 | -4,638.50 |
| 501200 | 1405 | 2/1/2010 Labor Oper TD Super/Eng | JE | 30913017 Labor Accrual January 2010 | -4,638.50 |
| 501200 | 1305 | 2/1/2010 Labor Oper WT Super/Eng | JE | 30913017 Labor Accrual January 2010 | -3,710.80 |
| 504100 | 16 | 2/1/2010 Group Ins Oper AG | RR | 10139202 Stokley, Susie | -161.34 |
| 504100 | 16 | 2/1/2010 Group Ins Oper AG | RR | 10139203 Bailey, Dorothy - Remit | -428.00 |
| 504100 | 16 | 2/1/2010 Group Ins Oper AG | RR | 10139240 Brown, Barbara K. | -50.00 |
| 504100 | 16 | 2/1/2010 Group Ins Oper AG | RR | 10139315 Allen, Euvonnia L. | -428.00 |
| 504100 | 16 | 2/1/2010 Group Ins Oper AG | RR | 10139324 Gooch, Wilma J. | -428.00 |
| 504100 | 16 | 2/1/2010 Group Ins Oper AG | RR | 10139436 Mays, Eric A. | -150.08 |
| 504100 | 16 | 2/1/2010 Group Ins Oper AG | RR | 10139543 Archer, Anthony | -184.80 |
| 504100 | 16 | 2/1/2010 Group Ins Oper AG | RR | 10139647 Bault, Hope Y. | -1,830.22 |
| 507100 | 16 | 2/1/2010 401k Oper AG | JE | 30913133 401K Co Match Accr Jan 2010 | -2,919.00 |
| 508101 | 16 | 2/1/2010 DCP Oper AG | JE | 30913039 DCP Accrual Jan 2010 | -2,562.82 |


| ACCOUNT | SUB | GL DATE $\quad$ DESCRIPTION | DOC TYPE | DOC\# ${ }^{\text {E }}$ EXPLANATION | AMOUNT |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 511100 | 13 | 2/1/2010 Waste Disposal Exp WT | JE | 156 Accr Discretionary Power 01.10 | -220.69 |
| 515100 | 12 | 2/1/2010 Purch Power P | JE | 156 Accr Discretionary Power 01.10 | -2,314.16 |
| 515100 | 13 | 2/1/2010 Purch Power WT | JE | 156 Accr Discretionary Power 01.10 | -1,456.03 |
| 520100 | 14 | 2/1/2010 M \& S Oper TD | JE | 155 Power Accrual Jan 2010 | -134.56 |
| 520100 | 14 | 2/1/2010 M \& S Oper TD | JE | 160 Accr for Inv Rec'd but not app | -2,064.56 |
| 535000 | 16 | 2/1/2010 Contr Svc-Other Oper AG | PV | 42427205 Dixon Electric Inc-PO/REMIT | 144.00 |
| 535000 | 16 | 2/1/2010 Contr Svc-Other Oper AG | PV | 42427209 Dixon Electric Inc-PO/REMIT | 96.00 |
| 535001 | 13 | 2/1/2010 Contr Svc-Temp Empl Oper WT | JE | 160 Accr for Inv Rec'd but not app | -2,125.66 |
| 550001 | 16 | 2/1/2010 Trans Oper AG Lease Cost | JE | 215 Acc ARI \& Addl 13 days | -9,066.09 |
| 570100 | 15 | 2/1/2010 Uncollectible Accounts | JE | 30913534 KY CIS POST GL BATCH | -493.31 |
| 575000 | 14 | 2/1/2010 Misc Oper TD | PV | 42427212 USA Blue Book | 268.89 |
| 575100 | 16 | 2/1/2010 Bank Service Charges AG | JE | 104 CURRENT PORTION LTD | -. 17 |
| 575200 | 15 | 2/1/2010 Collection Agencies CA | JE | 30112 Accr GC Services 12/09 \& 01/10 | -10,146.63 |
| 575220 | 16 | 2/1/2010 Community Relations | JE | 160 Accr for Inv Rec'd but not app | -2,000.00 |
| 575220 | 16 | 2/1/2010 Community Relations | JE | 600 Accr for Good/Serv Rec not inv | -1,851.57 |
| 575240 | 16 | 2/1/2010 Co Dues/Membership Deduct | PS | 42427039 Hilary J Boone Ctr at the Univ | 240.00 |
| 575280 | 16 | 2/1/2010 Dues/Membership Deduct | JE | 130 KY UNMAPPED PCARD ACCURAL 0110 | -230.00 |
| 575320 | 13 | 2/1/2010 Electricity WT | JE | 156 Accr Discretionary Power 01.10 | -62.32 |
| 575500 | 14 | 2/1/2010 Janitorial TD | JE | 600 Accr for Good/Serv Rec not inv | -532.00 |
| 575620 | 14 | 2/1/2010 Office \& Admin Supplies TD | JE | 130 KY UNMAPPED PCARD ACCURAL 0110 | -675.75 |
| 575780 | 14 | 2/1/2010 Trash Removal TD | JE | 130 KY UNMAPPED PCARD ACCURAL 0110 | -56.17 |
| 620000 | 24 | 2/1/2010 Mat and Sup Maint TD | JE | 160 Accr for Inv Rec'd but not app | -1,187.40 |
| 620000 | 24 | 2/1/2010 Mat and Sup Maint TD | PV | 42427187 Ford Meter Box Co Inc - ALL US | 1,187.40 |
| 635000 | 26 | 2/1/2010 Contr Svc-Other Maint AG | PV | 42427197 Stephen Hillenmeyer Landscape | 1,135.83 |
| 675000 | 26 | 2/1/2010 Misc Maint AG | PV | 42427229 Xerox Corp- REMIT | 161.88 |
| 675650 | 24 | 2/1/2010 Paving/Backfill TD | JE | 120108 Mthly Paving Accrual 01.10 | -42,033.83 |
| 685320 |  | 2/1/2010 FUTA | JE | 30913526 January 2010 FUTA Accrual | -1,013.73 |
| 685325 |  | 2/1/2010 FICA | JE | 30913412 January 2010 FICA Accrual | -41,707.78 |
| 685350 |  | 2/1/2010 SUTA | JE | 30913624 January 2010 SUTA Accrual | -1,805.30 |
| 715111 |  | 2/1/2010 M\&J Revenues-Outside | RI | 10133952 Mr Barker | -114.00 |
| 715111 |  | 2/1/2010 M\&J Revenues-Outside | RR | 10139318 Bluegrass Station Division-Rem | -8,784.17 |
| 716121 |  | 2/1/2010 M\&J Expenses-Outside | JE | 120108 Mthly Paving Accrual 01.10 | -5,072.71 |
| 760200 |  | 2/1/2010 Other Income Deductions | JE | 600 Accr for Good/Serv Rec not inv | -20,095.31 |
| 760200 |  | 2/1/2010 Other Income Deductions | JE | 120112 Reverse Accr for CJ Advertisin | 204,595.00 |
| 860100 |  | 2/1/2010 Div Dec Pref Stk-Outside | JE | 104 CURRENT PORTION LTD | -19,531.50 |
| 860220 | AW02 | 2/1/2010 Div Decl Com Stk In-AW02 | JE | 120111 Accrue Common Dividends 01.10 | -2,006,260.48 |
| 401110 |  | 2/2/2010 Res Sales Billed | JE | 30913774 KY CIS POST GL BATCH | -118,712.43 |
| 401210 |  | 2/2/2010 Com Sales Billed | JE | 30913774 KY CIS POST GL BATCH | -100,380.08 |
| 401510 |  | 2/2/2010 Pub Auth Billed | JE | 30913774 KY CIS POST GL BATCH | -505.55 |
| 403104 |  | 2/2/2010 Oth Rev-NSF Check Charge | JE | 30913774 KY CIS POST GL BATCH | -96.00 |
| 403105 |  | 2/2/2010 Oth Rev-Appl/Initiate Serv Fee | JE | 30913774 KY CIS POST GL BATCH | -1,612.00 |
| 403107 |  | 2/2/2010 Oth Rev-Reconnection Charges | JE | 30913774 KY CIS POST GL BATCH | -3,328.00 |
| 520100 | 14 | 2/2/2010 M \& S Oper TD | PV | 42428409 Neptune Technology - ALL USE R | 2,064.56 |
| 570100 | 15 | 2/2/2010 Uncollectible Accounts | JE | 30913774 KY CIS POST GL BATCH | -660.81 |
| 575275 | 16 | 2/2/2010 Discounts Available | PK | 62058688 Mueller Co - ALL USE PO/REMIT | -8.30 |
| 575500 | 16 | 2/2/2010 Janitorial AG | PR | 42427331 Hales Cleaning Service - ACH | 5,633.33 |
| 575740 | 16 | 2/2/2010 Telephone AG | TC | 30913437 AT\&T | . 15 |
| 575740 | 16 | 2/2/2010 Telephone AG | TC | 30913438 AT\&T | . 69 |
| 575740 | 16 | 2/2/2010 Telephone AG | TC | 30913441 AT\&T | . 15 |
| 575740 | 16 | 2/2/2010 Telephone AG | TC | 30913442 AT\&T | -. 18 |
| 575740 | 16 | 2/2/2010 Telephone AG | TC | 30913443 AT\&T | . 19 |
| 575740 | 16 | 2/2/2010 Telephone AG | TC | 30913446 AT\&T | . 18 |
| 575740 | 16 | 2/2/2010 Telephone AG | TC | 30913447 AT\&T | . 65 |
| 575740 | 16 | 2/2/2010 Telephone AG | TC | 30913455 AT\&T | . 25 |
| 575740 | 15 | 2/2/2010 Telephone CA | TC | 30913467 Windstream | 49.79 |
| 575740 | 16 | 2/2/2010 Telephone AG | TC | 30913469 AT\&T | 244.39 |
| 575740 | 15 | 2/2/2010 Telephone CA | TC | 30913469 AT\&T | 953.70 |
| 575740 | 15 | 2/2/2010 Telephone CA | TC | 30913498 AT\&T | 2,014.43 |
| 620000 | 24 | 2/2/2010 Mat and Sup Maint TD | 11 | 582400 Hwy 467 Sparta Address 150 | 100.10 |
| 620000 | 24 | 2/2/2010 Mat and Sup Maint TD | 11 | 5824014985 Jonesville Rd. | 34.16 |
| 620000 | 24 | 2/2/2010 Mat and Sup Maint TD | IR | 582440 Inventory Return | -207.36 |
| 620000 | 24 | 2/2/2010 Mat and Sup Maint TD | IR | 582442 Inventory Return | -411.96 |
| 620000 | 21 | 2/2/2010 Mat and Sup Maint SS | PV | 42428438 Neptune Technology - ALL USE R | 201.77 |
| 620000 | 21 | 2/2/2010 Mat and Sup Maint SS | PV | 42428835 Neptune Technology - ALL USE R | 67.10 |
| 716121 |  | 2/2/2010 M\&J Expenses-Outside | 11 | 582441 Inventory Issue-Stk E \& D | 411.96 |
| 401110 |  | 2/3/2010 Res Sales Billed | JE | 30913972 KY CIS POST GL BATCH | -155,800.38 |
| 401210 |  | 2/3/2010 Com Sales Billed | JE | 30913972 KY CIS POST GL BATCH | -41,651.30 |
| 401310 |  | 2/3/2010 Ind Sales Billed | JE | 30913972 KY CIS POST GL BATCH | -67,624.24 |
| 401410 |  | 2/3/2010 Pub Fire Billed | JE | 30913972 KY CIS POST GL BATCH | -227,125.71 |
| 401450 |  | 2/3/2010 Priv Fire Billed | JE | 30913972 KY CIS POST GL BATCH | -140,028.93 |
| 401510 |  | 2/3/2010 Pub Auth Billed | JE | 30913972 KY CIS POST GL BATCH | -130,255.09 |
| 401610 |  | 2/3/2010 SFR Billed | JE | 30913972 KY CIS POST GL BATCH | -8,464.56 |
| 403104 |  | 2/3/2010 Oth Rev-NSF Check Charge | JE | 30913972 KY CIS POST GL BATCH | -192.00 |
| 403105 |  | 2/3/2010 Oth Rev-Appl/Initiate Serv Fee | JE | 30913972 KY CIS POST GL BATCH | -2,210.00 |
| 403107 |  | 2/3/2010 Oth Rev-Reconnection Charges | JE | 30913972 KY CIS POST GL BATCH | -2,314.00 |
| 504100 | 16 | 2/3/2010 Group Ins Oper AG | PS | 42429542 Wachovia Bank National Associa | 145,439.27 |
| 515100 | 14 | 2/3/2010 Purch Power TD | EE | 4077658 OWEN ELECTRIC COOP INC | 73.08 |
| 515100 | 14 | 2/3/2010 Purch Power TD | EE | 4078150 KU | 12.44 |
| 515100 | 14 | 2/3/2010 Purch Power TD | EE | 4079648 KU | 98.65 |
| 520100 | 14 | 2/3/2010 M \& S Oper TD | EE | 4079648 KU | 10.00 |
| 520100 | 14 | 2/3/2010 M \& S Oper TD | ST | 30913737 SABRIX VENDOR TAX COMPARE | . 33 |
| 520100 | 16 | 2/3/2010 M \& S Oper AG | PV | 42429769 Baumann Paper-PO/REMIT | 157.80 |
| 535000 | 16 | 2/3/2010 Contr Svc-Other Oper AG | RI | 10140443 Mueller Co - ALL USE PO/REMIT | -73.02 |
| 535000 | 16 | 2/3/2010 Contr Svc-Other Oper AG | PV | 42429770 Lexington Tree Service Inc-PO/ | 714.00 |


| ACCOUNT | SUB | GL DATE $\quad$ DESCRIPTION | DOC TYPE | DOC\# ${ }^{\text {E }}$ EXPLANATION | AMOUNT |
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| 535000 | 16 | 2/3/2010 Contr Svc-Other Oper AG | PV | 42429773 SimplexGrinnell - CH 10320 RE | 419.76 |
| 535000 | 16 | 2/3/2010 Contr Svc-Other Oper AG | PV | 42429775 SimplexGrinnell - CH 10320 RE | 484.84 |
| 535000 | 16 | 2/3/2010 Contr Svc-Other Oper AG | PV | 42429777 SimplexGrinnell - CH 10320 RE | 420.88 |
| 535000 | 16 | 2/3/2010 Contr Svc-Other Oper AG | PV | 42429778 SimplexGrinnell - CH 10320 RE | 1,325.50 |
| 535000 | 16 | 2/3/2010 Contr Svc-Other Oper AG | PV | 42429780 SimplexGrinnell - CH 10320 RE | 1,063.03 |
| 536000 | 13 | 2/3/2010 Contr Svc-Lab Testing Oper WT | PV | 42429286 Fouser Environmental Services | 50.00 |
| 570100 | 15 | 2/3/2010 Uncollectible Accounts | JE | 30913972 KY CIS POST GL BATCH | -522.07 |
| 575000 | 14 | 2/3/2010 Misc Oper TD | ST | 30913738 SABRIX NO TAX CHARGED ACR | 16.13 |
| 575000 | 14 | 2/3/2010 Misc Oper TD | PV | 42429272 Grainger - ALL USE REMIT | 77.57 |
| 575000 | 14 | 2/3/2010 Misc Oper TD | PV | 42429274 Grainger - ALL USE REMIT | 116.42 |
| 575000 | 14 | 2/3/2010 Misc Oper TD | PV | 42429276 Grainger - ALL USE REMIT | 573.57 |
| 575275 | 16 | 2/3/2010 Discounts Available | PK | 62058695 Mueller Co - ALL USE PO/REMIT | -80.44 |
| 575320 | 14 | 2/3/2010 Electricity TD | EE | 4078147 KU | 74.79 |
| 575625 | 16 | 2/3/2010 Overnight Shipping AG | PV | 42429241 United Parcel Service | 95.48 |
| 575625 | 16 | 2/3/2010 Overnight Shipping AG | PV | 42429244 United Parcel Service | 205.41 |
| 575780 | 11 | 2/3/2010 Trash Removal SS | PV | 42429285 Allied Waste Services \#993 | 202.83 |
| 620000 | 21 | 2/3/2010 Mat and Sup Maint SS | ST | 30913737 SABRIX VENDOR TAX COMPARE | . 39 |
| 620000 | 24 | 2/3/2010 Mat and Sup Maint TD | ST | 30913738 SABRIX NO TAX CHARGED ACR | 71.24 |
| 620000 | 24 | 2/3/2010 Mat and Sup Maint TD | PV | 42429267 Hayes Pipe Supply Inc-PO/REMIT | 2,782.87 |
| 620000 | 24 | 2/3/2010 Mat and Sup Maint TD | PV | 42429281 Smith Blair Inc 120001 - REMIT | 1,470.44 |
| 620000 | 24 | 2/3/2010 Mat and Sup Maint TD | PV | 42429283 Ferguson SAC - ALL USE REMIT | 995.37 |
| 635000 | 26 | 2/3/2010 Contr Svc-Other Maint AG | PV | 42429771 Orkin Exterminating Co - Lexin | 53.46 |
| 635000 | 26 | 2/3/2010 Contr Svc-Other Maint AG | PV | 42429772 Orkin Exterminating Co - Lexin | 50.98 |
| 675000 | 26 | 2/3/2010 Misc Maint AG | ST | 30913737 SABRIX VENDOR TAX COMPARE | 8.90 |
| 675000 | 26 | 2/3/2010 Misc Maint AG | PV | 42429781 Perfection Services-PO/REMIT | 168.00 |
| 675650 | 24 | 2/3/2010 Paving/Backfill TD | PV | 42429250 HG Wilson \& Sons Contractors I | 2,073.00 |
| 675650 | 24 | 2/3/2010 Paving/Backfill TD | PV | 42429264 HG Wilson \& Sons Contractors I | 2,514.10 |
| 716121 |  | 2/3/2010 M\&J Expenses-Outside | PV | 42429250 HG Wilson \& Sons Contractors I | 481.60 |
| 401110 |  | 2/4/2010 Res Sales Billed | JE | 30914241 KY CIS POST GL BATCH | -136,022.58 |
| 401210 |  | 2/4/2010 Com Sales Billed | JE | 30914241 KY CIS POST GL BATCH | -96,999.63 |
| 401310 |  | 2/4/2010 Ind Sales Billed | JE | 30914241 KY CIS POST GL BATCH | -39,673.14 |
| 401510 |  | 2/4/2010 Pub Auth Billed | JE | 30914241 KY CIS POST GL BATCH | -165,803.44 |
| 401610 |  | 2/4/2010 SFR Billed | JE | 30914241 KY CIS POST GL BATCH | -39,025.73 |
| 402110 |  | 2/4/2010 Dom WW Serv Billed | JE | 30914241 KY CIS POST GL BATCH | -12,964.76 |
| 402210 |  | 2/4/2010 Com WW Serv Billed | JE | 30914241 KY CIS POST GL BATCH | -6,880.90 |
| 402510 |  | 2/4/2010 Pub Auth WW Svc Billed | JE | 30914241 KY CIS POST GL BATCH | -295.38 |
| 403104 |  | 2/4/2010 Oth Rev-NSF Check Charge | JE | 30914241 KY CIS POST GL BATCH | -156.00 |
| 403105 |  | 2/4/2010 Oth Rev-Appl/Initiate Serv Fee | JE | 30914241 KY CIS POST GL BATCH | -2,002.00 |
| 403107 |  | 2/4/2010 Oth Rev-Reconnection Charges | JE | 30914241 KY CIS POST GL BATCH | -5,070.00 |
| 510100 | 11 | 2/4/2010 Purchased Water-Outside | PV | 42430205 Gallatin County Water District | 981.41 |
| 511100 | 13 | 2/4/2010 Waste Disposal Exp WT | EE | 4080103 KU | 884.11 |
| 511100 | 13 | 2/4/2010 Waste Disposal Exp WT | EE | 4080106 KU | 1,666.91 |
| 515100 | 12 | 2/4/2010 Purch Power P | EE | 4080085 KU | 435.47 |
| 515100 | 13 | 2/4/2010 Purch Power WT | EE | 4080097 KU | 489.31 |
| 515100 | 14 | 2/4/2010 Purch Power TD | EE | 4080122 KU | 32.04 |
| 515100 | 13 | 2/4/2010 Purch Power WT | EE | 4080137 KU | 6,639.63 |
| 515100 | 13 | 2/4/2010 Purch Power WT | EE | 4080626 KU | 14,146.25 |
| 515100 | 13 | 2/4/2010 Purch Power WT | EE | 4080640 KU | 187,296.75 |
| 520100 | 16 | 2/4/2010 M \& S Oper AG | ST | 30913932 SABRIX VENDOR TAX COMPARE | . 84 |
| 535000 | 15 | 2/4/2010 Contr Svc-Other Oper CA | TC | 30913911 Language Services | 1,134.36 |
| 541400 | 16 | 2/4/2010 Rents-Equipment Oper AG | PV | 42430400 Neopost Leasing | 213.33 |
| 570100 | 15 | 2/4/2010 Uncollectible Accounts | JE | 30914241 KY CIS POST GL BATCH | -282.85 |
| 575275 | 16 | 2/4/2010 Discounts Available | PK | 62058699 USA Blue Book | -2.69 |
| 575320 | 13 | 2/4/2010 Electricity WT | EE | 4080069 KU | 12.06 |
| 575320 | 14 | 2/4/2010 Electricity TD | EE | 4080072 KU | 97.44 |
| 575320 | 16 | 2/4/2010 Electricity AG | EE | 4080074 KU | 20.87 |
| 575320 | 13 | 2/4/2010 Electricity WT | EE | 4080087 KU | 12.06 |
| 575320 | 13 | 2/4/2010 Electricity WT | EE | 4080092 KU | 64.44 |
| 575320 | 13 | 2/4/2010 Electricity WT | EE | 4080110 KU | 712.43 |
| 575320 | 14 | 2/4/2010 Electricity TD | EE | 4080114 KU | 14.97 |
| 575320 | 14 | 2/4/2010 Electricity TD | EE | 4080117 KU | 705.56 |
| 575320 | 16 | 2/4/2010 Electricity AG | EE | 4080131 KU | 5,058.16 |
| 575480 | 14 | 2/4/2010 Heat - Oil/Gas TD | EE | 4080112 KU | 70.42 |
| 575480 | 14 | 2/4/2010 Heat - Oil/Gas TD | EE | 4080157 KU | 1,136.32 |
| 575480 | 16 | 2/4/2010 Heat - Oil/Gas AG | EE | 4080610 COLUMBIA GAS OF KENTUCKY | 1,118.87 |
| 575480 | 14 | 2/4/2010 Heat - Oil/Gas TD | EE | 4080621 COLUMBIA GAS OF KENTUCKY | 2,193.32 |
| 575620 | 16 | 2/4/2010 Office \& Admin Supplies AG | PV | 42430058 United Parcel Service | 148.73 |
| 575625 | 16 | 2/4/2010 Overnight Shipping AG | PV | 42430012 United Parcel Service | 68.39 |
| 575625 | 16 | 2/4/2010 Overnight Shipping AG | PV | 42430017 United Parcel Service | 29.91 |
| 575711 | 16 | 2/4/2010 Add'l Security Costs AG | PV | 42430026 Murray Guard Inc-PO/REMIT | 715.20 |
| 575711 | 16 | 2/4/2010 Add'l Security Costs AG | PV | 42430034 Murray Guard Inc-PO/REMIT | 2,668.64 |
| 575711 | 16 | 2/4/2010 Add'I Security Costs AG | PV | 42430051 Murray Guard Inc-PO/REMIT | 715.20 |
| 575711 | 16 | 2/4/2010 Add'I Security Costs AG | PV | 42430054 Murray Guard Inc-PO/REMIT | 2,668.64 |
| 575741 | 13 | 2/4/2010 Cell Phone WT | TC | 30913912 Cingular | 53.58 |
| 575741 | 16 | 2/4/2010 Cell Phone AG | TC | 30913912 Cingular | 352.90 |
| 575741 | 13 | 2/4/2010 Cell Phone WT | TC | 30913913 Cingular | 52.44 |
| 575741 | 16 | 2/4/2010 Cell Phone AG | TC | 30913913 Cingular | 324.29 |
| 575741 | 13 | 2/4/2010 Cell Phone WT | TC | 30913921 Verizon Wireless | 101.31 |
| 575741 | 16 | 2/4/2010 Cell Phone AG | TC | 30913921 Verizon Wireless | 6,347.52 |
| 575741 | 16 | 2/4/2010 Cell Phone AG | TC | 30913926 Verizon Wireless | 243.05 |
| 620000 | 24 | 2/4/2010 Mat and Sup Maint TD | 11 | 582660 Nest to 567 Rose born hide aw | 13.07 |
| 620000 | 24 | 2/4/2010 Mat and Sup Maint TD | IR | 582797 Inventory Return | -341.88 |
| 620000 | 24 | 2/4/2010 Mat and Sup Maint TD | ST | 30913938 SABRIX NO TAX CHARGED ACR | 88.23 |
| 675000 | 26 | 2/4/2010 Misc Maint AG | PV | 42430270 Xerox Corp- REMIT | 161.88 |


| ACCOUNT | SUB | GL DATE $\quad$ DESCRIPTION | DOC TYPE | DOC\# ${ }^{\text {E }}$ - EXPLANATION | AMOUNT |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 715111 |  | 2/4/2010 M\&J Revenues-Outside | RI | 10140501 Central Kentucky Sprinkler | -750.00 |
| 715111 |  | 2/4/2010 M\&J Revenues-Outside | RI | 10140502 Green Mechanical Construction | -750.00 |
| 401110 |  | 2/5/2010 Res Sales Billed | JE | 30914295 KY CIS POST GL BATCH | -103,514.29 |
| 401210 |  | 2/5/2010 Com Sales Billed | JE | 30914295 KY CIS POST GL BATCH | -127,807.19 |
| 401310 |  | 2/5/2010 Ind Sales Billed | JE | 30914295 KY CIS POST GL BATCH | -6,859.85 |
| 401510 |  | 2/5/2010 Pub Auth Billed | JE | 30914295 KY CIS POST GL BATCH | -32,128.12 |
| 401610 |  | 2/5/2010 SFR Billed | JE | 30914295 KY CIS POST GL BATCH | -67,760.48 |
| 403104 |  | 2/5/2010 Oth Rev-NSF Check Charge | JE | 30914295 KY CIS POST GL BATCH | -108.00 |
| 403105 |  | 2/5/2010 Oth Rev-Appl/Initiate Serv Fee | JE | 30914295 KY CIS POST GL BATCH | -1,118.00 |
| 403107 |  | 2/5/2010 Oth Rev-Reconnection Charges | JE | 30914295 KY CIS POST GL BATCH | -2,210.00 |
| 510100 | 11 | 2/5/2010 Purchased Water-Outside | PV | 42430689 Winchester Municipal Utilities | 103.84 |
| 535000 | 13 | 2/5/2010 Contr Svc-Other Oper WT | PV | 42424469 Christopher Excavating | -7,080.00 |
| 535000 | 14 | 2/5/2010 Contr Svc-Other Oper TD | PV | 42424469 Christopher Excavating | -2,160.00 |
| 535000 | 16 | 2/5/2010 Contr Svc-Other Oper AG | PV | 42424469 Christopher Excavating | -480.00 |
| 535000 | 15 | 2/5/2010 Contr Svc-Other Oper CA | PV | 42430688 Kings Helper Inc-REMIT | 96.50 |
| 570100 | 15 | 2/5/2010 Uncollectible Accounts | JE | 30914295 KY CIS POST GL BATCH | -1,024.41 |
| 575275 | 16 | 2/5/2010 Discounts Available | PK | 62058711 US Pipe \& Foundry Co - REMIT | -4.13 |
| 575275 | 16 | 2/5/2010 Discounts Available | PK | 62058717 Powerseal Pipeline Products Co | -69.66 |
| 575275 | 16 | 2/5/2010 Discounts Available | PK | 62058719 Smith Blair Inc 120001 - REMIT | -28.92 |
| 575275 | 16 | 2/5/2010 Discounts Available | PK | 62058723 Ferguson SAC - ALL USE REMIT | -97.27 |
| 575340 | 16 | 2/5/2010 Employee Expenses AG | PS | 42430646 Kentucky State Treasurer-REMIT | 190.00 |
| 575500 | 13 | 2/5/2010 Janitorial WT | PV | 42424469 Christopher Excavating | -2,112.50 |
| 675000 | 26 | 2/5/2010 Misc Maint AG | ST | 30914110 SABRIX VENDOR TAX COMPARE | 8.90 |
| 501200 | 2410 | 2/7/2010 Labor Maint TD Struct \& Imp | T2 | 36555 Payroll Labor Distribution | 139.02 |
| 501200 | 2415 | 2/7/2010 Labor Maint TD Dist Res | T2 | 36555 Payroll Labor Distribution | 233.90 |
| 501200 | 24 | 2/7/2010 Labor Maint TD | T2 | 36555 Payroll Labor Distribution | 329.92 |
| 501200 | 2405 | 2/7/2010 Labor Maint TD Super/Eng | T2 | 36555 Payroll Labor Distribution | 675.39 |
| 501200 | 2305 | 2/7/2010 Labor Maint WT Super/Eng | T2 | 36555 Payroll Labor Distribution | 1,924.96 |
| 501200 | 2435 | 2/7/2010 Labor Maint TD Meters | T2 | 36555 Payroll Labor Distribution | 3,368.16 |
| 501200 | 22 | 2/7/2010 Labor Maint P | T2 | 36555 Payroll Labor Distribution | 3,508.50 |
| 501200 | 15 | 2/7/2010 Labor Oper CA | T2 | 36555 Payroll Labor Distribution | 4,300.71 |
| 501200 | 1405 | 2/7/2010 Labor Oper TD Super/Eng | T2 | 36555 Payroll Labor Distribution | 4,558.72 |
| 501200 | 2440 | 2/7/2010 Labor Maint TD Hydrants | T2 | 36555 Payroll Labor Distribution | 7,128.69 |
| 501200 | 1415 | 2/7/2010 Labor Oper TD Lines | T2 | 36555 Payroll Labor Distribution | 7,229.14 |
| 501200 | 1520 | 2/7/2010 Labor Oper CA Cust Serv | T2 | 36555 Payroll Labor Distribution | 7,625.05 |
| 501200 | 2420 | 2/7/2010 Labor Maint TD Mains | T2 | 36555 Payroll Labor Distribution | 9,232.37 |
| 501200 | 2430 | 2/7/2010 Labor Maint TD Services | T2 | 36555 Payroll Labor Distribution | 11,565.04 |
| 501200 | 1510 | 2/7/2010 Labor Oper CA Mtr Read | T2 | 36555 Payroll Labor Distribution | 22,387.98 |
| 501200 | 1305 | 2/7/2010 Labor Oper WT Super/Eng | T2 | 36555 Payroll Labor Distribution | 24,316.99 |
| 501200 | 1420 | 2/7/2010 Labor Oper TD Meter | T2 | 36555 Payroll Labor Distribution | 24,583.88 |
| 501200 | 13 | 2/7/2010 Labor Oper WT | T2 | 36555 Payroll Labor Distribution | 33,208.43 |
| 501200 | 14 | 2/7/2010 Labor Oper TD | T2 | 36555 Payroll Labor Distribution | 35,702.32 |
| 501200 | 16 | 2/7/2010 Labor Oper AG | T2 | 36555 Payroll Labor Distribution | 41,050.13 |
| 501210 | 2415 | 2/7/2010 Labor NS OT TD Dist Res | T2 | 36555 Payroll Labor Distribution | 17.54 |
| 501210 | 2430 | 2/7/2010 Labor NS OT TD Services | T2 | 36555 Payroll Labor Distribution | 668.57 |
| 501210 | 14 | 2/7/2010 Labor NS OT TD | T2 | 36555 Payroll Labor Distribution | 809.60 |
| 501210 | 2420 | 2/7/2010 Labor NS OT TD Mains | T2 | 36555 Payroll Labor Distribution | 976.79 |
| 501210 | 1415 | 2/7/2010 Labor NS OT TD Lines | T2 | 36555 Payroll Labor Distribution | 1,153.85 |
| 501210 | 1305 | 2/7/2010 Labor NS OT WT Super/Eng | T2 | 36555 Payroll Labor Distribution | 1,310.30 |
| 501210 | 1520 | 2/7/2010 Labor NS OT CA Cust Serv | T2 | 36555 Payroll Labor Distribution | 1,735.22 |
| 501210 | 1510 | 2/7/2010 Labor NS OT CA Mtr Read | T2 | 36555 Payroll Labor Distribution | 1,754.69 |
| 501210 | 13 | 2/7/2010 Labor NS OT WT | T2 | 36555 Payroll Labor Distribution | 2,842.71 |
| 501210 | 1420 | 2/7/2010 Labor NS OT TD Meter | T2 | 36555 Payroll Labor Distribution | 4,278.00 |
| 501711 |  | 2/7/2010 IP-Off-Annual-P/R JE | T3 | 36557 Actual Burden Journal Entries | 11,865.67 |
| 504100 | 16 | 2/7/2010 Group Ins Oper AG | T3 | 36557 Actual Burden Journal Entries | 3,421.00 |
| 504100 | 1 | 2/7/2010 Group Insurance - Cap Credits | T3 | 36557 Actual Burden Journal Entries | 41,800.93 |
| 505100 | 1 | 2/7/2010 PBOP Cap Credits | T3 | 36557 Actual Burden Journal Entries | 28,167.99 |
| 506100 | 1 | 2/7/2010 Pension - Cap Credits | T3 | 36557 Actual Burden Journal Entries | 39,944.40 |
| 507100 | 16 | 2/7/2010 401k Oper AG | T3 | 36557 Actual Burden Journal Entries | 4,745.16 |
| 508101 | 16 | 2/7/2010 DCP Oper AG | T3 | 36557 Actual Burden Journal Entries | 4,134.04 |
| 508102 | 16 | 2/7/2010 Retiree Med Oper AG | T3 | 36557 Actual Burden Journal Entries | 698.31 |
| 550000 | 1 | 2/7/2010 Trans - Cap Credits | T3 | 36557 Actual Burden Journal Entries | 21,674.51 |
| 558000 | 1 | 2/7/2010 Ins Work Comp Cap Credits | T3 | 36557 Actual Burden Journal Entries | 4,644.65 |
| 575340 | 16 | 2/7/2010 Employee Expenses AG | T3 | 36557 Actual Burden Journal Entries | 614.07 |
| 575350 | 16 | 2/7/2010 Meals Deduct | T3 | 36557 Actual Burden Journal Entries | 166.25 |
| 685320 |  | 2/7/2010 FUTA | T3 | 36557 Actual Burden Journal Entries | 1,571.14 |
| 685325 |  | 2/7/2010 FICA | T3 | 36557 Actual Burden Journal Entries | 19,159.34 |
| 685350 |  | 2/7/2010 SUTA | T3 | 36557 Actual Burden Journal Entries | 3,102.47 |
| 716121 |  | 2/7/2010 M\&J Expenses-Outside | T2 | 36555 Payroll Labor Distribution | -360.41 |
| 716121 |  | 2/7/2010 M\&J Expenses-Outside | T3 | 36557 Actual Burden Journal Entries | -270.28 |
| 401110 |  | 2/8/2010 Res Sales Billed | JE | 30914533 KY CIS POST GL BATCH | -130,966.46 |
| 401210 |  | 2/8/2010 Com Sales Billed | JE | 30914533 KY CIS POST GL BATCH | -53,701.72 |
| 401310 |  | 2/8/2010 Ind Sales Billed | JE | 30914533 KY CIS POST GL BATCH | -258.10 |
| 401450 |  | 2/8/2010 Priv Fire Billed | JE | 30914533 KY CIS POST GL BATCH | -97.79 |
| 401510 |  | 2/8/2010 Pub Auth Billed | JE | 30914533 KY CIS POST GL BATCH | -4,700.41 |
| 402310 |  | 2/8/2010 Ind WW Serv Billed | RI | 10140577 Kentucky American Northern | -500.00 |
| 403103 |  | 2/8/2010 Oth Rev-Collect for Others | PS | 42432104 Treehaven II LLC | -251.60 |
| 403103 |  | 2/8/2010 Oth Rev-Collect for Others | PS | 42432105 Verna Hills Neighborhood Assoc | -203.22 |
| 403104 |  | 2/8/2010 Oth Rev-NSF Check Charge | JE | 30914533 KY CIS POST GL BATCH | -96.00 |
| 403105 |  | 2/8/2010 Oth Rev-Appl/Initiate Serv Fee | JE | 30914533 KY CIS POST GL BATCH | -2,574.00 |
| 403107 |  | 2/8/2010 Oth Rev-Reconnection Charges | JE | 30914533 KY CIS POST GL BATCH | -3,978.00 |
| 520100 | 14 | 2/8/2010 M \& S Oper TD | PV | 42431967 Neptune Technology - ALL USE R | 2,552.76 |
| 535000 | 16 | 2/8/2010 Contr Svc-Other Oper AG | PV | 42431969 Christopher Excavating | 120.00 |
| 535000 | 14 | 2/8/2010 Contr Svc-Other Oper TD | PV | 42431969 Christopher Excavating | 1,140.00 |




| ACCOUNT | SUB | GL DATE ${ }^{\text {deSCRIPTION }}$ | DOC TYPE | DOC\# | AMOUNT |
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| 520100 | 16 | 2/15/2010 M \& S Oper AG | PV | 42436380 Vital Records Control | 969.76 |
| 533000 | 16 | 2/15/2010 Contr Svc-Legal Oper AG | PV | 42436379 Stoll Keenon Ogden PLLC-PO/REM | 157.14 |
| 535000 | 16 | 2/15/2010 Contr Svc-Other Oper AG | PV | 42435282 WorkSmart LLC | 278.75 |
| 535000 | 16 | 2/15/2010 Contr Svc-Other Oper AG | PV | 42435286 Randy Walker Electric-PO/REMIT | 373.50 |
| 535000 | 16 | 2/15/2010 Contr Svc-Other Oper AG | PV | 42435290 Randy Walker Electric-PO/REMIT | 511.34 |
| 535000 | 16 | 2/15/2010 Contr Svc-Other Oper AG | PV | 42435291 Kentucky Underground Storage I | 148.50 |
| 535000 | 16 | 2/15/2010 Contr Svc-Other Oper AG | PV | 42435370 Commonwealth Communications of | 66.00 |
| 535000 | 16 | 2/15/2010 Contr Svc-Other Oper AG | PV | 42435516 Randy Walker Electric-PO/REMIT | 312.29 |
| 535000 | 15 | 2/15/2010 Contr Svc-Other Oper CA | PV | 42435530 Garda CL Central Inc | 502.12 |
| 535001 | 14 | 2/15/2010 Contr Svc-Temp Empl Oper TD | PV | 42435577 Volt Management Corp | 117.16 |
| 535001 | 13 | 2/15/2010 Contr Svc-Temp Empl Oper WT | PV | 42435577 Volt Management Corp | 853.62 |
| 550000 | 16 | 2/15/2010 Trans Oper AG | PV | 42435507 Bridgestone Americas Inc | 403.40 |
| 550000 | 16 | 2/15/2010 Trans Oper AG | PV | 42435520 Bridgestone Americas Inc | 650.12 |
| 550001 | 16 | 2/15/2010 Trans Oper AG Lease Cost | PV | 42436283 Automotive Rentals Inc ACH/ALL | 4,351.72 |
| 550002 | 16 | 2/15/2010 Trans Oper AG Lease Fuel | PV | 42436283 Automotive Rentals Inc ACH/ALL | 11,392.17 |
| 550003 | 16 | 2/15/2010 Trans Oper AG Lease Maint | PV | 42436283 Automotive Rentals Inc ACH/ALL | 6,028.89 |
| 570100 | 15 | 2/15/2010 Uncollectible Accounts | JE | 30915103 KY CIS POST GL BATCH | -222.02 |
| 575000 | 16 | 2/15/2010 Misc Oper AG | PV | 42435324 Backtrack Employment Screening | 560.00 |
| 575000 | 14 | 2/15/2010 Misc Oper TD | PV | 42435334 Grainger - ALL USE REMIT | 598.66 |
| 575000 | 14 | 2/15/2010 Misc Oper TD | PV | 42435338 Grainger - ALL USE REMIT | 414.93 |
| 575000 | 14 | 2/15/2010 Misc Oper TD | PV | 42435342 Grainger - ALL USE REMIT | 518.66 |
| 575000 | 14 | 2/15/2010 Misc Oper TD | PV | 42435409 E H Wachs Co | 364.97 |
| 575000 | 14 | 2/15/2010 Misc Oper TD | PV | 42435499 E H Wachs Co | 133.89 |
| 575000 | 14 | 2/15/2010 Misc Oper TD | PV | 42435503 United Rentals (GA) - REMIT | 1,177.14 |
| 575000 | 16 | 2/15/2010 Misc Oper AG | PV | 42436324 Ferguson SAC - ALL USE REMIT | 7.38 |
| 575002 | 16 | 2/15/2010 Misc General Office | PV | 42435667 Contemporary Graphics Inc | 48.91 |
| 575275 | 16 | 2/15/2010 Discounts Available | PK | 62058778 US Pipe \& Foundry Co - REMIT | -9.02 |
| 575275 | 16 | 2/15/2010 Discounts Available | PK | 62058783 Ford Meter Box Co Inc - ALL US | -29.57 |
| 575275 | 16 | 2/15/2010 Discounts Available | PK | 62058787 Ferguson SAC - ALL USE REMIT | -12.09 |
| 575320 | 14 | 2/15/2010 Electricity TD | EE | 4095456 KU | 27.10 |
| 575500 | 14 | 2/15/2010 Janitorial TD | PV | 42435559 Cobb, Rodney | 532.00 |
| 575620 | 16 | 2/15/2010 Office \& Admin Supplies AG | PV | 42435389 United Parcel Service | 215.99 |
| 575620 | 13 | 2/15/2010 Office \& Admin Supplies WT | PV | 42436007 Contemporary Graphics Inc | 57.98 |
| 575711 | 16 | 2/15/2010 Add'I Security Costs AG | PV | 42435375 Murray Guard Inc-PO/REMIT | 715.20 |
| 575711 | 16 | 2/15/2010 Add'I Security Costs AG | PV | 42435382 Murray Guard Inc-PO/REMIT | 2,668.64 |
| 575780 | 16 | 2/15/2010 Trash Removal AG | PV | 42435511 Lexington Fayette Urban County | 132.55 |
| 575780 | 16 | 2/15/2010 Trash Removal AG | PV | 42435525 Allied Waste Services \#993 | 193.91 |
| 575780 | 16 | 2/15/2010 Trash Removal AG | PV | 42435574 Rumpke of Ind LLC-REMIT-ALL AC | 85.07 |
| 575780 | 11 | 2/15/2010 Trash Removal SS | PV | 42436003 Allied Waste Services \#993 | 365.86 |
| 620000 | 24 | 2/15/2010 Mat and Sup Maint TD | PV | 42435329 Ferguson SAC - ALL USE REMIT | 278.38 |
| 620000 | 23 | 2/15/2010 Mat and Sup Maint WT | PV | 42436331 Fauste Oil Services Inc | 137.50 |
| 635000 | 26 | 2/15/2010 Contr Svc-Other Maint AG | PV | 42436371 Perfection Services-PO/REMIT | 272.92 |
| 635000 | 26 | 2/15/2010 Contr Svc-Other Maint AG | PV | 42436373 Perfection Services-PO/REMIT | 547.71 |
| 675000 | 26 | 2/15/2010 Misc Maint AG | PV | 42435394 Perfection Services-PO/REMIT | 168.00 |
| 675000 | 26 | 2/15/2010 Misc Maint AG | PV | 42435405 Perfection Services-PO/REMIT | 867.00 |
| 760100 |  | 2/15/2010 Donations Deduct | PV | 42436029 Lexington Habitat For Humanity | 1,000.00 |
| 760100 |  | 2/15/2010 Donations Deduct | PV | 42436036 News-Herald Owenton | 183.41 |
| 760200 |  | 2/15/2010 Other Income Deductions | PV | 42436333 Creative Co Op LLC | 6,425.00 |
| 760200 |  | 2/15/2010 Other Income Deductions | PV | 42436336 Creative Co Op LLC | 3,445.31 |
| 760200 |  | 2/15/2010 Other Income Deductions | PV | 42436361 Creative Co Op LLC | 1,750.00 |
| 760200 |  | 2/15/2010 Other Income Deductions | PV | 42436363 Creative Co Op LLC | 2,850.00 |
| 760200 |  | 2/15/2010 Other Income Deductions | PV | 42436364 Creative Co Op LLC | 750.00 |
| 760200 |  | 2/15/2010 Other Income Deductions | PV | 42436365 Creative Co Op LLC | 300.00 |
| 760200 |  | 2/15/2010 Other Income Deductions | PV | 42436366 Creative Co Op LLC | 225.00 |
| 760200 |  | 2/15/2010 Other Income Deductions | PV | 42436368 Creative Co Op LLC | 2,200.00 |
| 760200 |  | 2/15/2010 Other Income Deductions | PV | 42436369 Creative Co Op LLC | 600.00 |
| 401110 |  | 2/16/2010 Res Sales Billed | JE | 30915183 KY CIS POST GL BATCH | -145,956.69 |
| 401210 |  | 2/16/2010 Com Sales Billed | JE | 30915183 KY CIS POST GL BATCH | -66,622.80 |
| 401510 |  | 2/16/2010 Pub Auth Billed | JE | 30915183 KY CIS POST GL BATCH | -15,689.94 |
| 401610 |  | 2/16/2010 SFR Billed | JE | 30915183 KY CIS POST GL BATCH | -713.80 |
| 403105 |  | 2/16/2010 Oth Rev-Appl/Initiate Serv Fee | JE | 30915183 KY CIS POST GL BATCH | -2,418.00 |
| 403107 |  | 2/16/2010 Oth Rev-Reconnection Charges | JE | 30915183 KY CIS POST GL BATCH | -4,706.00 |
| 515100 | 12 | 2/16/2010 Purch Power P | EE | 4095744 KU | 62.39 |
| 515100 | 14 | 2/16/2010 Purch Power TD | EE | 4095746 KU | 68.04 |
| 515100 | 14 | 2/16/2010 Purch Power TD | EE | 4095748 KU | 12.60 |
| 515100 | 14 | 2/16/2010 Purch Power TD | EE | 4095751 KU | 27.77 |
| 515100 | 14 | 2/16/2010 Purch Power TD | EE | 4095752 KU | 569.60 |
| 520100 | 14 | 2/16/2010 M \& S Oper TD | EE | 4095748 KU | 10.00 |
| 520100 | 16 | 2/16/2010 M \& S Oper AG | PV | 42437370 Sams Club | 302.93 |
| 550000 | 16 | 2/16/2010 Trans Oper AG | ST | 30915059 SABRIX VENDOR TAX COMPARE | 11.94 |
| 570100 | 15 | 2/16/2010 Uncollectible Accounts | JE | 30915183 KY CIS POST GL BATCH | -118.37 |
| 575000 | 14 | 2/16/2010 Misc Oper TD | TC | 30914988 Granite | 74.02 |
| 575000 | 14 | 2/16/2010 Misc Oper TD | ST | 30915059 SABRIX VENDOR TAX COMPARE | 9.00 |
| 575002 | 16 | 2/16/2010 Misc General Office | ST | 30915050 SABRIX NO TAX CHARGED ACR | 2.93 |
| 575220 | 16 | 2/16/2010 Community Relations | PS | 42437360 Hands On Originals Inc | 4,664.17 |
| 575220 | 16 | 2/16/2010 Community Relations | PV | 42437370 Sams Club | 340.20 |
| 575275 | 16 | 2/16/2010 Discounts Available | PK | 62058795 Mueller Co - ALL USE PO/REMIT | -131.60 |
| 575350 | 16 | 2/16/2010 Meals Deduct | PV | 42437370 Sams Club | 28.13 |
| 575480 | 14 | 2/16/2010 Heat - Oil/Gas TD | EE | 4095789 CARROLLTON MUNICIPAL UTILITIES | 411.45 |
| 575620 | 13 | 2/16/2010 Office \& Admin Supplies WT | ST | 30915056 SABRIX NO TAX CHARGED ACR | 3.48 |
| 575740 | 16 | 2/16/2010 Telephone AG | TC | 30914988 Granite | 97.60 |
| 575740 | 14 | 2/16/2010 Telephone TD | TC | 30914988 Granite | 113.80 |
| 575740 | 16 | 2/16/2010 Telephone AG | TC | 30915020 AT\&T | 141.06 |
| 575740 | 16 | 2/16/2010 Telephone AG | TC | 30915021 AT\&T | 224.50 |


| ACCOUNT | SUB | GL DATE DESCRIPTION | DOC TYPE | DOC\# ${ }^{\text {E }}$ EXPLANATION | AMOUNT |
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| 575740 | 16 | 2/16/2010 Telephone AG | TC | 30915022 AT\&T | 1,406.30 |
| 575741 | 14 | 2/16/2010 Cell Phone TD | TC | 30915030 Verizon Wireless | 145.83 |
| 575741 | 16 | 2/16/2010 Cell Phone AG | TC | 30915032 Nextel Communications | 68.04 |
| 575741 | 14 | 2/16/2010 Cell Phone TD | TC | 30915045 Verizon Wireless | 826.37 |
| 620000 | 24 | 2/16/2010 Mat and Sup Maint TD | IR | 583797 Inventory Return | -23.54 |
| 620000 | 24 | 2/16/2010 Mat and Sup Maint TD | IR | 583880 Inventory Return | -189.54 |
| 620000 | 23 | 2/16/2010 Mat and Sup Maint WT | PD | 42436710 Fauste Oil Services Inc | -22.50 |
| 716121 |  | 2/16/2010 M\&J Expenses-Outside | 11 | 583798 Inventory Issue-Stk E \& D | 23.54 |
| 716121 |  | 2/16/2010 M\&J Expenses-Outside | 11 | 583881 Inventory Issue-Stk E \& D | 189.54 |
| 760100 |  | 2/16/2010 Donations Deduct | PS | 42437359 Fairway Golf Course - REMIT | 300.00 |
| 760100 |  | 2/16/2010 Donations Deduct | PS | 42437361 Citizens Fire Academy Alumni A | 310.00 |
| 760200 |  | 2/16/2010 Other Income Deductions | ST | 30915056 SABRIX NO TAX CHARGED ACR | 216.00 |
| 760200 |  | 2/16/2010 Other Income Deductions | PS | 42437362 Kentucky Science Olympiad-REMI | 1,000.00 |
| 401110 |  | 2/17/2010 Res Sales Billed | JE | 30915394 KY CIS POST GL BATCH | -64,242.34 |
| 401210 |  | 2/17/2010 Com Sales Billed | JE | 30915394 KY CIS POST GL BATCH | -63,876.81 |
| 401310 |  | 2/17/2010 Ind Sales Billed | JE | 30915394 KY CIS POST GL BATCH | -2,559.21 |
| 401510 |  | 2/17/2010 Pub Auth Billed | JE | 30915394 KY CIS POST GL BATCH | -4,966.50 |
| 403104 |  | 2/17/2010 Oth Rev-NSF Check Charge | JE | 30915394 KY CIS POST GL BATCH | -36.00 |
| 403105 |  | 2/17/2010 Oth Rev-Appl/Initiate Serv Fee | JE | 30915394 KY CIS POST GL BATCH | -1,274.00 |
| 403107 |  | 2/17/2010 Oth Rev-Reconnection Charges | JE | 30915394 KY CIS POST GL BATCH | -3,016.00 |
| 535000 | 13 | 2/17/2010 Contr Svc-Other Oper WT | PV | 42437805 Stephen Hillenmeyer Landscape | 927.22 |
| 536000 | 13 | 2/17/2010 Contr Svc-Lab Testing Oper WT | PV | 42437800 Fouser Environmental Services | 50.00 |
| 570100 | 15 | 2/17/2010 Uncollectible Accounts | JE | 30915394 KY CIS POST GL BATCH | -158.95 |
| 575275 | 16 | 2/17/2010 Discounts Available | PK | 62058803 Mueller Co - ALL USE PO/REMIT | -16.01 |
| 620000 | 24 | 2/17/2010 Mat and Sup Maint TD | OV | 10290454 Smith Blair Inc - PO Box 5337 | 1,736.34 |
| 685200 |  | 2/17/2010 Property Taxes | RI | 10141225 Harrison County Sheriff Office | -17.93 |
| 401110 |  | 2/18/2010 Res Sales Billed | JE | 30915494 KY CIS POST GL BATCH | -114,779.22 |
| 401210 |  | 2/18/2010 Com Sales Billed | JE | 30915494 KY CIS POST GL BATCH | -32,404.62 |
| 401310 |  | 2/18/2010 Ind Sales Billed | JE | 30915494 KY CIS POST GL BATCH | -175.00 |
| 401510 |  | 2/18/2010 Pub Auth Billed | JE | 30915494 KY CIS POST GL BATCH | -919.65 |
| 401610 |  | 2/18/2010 SFR Billed | JE | 30915494 KY CIS POST GL BATCH | -67.53 |
| 401710 |  | 2/18/2010 Misc Sales Billed | JE | 30915494 KY CIS POST GL BATCH | -142.09 |
| 402110 |  | 2/18/2010 Dom WW Serv Billed | JE | 30915494 KY CIS POST GL BATCH | -1,595.82 |
| 402210 |  | 2/18/2010 Com WW Serv Billed | JE | 30915494 KY CIS POST GL BATCH | -296.97 |
| 402310 |  | 2/18/2010 Ind WW Serv Billed | JE | 30915494 KY CIS POST GL BATCH | -20.75 |
| 403104 |  | 2/18/2010 Oth Rev-NSF Check Charge | JE | 30915494 KY CIS POST GL BATCH | -84.00 |
| 403105 |  | 2/18/2010 Oth Rev-Appl/Initiate Serv Fee | JE | 30915494 KY CIS POST GL BATCH | -1,118.00 |
| 403107 |  | 2/18/2010 Oth Rev-Reconnection Charges | JE | 30915494 KY CIS POST GL BATCH | -1,586.00 |
| 515100 | 12 | 2/18/2010 Purch Power P | EE | 4098745 OWEN ELECTRIC COOP INC | 22.86 |
| 515100 | 14 | 2/18/2010 Purch Power TD | EE | 4099036 KU | 64.11 |
| 515100 | 14 | 2/18/2010 Purch Power TD | EE | 4099041 KU | 33.48 |
| 515100 | 13 | 2/18/2010 Purch Power WT | EE | 4099051 KU | 2,398.74 |
| 515100 | 12 | 2/18/2010 Purch Power P | EE | 4099069 KU | 1,112.36 |
| 515100 | 13 | 2/18/2010 Purch Power WT | EE | 4099358 KU | 432.03 |
| 515100 | 14 | 2/18/2010 Purch Power TD | EE | 4099360 KU | 14.77 |
| 518001 | AWSI | 2/18/2010 Chemicals Carbon AWSI | PV | 42438601 American Anglian Environmental | 3,872.29 |
| 518001 | AWSI | 2/18/2010 Chemicals Carbon AWSI | PV | 42438604 American Anglian Environmental | 3,550.41 |
| 520100 | 14 | 2/18/2010 M \& S Oper TD | PV | 42438624 Saf ti co Inc-PO/REMIT | 52.58 |
| 520100 | 14 | 2/18/2010 M \& S Oper TD | PV | 42438626 CI Thornburg Co Inc | 1,643.00 |
| 535000 | 15 | 2/18/2010 Contr Svc-Other Oper CA | TC | 30915253 Language Services | 1,147.24 |
| 535000 | 13 | 2/18/2010 Contr Svc-Other Oper WT | PV | 42438628 Siemens Water Technologies Cor | 756.74 |
| 570100 | 15 | 2/18/2010 Uncollectible Accounts | JE | 30915494 KY CIS POST GL BATCH | -539.40 |
| 575000 | 14 | 2/18/2010 Misc Oper TD | PV | 42438562 Grainger - ALL USE REMIT | 380.66 |
| 575000 | 14 | 2/18/2010 Misc Oper TD | PV | 42438565 Grainger - ALL USE REMIT | 414.93 |
| 575000 | 14 | 2/18/2010 Misc Oper TD | PV | 42438569 Grainger - ALL USE REMIT | 85.48 |
| 575000 | 14 | 2/18/2010 Misc Oper TD | PV | 42438574 Grainger - ALL USE REMIT | 113.97 |
| 575000 | 14 | 2/18/2010 Misc Oper TD | PV | 42438577 Grainger - ALL USE REMIT | 113.53 |
| 575000 | 14 | 2/18/2010 Misc Oper TD | PV | 42438579 Grainger - ALL USE REMIT | 377.10 |
| 575000 | 14 | 2/18/2010 Misc Oper TD | PV | 42438583 Grainger - ALL USE REMIT | 437.25 |
| 575000 | 14 | 2/18/2010 Misc Oper TD | PV | 42438587 Grainger - ALL USE REMIT | 83.45 |
| 575000 | 14 | 2/18/2010 Misc Oper TD | PV | 42438589 Grainger - ALL USE REMIT | 170.45 |
| 575000 | 14 | 2/18/2010 Misc Oper TD | PV | 42438593 USA Blue Book | 33.69 |
| 575000 | 16 | 2/18/2010 Misc Oper AG | PV | 42439014 Backtrack Employment Screening | 709.50 |
| 575275 | 16 | 2/18/2010 Discounts Available | PK | 62058808 USA Blue Book | -. 34 |
| 575275 | 16 | 2/18/2010 Discounts Available | PK | 62058809 US Pipe \& Foundry Co - REMIT | -12.98 |
| 575320 | 14 | 2/18/2010 Electricity TD | EE | 4098588 OWEN ELECTRIC COOP INC | 99.45 |
| 575320 | 14 | 2/18/2010 Electricity TD | EE | 4098981 KU | 13.50 |
| 575320 | 14 | 2/18/2010 Electricity TD | EE | 4099357 KU | 87.06 |
| 575320 | 14 | 2/18/2010 Electricity TD | EE | 4099985 KU | 26.84 |
| 575320 | 14 | 2/18/2010 Electricity TD | EE | 4099988 KU | 160.04 |
| 575320 | 14 | 2/18/2010 Electricity TD | EE | 4099993 KU | 50.17 |
| 575420 | 15 | 2/18/2010 Forms CA | PV | 42438546 Regulus Integrated Solutions L | 1,620.28 |
| 575420 | 15 | 2/18/2010 Forms CA | PV | 42438585 Regulus Integrated Solutions L | 3,423.79 |
| 575420 | 15 | 2/18/2010 Forms CA | PV | 42438613170105.575420 .15 ed Solutions L | 11,714.60 |
| 575545 | 13 | 2/18/2010 Lab Supplies WT | PV | 42438635 Scott Gross Co Inc | 15.94 |
| 575625 | 16 | 2/18/2010 Overnight Shipping AG | PV | 42438594 United Parcel Service | 75.47 |
| 575625 | 16 | 2/18/2010 Overnight Shipping AG | PV | 42438596 United Parcel Service | 70.11 |
| 575625 | 16 | 2/18/2010 Overnight Shipping AG | PV | 42438598 United Parcel Service | 157.24 |
| 575740 | 16 | 2/18/2010 Telephone AG | TC | 30915225 Genesys | 9.40 |
| 575740 | 16 | 2/18/2010 Telephone AG | TC | 30915226 Genesys | 45.38 |
| 575780 | 11 | 2/18/2010 Trash Removal SS | PV | 42438617 Allied Waste Services \#993 | 77.50 |
| 575780 | 14 | 2/18/2010 Trash Removal TD | PV | 42438617 Allied Waste Services \#993 | 77.51 |
| 575780 | 11 | 2/18/2010 Trash Removal SS | PV | 42438620 Allied Waste Services \#993 | 409.64 |
| 575780 | 14 | 2/18/2010 Trash Removal TD | PV | 42438620 Allied Waste Services \#993 | 409.65 |


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| 620000 | 24 | 2/18/2010 Mat and Sup Maint TD | PV | 42438611 Bill Pence \& Son Trucking Inc | 784.16 |
| 675000 | 24 | 2/18/2010 Misc Maint TD | PV | 42438606 Saf ti co Inc - PO/REMIT | 100.70 |
| 760400 |  | 2/18/2010 Other Lobbying Expenses | PV | 42438697 McCarthy Strategic Solutions L | 4,528.74 |
| 401110 |  | 2/19/2010 Res Sales Billed | JE | 30915587 KY CIS POST GL BATCH | -252,191.72 |
| 401210 |  | 2/19/2010 Com Sales Billed | JE | 30915587 KY CIS POST GL BATCH | -126,437.90 |
| 401510 |  | 2/19/2010 Pub Auth Billed | JE | 30915587 KY CIS POST GL BATCH | -6,695.26 |
| 403104 |  | 2/19/2010 Oth Rev-NSF Check Charge | JE | 30915587 KY CIS POST GL BATCH | -72.00 |
| 403105 |  | 2/19/2010 Oth Rev-Appl/Initiate Serv Fee | JE | 30915587 KY CIS POST GL BATCH | -4,628.00 |
| 403107 |  | 2/19/2010 Oth Rev-Reconnection Charges | JE | 30915587 KY CIS POST GL BATCH | -9,620.00 |
| 504670 | 16 | 2/19/2010 Training AG | PS | 42439748 Kentucky State Treasurer-Water | 190.00 |
| 535000 | 15 | 2/19/2010 Contr Svc-Other Oper CA | PV | 42439661 Accenture, LLP-REMIT | 4,246.95 |
| 536000 | 13 | 2/19/2010 Contr Svc-Lab Testing Oper WT | PV | 42439506 Fouser Environmental Services | 80.00 |
| 570100 | 15 | 2/19/2010 Uncollectible Accounts | JE | 30915587 KY CIS POST GL BATCH | -1,175.42 |
| 575000 | 14 | 2/19/2010 Misc Oper TD | ST | 30915464 SABRIX NO TAX CHARGED ACR | 2.02 |
| 575100 | 15 | 2/19/2010 Bank Service Charges CA | PV | 42439638 CheckFreePay Corporation | 7,807.97 |
| 575200 | 15 | 2/19/2010 Collection Agencies CA | PV | 42439647 Penn Credit Corp | -34.81 |
| 575220 | 16 | 2/19/2010 Community Relations | PS | 42439742 Helm, David W | 26.79 |
| 575220 | 16 | 2/19/2010 Community Relations | PS | 42439743 Bowen, Lori T - REMIT | 471.52 |
| 575220 | 16 | 2/19/2010 Community Relations | PS | 42439745 Central KY Reg Science \& Engr | 5,000.00 |
| 575275 | 16 | 2/19/2010 Discounts Available | PK | 62058825 US Pipe \& Foundry Co - REMIT | -159.30 |
| 575275 | 16 | 2/19/2010 Discounts Available | PK | 62058832 Smith Blair Inc 120001 - REMIT | -50.28 |
| 575275 | 16 | 2/19/2010 Discounts Available | PK | 62058833 Mueller Co - ALL USE PO/REMIT | -23.08 |
| 575275 | 16 | 2/19/2010 Discounts Available | PK | 62058840 Ferguson SAC - ALL USE REMIT | -18.78 |
| 575280 | 16 | 2/19/2010 Dues/Membership Deduct | PS | 42439746 Owen County Chamber of Commerc | 500.00 |
| 575625 | 16 | 2/19/2010 Overnight Shipping AG | PV | 42439507 United Parcel Service | 40.71 |
| 575625 | 16 | 2/19/2010 Overnight Shipping AG | PV | 42439509 United Parcel Service | 47.85 |
| 575820 | 11 | 2/19/2010 Uniforms SS | PV | 42439510 Kentucky American Water | 3,147.41 |
| 620000 | 24 | 2/19/2010 Mat and Sup Maint TD | ST | 30915464 SABRIX NO TAX CHARGED ACR | 47.05 |
| 760100 |  | 2/19/2010 Donations Deduct | PS | 42439744 Bluegrass PRIDE | 2,500.00 |
| 760100 |  | 2/19/2010 Donations Deduct | PS | 42439747 United Way of the Bluegrass - | 10,000.00 |
| 715111 |  | 2/20/2010 M\&J Revenues-Outside | RI | 10141596 AAA Insurance | -611.13 |
| 501200 | 2405 | 2/21/2010 Labor Maint TD Super/Eng | T2 | 36705 Payroll Labor Distribution | 270.16 |
| 501200 | 2305 | 2/21/2010 Labor Maint WT Super/Eng | T2 | 36705 Payroll Labor Distribution | 810.52 |
| 501200 | 24 | 2/21/2010 Labor Maint TD | T2 | 36705 Payroll Labor Distribution | 1,583.88 |
| 501200 | 22 | 2/21/2010 Labor Maint P | T2 | 36705 Payroll Labor Distribution | 3,672.23 |
| 501200 | 2435 | 2/21/2010 Labor Maint TD Meters | T2 | 36705 Payroll Labor Distribution | 3,847.65 |
| 501200 | 2440 | 2/21/2010 Labor Maint TD Hydrants | T2 | 36705 Payroll Labor Distribution | 4,862.10 |
| 501200 | 15 | 2/21/2010 Labor Oper CA | T2 | 36705 Payroll Labor Distribution | 4,893.49 |
| 501200 | 1415 | 2/21/2010 Labor Oper TD Lines | T2 | 36705 Payroll Labor Distribution | 5,515.87 |
| 501200 | 1405 | 2/21/2010 Labor Oper TD Super/Eng | T2 | 36705 Payroll Labor Distribution | 6,036.78 |
| 501200 | 1520 | 2/21/2010 Labor Oper CA Cust Serv | T2 | 36705 Payroll Labor Distribution | 9,897.56 |
| 501200 | 2420 | 2/21/2010 Labor Maint TD Mains | T2 | 36705 Payroll Labor Distribution | 10,412.61 |
| 501200 | 2430 | 2/21/2010 Labor Maint TD Services | T2 | 36705 Payroll Labor Distribution | 13,164.26 |
| 501200 | 1510 | 2/21/2010 Labor Oper CA Mtr Read | T2 | 36705 Payroll Labor Distribution | 20,470.15 |
| 501200 | 1305 | 2/21/2010 Labor Oper WT Super/Eng | T2 | 36705 Payroll Labor Distribution | 22,501.04 |
| 501200 | 1420 | 2/21/2010 Labor Oper TD Meter | T2 | 36705 Payroll Labor Distribution | 29,298.87 |
| 501200 | 13 | 2/21/2010 Labor Oper WT | T2 | 36705 Payroll Labor Distribution | 31,783.18 |
| 501200 | 14 | 2/21/2010 Labor Oper TD | T2 | 36705 Payroll Labor Distribution | 34,427.66 |
| 501200 | 16 | 2/21/2010 Labor Oper AG | T2 | 36705 Payroll Labor Distribution | 36,105.94 |
| 501210 | 15 | 2/21/2010 Labor NS OT CA | T2 | 36705 Payroll Labor Distribution | 119.82 |
| 501210 | 2430 | 2/21/2010 Labor NS OT TD Services | T2 | 36705 Payroll Labor Distribution | 328.51 |
| 501210 | 1415 | 2/21/2010 Labor NS OT TD Lines | T2 | 36705 Payroll Labor Distribution | 378.96 |
| 501210 | 14 | 2/21/2010 Labor NS OT TD | T2 | 36705 Payroll Labor Distribution | 404.79 |
| 501210 | 2420 | 2/21/2010 Labor NS OT TD Mains | T2 | 36705 Payroll Labor Distribution | 708.68 |
| 501210 | 1420 | 2/21/2010 Labor NS OT TD Meter | T2 | 36705 Payroll Labor Distribution | 724.50 |
| 501210 | 1520 | 2/21/2010 Labor NS OT CA Cust Serv | T2 | 36705 Payroll Labor Distribution | 1,174.51 |
| 501210 | 1305 | 2/21/2010 Labor NS OT WT Super/Eng | T2 | 36705 Payroll Labor Distribution | 1,483.29 |
| 501210 | 13 | 2/21/2010 Labor NS OT WT | T2 | 36705 Payroll Labor Distribution | 2,187.57 |
| 501210 | 1510 | 2/21/2010 Labor NS OT CA Mtr Read | T2 | 36705 Payroll Labor Distribution | 4,098.32 |
| 501711 |  | 2/21/2010 IP-Off-Annual-P/R JE | T3 | 36706 Actual Burden Journal Entries | 11,294.52 |
| 504100 | 16 | 2/21/2010 Group Ins Oper AG | T3 | 36706 Actual Burden Journal Entries | 2,466.31 |
| 504100 | 1 | 2/21/2010 Group Insurance - Cap Credits | T3 | 36706 Actual Burden Journal Entries | 40,688.42 |
| 505100 | 1 | 2/21/2010 PBOP Cap Credits | T3 | 36706 Actual Burden Journal Entries | 27,635.62 |
| 506100 | 1 | 2/21/2010 Pension - Cap Credits | T3 | 36706 Actual Burden Journal Entries | 32,503.09 |
| 507100 | 16 | 2/21/2010 401k Oper AG | T3 | 36706 Actual Burden Journal Entries | 4,496.27 |
| 508101 | 16 | 2/21/2010 DCP Oper AG | T3 | 36706 Actual Burden Journal Entries | 3,839.10 |
| 550000 | 1 | 2/21/2010 Trans - Cap Credits | T3 | 36706 Actual Burden Journal Entries | 21,097.60 |
| 558000 | 1 | 2/21/2010 Ins Work Comp Cap Credits | T3 | 36706 Actual Burden Journal Entries | 4,018.63 |
| 685320 |  | 2/21/2010 FUTA | T3 | 36706 Actual Burden Journal Entries | 690.80 |
| 685325 |  | 2/21/2010 FICA | T3 | 36706 Actual Burden Journal Entries | 18,618.63 |
| 685350 |  | 2/21/2010 SUTA | T3 | 36706 Actual Burden Journal Entries | 1,948.59 |
| 715111 |  | 2/21/2010 M\&J Revenues-Outside | RI | 10141592 Ballina-Magana, David | -650.16 |
| 715111 |  | 2/21/2010 M\&J Revenues-Outside | RI | 10141593 Kings Helper | -528.43 |
| 715111 |  | 2/21/2010 M\&J Revenues-Outside | RI | 10141594 Stoll, Richard | -353.56 |
| 715111 |  | 2/21/2010 M\&J Revenues-Outside | RI | 10141595 Collin \& Company | -509.50 |
| 715111 |  | 2/21/2010 M\&J Revenues-Outside | RI | 10141597 Mike Kerswin Custom Homes | -670.31 |
| 715111 |  | 2/21/2010 M\&J Revenues-Outside | RI | 10141598 CJ Hughes Construction Co Inc | -231.86 |
| 715111 |  | 2/21/2010 M\&J Revenues-Outside | RI | 10141599 John T Cannon Company | -1,326.18 |
| 715111 |  | 2/21/2010 M\&J Revenues-Outside | RI | 10141600 Tutt Construction | -439.98 |
| 715111 |  | 2/21/2010 M\&J Revenues-Outside | RI | 10141601 Walmart | -395.70 |
| 716121 |  | 2/21/2010 M\&J Expenses-Outside | T2 | 36705 Payroll Labor Distribution | -2,747.05 |
| 716121 |  | 2/21/2010 M\&J Expenses-Outside | T3 | 36706 Actual Burden Journal Entries | -1,560.37 |
| 716122 |  | 2/21/2010 M\&J Expenses-Inside | T2 | 36705 Payroll Labor Distribution | 233.76 |
| 716122 |  | 2/21/2010 M\&J Expenses-Inside | T3 | 36706 Actual Burden Journal Entries | 178.72 |



| ACCOUNT | SUB | GL DATE ${ }^{\text {deSCRIPTION }}$ | DOC TYPE | DOC\# EXPLANATION | AMOUNT |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 575000 | 14 | 2/23/2010 Misc Oper TD | PV | 42441855 Grainger - ALL USE REMIT | 16.89 |
| 575000 | 14 | 2/23/2010 Misc Oper TD | PV | 42441857 Grainger - ALL USE REMIT | 51.87 |
| 575000 | 14 | 2/23/2010 Misc Oper TD | PV | 42441859 Grainger - ALL USE REMIT | 516.84 |
| 575000 | 14 | 2/23/2010 Misc Oper TD | PV | 42441861 Grainger - ALL USE REMIT | 155.95 |
| 575275 | 16 | 2/23/2010 Discounts Available | PK | 62058855 USA Blue Book | -5.18 |
| 575275 | 16 | 2/23/2010 Discounts Available | PK | 62058860 Mueller Co - ALL USE PO/REMIT | -48.11 |
| 575320 | 14 | 2/23/2010 Electricity TD | EE | 4103669 KU | 170.91 |
| 575320 | 16 | 2/23/2010 Electricity AG | EE | 4103673 KU | 459.43 |
| 575320 | 14 | 2/23/2010 Electricity TD | EE | 4104127 OWEN ELECTRIC COOP INC | 69.27 |
| 575320 | 14 | 2/23/2010 Electricity TD | EE | 4105775 OWEN ELECTRIC COOP INC | 16.06 |
| 575320 | 13 | 2/23/2010 Electricity WT | EE | 4105840 BLUE GRASS ENERGY | 38.17 |
| 575320 | 14 | 2/23/2010 Electricity TD | EE | 4105844 OWEN ELECTRIC COOP INC | 300.68 |
| 575620 | 14 | 2/23/2010 Office \& Admin Supplies TD | PV | 42441520 Contemporary Graphics Inc | 450.56 |
| 575620 | 14 | 2/23/2010 Office \& Admin Supplies TD | PV | 42441525 Laser Images Inc - PO/REMIT | 1,373.76 |
| 575620 | 14 | 2/23/2010 Office \& Admin Supplies TD | PV | 42441851 Grainger - ALL USE REMIT | 232.24 |
| 575620 | 16 | 2/23/2010 Office \& Admin Supplies AG | PV | 42441863 United Parcel Service | 204.92 |
| 575620 | 16 | 2/23/2010 Office \& Admin Supplies AG | PV | 42441865 United Parcel Service | 204.40 |
| 575711 | 16 | 2/23/2010 Add'I Security Costs AG | PV | 42441604 Murray Guard Inc-PO/REMIT | 2,668.64 |
| 575711 | 16 | 2/23/2010 Add'I Security Costs AG | PV | 42441605 Murray Guard Inc-PO/REMIT | 715.20 |
| 575711 | 16 | 2/23/2010 Add'I Security Costs AG | PV | 42441610 Murray Guard Inc-PO/REMIT | 2,668.64 |
| 575740 | 15 | 2/23/2010 Telephone CA | TC | 30915638 Windstream | 115.29 |
| 575740 | 15 | 2/23/2010 Telephone CA | TC | 30915639 Windstream | 268.89 |
| 575740 | 15 | 2/23/2010 Telephone CA | TC | 30915640 Windstream | 1,146.98 |
| 575740 | 15 | 2/23/2010 Telephone CA | TC | 30915641 Windstream | 108.24 |
| 575740 | 15 | 2/23/2010 Telephone CA | TC | 30915642 Windstream | 147.53 |
| 575740 | 15 | 2/23/2010 Telephone CA | TC | 30915643 Windstream | 2,396.99 |
| 575830 | 16 | 2/23/2010 Wtr \& Waste Wtr Exp AG | PV | 42441496 Kentucky American Water | 930.55 |
| 575830 | 16 | 2/23/2010 Wtr \& Waste Wtr Exp AG | PV | 42441499 Kentucky American Water | 19.81 |
| 575830 | 16 | 2/23/2010 Wtr \& Waste Wtr Exp AG | PV | 42441502 Kentucky American Water | 4.05 |
| 575830 | 16 | 2/23/2010 Wtr \& Waste Wtr Exp AG | PV | 42441506 Kentucky American Water | 17.28 |
| 620000 | 24 | 2/23/2010 Mat and Sup Maint TD | IR | 584836 Inventory Return | -110.10 |
| 620000 | 24 | 2/23/2010 Mat and Sup Maint TD | IR | 584852 Inventory Return | -161.06 |
| 620000 | 24 | 2/23/2010 Mat and Sup Maint TD | JE | 30915784 BP non stock material to MJ | -64.99 |
| 620000 | 24 | 2/23/2010 Mat and Sup Maint TD | JE | 30915786 BP non stock material to MJ | -14.33 |
| 620000 | 24 | 2/23/2010 Mat and Sup Maint TD | JE | 30915787 BP non stock material to MJ | -125.26 |
| 620000 | 21 | 2/23/2010 Mat and Sup Maint SS | PV | 42441829 Ashbrook Simon Hartley | 988.01 |
| 620000 | 24 | 2/23/2010 Mat and Sup Maint TD | PV | 42441844 Ford Meter Box Co Inc - ALL US | 244.00 |
| 716121 |  | 2/23/2010 M\&J Expenses-Outside | II | 584849 Inventory Issue-Stk E \& D | 161.06 |
| 716121 |  | 2/23/2010 M\&J Expenses-Outside | JE | 30915784 BP non stock material to MJ | 64.99 |
| 716121 |  | 2/23/2010 M\&J Expenses-Outside | JE | 30915786 BP non stock material to MJ | 14.33 |
| 716121 |  | 2/23/2010 M\&J Expenses-Outside | JE | 30915787 BP non stock material to MJ | 125.26 |
| 760200 |  | 2/23/2010 Other Income Deductions | PV | 42441874 Creative Co Op LLC | 650.00 |
| 760200 |  | 2/23/2010 Other Income Deductions | PV | 42441878 Creative Co Op LLC | 900.00 |
| 401110 |  | 2/24/2010 Res Sales Billed | JE | 30916086 KY CIS POST GL BATCH | -122,968.73 |
| 401210 |  | 2/24/2010 Com Sales Billed | JE | 30916086 KY CIS POST GL BATCH | -19,087.10 |
| 401510 |  | 2/24/2010 Pub Auth Billed | JE | 30916086 KY CIS POST GL BATCH | -691.16 |
| 403104 |  | 2/24/2010 Oth Rev-NSF Check Charge | JE | 30916086 KY CIS POST GL BATCH | -192.00 |
| 403105 |  | 2/24/2010 Oth Rev-Appl/Initiate Serv Fee | JE | 30916086 KY CIS POST GL BATCH | -1,170.00 |
| 403107 |  | 2/24/2010 Oth Rev-Reconnection Charges | JE | 30916086 KY CIS POST GL BATCH | -1,352.00 |
| 541400 | 16 | 2/24/2010 Rents-Equipment Oper AG | PV | 42442900 Neopost Leasing | 213.33 |
| 541400 | 16 | 2/24/2010 Rents-Equipment Oper AG | PV | 42444164 Canon Financial Svcs Inc -REMI | 154.97 |
| 541400 | 16 | 2/24/2010 Rents-Equipment Oper AG | PV | 42444166 Canon Financial Svcs Inc -REMI | 138.90 |
| 541400 | 16 | 2/24/2010 Rents-Equipment Oper AG | PV | 42444168 Canon Financial Svcs Inc -REMI | 1,323.59 |
| 568010 | 16 | 2/24/2010 Water Res Conservation | PV | 42444034 Rupp Arena Sports \& Entertainm | 8,583.34 |
| 570100 | 15 | 2/24/2010 Uncollectible Accounts | JE | 30916086 KY CIS POST GL BATCH | -143.68 |
| 575130 | 16 | 2/24/2010 Brochures and Handouts | PV | 42444018 Harperprints Inc | 1,550.52 |
| 575130 | 16 | 2/24/2010 Brochures and Handouts | PV | 42444024 Creative Co Op LLC | 600.00 |
| 575220 | 16 | 2/24/2010 Community Relations | PV | 42444028 Identity Links Inc | 167.00 |
| 575275 | 16 | 2/24/2010 Discounts Available | PK | 62058873 Mueller Co - ALL USE PO/REMIT | -4.20 |
| 575320 | 13 | 2/24/2010 Electricity WT | EE | 4106203 KU | 111.36 |
| 575320 | 14 | 2/24/2010 Electricity TD | EE | 4106209 KU | 323.20 |
| 575620 | 14 | 2/24/2010 Office \& Admin Supplies TD | ST | 30915815 SABRIX NO TAX CHARGED ACR | 27.03 |
| 575620 | 16 | 2/24/2010 Office \& Admin Supplies AG | PV | 42444171 Laser Images Inc - PO/REMIT | 122.96 |
| 620000 | 24 | 2/24/2010 Mat and Sup Maint TD | ST | 30915815 SABRIX NO TAX CHARGED ACR | 14.64 |
| 716121 |  | 2/24/2010 M\&J Expenses-Outside | PV | 42442895 HDR Engineering Inc - ALL USE | 252.00 |
| 760100 |  | 2/24/2010 Donations Deduct | PS | 42443222 Boy Scouts of America - KY | 1,000.00 |
| 760200 |  | 2/24/2010 Other Income Deductions | ST | 30915815 SABRIX NO TAX CHARGED ACR | 93.00 |
| 401110 |  | 2/25/2010 Res Sales Billed | JE | 30916292 KY CIS POST GL BATCH | -131,732.27 |
| 401210 |  | 2/25/2010 Com Sales Billed | JE | 30916292 KY CIS POST GL BATCH | -1,089.39 |
| 401510 |  | 2/25/2010 Pub Auth Billed | JE | 30916292 KY CIS POST GL BATCH | -700.25 |
| 403104 |  | 2/25/2010 Oth Rev-NSF Check Charge | JE | 30916292 KY CIS POST GL BATCH | -144.00 |
| 403105 |  | 2/25/2010 Oth Rev-Appl/Initiate Serv Fee | JE | 30916292 KY CIS POST GL BATCH | -1,534.00 |
| 403107 |  | 2/25/2010 Oth Rev-Reconnection Charges | JE | 30916292 KY CIS POST GL BATCH | -4,004.00 |
| 511100 | 13 | 2/25/2010 Waste Disposal Exp WT | ID | 585749 Chem issues KRS Feb 2010 | 6,210.49 |
| 511100 | 13 | 2/25/2010 Waste Disposal Exp WT | ID | 585756 CHEM ISSUES RRS FEB 2010 | 1,896.59 |
| 515100 | 12 | 2/25/2010 Purch Power P | EE | 4109180 OWEN ELECTRIC COOP INC | 19.15 |
| 518000 | 13 | 2/25/2010 Chemicals WT | ID | 585479 Owenton WWTP Feb. 2010 | 524.69 |
| 518000 | 13 | 2/25/2010 Chemicals WT | ID | 585482 Owenton Water Feb. 2010 | 8,927.63 |
| 518000 | 13 | 2/25/2010 Chemicals WT | ID | 585749 Chem issues KRS Feb 2010 | 61,337.43 |
| 518000 | 13 | 2/25/2010 Chemicals WT | ID | 585756 CHEM ISSUES RRS FEB 2010 | 43,272.25 |
| 518000 | 13 | 2/25/2010 Chemicals WT | ID | 585758 CHEM ISSUES ROCKWELL FEB 2010 | 549.18 |
| 518000 | 13 | 2/25/2010 Chemicals WT | IR | 585759 RETURN STOCK ROCKWELL FEB 2010 | -27.55 |
| 535000 | 16 | 2/25/2010 Contr Svc-Other Oper AG | PV | 42444833 West Payment Center Thomson | 603.00 |
| 568010 | 16 | 2/25/2010 Water Res Conservation | ST | 30916054 SABRIX NO TAX CHARGED ACR | 515.00 |



| ACCOUNT | SUB | GL DATE | DESCRIPTION | DOC TYPE | DOC\# | EXPLANATION | AMOUNT |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 501200 | 14 | 2/28/2010 | Labor Oper TD | JE | 30916494 | Labor Accrual - February 2010 | 3,790.80 |
| 501200 | 1405 | 2/28/2010 | Labor Oper TD Super/Eng | JE | 30916494 | Labor Accrual - February 2010 | 5,686.20 |
| 501200 | 16 | 2/28/2010 | Labor Oper AG | JE | 30916494 | Labor Accrual - February 2010 | 118,462.50 |
| 501200 | 1305 | 2/28/2010 | Labor Oper WT Super/Eng | JE | 30917266 | FASTR - ALLOCATION KY_ALLEXP2 | -924.41 |
| 501200 | 13 | 2/28/2010 | Labor Oper WT | JE | 30917266 | FASTR - ALLOCATION KY_ALLEXP2 | -70.17 |
| 501716 | 16 | 2/28/2010 | Comp Exp-Options | JE | 30916946 | Accrue RSU \& Opt Exp Feb 2010 | 737.00 |
| 501718 | 16 | 2/28/2010 | Comp Exp-RSU's | JE | 30916946 | Accrue RSU \& Opt Exp Feb 2010 | 1,052.00 |
| 504100 | 16 | 2/28/2010 | Group Ins Oper AG | JE |  | Allmerica Feb Pmt | -365.20 |
| 504100 | 16 | 2/28/2010 | Group Ins Oper AG | JE | 103 | Retiree Reductions Feb-10 | -2,952.50 |
| 504100 | 16 | 2/28/2010 | Group Ins Oper AG | JE | 30916692 | Feb 2010 Accr Insurance Adjust | -5,800.26 |
| 504670 | 16 | 2/28/2010 | Training AG | JE |  | KY UNMAPPED PCARD ACCRUAL 0210 | 35.14 |
| 505100 | 16 | 2/28/2010 | PBOP Oper AG | JR | 2001 | OPEB Cost Allocation | 92,811.08 |
| 506100 | 16 | 2/28/2010 | Pension Oper AG | JR | 2002 | 2010 Pension Costs | 109,281.00 |
| 507100 | 16 | 2/28/2010 | 401k Oper AG | JE | 30917266 | FASTR - ALLOCATION KY_ALLEXP2 | -26.75 |
| 508101 | 16 | 2/28/2010 | DCP Oper AG | JE | 30917266 | FASTR - ALLOCATION KY_ALLEXP2 | -6.44 |
| 508200 | 16 | 2/28/2010 | ESPP Oper AG | JE | 30916954 | Accrue ESPP Expense Feb 2010 | 123.47 |
| 510100 | 11 | 2/28/2010 | Purchased Water-Outside | JE |  | KY Purchased Water Accrual Feb | -956.00 |
| 510110 | AW12 | 2/28/2010 | Purch Water AW12 | JE | 120202 | Owenton Wastewater Pur Wat Feb | 1,190.18 |
| 511100 | 13 | 2/28/2010 | Waste Disposal Exp WT | JE |  | Power Accrual | -218.56 |
| 511100 | 13 | 2/28/2010 | Waste Disposal Exp WT | JE | 120205 | True Up Waste Disposal | 3,094.00 |
| 511100 | 13 | 2/28/2010 | Waste Disposal Exp WT | JR | 30059984 | Periodic Waste Disposal Accrua | 4,167.00 |
| 511200 | 13 | 2/28/2010 | Amort Waste Disp Exp | JR | 30059991 | Amortize Waste Disposal KY Riv | 7,692.79 |
| 515100 | 12 | 2/28/2010 | Purch Power P | JE |  | Power Accrual | -3,112.17 |
| 515100 | 14 | 2/28/2010 | Purch Power TD | JE |  | Power Accrual | -2,863.14 |
| 515100 | 13 | 2/28/2010 | Purch Power WT | JE |  | Power Accrual | 18,422.93 |
| 515100 | 13 | 2/28/2010 | Purch Power WT | JE |  | Manual Power Accrual Adj Feb | -53,274.09 |
| 520100 | 14 | 2/28/2010 | M \& S Oper TD | JE |  | KY UNMAPPED PCARD ACCRUAL 0210 | -4,369.65 |
| 520100 | 16 | 2/28/2010 | M \& S Oper AG | JE |  | KY UNMAPPED PCARD ACCRUAL 0210 | -481.53 |
| 520100 | 13 | 2/28/2010 | M \& S Oper WT | JE |  | KY UNMAPPED PCARD ACCRUAL 0210 | 295.94 |
| 520100 | 14 | 2/28/2010 | M \& S Oper TD | JE |  | Acc for Good/Ser Rec not invoi | 701.00 |
| 532100 | 16 | 2/28/2010 | Contr Svc-Audit Fees Oper AG | JR |  | Amort PWC Audit Fee 09-10 | 8,849.58 |
| 533000 | 16 | 2/28/2010 | Contr Svc-Legal Oper AG | JE |  | Accrue for Unbilled Legal Fees | 5,146.65 |
| 533000 | 16 | 2/28/2010 | Contr Svc-Legal Oper AG | JR | 30059967 | King \& Spalding Legal Fees | 34.07 |
| 534600 | 16 | 2/28/2010 | Mmgt Fees-Corporate | JB | 30917270 |  | 284.54 |
| 534601 | 16 | 2/28/2010 | Mmgt Fees-External Affairs/Com | JB | 30917270 |  | 25,610.82 |
| 534602 | 16 | 2/28/2010 | Mmgt Fees-Finance | JB | 30917270 | CP | 84,522.42 |
| 534603 | 16 | 2/28/2010 | Mmgt Fees-Human Resources | JB | 30917270 | CP | 23,964.36 |
| 534604 | 16 | 2/28/2010 | Mmgt Fees-Legal | JB | 30917270 |  | 34,384.67 |
| 534605 | 16 | 2/28/2010 | Mmgt Fees-Operations Svcs | JB | 30917270 |  | 31,737.45 |
| 534606 | 16 | 2/28/2010 | Mmgt Fees-Property | JB | 30917270 | CP | 41,734.38 |
| 534607 | 16 | 2/28/2010 | Mmgt Fees-Business Development | JB | 30917270 |  | 15,869.33 |
| 534608 | 16 | 2/28/2010 | Mmgt Fees-Bus Transformation | JB | 30917270 | CP | . 01 |
| 534609 | 16 | 2/28/2010 | Mmgt Fees-Audit | JB | 30917270 |  | 4,559.07 |
| 534610 | 16 | 2/28/2010 | Mmgt Fees-Regulatory | JB | 30917270 | CP | 1,845.08 |
| 534611 | 16 | 2/28/2010 | Mmgt Fees-Inv Relations | JB | 30917270 |  | 1,746.65 |
| 534615 | 16 | 2/28/2010 | SSC-Shrd Bus Srv Fees | JB | 30917270 |  | 48,008.09 |
| 534625 | 16 | 2/28/2010 | CSC-Shrd Bus Srv Fees | JB | 30917270 | CP | 128,898.44 |
| 534635 | 16 | 2/28/2010 | ITS-Shrd Bus Srv Fees | JB | 30917270 |  | 134,075.17 |
| 534645 | 16 | 2/28/2010 | Procure-Shrd Bus Srv Fees | JB | 30917270 |  | 7,236.26 |
| 534655 | 16 | 2/28/2010 | Lab-Shrd Bus Srv Fees | JB | 30917270 |  | 14,352.90 |
| 534665 | 16 | 2/28/2010 | BSC-Shrd Bus Srv Fees | JB | 30917270 |  | 3,726.11 |
| 534701 | 16 | 2/28/2010 | Mmgt Fees-Regulated Operations | JB | 30917270 |  | 87,310.68 |
| 535000 | 15 | 2/28/2010 | Contr Svc-Other Oper CA | JE |  | February 2010 Calence | 278.01 |
| 535000 | 13 | 2/28/2010 | Contr Svc-Other Oper WT | JE | 600 | Acc for Good/Ser Rec not invoi | -2,766.00 |
| 535000 | 14 | 2/28/2010 | Contr Svc-Other Oper TD | JE | 600 | Acc for Good/Ser Rec not invoi | -960.00 |
| 535000 | 16 | 2/28/2010 | Contr Svc-Other Oper AG | JE | 600 | Acc for Good/Ser Rec not invoi | -120.00 |
| 535000 | 16 | 2/28/2010 | Contr Svc-Other Oper AG | JE | 30224 | Legal Westlaw Feb accrual | 603.00 |
| 535000 | 13 | 2/28/2010 | Contr Svc-Other Oper WT | JE | 120207 | Reclass Martins Sanitation | 1,375.00 |
| 535000 | 13 | 2/28/2010 | Contr Svc-Other Oper WT | JE | 120216 | True Up Prepaid Other 02.10 | -1,415.84 |
| 535000 | 13 | 2/28/2010 | Contr Svc-Other Oper WT | JR | 30059979 | Hach Co. - Maintenance | 3,268.57 |
| 535000 | 15 | 2/28/2010 | Contr Svc-Other Oper CA | JE | 30913871 | Re-Accrue Tactival Study | 278.01 |
| 535001 | 14 | 2/28/2010 | Contr Svc-Temp Empl Oper TD | JE | 30917266 | FASTR - ALLOCATION KY_ALLEXP2 | -803.39 |
| 535001 | 13 | 2/28/2010 | Contr Svc-Temp Empl Oper WT | JE | 30917266 | FASTR - ALLOCATION KY_ALLEXP2 | 610.93 |
| 541400 | 16 | 2/28/2010 | Rents-Equipment Oper AG | JR | 30059976 | Dyntek Services | 243.12 |
| 550000 | 16 | 2/28/2010 | Trans Oper AG | JE | 130 | KY UNMAPPED PCARD ACCRUAL 0210 | -198.15 |
| 550000 | 14 | 2/28/2010 | Trans Oper TD | JE | 130 | KY UNMAPPED PCARD ACCRUAL 0210 | 5.00 |
| 550002 | 16 | 2/28/2010 | Trans Oper AG Lease Fuel | JE |  | 02 ARI Accrual | -1,232.88 |
| 550003 | 16 | 2/28/2010 | Trans Oper AG Lease Maint | JE |  | 02 ARI Accrual | -3,268.06 |
| 556000 | 16 | 2/28/2010 | Ins Vehicle Oper AG | JR |  | PPI Auto Liability | 2,918.16 |
| 557000 | 16 | 2/28/2010 | Ins Gen Liab Oper AG | JR |  | Amort Fiduciary PPI | 205.86 |
| 557000 | 16 | 2/28/2010 | Ins Gen Liab Oper AG | JR |  | Amort Emply Pract PPI | 197.77 |
| 557000 | 16 | 2/28/2010 | Ins Gen Liab Oper AG | JR |  | Amort Lawyers PPI | 134.34 |
| 557000 | 16 | 2/28/2010 | Ins Gen Liab Oper AG | JR | 109 | PPI Directors \& Officers | 1,025.03 |
| 557000 | 16 | 2/28/2010 | Ins Gen Liab Oper AG | JR |  | PPI General Liability | 22,286.93 |
| 557000 | 16 | 2/28/2010 | Ins Gen Liab Oper AG | JR | 113 | Excess Liab Marsh NY | 4,129.26 |
| 557000 | 16 | 2/28/2010 | Ins Gen Liab Oper AG | JR |  | Excess Liab Marsh Bermuda | 1,498.13 |
| 557000 | 16 | 2/28/2010 | Ins Gen Liab Oper AG | JR | 119 | Excess Liab Marsh UK | 1,737.10 |
| 558000 | 16 | 2/28/2010 | Ins Work Comp AG | JR |  | Workers Comp | 12,608.21 |
| 559000 | 16 | 2/28/2010 | Ins Other Oper AG | JR |  | Amort Travel PPI | 8.16 |
| 559000 | 16 | 2/28/2010 | Ins Other Oper AG | JR | 103 | Amort Crime PPI | 58.76 |
| 559000 | 16 | 2/28/2010 | Ins Other Oper AG | JR |  | PPI Liab Consult Fee Marsh | 415.93 |
| 559000 | 16 | 2/28/2010 | Ins Other Oper AG | JR |  | Amort Property PPI | 10,421.16 |
| 559000 | 16 | 2/28/2010 | Ins Other Oper AG | JE |  | Kidnap \& Ransom PPI Exp | 97.16 |
| 559000 | 16 | 2/28/2010 | Ins Other Oper AG | JE |  | Exp PPI Spec Cont Risk | 291.48 |




# KENTUCKY-AMERICAN WATER COMPANY <br> CASE NO. 2010-00036 <br> COMMISSION STAFF'S FIRST REQUEST FOR INFORMATION 

Witness: Michael Miller
29. a. Provide a copy of Kentucky-American’s 1989 service contract with the American Water Works Service Company.
b. State whether the 1989 service contract, provided in response to Item 29(a), has been modified, amended, or replaced.
c. If the 1989 service contract has been modified, amended, or replaced, provide a complete copy of the current service contract and identify the areas in that contract that differ from the 1989 service contract.

## Response:

a. See attached.
b. The 1989 Service Company Contract has not been modified.
c. Not applicable.

For the electronic version, please refer to KAW_R_PSCDR1\#29_031610.pdf.

## AGREEMENT

Agreement dated January 1, 1989, between AMERICAN WATER WORKS SERVICE COMPANY, INC., a Delaware corporation (hereinafter "Service Company"), and KENTUCKY-AMERICAN WATER COMPANY, a Kentucky corporation (hereinafter "Water Company").

The background of this Agreement is that:

1. Both Service Company and Water Company are subsidiaries of American Water Works Company, Inc., a Delaware corporation (hereinafter "American").
2. Water Company has been organized for and is presently engaged in the business of providing potable water as a public utility in the State of Kentucky.
3. Service Company maintains an organization whose officers and employees are familiar with all facets of the water utility business, including the development, business and property of Water Company, and are experienced in the efficient management, financing, accounting and operation of water utility properties and the extension and improvement thereof. The officers and employees of Service Company are qualified to aid, assist and advise Water Company in its business operations through the services to be performed under this Agreement.
4. Service Company has provided administrative and operating services to Water Company for many years, the past 17 years pursuant to an agreement dated January 1,
5. Because Water Company is of the opinion that it cannot obtain the same quality and diversification of services on a comparable economic basis elsewhere, it proposes to enter into a new agreement with Service Company more specifically defining the types of services available to it.
6. Service Company has entered or proposes to enter into agreements similar to this agreement with other affiliated water companies (hereinafter collectively "Water Companies").
7. The services to be rendered under this agreement are to be rendered by Service Company to Water Companies at their cost to Service Company, as hereinafter provided.

NOW, THEREFORE, in consideration of the premises and mutual agreements herein contained, the Water Company and Service Company agree that:

## ARTICLE 1. PERSONNEL AND SERVICES TO BE PROVIDED

1.1 During the term of this agreement and upon the terms and conditions hereinafter set forth, Service Company shall provide corporate guidance for Water Company. In addition to the guidance provided by the officers and employees of Service Company through the coordination of functional activities for all subsidiaries of American, the officers and employees of Service Company shall furnish and Water Company shall purchase from Service Company, the following services: Accounting, Administration, Communication, Corporate Secretarial, Engineering, Financial, Human Resources,

Information Systems, Operation, Rates and Revenue, Risk Management and Water Quality, together with such other services as Water Company and Service Company may agree; provided, however, that Water Company may perform the service with its own personnel or engage another company or person to provide those services on its behalf. Service Company by mutual consent may engage another Company or person to provide such services on its behalf.
1.2 Service Company shall employ qualified officers and employees and those persons shall be available for election by Water Company to serve as officers of Water Company.
1.3 Without limitation, services to be provided by the Service Company shall be rendered as follows:
A. Accounting: Service Company shall assist in the preparation and implementation of accounting methods and procedures to determine that they conform fully to the requirements, rules and regulations of governmental authorities having jurisdiction and review Water Company's monthly financial reports, annual reports and other reports to stockholders and to any governmental authorities. It shall advise and assist in the establishment and maintenance of current record keeping techniques; review accounting procedures, methods and forms; and evaluate systems of internal control for receipt and disbursement of funds, materials and supplies, and other assets. Service Company shall maintain accounting records as required by Water Company. When appropriate, Service Company shall cooperate and consult with Water Company's independent certified public accountants.

Service Company shall assist in the preparation of operating and construction budgets and monitor the control over such budgets by comparing experienced costs to the projections.

Service Company shall prepare or assist in the preparation of federal, state and local tax returns for and to the extent required by Water Company.
B. Administration: Service Company shall make qualified employees available to perform or assist in the performance of Water Company's corporate activities. Those employees shall keep themselves informed on all aspects of Water Company's operations and shall regularly visit Water Company's facilities. They shall make recommendations to Water Company for operating expenditures and for additions to and improvements of property, plant and equipment. They shall keep abreast of economic, regulatory, governmental and operational developments and conditions that may affect Water Company; and advise Water Company of any such developments and conditions to the extent that they may be important to Water Company. Service Company shall provide an internal audit staff for periodic audits of accounts, records, policies and procedures of Water Company and submit reports thereon.
C. Communications: Service Company shall recommend procedures to promote satisfactory relations with employees, customers, communities and the general public and assist in the preparation of communication materials, (including press releases, brochures, audio visual presentations and speeches) plant tours, public exhibits and displays and other related services to inform the public.
D. Corporate Secretarial: Service Company shall maintain, in such places and manner as may be required by applicable law, documents of Water Company, such as minute books, charters, by-laws, contracts, deeds and other corporate records, and shall administer an orderly program of records retention. It shall maintain, or arrange for the maintenance of, records of stockholders of Water Company, prepare or arrange for the preparation of stock certificates, perform duties relating to the transfer of stock and perform other corporate secretarial functions as required including preparation of notices of stockholder and director meetings and the minutes thereof.

Service Company shall review and may assist in the preparation of documents and reports required by Water Company such as deeds, easements, contracts, charters, franchises, trust indentures and regulatory reports and filings.
E. Engineering: Service Company shall advise, and provide engineering services to assist Water Company in planning for, operating, maintaining and constructing its facilities.

It shall conduct distribution system surveys and hydraulic analyses and prepare or review maps, charts, operating statistics, reports and other pertinent data.

It shall assist Water Company in the proper maintenance and protection of Water Company properties by periodic inspection of its structures, tanks, reservoirs, dams, wells and electrical and mechanical equipment.

The engineering services provided by Service Company shall also include the conduct of field investigations as necessary to
obtain engineering information and, when required, the preparation of studies, reports, designs, drawings, cost estimates, specifications, and contracts for the construction of additions to or improvements of Water Company's source of supply, treatment plant, pumping stations, distribution system, and such other facilities as Water Company may request. Service Company shall provide a Materials Management Program to arrange for the purchase of equipment, materials, and supplies in volume on a basis advantageous to Water Company and assist in the evaluation of new and existing products and application procedures.
F. Financial: Service Company shall assist in the development and implementation of financing programs for Water Company, including the furnishing of advice from time to time on securities market conditions and the form and timing of financing; advise concerning arrangements for the sale of its securities; and assist in the preparation of necessary papers, documents, registration statements, prospectuses, petitions, applications and declarations. It shall prepare reports to be filed with, and reply to inquiries made by, security holders and bond and mortgage trustees.

Service Company shall assist Water Company in cash management including arrangements for bank credit lines, establishment of collection policies, and development of temporary investment programs.

Service Company shall provide assistance to Water Company in the preparation of all financial reports.
G. Human Resources: Service Company shall assist in obtaining qualified personnel for Water Company; in establishing appropriate rates of pay for those employees; and in negotiating with bargaining units representing Water Company employees. It shall carry out training programs for the development of personnel and advise and assist Water Company regarding personnel. It shall also advise and assist Water Company in regard to group employee insurance, pension and benefit plans and in the drafting or revising of those plans when required. It will keep Water Company apprised of all employment laws and develop procedures and controls to assure compliance.
H. Information Systems: Service Company shall make available to Water Company electronic data processing services. Those services shall include customer billing and accounting, preparation of financial statements and other reports including those required by Federal and State agencies.
I. Operation: Service Company shall develop and assist in the implementation of operating procedures to promote the efficient and economic operation of Water Company. Periodic operational reviews will be performed by Service Company personnel and any deviations from adopted procedures will be reported to Water Company.
J. Rates and Revenue: Service Company personnel shall make recommendations for changes in rates, rules and regulations and shall assist Water Company in the conduct of proceedings before, and in its compliance with the rulings of, regulatory bodies having jurisdiction over its operation. These personnel
shall keep abreast of economic and regulatory developments and conditions that may affect Water Company; and advise Water Company of any such developments and conditions to the extent that they may be important to Water Company. Rates and Revenue personnel shall assist in the preparation of rate filings or applications and the supporting documents and exhibits requested or required by the Water Company and their respective regulatory commissions. Service Company shall also provide qualified personnel to testify on Water Company's behalf as required during any regulatory proceedings.
K. Risk Management: Service Company shall provide a Risk Management Program to review the exposures to accidental loss of the Water Company, recommend efficient methods of protection either through the purchase of insurance, self-insurance or other risk management techniques and arrange for the purchase of insurance coverage. It shall also supervise investigation procedures; review claims; and negotiate and assist in, and evaluate proposals for, settlement at the request of Water Company. It shall assist in the establishment of safety and security programs to avoid or minimize risk and loss.
L. Water Quality: Service Company shall assist Water Company to comply with standards of governmental agencies and establish and attain water quality objectives of the Water Company. It shall assist in providing design criteria for processes, coordinating with public agencies, developing approaches and solutions to water quality problems, and providing
technical assistance and general direction for Water Company personnel.

It shall also provide laboratory services for programmed analyses as required by drinking water regulations, and special analyses as required by Water Company.

## ARTICLE II. PAYMENT FOR SERVICES

2.1 In consideration for the services to be rendered by Service Company as hereinabove provided, Water Company agrees to pay to Service Company the cost thereof determined as provided in this Article II and in Article III.
2.2 All costs of service rendered by Service Company personnel for Water Company or in common with other Water Companies shall be charged to Water Company based on actual time spent by those personnel as reflected in their daily time sheets or other mutually acceptable means of determination.
2.3 All costs of Service Company incurred in connection with services rendered by Service Company which can be identified and related exclusively to Water Company, shall be charged directly to Water Company.
2.4 All costs incurred in rendering services to Water Company in common with similar services to other Water Companies which cannot be identified and related exclusively to services rendered to a particular Water Company, shall be allocated among all Water Companies so served, or, in the case of costs incurred with respect to services rendered to a particular group of Water

Companies, among the members of such group, based on the number of customers served at the immediately preceding calendar year end.
2.5 Cost for support personnel (secretaries, clerical personnel, clerks, messengers, telephone operators, mail clerks, and other incidental support personnel of the Service Company) as well as the cost of lease payments, depreciation, utilities and other costs associated with leasing office space and equipment by Service Company shall be allocated among the Water Companies on the basis of the proportion of the aggregate cost allocated under Sections 2.3 and 2.4 .

## ARTICLE III. ALLOWANCE FOR OVERHEAD

3.1 In determining the cost to be assessed by Service Company for the rendering of services to Water Company as herein provided, there shall be added to the salaries of all officers and employees for whose services charges are to be made, a percentage sufficient to cover the general overhead of Service Company, as defined below, properly allocable thereto. Such percentage shall be calculated each month and shall be the ratio of the total general overhead of the Service Company for the month to the total salaries of the employees for whose service charges are to be made to the Water Companies. No general overhead of Service Company shall be added to costs incurred for services of non-affiliated consultants employed by Service Company.
3.2 The term "general overhead" shall include:
(a) pension and insurance premiums paid for the benefit of Service Company employees,
(b) legal and other fees for services rendered to the Service Company,
(c) taxes,
(d) other general office supplies and other similar expenses, and
(e) interest on working capital.

ARTICLE IV. BILLING PROCEDURES AND BOOKS AND RECORDS
4.1 As soon as practicable after the last day of each month, Service Company shall render a bill to Water Company for all amounts due from Water Company for services and expenses for such month plus an amount equal to the estimated cost of such services and expenses for the current month, all computed pursuant to Articles II and III. Such bill shall be in sufficient detail to show separately the charge for each class of service rendered. All amounts so billed shall reflect the credit for payments made on the estimated portion of the prior bill and shall be paid by Water Company within a reasonable time after receipt of the bill therefore.
4.2 Service Company agrees to keep its books and records available at all times for inspection by representatives of Water Company or by regulatory bodies having jurisdiction over Water Company.
4.3 Service Company shall at any time, upon request of Water Company, furnish any and all information required by Water Company with respect to the services rendered by Service Company
hereunder, the costs thereof, and the allocation of such costs among Water Companies.

## ARTICLE V. OTHER AGREEMENTS

5.1 It is understood by Water Company that Service Company has entered or may enter into similar agreements with other Water Companies that are affiliated with American to which similar services are to be furnished. Service Company will not enter into agreements to perform similar services for other companies on terms more favorable than those provided herein.
5.2 It is understood by Water Company that Service Company has entered or may enter into an agreement or agreements with American and certain other companies not engaged in the water or sewer service business to which limited services are to be furnished; Water Company consents to such additional agreements, provided, however, that no part of the cost of furnishing such services will be charged to Water Company.

## ARTICLE VI. TERM OF AGREEMENT

This agreement shall become effective as of the later of (a) the date first mentioned above or (b) the date the parties receive the last of any necessary approvals of governmental regulatory agencies having jurisdiction in the premises. Upon becoming effective, this agreement shall be the sole agreement between the parties concerning the subject matter hereof and shall supersede all prior agreements, written or oral, including the agreement dated January 1, 1971, which shall terminate on the date this
agreement becomes effective. This agreement shall continue in full force and effect until terminated by either of the parties hereto giving the other party hereto ninety day's notice in writing; provided, however, that this agreement shall terminate as of the date Water Company or Service Company ceases to be an affiliate of American.

IN WITNESS WHEREOF, Service Company and Water Company have caused this agreement to be signed in their respective corporate names by their respective Presidents or Vice Presidents, and impressed with their respective corporate seals attested by their respective Secretaries or Assistant Secretaries, all as of the day and year first above written.

ATTEST:


AMERICAN WATER WORKS SERVICE COMPANY, INC.


ATTEST:
KENTUCKY-AMERICAN WATER COMPANY


# KENTUCKY-AMERICAN WATER COMPANY <br> CASE NO. 2010-00036 <br> COMMISSION STAFF'S FIRST REQUEST FOR INFORMATION 

Witness: Michael A. Miller
30. a. Provide a copy of all other service agreements and contracts that KentuckyAmerican has with affiliate companies.
b. Describe in detail the pricing policies of Kentucky-American and its affiliates with regard to affiliate company transactions.

## Response:

a. Please see the attached documents.
b. $\quad$ American Water Capital Corporation - Costs of AWCC are billed as outlined in the Services Agreement attached to part (a) above between KAWC and AWCC approved by the Commission. As outlined in the Service Agreement, KAWC will pay AWCC a portion of the costs and appropriate overhead incurred by AWCC in providing services as follows. The cost incurred by AWCC in connection with its bank credit lines and short-term public borrowing will be divided amount the CoParticipants in proportion to the maximum principal amount that each CoParticipant requests be made available to it during the course of a year. The costs incurred by AWWC in connection with each long-term borrowing by AWCC will be divided among each Co-Participant in proportion to the principal amount of that borrowing that is loaned to that Co-Participant. AWCC's overhead will be allocated among the Co-Participants in the same proportion as each CoParticipant's long-term and maximum, requested short-term borrowings and investments in a calendar year bear to all the long and maximum short-term borrowings and investments by all Co-Participants during the same year. Also see the responses to KAW_R-PSDR1\#31_031610.

AAET, L.P. - KAWC obtains activated granular carbon from AAET per the Consolidated GAC Reactivation and Sale Agreement provided in response to part
(a) above. The payment and pricing terms of the agreement are contained in Sections (B) and (C) of the Agreement.

American Water Works Service Company- AWWSC leases space from KAWC for office space for the Field Resource Coordination Center (FRCC). The payment and pricing terms are contained in Section 3 of the Lease. Also see the response to KAW_R_PSC1\#32_031610.

For the electronic version, refer to KAW_R_PSCDR1\#30_031610.pdf.

## FINANCIAL SERVICES AGREEMENT

THIS AGREEMENT，dated as of June 15，2000，by and between Kentucky－ Amencan Water Company（the＂Company＂）and American Water Capital Corp．（＂AWCC＂）．

BACKGROUND

The Company currently performs its own financial services．
However，the Company has determined that it can obtain these services more efficiently through the consolidation of certain necessary management and staff functions with those performed for other entities that may enter into agreement with AWCC substantially similar to this one（＂Co－Participants＂）．

AWCC is dedicated to performing such consolidated functions．
Accordingly，the parties have determined to enter into this Agreement for the provision of financial services by AWCC to the Company and for the proper determination and allocation of the costs of providing such services．

Therefore，the parties agree as follows：

## AGREEMENT

1．Services．AWCC will provide，either directly or through arrangements with thito parties for the benefit of the Company，such financial services as the Company and AWCC may from time to time agree，including but not limited to those more fully described in Appendix I attached to this Agreement．

2．Costs．In consideration of the provision of the services contemplated by paragraph 1，the Company agrees to pay AWCC a portion of the costs and appropriate overhead incurred by AWCC in providing those services，as follows．The costs incurred by AWCC in connection with its bank credit lines and short－term public borrowings will be divided among the Co－Participants in proportion to the maximum principal amount that each Co－Participant requests be made available to it during the course of a year．The costs incurred by AWCC in connection with each long－term bonowing by AWCC will be divided among each Co－Participant in proportion to the principal amount of that borrowing that is loaned to that Co－Participant． AWCC＇s overhead will be allocated among the Co－Participants in the same proportion as each Co－Participant＇s long－term and maximum，requested short－term borrowings and investments in a calendar year bear to all of the long and maximum short－tem borrowings and investments by all Co－Participants during the same year．

3．Statements．AWCC will prepare and deliver to the Company monthly statements of the services provided by AWCC and amounts payable to AWCC，giving effect to
all the provisions of this Agreement. The Company shall pay the net amount shown on its statement within thinty (30) days after the billing date.
4. Inspection. Upon reasonable notice, AWCC will make available to the Company for its inspection AWCC's books, records, bills, accounts and any other documents which describe or support the costs allocated to the Company under this Agreement.
5. Obligations Not Joint. AWCC and the Company expressly agree: (a) that the obligations of the Company and each Co-Participant to AWCC are several and not joint; (b) that the Company will not be responsible to any Co-Participant, to AWCC or to any assignee or creditor of AWCC for any payment in excess of payments due by the Company to AWCC under this Agreement or a Note in the form attached to this Agreement; and (c) that no Co-Participant will be responsible to the Company, to any other Co-Participant, to AWCC or to any assignee or creditor of AWCC for any payment in excess of payments due by-that Co-Participant to AWCC under any agreement substantially similar to this Agreement or under any Note attached to that other agreement. AWCC covenants and agrees that it will require, as a condition to its entering into any such other agreement with a Co-Participant, that such other agreement contains the same provision as that contained in the immediately preceding sentence.
6. Notes. The Company's borrowings under this Agreement will be evidenced by one or more promissory notes in the form of Exhibit A or Exhibit B attached to this Agreement.
7. Non-Exclusjvity. Nothing in this Agreement prohibits or restricts the Company from borrowing from third parties, or obtaining services described in this Agreement from third parties, whenever and on whatever terms it deems appropriate.
8. Effectiveness. This Agreement shall be effective as of June 15, 2000, provided that, if prior approval by the regulatory commission of any jurisdiction is required before this Agreement may become effective as to the Company, or before AWCC may provide a particular service hereunder to the Company, this Agreement shall not be effective as to the Company or as to that service, as the case may be, unless and until the required approval has been obtained. Unless and until this Agreement becomes effective as to the Company in whole or in part, the Company shall not be entitled to the benefits of, nor shall it have any rights or duties under, this Agreement. This Agreement may be amended or rescinded only by written instrument signed by the Company and AWCC.
9. Termination. The Company may terminate its participation in this Agreement by giving ten (10) days prior written notice of such termination to AWCC; and (b) AWCC may terminate this Agreement by giving ninety ( 90 ) days prior witten notice of such termination to the Company. Termination of this Agreement will not affect: (a) the Company's obligations under any Promissory Notes; (b) any party's obligations with respect to any amounts owing under Sections 2 and 3 of this Agreement (including such amounts attributable to obligations of any terminating party under any Promissory Notes that remain outstanding after this Agreement is terminated as to that party); or (c) AWCC's obligations to repay any investments made by a Company pursuant to Appendix I.

10．Copies．This Agreement may be executed by the parties in one or more copies and each executed copy shall be considered an original．

In witness of the foregoing，each of the Company and AWCC has caused its respective corporate seal to be affixed to this Agreement and has caused this Agreement to be signed on its behalf by its duly authorized officers．

## ATTEST：



## ATTEST：



KENTUCKY－AMERICAN WATER COMPANY


AMERICAN WATER CAPITAL CORP．
By：Nappe Qhelentt

## APPENDIXI

## DESCRIPTION OF FINANCIAL SERVICES

Set forth below is a list of the services which AWCC agrees to provide to the Company upon its request pursuant to the Agreement to which this Appendix is attached．

1．Short－Term Loans．AWCC will provide Short－Term Loans to the Company pursuant to the terms set forth in the promissory notes to be issued by the Company to AWCC，each substantially in the form attached to this Agreement as Exhibit A．

2．Long－Term Bonowings．AWCC will provide loans other than Short－Term Loans to the Company pursuant to the terms set forth in the promissory notes to be issued by the Company to AWCC，each substantially in the form attached hereto as Exhibit B．

3．Cash Management．Cash not required by the Company to pay its daily disbursements or to pay when due the principal of and interest on，the Company＇s borrowings from AWCC other than Short－Term Loans will be used by AWCC first to reduce the outstanding principal balance of the Company＇s Short－Term Loans owing to AWCC and any excess will be deemed to be invested with AWCC and will eam a daily rate of interest that is equal to the interest income earned by AWCC on those funds．Upon the request of that Company，AWCC shall execute one or more promissory notes in favor of the Company，in form and substance substantially similar to the Promissory Note attached as Exhibit A to the Agreement as evidence of such investment．

EXHIBIT A PROMISSORY NOTE FOR SHORT-TERM LOANS

FOR VALUE RECEIVED, [NAME OF COMPANY], a corporation (herein "Borrower") hereby promises to pay ON DEMAND to the order of American Water Capital Corp., a Delaware corporation ("Lender"), in same day funds at its offices at Voorhees, New Jersey or such other place as Lender may from time to time designate, the principal sum of $\qquad$ dollars (\$ $\qquad$ ) (the "Maximum Principal Sum"), or such lesser amount as shall equal the aggregate unpaid principal amount of the loans made by Lender to Bonower (other than loans evidenced by a promissory note under which the principal amount is due and payable in one or more scheduled installments more than one year after the date of its issue), together with interest thereon from the date hereof until paid in full. Interest will be charged on the unpaid outstanding principal balance of this Note at a rate per annum equal to Lender's actual cost of funds to make such loan, such rate to change as Lender's actual cost of funds changes. Interest on borrowings shall be due and payable on the first business day of each month, commencing with the first business day of the month after the month in which this Note is executed. In the absence of manifest error, the records maintained by Lender of the amount and term, if any, of borrowings hereunder shall be deemed conclusive.

Bonower may bonow, repay and rebonow hereunder in amounts which do not, in the aggregate outstarding at any time, exceed the Maximum Principal Sum.

The occurence of one or more of any of the following shall constitute an event of default hereunder:
(a) Borrower shall fail to make any payment of principal and/or interest due hereunder or under any other promissory note between Lender and Borrower within five business days after the same shall become due and payable, whether at maturity or by acceleration or otherwise;
(b) Borrower shall apply for or consent to the appointment of a receiver, trustee or liquidator of itself or any of its property, admit in writing its inability to pay its debts as they mature, make a general assigument for the benefit of creditors, be adjudicated a banknupt or insolvent or file a voluntary petition in bankruptcy or a petition or an answer seeking reorganization or an arrangement with creditors or to take advantage of any bankruptcy, reorganization, insolvency, readjustment of debt, dissolution or liquidation of law or statute, or an answer admitting the material allegations of a petition filed against it in any proceeding under any such law, or if action shall be taken by Borrower for the purposes of effecting any of the foregoing; or
(c) Any order, judgment or decree shall be entered by any court of competent jurisdiction, approving a petition seeking reorganization of Borrower or all or a substantial part of the assets of Borsower, or appointing a receiver, trustee or liquidator of

Borrower or any of its property, and such order, judgment or decree shall continue unstayed and in effect for any period of sixty ( 60 ) days.

Upon the occurrence of any event of default, the entire unpaid principal sum hereunder plus all interest accrued thereon plus all other sums due and payable to Lender hereunder shall, at the option of Lender, become due and payable immediately. In addition to the foregoing, upon the occurrence of any event of default, Lender may forthwith exercise singly, concurrently, successively or otherwise any and all rights and remedies available to Lender by law, equity, statute or otherwise.

Borrower hereby waivers presentment, demand, notice of nonpayment, protest, notice of protest or other notice of dishonor in cornection with any default in the payment of, or any enforcement of the payment of, all amounts due hereunder. To the extent permitted by law, Bonrower waives the right to any stay of execution and the benefit of all exemption laws now or hereafter in effect.

Following the occurence of any event of default, Borrower will pay upon demand all costs and expenses (including all amounts paid to attomeys, accountants, and other advisors employed by Lender), incurred by Lender in the exercise of any of its rights,remedies or powers hereunder with respect to such event of default, and any amount thereof not paid. promplly following demand therefor shall be added to the principal sum hereunder and will bear interest at the contract rate set forth herein from the date of such demand until paid in full. In connection with and as part of the foregoing, in the event that this. Note is placed in the hands of an attomey for the collection of any sum payable hereunder, Bornower agrees to pay reasonable attomeys' fees for the collection of the amount being claimed hereunder, as well as all costs, disbursements and allowances provided by law.

If for any reason one or more of the provisions of this Note of their application to any entity or circumstances shall be held to be invalid, illegal or unenforceable in any respect or to any extent, such provisions shall nevertheless remain valid, legal and enforceable in all such other respects and to such extent as may be permissible. In addition, any such invalidity, illegality or unenforceability shall not affect any other provisions of this Note, but this Note shall be construed as if such invalid, illegal or unenforceable provision had never been contained herein.

This Note inures to the benefit of Lender and binds Bonower and Lender's and Borower's respective successors and assigns, and the words "Lender" and "Borrower" whenever occurring herein shall be deemed and construed to include such respective successors and assigns.

This Promissory Note is one of the promissory notes referred to in the Financial Services Agreement dated as of June 15, 2000 between Borrower and Lender to which reference is made for a statement of additional rights and obligations of the parties hereto.

IN WITNESS WHEREOF, Borrower has executed this Promissory Note the day and year first written above.

## [BORROWER]

By:
Name and Title:

# EXHIBIT B <br> PROMISSORY NOTE FOR LONG-TERM BORROWINGS 

FOR VALUE RECENED, [NAME OF COMPANY], a corporation (herein "Bonower") hereby promises to pay to the order of American Water Capital Corp., a Delaware corporation ("Lender"), in same day funds at its offices at or such other place as Lender may from time to time designate, the principal sum of dollars (\$ $\qquad$ ,), together with interest thereon from the date hereof until paid in full. Interest shall be charged on the unpaid outstanding principal balance hereof at a rate per annum equal to the rate paid and to be paid by Lender with respect to the borrowings it made in order to provide funds to Bonower hereunder. Interest on bornowings shall be due and payable in immediately available funds on the same business day on which the Lender must pay interest on the borrowings it made in order to provide funds to the Borrower bereunder. The principal amount hereof shall be due and payable hereunder at such times and in such amounts and in such installments hereunder as the Lender must pay with respect to the borrowings it made in order to provide funds to the Bonower hereunder. Lender has provided Borrower with a copy of the documentation evidencing the borrowings made by Lender in order to provide funds to Borrower hereunder. In the absence of manifest error, such documentation and the records maintained by Lender of the amount and term, if any, of borrowings hereunder shall be deemed conclusive.

The occurrence of one or more of any of the following shall constitute an event of default hereunder:
(a) Borrower shall fail to make any payment of principal and/or interest due hereunder or under any other promissory note between Lender and Borrower within five business days after the same shall become due and payable, whether at maturity or by acceleration or otherwise;
(b) Borrower shall apply for or consent to the appointment of a receiver, trustee or liquidator of itself or any of its property, admit in writing its inability to pay its debts as they mature, make a general assignment for the benefit of creditors, be adjudicated a bankrupt or insolvent or file a voluntary petition in bankruptcy or a petition or an answer seeking reorganization or an artangement with creditors or to take advantage of any bankruptcy, reorganization, insolvency, readjustment of debt, dissolution or liquidation of law or statute, or an answer admitting the material allegations of a petition filed against it in any proceeding under any such law, or if action shall be taken by Bonower for the purposes of effecting any of the foregoing; or
(c) Any order, judgment or decree shall be entered by any court of competent jurisdiction, approving a petition seeking reorganization of Borrower or all or a substantial part of the assets of Bonower, or appointing a receiver, trustee or liquidator of Borrower or any of its property, and such order, judgment or decree shall continue unstayed and in effect for any period of sixty (60) days.

Upon the occurrence of any event of default，the entire unpaid principal sum hereunder plus all interest accrued thereon plus all other sums due and payable to Lender hereunder shall，at the option of Lender，become due and payable immediately．In addition to the foregoing，upon the occurrence of any event of default，Lender may forthwith exercise singly，concurrenty，successively or otherwise any and all rights and remedies available to Lender by law，equity，statute or otherwise．

Borrower hereby waivers presentment，demand，notice of nompayment，protest， notice of protest or other notice of dishonor in connection with any default in the payment of，or any enforcement of the payment of，all amounts due hereunder．To the extent permitted by law， Borrower waives the right to any stay of execution and the benefit of all exemption laws now or hereafter in effect．

Following the occurrence of any event of defaul，Borrower will pay upon demand all costs and expenses（including all amounts paid to attorneys，accountants，and other advisors employed by Lender），incurred by Lender in the exercise of any of its rights，remedies or powers heseunder with respect to such event of default，and any amount thereof not paid promptly following demand therefor shall be added to the principal sum hereunder and will bear interest at the contract rate set forth herein from the date of such demand until paid in full．In connection with and as part of the foregoing，in the event that this Note is placed in the hands of an atiomey for the collection of any sum payable hereunder，Bonower agrees to pay reasonable attorneys＇fees for the collection of the amount being claimed hereunder，as well as all costs， disbursements and allowances provided by law．

If for any reason one or more of the provisions of this Note or their application to any entity or circumstances shall be held to be invalid，illegal or unenforceable in any respect or to any extent，such provisions shall nevertheless remain valid，legal and enforceable in all such other respects and to such extent as may be permissible．In addition，any such invalidity， illegality or unenforceability shall not affect any other provisions of this Note，but this Note shall be construed as if such invalid，illegal or unenforceable provision had never been contained herein．

This Note inures to the benefir of Lender and binds Borrower and Lender＇s and Borrower＇s respective successors and assigns，and the words＂Lender＂and＂Borrower＂ whenever occurring herein shall be deemed and construed to include such respective successors and assigns．

This Promissory Note is one of the promissory notes referred to in the Financial Services Agreement dated as of June 15，2000 between Borower and Lender to which reference is made for a statement of additional rights and obligations of Lender and Borrower．

IN WITNESS WHEREOF, Borrower has executed this Promissory Note the day and year first written above.

## [BORROWER]

By:
Name and Title:

## CONSOLIDATED

## GAC REACTIVATION AND SALE AGREEMENT

## KENTUCKY

This Consolidated GAC Reactivation and Sale Agreement ("Agreement") is made as of this $6^{\text {th }}$ day of May, 2009 ("Effective Date"), by and between AAET, L.P., a Delaware limited partnership, having its principal office at 1025 Laurel Oak Road, Voorhees, New Jersey 08043 ("ACS") and Kentucky American Water Company, a Kentucky corporation, having its principal office at 2300 Richmond Road, Lexington, Kentucky 40502 ("KAWC"). ACS and KAWC are individually referred to herein as a "Party" and collectively referred to herein as the "Parties".

## RECITALS

WHEREAS, KAWC owns and operates a water treatment plant in Lexington, Kentucky, that is commonly referred to as "Richmond Road" ("Plant"), which treats water for the purpose of taste and odor ("T\&O") control using, among other things, Granular Activated Carbon ("GAC") media; and

WHEREAS, ACS, informally known as "Carbon Services Group", owns and operates, and also contracts the use of, GAC custom reactivation facilities (collectively, "Facility"), which reactivate GAC to be used, among other things, by treatment plants in the potable water industry; and

WHEREAS, ACS and KAWC entered into multiple agreements for the provision of GAC, as more particularly set forth in Exhibit I, annexed hereto and incorporated herein (collectively, "Original Agreements"), which provided for GAC exchange and reactivation services, as well as the lease of reactivated GAC media ("Reactivated GAC") from ACS to KAWC for use in the Plants' filters, as more particularly set forth in Exhibit II, annexed hereto and incorporated herein (each, a "Filter" and collectively, "Filters"); and

WHEREAS, the Parties have determined that they wish to combine the work to be performed under the Original Agreements and any future related work into one consolidated agreement and convert the contracting arrangement between the Parties moving forward to provide for the sale of GAC rather than the lease thereof; and

WHEREAS, the Parties wish to ratify the Original Agreements and the actions of the Parties taken thereunder up to the Effective Date of this Agreement, revise the Original Agreements to be consolidated into this Agreement and amended and restated herein by reference, and have this Agreement serve to document all GAC sale, exchange and reactivation services by and between the Parties for the term set forth hereinbelow.

NOW, THEREFORE, in consideration of the mutual covenants contained herein, the adequacy of which is hereby acknowledged, and intending to be legally bound, the Parties hereto agree as follows:

## A. SERVICES AND PERFORMANCE REOUIREMENTS

1. ACS shall remove the spent GAC media that is located in each of the Filters ("Spent GAC") and reactivate it, replace it with virgin GAC media ("Virgin GAC"), or perform whatever other service requested by KAWC and agreed to by ACS, which it shall do in accordance with the specifications more particularly set forth in a separate task order related to each respective Filter (each, a "Task Order" and collectively, "Task Orders"), a model of which is attached hereto and incorporated herein as Exhibit I. Each Task Order entered into by and between the Parties is appended to this Agreement by reference and read in conjunction herewith as if set forth at length herein.
2. At least two (2) weeks prior to beginning the GAC media exchange operation, a duly authorized ACS representative shall speak with the applicable KAWC Production Lead or his/her designated representative to review the plans for the GAC media exchange operation, including dates and times work is to begin and to end, to determine if any special circumstances exist, and to determine if any special equipment is required.
3. At least one (1) week prior to beginning the GAC media exchange operation, ACS shall provide KAWC with a written schedule showing agreed-upon dates and times of the exchange. The KAWC Production Lead or his/her designated representative shall approve this schedule. The GAC media exchange operation shall commence promptly each day by the agreed-upon time and ACS shall provide labor in a manner that minimizes the amount of time the respective Filter is out of service. ACS shall reimburse any overtime incurred by KAWC personnel as a result of deviation from this schedule, except where such deviation is due to KAWC's request, fault, failure or negligence, or an Uncontrollable Circumstance (as defined hereinbelow). All scheduling of material, equipment, services, and GAC media deliveries shall be conducted by the ACS representative. Any
additional costs incurred as a result of scheduling conflicts, errors, or omissions shall be paid solely by ACS, except where such cost overage is due to KAWC's rescheduling, fault, failure or negligence, or an Uncontrollable Circumstance.
4. ACS is responsible for determining the level of the Spent GAC before removing it from each Filter, by measuring the media depth in place after backwashing ("Noted Level"). During the Spent GAC removal process, all GAC media is to be removed from the applicable Filters, with the exception of up to a maximum of one (1) inch, unless otherwise specified in the Task Order. ACS shall remove the Spent GAC in a manner so as not to disturb sand and gravel layers. Any sand replacement required as result of disturbance during GAC media removal shall be replaced by ACS, at its sole cost, except where such disturbance is due to KAWC's fault, failure or negligence, or an Uncontrollable Circumstance. All waste sand, GAC media, or other waste materials generated as a result of the exchange operation shall be removed and disposed of by ACS, at no additional cost to KAWC.
5. Where the Parties have agreed in a Task Order that ACS is to reactivate the Spent GAC as part of the exchange operations, $\operatorname{ACS}$ is responsible for transporting the Spent GAC to the Facility for reactivation; to be performed at its sole cost and expense. The reactivation of the GAC that will be placed in the Filters will be conducted in a Facility dedicated exclusively to the reactivation of GAC media from potable water treatment plants, and which shall not have accepted GAC media used for purposes other than potable water treatment. The Spent GAC prepared for reactivation shall be treated as a discreet and separate batch, and shall not contact, be mixed with, be blended with, or exposed to any reactivation products that have not originated from the same Plant. All equipment used for reactivation, transport and installation that will come in contact with the GAC media, including but not limited to GAC media storage and feed equipment, cooling, screening and handling equipment, shall be cleaned and thoroughly purged of any other material.
6. Where the Parties have agreed in the Task Order that ACS is to reactivate the Spent GAC as part of the exchange operations, ACS is responsible for (1) reactivating the Spent GAC at the Facility; (2) custom-blending the Reactivated GAC with either or both of Virgin GAC and GAC media derived from the Plant that ACS is holding in storage (together, they are the "Custom-Blend GAC Media"), as is needed in the sole determination of ACS; (3) sampling the Reactivated GAC in accordance with the parameters set forth in the respective Task Order; (4) ensuring that the test results meet the standards set forth in the respective Task Order before returning
the Reactivated GAC to the Filter; and (5) providing KAWC with a copy of the analytical data from the sampling. The Parties understand and agree that the Reactivated GAC that is returned to the Filters following the exchange process may contain Custom-Blend GAC Media, and KAWC will assume all rights and title to, and interest in, the Custom-Blend GAC Media included in the Reactivated GAC upon KAWC making final payment of the consideration as more particularly set forth in the respective Task Order. Notwithstanding the above, ACS shall retain ownership of and hold all rights and title to, and interest in, all residual GAC media remaining following reactivation, as well as any GAC media that ACS removes from the Reactivated GAC during the exchange process for the purpose of creating custom-blended Reactivated GAC that meets the parameters set forth in the respective Task Order.
7. ACS will use only NSF-approved bituminous Virgin GAC for supply of Virgin GAC, creating Custom-Blend GAC Media, and for makeup purposes if the Reactivated GAC returned to the Filter is below the Noted Level, as more particularly set forth below. The supplier of the Virgin GAC shall have provided Virgin GAC media to at least ten (10) water treatment plants of similar source as the Plant in which the respective Filter is located, and such plants shall have been in service for at least five (5) years.
8. ACS is responsible for returning the Reactivated GAC to the Plant for reinstallation in the appropriate Filter pursuant to the terms of the respective Task Order. If the volume of Reactivated GAC returned to a Filter is below the Noted Level of fill by more than one (1) inch upon replacement, ACS is responsible for providing the quantity of Reactivated GAC necessary to return the Filter to the Noted Level. ACS is not entitled to a cost adjustment for additions to meet the required GAC media depth for the Noted Level after the initial backwashing.
9. The KAWC Production Lead or his/her designated agent shall have the right to verify the depth and volume of GAC in each Filter following the exchange.
10. ACS is responsible for providing auxiliary equipment, services, or materials required to conduct the GAC media exchange operation, which it shall do at no additional cost to KAWC. Equipment shall include, but not be limited to eductors, a transfer hose, a booster pump and all-miscellaneous fittings and connections to permit the Filter media removal. KAWC is responsible for providing all necessary water, electricity, and suitable drainage to accomplish the transfer of the GAC media into and out of the Filters at the Plant, which it will provide at its sole cost and expense.
11. In order to avoid equipment freezing and installation delays that could jeopardize the operation of the Plant, the GAC media exchange process will not occur during periods in which air temperatures drop below twenty-five (25) degrees Fahrenheit, to the extent reasonably and operationally practicable. Where possible and reasonably practical, the exchange operation shall be temporarily postponed and rescheduled to a time when temperature conditions exceed twenty-five (25) degrees Fahrenheit.

## B. CONSIOERATION

1. In consideration of the services provided by ACS and the provision of GAC to KAWC, KAWC shall compensate ACS as more particularly set forth in this Agreement and in the applicable Task Order.
2. ACS will invoice KAWC for the amount set forth in each Task Order upon completion of the exchange operation, unless otherwise provided in the respective Task Order.
3. ACS will transmit invoices to the "Shared Services Center" of American Water Works Company, Inc., Workbasket Number A12SEC05, and should likewise direct a copy to the attention of the following KAWC representative, unless and until KAWC designates a different individual:

Mitzi Combs
Production Supervisor
Richmond Road Treatment Plant
Kentucky American Water Company
2300 Richmond Road
Lexington, Kentucky 40502
Office: 859-268-6347
E-mail: mitzi.combs@amwater.com
Workbasket: A12SEC05
4. KAWC shall remit payment to ACS thirty (30) days after the receipt of $A C S$ ' invoice in the Shared Services Center JDE system. If KAWC fails to timely remit payment to ACS, KAWC shall pay interest on all outstanding amounts due at a rate of prime (as published in The Wall Street Journal), plus three percent ( $3 \%$ ). Such interest shall be calculated and added to any unpaid amounts on a monthly basis, but shall not be compounded or treated as recomputed principal. Interest shall begin to accrue on the fifteenth ( $15^{\text {th }}$ ) day following the due date of the invoice.

## C. PURCHASE OF GAC MEDIA REMAINING IN FILTERS PURSUANT TO ORIGINAL AGREEMENTS

1. As of the Effective Date of this Agreement, ACS holds all rights, title and interest in and to the GAC media located in the Filters; however, the Parties understand and agree that KAWC will be purchasing the GAC media from ACS, as more particularly set forth below:
(a) KAWC shall purchase the GAC media located in Filters 17-21 pursuant to the terms of this Agreement and Task Orders - Number 1 through 5 entered into by and between the Parties. The transfer of all rights and title to, and interest in, the GAC media located in Filters 17-21 will occur upon reinstallation of the Reactivated GAC in the respective Filters and KAWC making final payment of the consideration as more particularly set forth in Task Orders - Number 1 through 5.
(b) KAWC will purchase the GAC media located in Filters 11-16 and 22-26 following the expiration of Leases 121 and 101, respectively. The purchase of the GAC media located in Filters 11-16 and 22-26 will be subject to the terms of this Agreement and the applicable Task Orders to be entered by and between the Parties, which will, among other things, effectuate the transfer of ownership.
2. The Warranty Period (as defined hereinbelow) on the GAC media located in Filters 17-21 will be as set forth in Task Orders - Numbers 1 through 5. The Warranty Period on the GAC media located in Filters I1-16 and 22-26, will expire as of the date originally set forth in Leases 121 and 101 , respectively.

## D. TERM

1. The term of this Agreement shall commence as of the Effective Date first set forth above ("Commencement Date"), and continue without interruption through such date that the Parties mutually agree to terminate this Agreement, unless carlier terminated as set forth herein ("Expiration Date") (hereinafter, "Term"). In no instance will the Term of this Agreement extend the Warranty Period beyond the term specified in the respective Task Order.
2. At such time as the GAC media located in a Filter has reached the end of its useful life, KAWC shall have the right to do the following, subject to Uncontrollable Circumstances: (a) request that ACS remove the GAC media from the Filter, reactivate the GAC media, and return the GAC media to that Filter for another term, at a cost to be agreed-upon by and between the Parties and
memorialized in a separate Task Order; (b) request that ACS remove the GAC media from the Filter without reactivation, at a cost to be agreed-upon by and between the Parties and memorialized in a separate Task Order, at which time ACS will reassume ownership of and title to the GAC media and KAWC will relinquish any rights, title and interest therein and thereto; (c) retain the GAC media in the Filter without any form of warranty, with no further cost to KAWC other than any monies due and owing that KAWC has not paid as of that date; (d) any combination of the above, as may be practicable; or (e) such other arrangement as agreed upon by and between the Parties. KAWC shall notify ACS of its election of the above options not less than sixty (60) days prior to the requested service.

## E. WARRANTY

1. ACS warrants that, when used under the conditions that exist at the Plant as of the effective date of a particular Task Order, which are considered "normal" conditions, the Reactivated GAC provided by ACS under this Agreement will perform the function of adsorption of dissolved organics that contribute to $\mathrm{T} \& \mathrm{O}$ control for such period after installation into the respective Filter as is set forth in the respective Task Order (the warranty being referred to herein as the "Warranty" and the specific period of the Warranty being referred to as the "Warranty Period"). For purposes of this Warranty, effective T\&O adsorption is defined as the reduction of adsorbable dissolved odors, such that the threshold odor number of the carbon filtered water as measured by the procedure defined in "Standard Methods for the Examination of Water and Wastewater", $20^{\text {ilh }}$ Edition, shall not exceed a level two (2) in the carbon filtered effluent for a duration of four (4) consecutive days while the Plant is in normal operation.
2. The Warranty Period for the Reactivated GAC installed in a Filter will begin once the respective filtering unit is placed in service after backwashing following installation of the Reactivated GAC.
3. ACS' obligation under the Warranty is contingent upon KAWC meeting the following conditions during the entire term of the Warranty Period:
(a) If the concentration of organics in the raw water supply should exceed normal operational levels (e.g., in the case of an accidental industrial dischatge, chemical spill or other adversity), KAWC will initiate the feed of powdered activated carbon or may elect a complete bypass of contaminated water during the course of abnormal conditions. If KAWC does not immediately take
emergency measures to prevent the Reactivated GAC from being exposed to excessive levels of organic contaminants, the Warranty for such Filter shall be null and void.
(b) KAWC will continue to practice normal and customary water treatments prior to carbon filtration. These customary treatments include, without limitation, providing requisite disinfection, coagulation, and clarification of the raw water and stabilizing the clarified water to prevent the deposition of calcium carbonate scale on the GAC media.
(c) Average and maximum filtration rates will not exceed 3.0 and 4.0 gallons per minute per square foot, respectively.
(d) KAWC will maintain the GAC media bed depth in each Filter at the Noted Level, with an allowable loss of up to two (2) inches of GAC media bed depth per Filter, per year, due to attrition losses. If losses should exceed two (2) inches of bed depth in a Filter during any one (1) year of operation, KAWC shall immediately advise ACS and request it to replace the excess GAC media loss in that Filter with GAC media equal to that supplied. KAWC shall pay ACS for any such replacement of GAC media at a price agreed upon by the Parties. If the Parties are unable to agree-upon a price for the replacement GAC media, then KAWC has the right to seek an alternate supplier therefor. In such instance, however, the alternate supplier shall provide GAC media that meets the same quality and standards as the Reactivated GAC that ACS placed in the Filter, and the GAC media shall meet ACS' approval, in its reasonable discretion. The failure of the alternate GAC media to meet these standards shall deem the Warranty null and void. Notwithstanding anything set forth herein, if KAWC does not immediately advise ACS of the loss and replace such loss, the Warranty for the Reactivated GAC in such Filter shall be null and void.
(e) KAWC will maintain the Plant's Filfers in good operating condition, in accordance with accepted industry practice. If the Reactivated GAC fails to perform due to encrustation by inorganic precipitates, the Warranty will be null and void and KAWC will bear the cost of cleaning, and if necessary, replacing the Reactivated GAC to restore performance, in accordance with procedures provided by ACS.
4. If, during the Warranty Period, the Reactivated GAC fails to perform in accordance with the parameters established in the Warranty and in the respective Task Order, subject to the terms and conditions contained herein and therein, ACS will, at its sole option and cost, either reactivate or replace all or part of the Reactivated GAC to restore its capability.
5. EXCEPT AS SET FORTH IN THIS SECTION E., ACS MAKES NO WARRANTY, EXPRESSED OR IMPLIED, INCLUDING THE WARRANTIES OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE, WITH RESPECT TO THE MATERIALS OR SERVICES TO BE PROVIDED BY IT UNDER THKS AGREEMENT. ACS SHALL HAVE NO LIABILITY FOR ANY INDIRECT, INCIDENTAL, OR CONSEQUENTIAL DAMAGES ARISING OUT OF A BREACH OF THIS WARRANTY. KAWC'S SOLE REMEDY FOR ANY BREACH OF THIS WARRANTY SHALL BE TO REQUIRE ACS TO EITHER REACTIVATE OR REPLACE THE REACTIVATED GAC AS PROVIDED ABOVE.
6. During the Warranty Period, ACS will test all Reactivated GAC supplied under this Agreement every six (6) months from samples supplied by KAWC to determine levels of exhaustion, which ACS will do at its sole cost and expense. The testing shall include the following factors: Iodine Number, Appareat Density, Total Ash, Abrasion Number, Effective Size, Uniformity Coefficient, and Screen Analysis. ACS will submit copies of the test results to KAWC's local Production Lead, as well as the Director of Water Quality for KAWC.
7. KAWC is prohibited from removing the Reactivated GAC from a Filter or causing the Reactivated GAC to be removed except for emergency maintenance in accordance with the terms of this Agreement. Removing GAC media from a Filter may nullify the Warranty, in ACS' sole determination.

## F. UNCONTROLLABLE CIRCUMSTANCES

1. An "Uncontrollable Circumstance" is any act, event, condition or circumstance that ( 1 ) is beyond the reasonable control of the Party relying thereon as justification for not performing an obligation of such Party under the Agreement, (2) by itself or in combination with other acts, events, conditions or circumstances adversely affects, interferes with or delays the Party's ability to perform its obligations under the Agreement, expands the scope of the Party's obligations under the Agreement, or increases the Party's cost of performing its obligations under the Agreement, and (3) is not the direct result of the willful or negligent act, intentional misconduct, or breach of the Agreement by the Party claiming the occurrence of an Uncontrollable Circumstance.
2. If an Uncontrollable Circumstance occurs, the affected Party shall be entitled to (1) relief from its performance obligations under the Agreement to the extent the occurrence of the Uncontrollable Circumstance prevents its performance of such obligations, (2) an extension of schedule to perform its obligations under the Agreement to the extent the occurrence of the Uncontrollable Circumstance prevents its ability to perform such obligations in the time specified in the Agreement, and (3) an increase in the fee to be paid under the Agreement to the extent the occurrence of the Uncontrollable Circumstance increases its costs of performance of its obligations under the Agreement. The occurrence of an Uncontrollable Circumstance shall not, however, excuse or delay KAWC's obligation to pay monies previously accrued and owing to ACS under the Agreement, or for ACS to perform any obligation under the Agreement not affected by the occurrence of the Uncontrollable Circumstance.

## G. DEFAULT/TERMINATION

1. Notwithstanding the terms set forth under Sections B. and C., above, relating KAWC's failure to timely pay $A C S$ ' invoices, either Party shall be deemed in default under the Agreement for its failure to perform any material term, covenant, or condition of the Agreement or a respective Task Order, and such failure continues for more than thirty (30) days following the nondefaulting Party ("Non-Defaulting Party") giving written notice to the defaulting Party ("Defaulting Party") outlining the basis for the alleged material breach or default of its obligations under this Agreement; provided, however, that if, and to the extent such default cannot reasonably be cured within the thirty (30) day period, and the Defaulting Party has diligently attempted to cure same and continues to diligently attempt to cure same thereafter, then the cure period provided for herein shall extend up to, but in no case more than, a collective sixty (60) days.
2. The Non-Defaulting Party shall have the right to terminate the Agreement upon notice to the Defaulting Party following conclusion of the cure period(s) set forth in Section G.I., above; provided that, (1) the Defaulting Party has not cured such default within thirty (30) days of notice being given to it, or (2) such breach is capable of being cured or remedied but cannot be cured or remedied within such thirty (30) day period, and the Defaulting Party either fails to commence such cure or remedy as soon as reasonably possible following such thirty (30) day period or fails to cure the default within a collective sixty (60) days.
3. If KAWC defaults under this Agreement as described above, it shall automatically relinquish ownership of and title to the GAC media, which will revert to ACS as if title had never passed to KAWC; however, such relinquishment of title shall be limited to the GAC media provided by ACS pursuant to a particular Task Order if KAWC's default is the subject of, or relates to, only that Task Order.
4. The right to terminate for default shall be in addition to any other remedy available at law for material breach or default.

## H. LIABILTTY/INDEMNIFICATION

1. ACS will indemnify, defend and save harmless KAWC against any and all liability, loss, damage, costs or expense that KAWC may incur, suffer or be required to pay as a result of ACS' negligent acts, errors or omissions or failure to perform in accordance with this Agreement, or ACS' violation of any Federal, State or local laws or regulations in its performance of this Agreement; but in either case only to the extent of and in proportion to the degree of fault, failure, or negligence of ACS or any of its officers, directors, employees and agents.
2. KAWC will indemnify, defend and save harmess ACS against any and all liability, loss, damage, costs or expense that ACS may incur, suffer or be required to pay as a result of KAWC's negligent acts, errors or omissions or failure to perform in accordance with this Agreement, or KAWC's violation of any Federal, State or local laws or regulations in its performance of this Agreement; but in either case only to the extent of and in proportion to the degree of fault, failure, or negligence of KAWC or any of its officers, directors, employees and agents. KAWC hereby indemnifies, defends and saves harmless ACS against any and all liability, loss, damage, costs and expense that ACS may incur, suffer or be required to pay as a result of Spent GAC becoming classified as a hazardous material, hazardous waste or hazardous substance, or containing a hazardous material, hazardous waste or hazardous substance, pursuant to applicable environmental laws.
3. In no event shall the Parties be liable to each other, and each Party specifically waives as against the other, any and all claims for consequential, incidental, special or punitive damages resulting in any way from performance or non-performance of this Agreement, whether such damages are characterized as arising under breach of contract or warranty, tort (including negligence), fault, strict liability, indemnity or other theory of legal liability.

## I. DISPUTE RESOLUTION

1. If there is a dispute between the Parties arising under, or out of, this Agreement that does not involve claims made by or asserted against third parties, the Parties agree to submit such disputes to non-binding mediation, which shall be considered an express condition precedent to any further resolution process. If they are unable to resolve such disputes through mediation, the Parties shall be entitled to submit the dispute to a court of competent jurisdiction in the State of Kentucky. If the Parties mutually agree to do so, they may agree to arbitration in lieu of litigation in the local court system, through a mutually agreed upon dispute resolution agency.
2. If there is a claim or demand made in any proceeding against $A C S$ by any third party, which arises out of or relates to the ACS' duties or obligations under this Agreement, nothing in this Agreement shall be construed to limit, waive or otherwise impair ACS' ability to join KAWC as a party to those proceedings, and to assert claims in the nature of indemnity or contribution for any damages or losses made against ACS in said proceedings.
3. If there is a claim or demand made in any proceeding against KAWC by any third party, which arises out of or relates to ACS' work under this Agreement, nothing in this Agreement shall be construed to limit, waive or otherwise impair KAWC's ability to join ACS and to assert claims in the nature of indemnity or contribution for any damages or losses made against KAWC in said proceedings.

## J. NOTICES

All notices required under this Agreement shall be given by Certified Mail, Return Receipt Requested and shall be deemed made within thrce (3) days of being deposited in the U.S. Mail properly addressed, with postage prepaid, as follows:

To ACS: AAET, L.P.<br>c/o Carbon Services Group 1025 Laurel Oak Road Voorkees, New Jersey 08043<br>Attn: Adam R. McDonough, Vice President, AAET, Inc.<br>To KAWC: Kentucky-American Water Company<br>2300 Richmond Road<br>Lexington, Kentucky 40502<br>Attn: Keith L. Cartier, Vice-President, Operations

## K. TAXES

The fees to be paid by KAWC under this Agreement do not include any taxes or other assessments. KAWC agrees to pay all taxes or governmental assessments imposed on the services and materials provided by ACS pursuant to this Agreement and any Task Order.

## L. INSURANCE

At no expense to KAWC, ACS shall (1) obtain and keep in force during the term of this Agreement, and any renewals or extensions hereof, and (2) require its subcontractors to obtain and keep in force during the terms of their respective contracts, the following minimum insurance limits and coverage. The insurance coverage limits stated below are minimum coverage requirements, not limitations of liability, and shall not be construed in any way as KAWC's acceptance of the responsibility of ACS .

1. Commercial General Liability
(a) $\$ 1,000,000$ per occurrence Combined Single Limits
(b) $\$ 1,000,000$ General Aggregate
(c) $\$ 1,000,000$ Products and Completed Operations Aggregate

CGL ISO 1996 or later occurrence form, including Premises and Operations Coverage, Products and Completed Operations, Coverage for Independent Contractors, Personal Injury Coverage and Blanket Contractual Liability, and Contractors Protective Liability if ACS subcontracts all or any portion of the work to another party. Completed Operations shall be maintained for a period of three (3) years following Final Completion for any construction, renovation, repair and or maintenance service.
2. Workers' Compensation
(a) Applicable Federal or State Requirements: Statutory Minimum
(b) Employer's Liability:

| . | Each Accident | $\$ 1,000,000$ |
| :--- | :--- | :--- |
| . | Each Employee - Disease | $\$ 1,000,000$ |
| . | Policy Limit-Disease | $\$ 1,000,000$ |

(c) Other States insurance

The Workers" Compensation policy shall also include U.S. Longshoreman and Harbors Workers' Compensation Act Coverage, if any Work shall be done over or within 100 feet of any body of water, or otherwise at the sole discretion of KAWC. It shall provide maritime (Jones Act) coverage if a boat or vessel of any type is used.
3. Automobile Liability; Including Owned, Hired, Borrowed and Non-Ownership Liability
(a) Bodily Injury and Property Damage: $\$ 1,000,000$ each occurrence, Combined Single Limits
4. Umbrella Liability
(a) $\$ 4,000,000$ each occurrence and annual aggregate in excess of Employer's Liability,
(b) General Liability and Automotive Liability (no more restrictive than underlying insurance)
5. The minimum liability limits required may be satisfied through the combination of the primary General Liability, Employers' Liability, and Automotive Liability limits with an Umbrella Liability policy (with coverage no more restrictive than the underlying insurance), providing excess limits at least equal to or greater than the combined primary limits.
6. All Commercial General Liability, including completed operations-products liability coverage, and Automotive liability insurance shall designate KAWC, its parent, affiliates and subsidiaries, its directors, officers and employees as an Additional Insured. All such insurance should be primary and non-contributory, and is required to respond and pay prior to any other insurance or self-insurance available to KAWC. In addition to the liability limits available, such insurance will pay on behalf or will indemnify KAWC for defense costs. Any other coverage available to KAWC applies on a contingent and excess basis. Such insurance shall include appropriate clauses pursuant to which the insurance companies shall waive their rights of subrogation against KAWC.
7. ACS and any of its subcontractors shall furnish, prior to the start of work, certificates or adequate proof of the foregoing insurance including, if specifically requested by KAWC, copies of the endorsements and insurance policies naming KAWC as an Additional Insured. Current certificates of insurance shall be provided prior to the commencement of work and shall be maintained until completion of the Agreement. ACS shall notify in writing, at least thirty (30) days
prior to a material change in or cancellation of a policy.
8. Carriers providing coverage will be rated by A.M. Best with at least an A-rating and a financial size category of at least Class VII. Such cancellation or material alteration shall not relieve ACS of its continuing obligation to maintain insurance coverage in accordance with this Agreement. Carriers shall be licensed in the state(s) where the work is being performed.
9. If ACS shall fail to procure and maintain the above insurance, KAWC, upon written notice, may, but shall not be required to, procure and maintain the required coverage at $A C S^{\prime}$ expense. In the alternative, KAWC may declare a default hereunder and, unless such default is timely cured, terminate this Agreement. Unless and until the default is cured, neither ACS nor its servants, employees or agents will be allowed to enter upon KAWC's premises.

## M. MISCELLANEOUS

1. This Agreement shall not be assignable by either Party without the prior written consent of the other Party, which consent shall not be unreasonably witheld. Any assignee shall assume all the obligations of this Agreement and the assignor shall not be relieved of its obligations under this Agreement by reason of an assignment.
2. This Agrcement ratifies the Original Agreements, incorporates the Original Agreements in their entirety as if set forth at length herein, and constitutes the entire agreement between the Parties with respect to the content hereof. All previous agreements, including, without limitation, the Original Agreements, and all representations related thereto, either written or oral, are hereby annulled and superseded by this Agreement. No modifications to this Agreement shall be binding on either Party unless it shall be in writing and signed by an authorized officer of both Parties.
3. The failure of a Party to insist on strict performance of any or all of the terms of this Agreement, or to exercise any right to remedy under this Agreement, shall not constitute a waiver or relinquishment of any nature regarding such right or remedy or any other right or remedy. Any waiver by either Party of any provision or condition of this Agreement shall not be construed or deemed to be a waiver of any other provision or condition of this Agreement, nor a waiver of a subsequent breach of the same provision or condition unless such waiver be so expressed in writing and signed by the Party to be bound.
4. If any provision contained herein is held to be unenforceable by a court of law or equity, this Agreement shall be construed as if such provisions did not exist and the unenforceability of such provision shall not be held to render any other provision of this Agreement unenforceable.
5. The covenants, warranties, and agreements set forth in Section E. and in the respective Task Orders shall survive termination of this Agreement, as applicable,
6. ACS shall not be liable or responsible for the transportation, handling, treatment, storage, disposal or other activity in connection with GAC media that is or becomes a hazardous material, hazardous waste or hazardous substance.
7. This Agreement shall be governed and construed in accordance with the laws of the State of Kentucky without giving effect to conflict of law principles.
8. The Recitals first set forth above are hereby incorporated into and made part of this Agreement.
[SIGNATURE PAGE TO FOLLOW]

IN WITNESS WHEREOF, the Parties have caused this Agreement to be executed by their duly authorized representatives as of the Effective Date.

## ACCEPTED AND AGREED:

Kentucky American
Water Company

By:


Keith L. Cartier
Vice-President, Operations

## ACCEPTED AND AGREED:

## AET, LP.



Adam R. McDonqugh, Vice President of AAET; Inc., its General Partner

## EXHIBITI

## ORIGINAL AGREEMENTS

| Agreement Name <br> $\cdot$ | Type <br> of <br> Agreement | Date <br> of <br> Agreement | Term <br> of <br> Agreement | Filters Included <br> in <br> Agreement |
| :---: | :---: | :---: | :---: | :---: |
| Lease 121 | Lease | April 1, 2008 | March 31, 2011 | Lexington Filters <br> $11-16$ |
| Lease 94 | Lease | April 8, 2006 | April 7, 2009 | Lexington Filters <br> $17-21$ |
| Lease 101 | Lease | March 1, 2007 | March 31, 2010 | Lexington Filters <br> $22-26$ |

## EXHIBIT II

## LIST OF FILTERS AT THE PLANT

| Filter Number | Type of Filter | Surface Area | GAC Depth | GAC Volume | Plant Where Located |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 11 | Conventional | 340 Sq. Feet | 2 Feet | 680 Cu. Feet | Lexington |
| 12 | Conventional | 340 Sq. Feet | 2 Feet | 680 Cu . Feet | Lexington |
| 13 | Conventional | 340 Sq. Feet | 2 Feet | 680 Cu. Feet | Lexington |
| 14 | Conventional | 340 Sq. Feet | 2 Feet | 680 Cu . Feet | Lexington |
| 15 | Conventional | 340 Sq . Feet | 2 Fcet | 680 Cu . Feet | Lexington |
| 16 | Conventional | 340 Sq. Feet | 2 Feet | 680 Cu. Feet | Lexington |
| 17 | Conventional | 340 Sq. Feet | 2 Feet | 680 Cu. Feet | Lexington |
| 18 | Conventional | 340 Sq. Feet | 2 Feet | 680 Cu. Feet | Lexington |
| 19 | Conventional | 340 Sq. Feet | 2 Feet | 680 Cu. Feet | Lexington |
| 20 | Conventional | 340 Sq. Feet | 2 Feet | 680 Cu . Feet | Lexington |
| 21 | Conventional | 340 Sq . Feet | 2 Feet | 680 Cu. Feet | Lexington |
| 22 | Conventional | 340 Sq. Feet | 2 Feet | 680 Cu . Feet | Lexington |
| 23 | Conventional | 340 Sq. Feet | 2 Feet | 680 Cu . Feet | Lexington |
| 24 | Conventional | 340 Sq. Feet | 2 Feet | 680 Cu . Feet | Lexington |
| 25 | Conventional | 340 Sq. Feet | 2 Feet | 680 Cu. Feet | Lexington |
| 26 | Conventional | 340 Sq. Feet | 2 Feet | 680 Cu. Feet | Lexington |

## EXHIBIT III

FORM
OF
TASK ORDER

## TASK ORDER FOR GAC REACTIVATION AND SALE

## TASK ORDER NO.:

$\qquad$

This Task Order ("Task Order") is made as of this $\qquad$ day of $\qquad$ , 20 $\qquad$ ("Effective Date"), by and between AAET, L.P., a Delaware limited partnership, having its principal office at 1025 Laurel Oak Road, Voorhees, New Jersey 08043 ("ACS") and Kentucky American Water Company, a Kentucky corporation, having its principal office at 2300 Richmond Road, Lexington, Kentucky 40502 ("KAWC"). ACS and KAWC are individually referred to herein as a "Party" and collectively referred to herein as the "Parties".

## 1. Services:

All services, labor, and terms and conditions of performance that are the subject of this Task Order shall be performed and provided by the Parties in accordance with the provisions of the "Consolidated GAC Reactivation and Sale Agreement" entered into by and between the Parties on May 6, 2009 ("Agreement").

ACS shall perform the following services, which it shall carry out in accordance with the parameters set forth in the Agreement:
$\qquad$
$\qquad$
$\qquad$
$\qquad$
$\qquad$

## 2. Filter:

| Plant | Filter <br> Number | Surface <br> Area | GAC <br> Depth | GAC <br> Volume | Anticipated Installation <br> Period |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  |  |

## 3. Compensation:

In consideration of the services ACS is providing pursuant to the terms of the Agreement and this Task Order, and the provision of the Warranty, KAWC shall compensate ACS as set forth below:

| Unit Price <br> Per <br> Cubic Foot | Estimated Project Price ${ }^{*}$ |
| :---: | :---: |
| $\$$ | $\$$ |

*Actual price is based upon the total volume of GAC delivered.

The price set forth herein is guaranteed until $\qquad$ 200 $\qquad$ . The price for any services performed or materials provided by ACS after $\qquad$ , 200 $\qquad$ , will be adjusted by ACS in its sole determination based upon current market conditions; which adjustment, ACS will provide to KAWC in writing. If ACS adjusts the price and the adjustment is not acceptable to KAWC, KAWC has the right to cancel this Task Order upon prior written notice to ACS. In such instance, KAWC shall compensate ACS for all work performed up to the date of termination, at the price in effect at the time ACS performed the services.
4. Warranty:

| Filter <br> Number |  | Warranty Period $\qquad$ ( Months |
| :---: | :---: | :---: |
|  | Installation Date: <br> Warranty Expiration Date: |  |

## 5. Granular Activated Carbon Properties:

The Reactivated GAC shall not contain soluble inorganic or organic substances in quantities capable of producing deleterious of injurious effects on the health of those consuming the water, shall not impart to the water any contaminant that exceeds the limits as defined by the United States Environmental Protection Agency, Drinking Water Regulations, and shall meet the following specifications:

Iodine number
Density
Effective Size
Uniformity Coefficient
Moisture
Abrasion Number
Water Soluble Ash
Typical Mesh Size
$\qquad$ minimum
$\qquad$
$\qquad$ lb./cubic foot
$\qquad$
$\square$ mm
maximum

- \% maximum
$\qquad$ minimum
_ \% maximum
$\qquad$ x $\qquad$

6. Any term used in this Task Order that is not defined herein, shall be as it is defined in the Agreement.
7. This Task Order shall be read in conjunction with the Agreement and shall be incorporated therein by reference as if set forth in its entirety. If there are any inconsistencies between this Task Order and the Agreement, this Task Order shall govern.
[SIGNATURE PAGE TO FOLLOW]

IN WITNESS WHEREOF, the Parties have caused this Task Order to be executed by their duly authorized representatives as of the Effective Date.

## ACCEPTED AND AGREED:

## Kentucky American

Water Company

## ACCEPTED AND AGREED:

## AAET, L.P.

By:
Adam R. McDonough, Vice President of AAET, Inc., its General Partner

## TASK ORDER FOR GAC REACTIVATION AND SALE

TASK ORDER NO.: Kentucky American Water Company-Task Order 1

This Task Order ("Task Order") is made as of this 6 "day of May, 2009 ("Effective Date"), by and between AAET, L.P., a Delaware limited partnership, having its principal office at 1025 Laurel Oak Road, Voorhees, New Jersey 08043 ("ACS") and Kentucky American Water Company, a Kentucky corporation, having its principal office at 2300 Richmond Road, Lexington, Kentucky 40502 ("KAWC"). ACS and KAWC are individually referred to herein as a "Party" and collectively referred to herein as the "Parties".

## 1. Services:

All services, labor, and terms and conditions of performance that are the subject of this Task Order shall be performed and provided by the Parties in accordance with the provisions of the "Consolidated GAC Reactivation and Sale Agreement" entered into by and between the Parties on May 6, 2009 ("Agreement").

ACS shall perform the following services, which it shall carry out in accordance with the parameters set forth in the Agreement: Remove the Spent GAC from the Filter set forth below, reactivate it, and return the Reactivated GAC to the Filter, which ACS shall do in accordance with the terms of the Agreement.

## 2. Filter:

| Plant | Filter <br> Number | Surface <br> Area | GAC <br> Depth | GAC <br> Volume | Anticipated Installation <br> Period |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Lexington | 17 | 340 Sq. <br> Feet | 2 Feet | 680 Cu . Feet | May, 2009 |

3. Compensation:

In consideration of the services ACS is providing pursuant to the terms of the Agreement and this Task Order, and the provision of the Warranty, KAWC shall compensate ACS as set forth below:

| Unit Price <br> Per <br> Cubic Foot | Estimated Project Price* |
| :---: | :---: |
| $\$ 39.36$ | $\$ 26,764.80$ |

${ }^{*}$ Actual price is based upon the total volume of GAC delivered.
The price set forth herein is guaranteed until December 31, 2009. The price for any services performed or materials provided by ACS after December 31, 2009, will be adjusted by ACS in its sole determination based upon current market conditions; which adjustment, ACS will provide to KAWC in writing. If ACS adjusts the price and the adjustment is not acceptable to KAWC, KAWC has the right to cancel this Task Order upon prior written notice to ACS. In such instance, KAWC shall compensate ACS for all work performed up to the date of termination, at the price in effect at the time $\operatorname{ACS}$ performed the services.
4. Warranty:

| Filter <br> Number | Warranty Period <br> Thirty-Six (36) Months |  |
| :---: | :--- | :--- |
| 17 | Installation Date: | - |
|  | Warranty Expiration Date: |  |

5. Granular Activated Carbon Properties:

The Reactivated GAC shall not contain soluble inorganic or organic substances in quantities capable of producing deleterious or injurious effects on the health of those consuming the water, shall not impart to the water any contaminant that exceeds the limits as defined by the United States Environmental Protection Agency, Drinking Water Regulations, and shall meet the following specifications:

| lodine number | 800 minimum |
| :--- | :--- |
| Density | $28-30 \mathrm{lb} . / \mathrm{cubic}$ foot |
| Effective Size | $0.8-1.0 \mathrm{~mm}$ |
| Uniformity Coefficient | 2.1 maximum |
| Moisture | $2 \%$ maximum |
| Abrasion Number | 75 minimum |
| Water Soluble Ash | $1 \%$ maximum |
| Typical Mesh Size | $8 \times 30$ |

6. Any term used in this Task Order that is not defined herein, shall be as it is defined in the Agreement.
7. This Task Order shall be read in conjunction with the Agreement and shall be incorporated therein by reference as if set forth in its entirety. If there are any inconsistencies between this Task Order and the Agreement, this Task Order shall govern.
[SIGNATURE PAGE TO FOLLOW]

IN WITNESS WHEREOF, the Parties have caused this Task Order to be executed by their duly authorized representatives as of the Effective Date.

## ACCEPTED AND AGREED:

## Kentucky American

Water Company

Keith L. Cartier
Vice-President, Operations

## ACCEPTED AND AGREED:

## AAET, L.P.

By:
 of AAET, Inc., its General Partner

## TASK ORDER FOR GAC REACTIVATION AND SALE

TASK ORDER NO.: Kentucky American Water Company-Task Order 2

This Task Order ("Task Order") is made as of this $6^{\text {th }}$ day of May, 2009 ("Effective Date"), by and between AAET, L.P., a Delaware limited partnership, having its principal office at 1025 Laurel Oak Road, Voorhees, New Jersey 08043 ("ACS") and Kentucky American Water Company, a Kentucky corporation, having its principal office at 2300 Richmond Road, Lexington, Kentucky 40502 ("KAWC"). ACS and KAWC are individually referred to herein as a "Party" and collectively referred to herein as the "Parties".

## 1. Services:

All services, labor, and terms and conditions of performance that are the subject of this Task Order shall be performed and provided by the Parties in accordance with the provisions of the "Consolidated GAC Reactivation and Sale Agreement" entered into by and between the Parties on May 6, 2009 ("Agreement").

ACS shall perform the following services, which it shall carry out in accordance with the parameters set forth in the Agreement: Remove the Spent GAC from the Filter set forth below, reactivate it, and return the Reactivated GAC to the Filter, which ACS shall do in accordance with the terms of the Agreement.

## 2. Filter:

| Plant | Filter <br> Number | Surface <br> Area | GAC <br> Depth | GAC <br> Volume | Anticipated Installation <br> Period |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Lexington | 18 | 340 Sq. <br> Feet | 2 Feet | 680 Cu . Feet | May, 2009 |

## 3. Compensation:

In consideration of the services ACS is providing pursuant to the terms of the Agreement and this Task Order, and the provision of the Warranty, KAWC shall compensate ACS as set forth below:

| Unit Price <br> Per <br> Cubic Foot | Estimated Project Price* |
| :---: | :---: |
| $\$ 39.36$ | $\$ 26,764.80$ |

*Actual price is based upon the total volume of GAC delivered.
The price set forth herein is guaranteed until December 31, 2009. The price for any services performed or materials provided by ACS after December 31, 2009, will be adjusted by ACS in its sole determination based upon current market conditions; which adjustment, ACS will provide to KAWC in writing. If ACS adjusts the price and the adjustment is not acceptable to KAWC, KAWC has the right to cancel this Task Order upon prior written notice to ACS. In such instance, KAWC shall compensate ACS for all work performed up to the date of termination, at the price in effect at the time ACS performed the services.

## 4. Warranty:

| Filter <br> Number |  | Warranty Period <br> Thirty-Six (36) Months |
| :---: | :--- | :--- |
| 18 | Installation Date: <br> Warranty Expiration Date: |  |

## 5. Granular Activated Carbon Properties:

The Reactivated GAC shall not contain soluble inorganic or organic substances in quantities capable of producing deleterious or injurious effects on the health of those consuming the water, shall not impart to the water any contaminant that exceeds the limits as defined by the United States Environmental Protection Agency, Drinking Water Regulations, and shall meet the following specifications:

| Iodine number | 800 minimum |
| :--- | :--- |
| Density | $28-30 \mathrm{lb} . /$ cubic foot |
| Effective Size | $0.8-1.0 \mathrm{~mm}$ |
| Uniformity Coefficient | 2.1 maximum |
| Moisture | $2 \%$ maximum |
| Abrasion Number | 75 minimum |
| Water Soluble Ash | $1 \%$ maximum |
| Typical Mesh Size | $8 \times 30$ |

6. Any term used in this Task Order that is not defined herein, shall be as it is defined in the Agreement.
7. This Task Order shall be read in conjunction with the Agreement and shall be incorporated therein by reference as if set forth in its entirety. If there are any inconsistencies between this Task Order and the Agreement, this Task Order shall govern.
[SIGNATURE PAGE TO FOLLOW]

IN WITNESS WHERCOF, the Parties have caused this Task Order to be executed by their duly authorized representatives as of the Effective Date.

## ACCEPTED AND AGREED:

## Kentucky American

Water Company


Keith L. Cartier Vice-President, Operations

## ACCEPTED AND AGREED:

AAET, LIP.


## TASK ORDER FOR GAC REACTIVATION AND SALE

TASK ORDER NO.: Kentucky American Water Company-Task Order 3

This Task Order ("Task Order") is made as of this $6^{\text {ih }}$ day of May, 2009 ("Effective Date"), by and between AAET, L.P., a Delaware limited partnership, having its principal office at 1025 Laurel Oak Road, Voorhees, New Jersey 08043 ("ACS") and Kentucky American Water Company, a Kentucky corporation, having its principal office at 2300 Richmond Road, Lexington, Kentucky 40502 ("KAWC"). ACS and KAWC are individually referred to herein as a "Party" and collectively referred to herein as the "Parties".

1. Services:

All services, labor, and terms and conditions of performance that are the subject of this Task Order shall be performed and provided by the Parties in accordance with the provisions of the "Consolidated GAC Reactivation and Sale Agreement" entered into by and between the Parties on May 6, 2009 ("Agreement").

ACS shall perform the following services, which it shall carry out in accordance with the parameters set forth in the Agreement: Remove the Spent GAC from the Filter set forth below, reactivate it, and return the Reactivated GAC to the Filter, which ACS shall do in accordance with the terms of the Agreement.
2. Filter:

| Plant | Filter <br> Number | Surface <br> Area | GAC <br> Depth | GAC <br> Volume | Anticipated Installation <br> Period |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Lexington | 19 | 340 Sq. <br> Feet | 2 Feet | 680 Cu . Feet | May, 2009 |

## 3. Compensation:

In consideration of the services ACS is providing pursuant to the terms of the Agreement and this Task Order, and the provision of the Warranty, KAWC shall compensate ACS as set forth below:

| Unit Price <br> Per <br> Cubic Foot | Estimated Project Price ${ }^{*}$ |
| :---: | :---: |
| $\$ 39.36$ | $\$ 26,764.80$ |

*Actual price is based upon the total volume of GAC delivered.

The price set forth herein is guaranteed until December 31, 2009. The price for any services performed or materials provided by ACS after December 31, 2009, will be adjusted by ACS in its sole determination based upon current market conditions; which adjustment, ACS will provide to KAWC in writing. If ACS adjusts the price and the adjustment is not acceptable to KAWC, KAWC has the right to cancel this Task Order upon prior written notice to ACS. In such instance, KAWC shall compensate ACS for all work performed up to the date of termination, at the price in effect at the time ACS petformed the services.
4. Warranty:

| Filter <br> Number | Warranty Period <br> Thirty-Six (36) Months |  |
| :---: | :--- | :--- |
| 19 | Installation Date: <br> Warranty Expiration Date: |  |

## 5. Granular Activated Carbon Properties:

The Reactivated GAC shall not contain soluble inorganic or organic substances in quantities capable of producing deleterious or injurious effects on the health of those consuming the water, shall not impart to the water any contaminant that exceeds the limits as defined by the United States Environmental Protection Agency, Drinking Water Regulations, and shall meet the following specifications:

| Iodine number | 800 minimum |
| :--- | :--- |
| Density | $28-30 \mathrm{lb} . / \mathrm{cubic}$ foot |
| Effective Size | $0.8-1.0 \mathrm{~mm}$ |
| Uniformity Coefficient | 2.1 maximum |
| Moisture | $2 \%$ maximum |
| Abrasion Number | 75 minimum |
| Water Soluble Ash | $1 \%$ maximum |
| Typical Mesh Size | $8 \times 30$ |

6. Any term used in this Task Order that is not defined herein, shall be as it is defined in the Agreement.
7. This Task Order shall be read in conjunction with the Agreement and shall be incorporated therein by reference as if set forth in its entirety. If there are any inconsistencies between this Task Order and the Agreement, this Task Order shall govern.
[SIGNATURE PAGE TO FOLLOW]

IN WITNESS WHEREOF, the Parties have caused this Task Order to be executed by their duly authorized representatives as of the Effective Date.

## ACCEPTED AND AGREED:

## Kentucky American

Water Company

## By: <br> $\qquad$

Keith L. Cartier Vice-President, Operations

## ACCEPTED AND AGREED:

AAET, L.P.


## TASK ORDER FOR GAC REACTIVATION AND SALE

TASK ORDER NO.: Kentucky American Water Company-Task Order 4

This Task Order ("Task Order") is made as of this $6^{\text {th }}$ day of May, 2009 ("Effective Date"), by and between AAET, L.P., a Delaware limited partnership, having its principal office at 1025 Laurel Oak Road, Voorhees, New Jersey 08043 ("ACS") and Kentucky American Water Company, a Kentucky corporation, having its principal office at 2300 Richmond Road, Lexington, Kentucky 40502 ("KAWC"). ACS and KAWC are individually referred to herein as a "Party" and collectively referred to herein as the "Parties".

1. Services:

All services, labor, and terms and conditions of performance that are the subject of this Task Order shall be performed and provided by the Parties in accordance with the provisions of the "Consolidated GAC Reactivation and Sale Agreement" entered into by and between the Parties on May 6, 2009 ("Agreement").

ACS shall perform the following services, which it shall carry out in accordance with the parameters set forth in the Agreement: Remove the Spent GAC from the Filter set forth below, reactivate it, and return the Reactivated GAC to the Filter, which ACS shall do in accordance with the terms of the Agreement.
2. Filter:

| Plant | Filter <br> Number | Surface <br> Area | GAC <br> Depth | GAC <br> Volume | Anticipated Installation <br> Period |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Lexington | 20 | 340 Sq. <br> Feet | 2 Feet | 680 Cu . Feet | May, 2009 |

## 3. Compensation:

In consideration of the services ACS is providing pursuant to the terms of the Agreement and this Task Order, and the provision of the Warranty, KAWC shall compensate ACS as set forth below:

| Unit Price <br> Per <br> Cubic Foot | Estimated Project Price* |
| :---: | :---: |
| $\$ 39.36$ | $\$ 26,764.80$ |

*Actual price is based upon the total volume of GAC delivered.

The price set forth herein is guaranteed until December 31, 2009. The price for any services performed or materials provided by ACS after December 31, 2009, will be adjusted by ACS in its sole determination based upon current market conditions; which adjustment, ACS will provide to KAWC in writing. If ACS adjusts the price and the adjustment is not acceptable to KAWC, KAWC has the right to cancel this Task Order upon prior written notice to ACS. In such instance, KAWC shall compensate ACS for all work performed up to the date of termination, at the price in effect at the time ACS performed the services.

## 4. Warranty:

| Filter <br> Number |  | Warranty Period <br> Thirty-Six (36) Months |
| :---: | :--- | :--- |
| 20 | Installation Date: <br> Warranty Expiration Date: |  |

## 5. Granular Activated Carbon Properties:

The Reactivated GAC shall not contain soluble inorganic or organic substances in quantities capable of producing deleterious or injurious effects on the health of those consuming the water, shall not impart to the water any contaminant that exceeds the limits as defined by the United States Environmental Protection Agency, Drinking Water Regulations, and shall meet the following specifications:

| Iodine number | 800 minimum |
| :--- | :--- |
| Density | $28-30 \mathrm{ob} / \mathrm{cubic}$ foot |
| Effective Size | $0.8-1.0 \mathrm{~mm}$ |
| Uniformity Coefficient | 2.1 maximum |
| Moisture | $2 \%$ maximum |
| Abrasion Number | 75 minimum |
| Water Soluble Ash | $1 \%$ maximum |
| Typical Mesh Size | $8 \times 30$ |

6. Any term used in this Task Order that is not defined herein, shall be as it is defined in the Agreement.
7. This Task Order shall be read in conjunction with the Agreement and shall be incorporated therein by reference as if set forth in its entirety. If there are any inconsistencies between this Task Order and the Agreement, this Task Order shall govern.
[SIGNATURE PAGE TO FOLLOW]

IN WITNESS WHEREOF, the Parties have caused this Task Order to be executed by their duly authorized representatives as of the Effective Date.

ACCEPTED AND AGREED:
Kentucky American Water Company

By:


Keith L. Cartier Vice-President, Operations

## ACCEPTED AND AGREED:

AAET, L.P.

By:


## TASK ORDER FOR GAC REACTIVATION AND SALE

TASK ORDER NO.: Kentucky American Water Company-Task Order 5

This Task Order ("Task Order") is made as of this 6 "thay of May, 2009 ("Effective Date"), by and between AAET, L.P., a Delaware limited partnership, having its principal office at 1025 Laurel Oak Road, Voorhees, New Jersey 08043 ("ACS") and Kentucky American Water Company, a Kentucky corporation, having its principal office at 2300 Richmond Road, Lexington, Kentucky 40502 ("KAWC"). ACS and KAWC are individually referred to herein as a "Party" and collectively referred to herein as the "Parties".

## 1. Services:

All services, labor, and terms and conditions of performance that are the subject of this Task Order shall be performed and provided by the Parties in accordance with the provisions of the "Consolidated GAC Reactivation and Sale Agreement" entered into by and between the Parties on May 6, 2009 ("Agreement").

ACS shall perform the following services, which it shall carry out in accordance with the parameters set forth in the Agreement: Remove the Spent GAC from the Filter set forth below, reactivate it, and return the Reactivated GAC to the Filter, which ACS shall do in accordance with the terms of the Agreement.

## 2. Filter:

| Plant | Filter <br> Number | Surface <br> Area | GAC <br> Depth | GAC <br> Volume | Anticipated Installation <br> Period |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Lexington | 21 | 340 Sq. <br> Feet | 2 Feet | 680 Cu . Feet | May, 2009 |

## 3. Compensation:

In consideration of the services ACS is providing pursuant to the terms of the Agreement and this Task Order, and the provision of the Warranty, KAWC shall compensate ACS as set forth below:

| Unit Price <br> Per <br> Cubic Foot | Estimated Project Price* |
| :---: | :---: |
| $\$ 39.36$ | $\$ 26,764.80$ |

*Actual price is based upon the total volume of GAC delivered.

The price set forth herein is guaranteed until December 31, 2009. The price for any services performed or materials provided by ACS after December 31, 2009, will be adjusted by ACS in its sole determination based upon current market conditions; which adjustment, ACS will provide to KAWC in writing. If ACS adjusts the price and the adjustment is not acceptable to KAWC, KAWC has the right to cancel this Task Order upon prior written notice to ACS. In such instance, KAWC shall compensate ACS for all work performed up to the date of termination, at the price in effect at the time ACS performed the services.

## 4. Warranty:

| Filter <br> Number | Warranty Period <br> Thirty-Six (36) Months |  |
| :---: | :--- | :---: |
| 21 | Installation Date: <br> Warranty Expiration Date: | - |

5. Granular Activated Carbon Properties:

The Reactivated GAC shall not contain soluble inorganic or organic substances in quantities capable of producing deleterious or injurious effects on the health of those consuming the water, shall not impart to the water any contaminant that exceeds the limits as defined by the United States Environmental Protection Agency, Drinking Water Regulations, and shall meet the following specifications:

| Yodine number | 800 minimum |
| :--- | :--- |
| Density | $28-30 \mathrm{lb} . / \mathrm{cubic}$ foot |
| Effective Size | $0.8-1.0 \mathrm{~mm}$ |
| Uniformity Coefficient | 2.1 maximum |
| Moisture | $2 \%$ maximum |
| Abrasion Number | 75 minimum |
| Water Soluble Ash | $1 \%$ maximum |
| Typical Mesh Size | $8 \times 30$ |

6. Any term used in this Task Order that is not defined herein, shall be as it is defined in the Agreement.
7. This Task Order shall be read in conjunction with the Agreement and shall be incorporated therein by reference as if set forth in its entirety. If there are any inconsistencies between this Task Order and the Agreement, this Task Order shall govern.
[SIGNATURE PAGE TO FOLLOW]

IN WITNESS WHEREOF, the Parties have caused this Task Order to be executed by their duly authorized representatives as of the Effective Date.

## ACCEPTED AND AGREED:

## Kentucky American

 Water CompanyBy: Presto
Keith L. Cartier
Vice-President, Operations

ACCEPTED AND AGREED:
AET, LIP.

## LEASE

This Agreement made this 11th day of September, 2009, between KENTUCKY AMERICAN WATER COMPANY, a Kentucky corporation (LESSOR), and AMERICAN WATER WORKS SERVICE COMPANY, INC., a Delaware corporation (LESSEE):

In consideration of the rent and other mutual terms, covenants, agreements and conditions set forth in this Lease, the parties agree that the LESSOR has agreed to let to the LESSEE, and the LESSEE has agreed to lease from the LESSOR, the Premises described in Section 1.

## 1. Premises

a. By this Agreement, LESSOR is leasing to LESSEE, and LESSEE is renting from LESSOR, that certain space located on the third (3rd) floor of the Building, shown on the floor plan attached as Exhibit "A" ("Premises"). The term "Building" shall mean the three story office building located at 2300 Richmond Road, Lexington, Kentucky. The total agreed square footage of the Premises, in rentable square feet which includes LESSEE's proportionate share of the common areas and core space of the Building, is approximately 3,520 square feet. LESSOR expressly reserves the right to change the name of the Building without notice to LESSEE.
b. In addition, LESSOR further grants to LESSEE limited use of conference rooms, restrooms, and similar common areas located in the Building. LESSEE will be responsible to schedule the use of the Conference Rooms via Lotus Notes or the thencurrent electronic method for doing so. LESSOR also grants LESSEE access to and use of the surrounding grounds and parking areas.
c. LESSEE will be responsible for any and all damage, normal wear and tear excepted, that occurs or results from LESSEE's use or occupancy of any of Building. LESSEE will also be responsible for any special, additional janitorial service required or incurred as a result of LESSEE's use of the Building.

## 2. Term of Lease

The term of this Lease shall be for a period of five (5) years beginning the August 1, 2009. The term shall automatically renew for successive five (5) year periods unless otherwise terminated by either party by giving the other party written notice at least one hundred eighty (180) days prior to the end of the then current period (the original term and all successive terms shall be referred to herein as the "Term").

## 3. Rent

LESSEE shall pay LESSOR or LESSOR'S agent as rent for the Premises an Annual Rent of $\$ 158,748$ to pay by monthly installments equaling $\$ 13,229$. This amount is the base rent.
If LESSEE exercises its option to renew this Lease for the renewal term(s), the rent for the renewal term(s) shall be determined by then current market rates for similar commercial property in the area.

This initial Annual Rent is based on the percentage of Building occupied by LESSEE, currently $24 \%$. This calculation will be confirmed annually, and the Annual Rent shall be adjusted if the space requirements of LESSEE increase or decrease from that current percentage.

## 4. Taxes

It is further agreed between the parties that real estate taxes are included in the rental amount that LESSEE pays.

## 5. Condition and Upkeep of Premises

LESSEE will examine the condition of the Premises and will acknowledge in writing that it has received the same in good order and repair prior to assuming possession of the Premises. LESSEE further acknowledges that no representations as to the condition and repair thereof have been made by LESSOR, or its agent, prior to or at the execution of this Lease that are not herein expressed. LESSEE will keep, at its own expense, the Premises including all appurtenances, in good repair, replacing all broken glass with glass of the same size and quality as that broken, and will replace all damaged plumbing fixtures with others of equal quality, and will keep the Premises, including adjoining lands, in a clean and healthful condition according to the applicable municipal and/or county ordinances and the direction of the proper public officers during the term of this Lease at LESSEE'S expense. LESSOR will remove all snow and ice from the sidewalk and parking lots of the Premises when necessary and will have the grass mowed when necessary. Upon the termination of this Lease, in any way, LESSEE will yield up the Premises to LESSOR, in good condition and repair, loss by fire and ordinary wear excepted, and will deliver the keys to the Premises at the place of payment of said rent.

## 6. LESSEE Not to Misuse; Sublet; Assignment

LESSEE will not allow the Premises to be used for any purpose other than an office/service center complex, and will not load floors with machinery or goods beyond the floor load rating prescribed by applicable municipal and/or county ordinances, and will not allow the Premises to be occupied in whole, or in part, by any other person, and will not sublet the same or any part thereof, nor assign this Lease without in each case the written consent of the LESSOR, which will not be unreasonably withheld. LESSEE will not permit any transfer by operation of law of the interest in the Premises acquired through this Lease, and will not permit the Premises to be used for any unlawful purpose, or for any purpose that will injure the reputation of the building or increase the fire hazard of the building, or disturb the neighborhood, and will not permit the same to
remain vacant or unoccupied for more than ten (10) consecutive days. Except as approved by LESSOR, LESSEE will not allow any signs, cards or placards to be posted, or placed on the building.

## 7. Mechanic's Lien

LESSEE will not permit any mechanic's lien or liens to be placed upon the Premises or any building or improvement thereon during the term hereof, and in case of the filing of any such lien LESSEE will promptly pay same. If default in payment thereof shall continue for thirty (30) days after written notice thereof from LESSOR to the LESSEE, the LESSOR shall have the right and privilege at LESSOR'S option of paying the same or any portion thereof without inquiry as to the validity thereof, and any amounts so paid, including expenses and interest, shall be so much additional indebtedness hereunder due from LESSEE to LESSOR and shall be repaid to LESSOR immediately on rendition of a bill therefore.

## 8. Indemnity for Accidents

LESSEE covenants and agrees that it will protect and save and keep the LESSOR forever harmless and indemnified against and from any penalty or damages or charges imposed for any violation of any laws or ordinances, whether occasioned by the neglect of LESSEE or those holding under LESSEE, and the LESSEE will at all times protect, indemnify and save and keep harmless the LESSOR against and from any and all loss, cost, damage or expense, arising out of or from any accident or other occurrence on or about the Premises, causing injury to any person or property whomsoever or whatsoever and will protect, indemnify and save and keep harmless the LESSOR against and from any and all claims and against and from any and all loss, cost, damage or expense to the extent arising out of any failure of LESSEE in any respect to comply with and perform all the requirements and provisions hereof and excluding any such loss, cost, damage or expense caused by LESSOR's negligence or intentional misconduct.

## 9. Non-Liability of LESSOR

a. LESSOR shall not be liable for any damage to, or loss of, property in the Premises belonging to LESSEE, its employees, agents, visitors, licensees or other persons in or about the Premises, or for damage or loss suffered by the business of LESSEE, from any cause whatsoever, including, without limiting the generality thereof, such damage or loss resulting from fire, steam, smoke, electricity, gas, water, rain, ice or snow, which may leak or flow from or into any part of the Premises, or from the breakage, leakage, obstruction or other defects of the pipes, wires, appliances, plumbing, air-conditioning or lighting fixtures of the same, whether the said damage or injury results from conditions arising upon the Premises or upon other portions of the Building of which the Premises are a part, or from other sources unless caused solely by the negligence or willful misconduct of LESSOR. LESSOR shall not be liable in any manner to LESSEE, its agents, employees, invitees or visitors for any injury or damage to LESSEE, LESSEE's agents, employees, invitees or visitors, or their property, caused by the criminal or intentional misconduct, or by any act or neglect of third parties or of LESSEE, LESSEEs agents, employees, invitees or visitors, or of any other LESSEE of the Building.

LESSEE covenants that no claim shall be made against LESSOR by LESSEE, or by any agent or servant of LESSEE, or by others claiming the right to be in the Premises or in the Building through or under LESSEE, for any injury, loss or damage to the Premises or to any person or property occurring upon the Premises from any cause other than the sole negligence or willful misconduct of LESSOR. In no event shall LESSOR be liable to LESSEE for any consequential damages sustained by LESSEE arising out of the loss or damage to any property of LESSEE.
b. LESSEE covenants and agrees to save LESSOR and LESSOR's agent harmless and indemnified, and to defend LESSOR and LESSOR's agent from all loss, damage, liability or expense of any kind including without limitation attorneys' fees and court costs incurred, suffered or claimed by any person whomsoever, or for any damage or injury to any persons or property from any cause whatsoever, by reason of the use or occupancy by LESSEE, its agents, employees, invitees or visitors of the Premises, or of the Building unless and to the extent caused by the negligence or willful misconduct of LESSOR.

## 10. LESSOR'S Services

LESSOR covenants and agrees that it shall furnish appropriate operations and maintenance (O\&M) services, such as: (a) heat and air-conditioning to maintain the Premises at a reasonably comfortable temperature during LESSEE's normal business hours, which LESSOR understands will be all day and night, every day of the year; (b) electricity for lighting purposes and operation of ordinary office equipment and computers, excluding supplemental HVAC and other equipment requiring heavier than normal office use of electricity; (c) elevator service, (d) janitor and cleaning services Monday through Friday of each week, except holidays recognized by the U. S. Government, and (e) lawn services to the grounds, as needed. LESSEE acknowledges and agrees that LESSOR shall not be liable in any way for any damage or inconvenience caused by the cessation or interruption of heating, air-conditioning, electricity, elevator, janitor or cleaning service occasioned by fire, accident, strikes, necessary maintenance, alterations or repairs, or other causes beyond LESSOR's control and LESSEE shall not be entitled to any abatement or reduction of Rent by reason thereof, except if the interruption continues beyond fifteen (15) business days.

LESSOR reserves the right to erect, use, connect to, maintain and repair pipes, ducts conduits, cables, plumbing, vents and wires in, to and through the Premises as and to the extent that LESSOR believes necessary or appropriate for the proper operation and maintenance of the Building and the right at all times to transmit water, heat, airconditioning and electric current through the pipes, ducts, conduits, cables, plumbing, vents and wires, provided LESSOR shall not unreasonably interfere with LESSEE's operations.

## 11. LESSEE'S Duties

LESSEE covenants and agrees: (a) not to obstruct or interfere with the rights of other occupants, or injure or annoy them or those having business with them, or conflict with the fire laws or regulations, or with any insurance policy upon the Building or any part of
the Premises, or with any statutes, rules or regulations now existing or subsequently enacted or established by the local, state or federal governments and LESSEE shall be answerable for all nuisances caused or suffered on the Premises, or caused by LESSEE in the Building, or on the approaches to it; (b) not to place a load on any floor exceeding the floor load which such floor was designed to carry in accordance with the plans and specifications of the Building, and not to install, operate or maintain in the Premises any safe or heavy item of equipment except in the manner and location as LESSOR prescribes so as to achieve a proper distribution of weight; (c) not to strip, overload, damage or deface the Premises, hallways, stairways, elevators, parking facilities or other public areas of the Building, or the related fixtures; (d) not to permit any trade or occupation to be carried on or use made of the Premises which is unlawful, noisy, offensive, or injurious to any person or property, or such as to increase the danger of fire or affect or make void or voidable any insurance on the Building, or which may render any increased or extra premium payable for such insurance, or which is contrary to any law or ordinance, rule or regulation from time to time established by any public authority; (e) not to move any furniture or equipment into or out of the Premises except at the times and in the manner as LESSOR may from time to time designate; (f) not to place upon the interior or exterior of the Building, or any window or door of the Premises, any placard, sign, lettering, window covering or drapes, except as first approved in writing by LESSOR; (g) to park vehicles only in the area from time to time designated by LESSOR; (h) to conform to all rules and regulations from time to time established by the appropriate insurance rating organization and to all reasonable rules and regulations from time to time established by LESSOR; and (i) not to conduct or permit in the Premises either the generation, treatment, storage or disposal of any hazardous substances and materials or toxic substances of any kind as described in the Comprehensive Environmental Response, Compensation and Liability Act of 1980, as amended (42 U.S.C. Sections 9601 et seq.), the Resource Conservation and Recovery Act, as amended (42 U.S.C. 6901 et seq.), any regulations adopted under these acts, or any other present or future federal, state, county or local laws or regulations concerning environmental protection, except for typical amounts of these hazardous or toxic substances, the presence or use of which is necessary or convenient for the conduct of LESSEE's particular business within the Premises and is not in violation of applicable environmental laws and regulations, and LESSEE shall prohibit its assignees, sublessees, employees, agents and contractors (collectively, "Permittees") from doing so and LESSEE shall indemnify, defend and hold LESSOR and its agents harmless from all loss, costs, foreseeable and unforeseeable, direct or consequential; damages; liability; fines; prosecutions; judgments; litigation; and expenses, including, clean-up costs, court costs and reasonable attorneys' fees arising out of any violation of the provisions of this Article by LESSEE or its Permittees.

In addition to the base rent set in Paragraph 3 of this Lease, LESSEE shall pay a percentage of the appropriate $O \& M$ expenses of the Building, examples of which are specified in Paragraph 10. The percentage is calculated based on the percentage of building occupied by LESSEE, currently $24 \%$. Such calculation will be confirmed annually. LESSOR shall provide bills for those expenses to LESSEE on a monthly basis, and LESSEE shall pay its share with its next succeeding base rental payment.

## 12. Access to Premises

LESSEE will allow LESSOR free access to the Premises for the purpose of examining or exhibiting them, or to make any needful repairs, or alterations that LESSOR may see fit to make.
13. Holding Over

LESSEE will, at the termination of this Lease by lapse of time or otherwise, yield up immediate possession to LESSOR, and failing to do so, will pay as liquidated damages, for the whole time such possession is withheld, the sum of Four Hundered Fifty and no/100 Dollars ( $\$ 450.00$ ) per day. These daily liquidated damages shall escalate proportionately to increases in Annual Base Rent under Section 3 (i.e., a $10 \%$ increase in Annual Base Rent, as compared to the initial Annual Base Rent, shall result in a $10 \%$ increase in the daily liquidated damages, as compared to the initial $\$ 450.00$ per day). The provisions of this clause shall not be held as a waiver by LESSOR of any right of reentry; nor shall the receipt of the rent or any part thereof, or any other act in apparent affirmance of tenancy, operate as a waiver of the right to forfeit this Lease and the term granted for the period still unexpired, for a breach of any of the covenants of the Lease Agreement.
14. Inflammable or Explosive Materials

LESSEE shall not keep or use any inflammable or explosive liquids or materials on the Premises. LESSEE shall be liable for and shall assume all obligations and costs associated with any environmental or other damages and cleanup or leakage associated with any activity by LESSEE or releases by LESSEE that occur on the Premises during the term of this lease. This liability shall survive the term of this Lease and the parties specifically waive any applicable statute of limitations that might otherwise bar any claim by LESSOR under this paragraph.

## 15. Re-Entry

If LESSEE is in default in the payment of the rent, in whole or in part, or in any of the covenants to be kept by the LESSEE, it shall be lawful for LESSOR at any time at its election, without notice, to declare the lease term ended, and to re-enter the Premises, in whole or in part, with or without process of law, and to remove LESSEE, or any persons occupying the same, without prejudice to any remedies which might otherwise be used for arrears of rent, and LESSOR shall have at all times the right to distrain for rent due.

## 16. Confession of Judgment <br> [INTENTIONALLY OMITTED]

## 17. Fire and Casualty

In case the Premises shall be rendered untenantable by fire, or other casualty, LESSOR may, at its option, terminate this Lease, or repair the Premises within sixty (60) days, and failing so to do, or upon the destruction of the Premises by fire or other casualty, the term created shall terminate.

## 18. Payment of Fees

LESSEE will pay and discharge all reasonable costs, attorney's fees and expenses that may be incurred by LESSOR in enforcing the covenants and agreements of this Lease, and this Lease and all covenants and agreements contained in it shall be binding upon, apply, and inure to the benefit of the respective heirs, executors, successors, administrators, and assigns of all parties to this Lease.
19. Insurance
a. Public Liability and Property Damage Insurance. LESSEE shall procure a public liability and property damage insurance policy to protect the LESSOR against loss or damage occasioned by any person or corporation, or to any property of any person or corporation, by, through, or under any act, occasioned by the LESSEE, its agents, or employees, or arising out of or in any way pertaining to the operation of the demised Premises. This policy shall contain minimum limits of $\$ 1,000,000$ per person and $\$ 2,000,000$ combined single limit per occurrence for personal injuries and $\$ 1,000,000$ for property damage. In the event that LESSEE shall fail to obtain said policy or shall fail to renew said policy at any time during the term of this Lease, or extension thereof, the LESSOR shall have the right to obtain said policy and pay the premium therefore, and the amount of said premium so paid is declared to be so much additional rent and payable with the installment of rent next due after such payment.
b. Extended Coverage. In the event that the rates on LESSOR'S fire and extended coverage insurance on the building on the Premises are increased by reason of LESSEE'S use and occupancy of the Premises contrary to the use contemplated under this Lease, the LESSEE agrees to pay the additional premiums caused by these increased rates during the term of this Lease and any extensions of it. LESSEE'S failure to pay these additional premiums shall constitute a failure to pay the rent on the Premises.
c. Fire and Casualty Insurance. LESSEE shall maintain fire and casualty insurance in a company or companies approved by LESSOR in an adequate amount to protect the LESSOR and LESSEE, as their interests may appear, and LESSEE, upon request by LESSOR, shall furnish to LESSOR originals or certificates of these policies. The policies shall be noncancelable except upon ten (10) days' notice to LESSOR.

## 20. Assignment

LESSEE may not assign its rights under this Lease without the express written consent of LESSOR. LESSOR may assign its rights under this Lease.

## 21. General

Where in this instrument masculine pronouns are used, or words indicating the singular number appear, these words shall be considered as if feminine or neuter pronouns or words indicating the plural number had been used, where the context indicates the propriety of such use.

Where in this instrument rights are given to either LESSOR or LESSEE, those rights shall extend to the agents, employees, or representatives of those persons.

IN WITNESS WHEREOF, the parties by their duly authonzed officers have executed this instrument this day and year first above written.


# KENTUCKY-AMERICAN WATER COMPANY <br> CASE NO. 2010-00036 <br> COMMISSION STAFF'S FIRST REQUEST FOR INFORMATION 

## Witness: Michael Miller

31. a. List and describe each service that each affiliated company renders to KentuckyAmerican.
b. For each service listed above, describe the benefit(s), if any, that KentuckyAmerican derives from the provision of this service from the affiliate.

## Response:

a. Please refer to Exhibit 35 KAW_APP_EX35_02610.pdf of the Company's filing for a comprehensive list and detailed description of services rendered to Kentucky-American by the AWWSC and AAET. Also see the testimony of Patrick Baryenbruch and Michael Miller concerning services provided by AWWSC and AWCC.
b. AWWSC - As described in the testimony of Mr. Baryenbruch and Mr. Miller, the Company receives these services at or below what it could obtain those in the market. AWWSC provides the Company FTEs and expertise on a shared basis in many areas critical to the provision of water service that would not be possible to replicate in the market place or locally. Through AWWSC, KAWC has access to one of the premier water quality labs in the nation on an as needed basis, accounting and tax expertise, national purchasing power, water industry engineering expertise, rate expertise, finance and management expertise and many other disciplines required to provide effective water service. KAWC could not cost effectively replace these services and expertise locally. Because KAWC has these services available on a shared basis through AWWSC, it receives the services and expertise in many cases on a partial FTE basis. To duplicate those costs locally, KAWC would need to attract employees with cross disciplinary skills. Such employees would need to be proficient in both water quality and
design engineering, or in water quality and finance. It is simply impractical that employees with multiple disciplinary skills are available at the local level. Please see the testimony of Mr. Miller and Exhibit MAM-7 which describes the increase in Service Company charges and the net financial benefit from those transitions.

AAET - The carbon leases/purchases from AAET were obtained at or below market costs.

AWCC - See testimony of Mr. Miller for answers to questions 13-15 which describe the benefits of utilizing AWCC to obtain the debt capital for KAWC. Also see Exhibit MAM-4 attached to Mr. Miller’s testimony for a recap of the financial savings related to debt obtained from AWCC.

For the electronic version, please refer to KAW_R_PSCDR1\#31_031610.pdf.

# KENTUCKY-AMERICAN WATER COMPANY <br> CASE NO. 2010-00036 <br> COMMISSION STAFF'S FIRST REQUEST FOR INFORMATION 

Witness: Michael Miller
32. Provide a comprehensive list and detailed description of the services that KentuckyAmerican has provided to affiliated companies.

## Response:

The Company provides work space for a number of employees on the payroll of American Water Works Service Company - Eastern Region. Office space and overheads related to the space utilized by these employees were billed to AWWSC per the contract. During the twelve months ending December 2009, KAWC billed AWWSC \$100,240 for utilization of the Kentucky American office space.

For the electronic version, refer to KAW_R_PSCDR1\#32_031610.pdf.


[^0]:    The difference in short term debt is due mainly to the construction of the pool 3 treatment plant, long term debt difference is due to a sinking fund payment due March 2010, common equity is due an equity infusion May 2010 and the remaining diffference is related to the allocation of JDITC to the elements of the capital structure.

[^1]:    * This Opt Out of Coverage provision may vary or may not apply depending on the terms of your Union Contract.

[^2]:    Voluntary
    Coverage for
    Vour Dependents

[^3]:    $\stackrel{\sim}{\bullet}$

[^4]:    

