COMMONWEALTH OF KENTUCKY

BEFORE THE PUBLIC SERVICE COMMISSION OF KENTUCKY

In the Matter of:	
Proposed Adjustment of the Whole Water Service Rates of the City of Augusta	esale)) Case No. 2015-00039)
	AUGUSTA'S RESPONSES TO ING INFORMATION REQUESTS
The City of Augusta ("City" requested at the September 8, 2015, h), by counsel, hereby files its responses to the information nearing.
	Respectfully submitted, M. J.

CYNTHIA THOMPSON
202 East Riverside Dr.
Augusta, Kentucky 41002
ccthompsonatty@yahoo.com
Tel: (606) 756-2663
COUNSEL FOR CITY OF AUGUSTA

COMMONWEALTH OF KENTUCKY

BEFORE THE PUBLIC SERVICE COMMISSION OF KENTUCKY

In the Matter of:			
Proposed Adjustment of the Wholesale Water Service Rates of the City of Augusta)	Case No. 2015-00039	

CERTIFICATION OF RESPONSES TO THE POST-HEARING DATA REQUESTS

This is to certify that I have supervised the preparation of the City of Augusta's responses to the requests for information from the hearing on September 8, 2015, and that the responses are true and accurate to the best of my knowledge, information, and belief after reasonable inquiry.

Date:

Doug Padgett

WTP Operations Manager

1. List all water testing for the Water Treatment Plant and copies of invoices for testing.

ANSWER: The attached invoices from Appalachian States Analytical, LLC, show the testing that was performed in Fiscal Year 2014.





PO BOX 520 SHELBIANA, KY 41562 INVOICE NO.:

047835

INVOICE DATE:

7/31/13

ACCOUNT NO.:

AU983

P.O. NO.:

SEND PAYMENT TO:

APPALACHIAN STATES ANALYTICAL, L.L.C.

SUITE 100 . 147 ELEVENTH AVENUE SOUTH CHARLESTON, WV 25303

TO: Augusta Water Plant

PO Box 85

Augusta, KY 41002

Attn: Gretchen England

7/03/13	LAB. NO.	DESCRIPTION	1		
1/03/13		DESCRIPTION	PRICE	QUANTITY	AMOUNT
	2013-09002	Fluoride Fluoride Sample	13.50	1	\$13.50
7/31/13	2013-09973	Augusta Water Plant Monthly Pickup Fee	50.00	1	\$50.00
, 1/13	2013-10254	Augusta Water Plant Bacteriological Sample	14.75	2	\$29.50
/10/13	2013-09139	Fluoride Fluoride Sample	13.50	1	\$13.50
/17/13	2013-09607	036 KY0120013 Lead & Copper 039 KY0120013	26.75	1	\$26.75
		Lead & Copper 026 KY0120013	26.75	1	\$26.75
		Lead & Copper 015 KY0120013	26.75	1	\$26.75
		Lead & Copper 025 KY0120013	26.75	1	\$26.75
		Lead & Copper 040 KY0120013	26.75	1	\$26.75
		Lead & Copper 023 KY0120013	26.75	1	\$26.75
		Lead & Copper 033 KY0120013	26.75	1	\$26.75
		Lead & Copper 013 KY0120013	26.75	1	\$26.75
		Lead & Copper 024 KY0120013	26.75	1	\$26.75
		Lead & Copper	26.75	1	\$26.75
		TOTAL AMOUNT DUE:			\$374.00





INVOICE NO.:

048011

PO BOX 520

SHELBIANA, KY 41562

INVOICE DATE:

8/31/13

ACCOUNT NO.:

E86UA

P.O. NO.:

TO:

Augusta Water Plant

PO Box 85

Augusta, KY 41002

Attn:

Gretchen England

SEND PAYMENT TO:

APPALACHIAN STATES ANALYTICAL, L.L.C.

SUITE 100 . 147 ELEVENTH AVENUE

SOUTH CHARLESTON, WV 25303

6.FOH? DATE	LAB. NO.	DESCRIPTION	PRICE	QUANTITY	AMOUNT
3/07/13	2013-10633.	052 KY0120013 TTHM HAA SM2 KY0120013 TTHM HAA	48.00 171.00 48.00 171.00	1 1 1 1	\$48.00 \$171.00 \$48.00 \$171.00
3, 1/13	2013-11722	Augusta Water Plant Bacteriological Sample	14.75	2	\$29.50
1/31/13	2013-11818	Augusta Water PLant Monthly Pickup Fee	50.00	1	\$50.00
1/07/13	2013-10655,	Fluoride Fluoride Sample	13.50	1	\$13.50
2013-1092	2013-10920	Fluoride Fluoride Sample	13.50	1	\$13.50
		TOTAL AMOUNT DUE:			\$544.50





INVOICE NO.:

048185

9/30/13

INVOICE DATE:

ACCOUNT NO.:

AU983

P.O. NO.:

TO:

Augusta Water Plant

PO Box 85

Augusta, KY 41002

PO BOX 520

Attn: Gretchen England

SEND PAYMENT TO:

APPALACHIAN STATES ANALYTICAL, L.L.C. SUITE 100 . 147 ELEVENTH AVENUE

SOUTH CHARLESTON, WV 25303

REPORT DATE	LAB. NO.	DESCRIPTION	PRICE	QUANTITY	AMOUNT
9/04/13	2013-11991	Fluoride Fluoride Sample	13.50	1	\$13.50
9/30/13	2013-13249	Augusta Water Plant Bacteriological Sample	14.75	2	\$29.50
11/13	2013-12403	Fluoride Fluoride Sample	13.50	1	\$13.50
/30/13	2013-13173	Augusta Water Plant Monthly Pickup Fee	50.00	1	\$50.00
		TOTAL AMOUNT DUE:			\$106.50

INVOICE

16064370615

APPALACHIAN STATES ANALYTICAL, L.L.C.

PO BOX 520 SHELBIANA, KY 41562 INVOICE NO .:

048358

INVOICE DATE: 10/31/13

ACCOUNT NO.: AU983

P.O. NO.:

TO:

Augusta Water Plant PO Box 85 Augusta, KY 41002

Attn: Gretchen England

SEND PAYMENT TO:

APPALACHIAN STATES ANALYTICAL, L.L.C. SUITE 100 . 147 ELEVENTH AVENUE SOUTH CHARLESTON, WV 25303

REPORT DATE	LAB. NO.	DESCRIPTION		PRICE	QUANTITY	AMOUNT
0/02/13	2013-13469	Fluoride Fluoride Sample	13.50	1	\$13.50	
)/31/13	2013-14961	Augusta Water Plant Bacteriological Sample	14.75	2	\$29.50	
)/09/13	2013-13828	Augusta Backwash Test K Water Treatment Plant	35.00	1	\$35.00	
		fluoride Fluoride Sample	13.50	1	\$13.50	
/31/13	2013-14832	Augusta Water Plant Nonthly Pickup Fee	50.00	1	\$50.00	
		TOTAL AMOUNT DUE:			\$141.50	



16064370615

PO BOX 520 SHELBIANA, KY 41562

APPALACHIAN STATES ANALYTICAL, L.L.C.

INVOICE NO.:

048535

INVOICE DATE:

11/30/13

ACCOUNT NO.:

AU983

P.O. NO.:

TO: Augusta Water Plant

PO Box 85

Augusta, KY 41002

Attn:

Gretchen England

SEND PAYMENT TO:

APPALACHIAN STATES ANALYTICAL, L.L.C.

SUITE 100 . 147 ELEVENTH AVENUE SOUTH CHARLESTON, WV 25303

THERE ARE QUESTIONS CONCERNING THIS INVOICE PLEASE CALL: 606,437,6616

REPORT DATE	LAB. NO.	DESCRIPTION	PRICE	QUANTITY	AMOUNT
1/06/13	,2013-15263	Fluoride Fluoride Sample	13.50	1	\$13.50
1/30/13	2013-16361	Augusta Water Plant Bacteriological Sample	14.75	2	\$29.50
.3/13	-2013-15588	Fluoride Fluoride Sample	13.50	1	\$13.50
./30/13	2013-16217	Augusta Water Plant Monthly Pickup Fee	50.00	1	\$50.00
		TOTAL AMOUNT DUE:			\$106.50



PO BOX 520

SHELBIANA, KY 41562

INVOICE NO.:

048715

INVOICE DATE:

12/31/13

ACCOUNT NO.:

AU983

P.O. NO.:

TO: Augusta Water Plant

PO Box 85

Augusta, KY 41002

Attn: Gretchen England

SEND PAYMENT TO:

APPALACHIAN STATES ANALYTICAL, L.L.C.

REPORT DATE	LAB. NO.	DESCRIPTION	PRICE	QUANTITY	AMOUNT
2/04/13	2013-16583	Fluoride Fluoride Sample	13.50	1	\$13.50
2/31/13	2013-17732	Augusta Water Plant Bacteriological Sample	14.75	2	\$29.50
. 1/13	2013-16907	Fluoride Fluoride Sample	13.50	1	\$13.50
2/31/13	2013-17377	Augusta Water Plant Monthly Pickup Fee	50.00	1	\$50.00
		TOTAL AMOUNT DUE:			\$106.50

INVOICE

16064370615

APPALACHIAN STATES ANALYTICAL, L.L.C.

INVOICE NO.:

048881

PO BOX 520

SHELBIANA, KY 41562

INVOICE DATE:

1/31/14

ACCOUNT NO.:

AU983

P.O. NO.:

TO: Augusta Water Plant

PO Box 85

Augusta, KY 41002

Attn: Gretchen England

SEND PAYMENT TO:

APPALACHIAN STATES ANALYTICAL, L.L.C.

REPORT DATE	LAB, NO.	DESCRIPTION	PRICE	QUANTITY	AMOUNT
1/02/14	`2014-00059	Fluoride Fluoride Sample	13.50	1	\$13.50
./31/14	2014-01460	Augusta Water Plant Bacteriological Sample	14.75	2	\$29.50
/08/14	`2014-00325	Fluoride Fluoride Sample	13.50	1	\$13.50
/31/14	2014-01418	Augusta Water Plant Monthly Pickup Fee	50.00	1	\$50.00
		TOTAL AMOUNT DUE:			\$106.50



16064370615

PO BOX 520 SHELBIANA, KY 41562

APPALACHIAN STATES ANALYTICAL, L.L.C.

INVOICE NO.:

049056

INVOICE DATE:

2/28/14

ACCOUNT NO.:

AU983

P.O. NO.:

Augusta Water Plant

PO Box 85

Augusta, KY 41002

Attn: Gretchen England

SEND PAYMENT TO:

APPALACHIAN STATES ANALYTICAL, L.L.C.

REPORT DATE	LAB. NO.	DESCRIPTION	PRICE	QUANTITY	AMOUNT
2/05/14	12014-01642	FLOURIDE Fluoride Sample	14.25	1	\$14.25
?/28/14	2014-03060	Augusta Water Plant Bacteriological Sample	14.75	2	\$29.50
2/14	2014-02012	045 Fluoride Sample	14.25	1	\$14.25
/27/14	2014-02845	Augusta Water Plant Monthly Pickup Fee	50.00	1	\$50.00
		TOTAL AMOUNT DUE:			\$108.00
			,		



PO BOX 520 SHELBIANA, KY 41562 INVOICE NO.:

049238

INVOICE DATE:

3/31/14

ACCOUNT NO.:

AU983

P.O. NO.:

TO: Augusta Water Plant

PO Box 85

Augusta, KY 41002

Attn: Gretchen England

SEND PAYMENT TO:

APPALACHIAN STATES ANALYTICAL, L.L.C.

SUITE 100 . 147 ELEVENTH AVENUE SOUTH CHARLESTON, WV 25303

IF THERE ARE QUESTIONS CONCERNING THIS INVOICE PLEASE CALL: 606-437-5616

REPORT DATE	LAB. NO.	DESCRIPTION	PRICE	QUANTITY	AMOUNT
3/05/14	2014-03210	Fluoride Fluoride Sample	14.25	1	\$14.25
3/25/14	2014-04212	Augusta Water Plant Monthly Pickup Fee	50.00	1	\$50.00
31/14	2014-04566	Augusta Water Plant Bacteriological Sample	14.75	2	\$29.50
3/12/14	2014-03.577	045 Fluoride Sample	14.25	1	\$14.25
3/05/14	2014-03859	TPB KY0120013 Sodium	25.00	1	\$25.00
/05/14	2014-03230	TPB KY0120013 Secondary	184.00	1	\$184.00
/05/14	2014-03233	TPB KY0120013 Nitrate/Nitrite	60.00	1	\$60.00
		TOTAL AMOUNT DUE:			\$377.00

INVOICE



APPALACHIAN STATES ANALYTICAL, L.L.C.

PO BOX 520 SHELBIANA, KY 41562 INVOICE NO.:

049425

INVOICE DATE:

4/30/14

ACCOUNT NO .:

AU983

P.O. NO .:

TO: Augusta Water Plant

PO Box 85

Augusta, KY 41002

Attn: Gretchen England

SEND PAYMENT TO:

APPALACHIAN STATES ANALYTICAL, L.L.C.

REPORT DATE	LAB. NO.	NVOICE PLEASE CALL: 606-437-5616			
		DESCRIPTION	PRICE	QUANTITY	AMOUNT
/02/14	.2014-04791	045 Fluoride Sample	14.25	1	\$14.25
/29/14	2014-05911	Augusta Water Plant Monthly Pickup Fee	50.00	1	\$50.00
0/14	2014-06100	Augusta Watr Plant Bacteriological Sample	14.75	2	\$29.50
02/14	·2014-04795	TPB KY0120013 Inorganic	185.00	1	\$185.00
09/14	`2014-05047	045 Fluoride Sample	14.25	1	\$14.25
		TOTAL AMOUNT DUE:		5	\$293.00





PO BOX 520 SHELBIANA, KY 41562 INVOICE NO.:

049597

INVOICE DATE:

5/31/14

ACCOUNT NO.:

AU983

P.O. NO.:

TO:

Augusta Water Plant

PO Box 85

Augusta, KY 41002

Attn: Gretchen England

SEND PAYMENT TO:

APPALACHIAN STATES ANALYTICAL, L.L.C.

SUITE 100 . 147 ELEVENTH AVENUE SOUTH CHARLESTON, WV 25303

THERE ARE OURSTIONS CONCERNING

REPORT DATE	LAB. NO.	DESCRIPTION	PRICE	QUANTITY	. AMOUNT
/07/14	. 2014 - 06507	045 Fluoride Sample	14.25	1	\$14.25
/31/14	2:014-07680	Augusta Water Plant Bacteriological Sample	14.75	2	\$29.50
4/14	. 2014-06835	045 Fluoride Sample	14.25	1	\$14.25
/31/14	2014-07570	Augusta Water Plant Monthly Pickup Fee	50.00	1	\$50.00
		TOTAL AMOUNT DUE:			\$108.00
		•			
		•			
	·				

INVOICE



APPALACHIAN STATES ANALYTICAL, L.L.C.

PO BOX 520 SHELBIANA, KY 41562 INVOICE NO .:

049776

INVOICE DATE:

6/30/14

ACCOUNT NO.:

AU983

P.O. NO.:

TO: Augusta Water Plant

PO Box 85

Augusta, KY 41002

Attn: Gretchen England

SEND PAYMENT TO:

APPALACHIAN STATES ANALYTICAL, L.L.C. SUITE 100 . 147 ELEVENTH AVENUE SOUTH CHARLESTON, WV 25303

THERE ARE QUESTIONS CONCERNING THIS INVOICE PLEASE CALL: 606-437-5616

REPORT DATE	LAB. NO.	DESCRIPTION	PRICE	QUANTITY	AMOUNT
5/07/14	2014-06530	TPB KY0120013 Gross Alpha RADIUM 228	105.00 178.00	1 1	\$105.00 \$178.00
5/30/14	2014-09226	Augusta Water Plant Bacteriological Sample	14.75	2	\$29.50
. 1/14	2014-08265	045 Fluoride Sample	14.25	1	\$14.25
/30/14	2014-08823	Augusta Water Plant Monthly Pickup Fee	50.00	1	\$50.00
/04/14	2014-07972	TPB KY0120013 VOC's	195.00	1	\$195.00
04/14	2014-07982	045 Fluoride Sample	14.25	1	\$14.25
		TOTAL AMOUNT DUE:			\$586.00

2. Provide number of gallons sold to Bracken County Water District during the test year.

ANSWER: The number of gallons sold to Bracken County Water District during the test year is correctly identified in the City's Response to Item 7 of the Commission Staff's Second Request for Information. It was 164,627,400 gallons.

The City acknowledges that it erroneously utilized the incorrect gallons in footnote 2 of its Motion to Amend to Include Rate Case Expense, filed on August 28, 2015. In fact, the formula that was used in calculating a volumetric rate to include rate case expense was incorrect. Because only as a matter of law the rate to Bracken County Water District is determined through this rate case, the reasonable expenses related to this rate case incurred by the City should be borne by Bracken County Water District exclusively. Accordingly, if the Commission determines that a rate-case-expense surcharge is no longer appropriate for municipalities and that rate case expense should be included within the volumetric rate, the rate case expense should be allocated exclusively to Bracken County Water District. The appropriate formula using the estimated rate case expense of \$40,000 (and without any adjustments to the Operating Costs identified in the auditor's report) would be the following:

 $(\$417,778 / 214,653.4) + ((\$40,000 / 3) / 164,627.4) \approx \$2.03 \text{ per } 1,000 \text{ gallons}$

Consistent with Commission precedent, the City requests recovery of actual rate case expense even if it exceeds the amount estimated.

3. Confirm whether CI Thornburg has one or two accounts on which to bill.

ANSWER: C.I. Thornburg sent invoices during Fiscal Year 2014 to the City under one account number. Based on the City's request, C.I. Thornburg now sends invoices to the City on separate accounts for the Sewer Department, the Recreation/Pool Department, and the Water Treatment Plant.

4. Identify the salary amount for Assistant City Clerk's calculation of workers' compensation insurance.

ANSWER: The salary amount used to calculate the Assistant City Clerk's workers' compensation insurance was \$29,843.13 during Fiscal Year 2014.

5. Produce the invoice for Audit performed based on FY 2013, which would have been expense incurred in FY 2014.

ANSWER: The requested documents are attached to this Response.

CITY OF AUGUSTA 219 MAIN STREET P.O. BOX 85 AUGUSTA, KY 41002

*** Purchase Order ***

P.O. Numb: *21846 P.O. Descr: AUDIT Order Date: 01/08/2014 Date Req'd: 01/08/2014

Oper: BUC

Vendor: 1282

Ordered By:

DONNA HENDRIX, PSC, CPA

Bill To:

Name:

P.O. BOX 449

Dept:

MOREHEAD KY 40351

Ship To:

CITY OF AUGUSTA 219 MAIN STREET CITY OF AUGUSTA 219 MAIN STREET

P.O. BOX 85

P.O. BOX 85 AUGUSTA

KY 41002

AUGUSTA

KY 41002

Instructions:

Quantity Description

Unit-Cost 1580.0000 Amount 1580.00

1.00 WATER 1.00 SEWER

2300.0000 2220.0000

1800.0000

2300.00

1.00 GAS 1.00 GENERAL

1580.00

2220.00 1800.00

71.399.710.211

2300.00

72.399.720.211 73.399.730.211

2220.00

10.399.100.211

1800.00

Should have charsed WTP

1,185.00

**** Purchase Order Total ****

7900.00

PAID

ACCOUNT <u>Clearing</u>

CHECK #

14001

MASTER

DATE 1-8-14

SIGNATURE <u>A) 1 47,900,00</u>

Page 1 of 1

Donna J. Hendrix, PSC, CPA P.O. Box 449 Morehead KY 40351

INVOICE

13910

DATE 12/11/13 PAGE 1 of 1

CUSTOMER ID: CITY AUGUS

BILL TO:

City of Augusta PO Box 85 219 Main Street Augusta, KY 41002

DESCRIPTION		TNUOMA
6/30/13 AUDIT		7,900.00
		-
	Taxable Sales Tax	0.00 0.00 7,900.00 7,900.00
	Non-Taxable Subtotal	7,900.00
FDWE01011, 09/08/05	Total Due	7,900.00

PENNY STANFIELD CPA

Exhibit 2/

Page 2-of 4

PENNY R. STANFIELD, CPA & CO., PLLC

2202 OLD MAIN STREET MAYSVILLE, KY 41056

Date	Invoice #
11/21/2013	6947

Bill To	
CITY OF AUGUSTA PO BOX 85 AUGUSTA, KY 41002	

		P.O. No.	Terms	Project	
	· · · · · · · · · · · · · · · · · · ·				
Quantity	Description	_	Rate	Amount	
WTP 5.25 1.75 4.75	10/19/13 A/R DEBT, CASH 10/08/13 WTP, SEWER, WATER FUNDS 10/17/13 GAS, GENERAL, A/P 10/22/13 A/P, DEPRECIATION (OPFICE) 10/23/13 GENERAL, FUND 11/14/13 DEPRECIATION WTP (OFFICE) WTP RATE, ADJUSTMENTS, ETC 25 TP D TO PLYMY15	10		80.00 460. 80.00 440. 80.00 420. 80.00 380. 80.00 80. 80.00 240.	

Total

\$2,160.00

6. Produce the invoice for master-meter testing for expense that was incurred within Fiscal Year 2014.

ANSWER: The requested document is attached to this Response.

THE C.I. THORNBURG CO.,INC. PO BOX 2163 4034 ALTIZER AVENUE HUNTINGTON, WV 25705 304-523-3484 Fax 304-523-0510

WARRANTIES: LIMITED TO THOSE PROVIDED BY MANUFACTURER.

**** Invoice ****

27-6

INVOICE DATE	INVOICE NUMBER
10/08/13	S1620261.1
REMIT TO:	PAGE NO.
THE C.I. THORNBURG P.O. BOX 2163 HUNTINGTON, WV 2572	1

BILL TO:

AUGUSTA REGIONAL WTP 219 MAIN STREET AUGUSTA, KY 41002 SHIP TO:

AUGUSTA REGIONAL WTP 4TH AND FERRY STREETS AUGUSTA, KY 41002

CUSTOMER NUMBER	CUSTOMER ORDER NUMBER	CI	JSTOMER JOB NUM	BER.	WHSE	SALESPERSON	TERMS:
							DUE DATE AND CASE DISCOUNT IF APPLICABLE
4378	VERBAL-SUSAN				2	SHISTA	ARE LISTED BELOW.
SALES TICKET NUMBER	ALES TICKET NUMBER SHIP VIA DATE SHIPPED			PPED	ORDER DATE	1 1/2% FINANCE CHARGE	
S1620261.1	1620261.1 SERVICE DEPT 10/08/13				/12	10/00/12	ADDED ON PAST DUE ACCOUNTS.
21020201.1	SERVICE DEPT DESCRIPTION		ORDER QTY	SHIP QTY	/ 13	10/08/13 NET UNIT PRICE	NET AMOUNT
FT.OWNETTED C	ALIBRATION SERVICE BY		ORDER UTT	3HIP (IT)		250.000	1000.00
	UMENTATION TECHNICIAN		*		Ca	250.000	1000.00
	BY INSTRUMENTATION -		8	8	ea	125.000	1000.00
	HNICIAN SANDY PARR						
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Credit Cand	or D.Cord normants mo	de 25	-02 30				
Dava from dat	or P-Card payments ma te of Invoice will be	ue al	SCT 20				
a 4% Card Pro		. Bubl			-		
S I CAIA FIL	occopating ree.				<u> </u>	SUBTOTAL	2000.00
•						FREIGHT	1
PAYMENT TERMS: NET 30 DAYS. PAST DUE ACCOUNTS SUBJECT TO 1 1/2% FINANCE CHARGE					SALES TAX		
PER MONTH. ANNUAL PERC	PER MONTH. ANNUAL PERCENTAGE RATE 18%.						
NO RETURNS ALLOWED WITH HANDLING AND FREIGHT CI	HOUT PROPER WRITTEN AUTHORIZATION. HARGES.	RETURN M	ATERIAL SUBJI	ect to rest	OCKING,	AMT DUE	2000.00

7. Produce the invoices from Rhett Kelsch during test year

ANSWER: The requested documents are attached to this Response.

Rheat Kelsch

315°°

2014

#360°°

2015

Payne 7000

Highland 9000

Hill 3000

Sale Theoliver 12500

Payre 80^{∞} Highland 100^{∞} Hiel 40^{∞}

Water Great part 14000

the Heel

Rhett Kelsch

6439 Augusta-Minerva Road Augusta, Kentucky 41002 cell: 859-221-8701

04/17/2014 Date: Invoice No.: 10092

05/17/2014 Due Date:

Bill To: City of Augusta

Qty	Description	Unit Price	Total
1	Mowing the following cemeteries and City property: Payne Cemetery, Highland Cemetery, Cemetary on the Hill, and the water treatment plant. Also weed eating and removal of clippings from head stones and trash. Each time	\$315.00	\$315.00
	wth Portion	#125.00	
			,

Total

\$315.00

Balance Due

\$315.00

Rhett Kelsch

6439 Augusta-Minerva Road Augusta, Kentucky 41002 cell: 859-221-8701

Due Date:

Date:

04/24/2014 Invoice No.: 10096 05/24/2014

Bill To:

City of Augusta

Qty	Description	Unit Price	Total
1	Mowing the following cemeteries and City property: Payne Cemetery, Highland Cemetery, Cemetary on the Hill, and the water treatment plant. Also weed eating and removal of clippings from head stones and trash. Each time	\$315.00	\$315.00
	Withou	9,25.00	
			,

Total

\$315.00

Balance Due

\$315.00

Rhett Kelsch

6439 Augusta-Minerva Road Augusta, Kentucky 41002 cell: 859-221-8701

Bill To:

City of Augusta

05/02/2014 Date: Invoice No.: 10098

06/01/2014 Due Date:

Qty	Description	Unit Price	Total
1	Mowing the following cemeteries and City property: Payne Cemetery, Highland Cemetery, Cemetary on the Hill, and the water treatment plant. Also weed eating and removal of clippings from head stones and trash. Each time	\$315.00	\$315.00
	WTP Partion	\$125.00	·
		<u> </u>	Total 6315.00

Total

\$315.00

Balance Due

\$315.00

Rhett Kelsch

6439 Augusta-Minerva Road Augusta, Kentucky 41002 cell: 859-221-8701

Date:

05/08/2014

Invoice No.: 10101

Due Date:

06/07/2014

Bill To:

City of Augusta

Qty	Description	Unit Price	Total
Qty 1	Mowing the following cemeteries and City property: Payne Cemetery, Highland Cemetery, Cemetary on the Hill, and the water treatment plant. Also weed eating and removal of clippings from head stones and trash. Each time	\$315.00	**************************************

Total

\$315.00

Balance Due

\$315.00

Rhett Kelsch

6439 Augusta-Minerva Road Augusta, Kentucky 41002 cell: 859-221-8701

Date:

05/13/2014

Invoice No.: 10100 Due Date:

06/12/2014

Bill To:

City of Augusta

Qty	Description	Unit Price	Total
1	Mowing the following cemeteries and City property: Payne Cemetery, Highland Cemetery, Cemetary on the Hill, and the water treatment plant. Also weed eating and removal of clippings from head stones and trash. Each time	\$315.00	\$315.00
	WTP Portion	125.00	

Total

\$315.00

Balance Due

\$315.00

Rhett Kelsch

6439 Augusta-Minerva Road Augusta, Kentucky 41002 cell: 859-221-8701

Date:

05/21/2014

Invoice No.: 10102

06/20/2014 Due Date:

Bill To:

City of Augusta

Qty	Description	Unit Price	Total
1	Mowing the following cemeteries and City property: Payne Cemetery, Highland Cemetery, Cemetary on the Hill, and the water treatment plant. Also weed eating and removal of clippings from head stones and trash. Each time	\$315.00	\$315.00
	portion	125.00	

Total

\$315.00

Balance Due

\$315.00

Rhett Kelsch

6439 Augusta-Minerva Road Augusta, Kentucky 41002 cell: 859-221-8701

Date:

05/28/2014

Invoice No.: 10103 06/27/2014 Due Date:

Bill To:

City of Augusta

Qty	Description	Unit Price	Total
1	Mowing the following cemeteries and City property: Payne Cemetery, Highland Cemetery, Cemetary on the Hill, and the water treatment plant. Also weed eating and removal of clippings from head stones and trash. Each time	\$315.00	\$315.00
	WTP Portion	125.00	
,			

Total

\$315.00

Balance Due

\$315.00

Rhett Kelsch

6439 Augusta-Minerva Road Augusta, Kentucky 41002 cell: 859-221-8701

Bill To:

City of Augusta

06/03/2014 Date: Invoice No.: 10115 Due Date: 07/03/2014

Mowing the following cemeteries and City property: Payne Cemetery, Highland Cemetery, Cemetary on the Hill, and the water treatment plant. Also weed eating and removal of clippings from head stones and trash. Each time WTT Payne (25.00) \$315.00 \$315.00	Qty	Description	Unit Price	Total
	1	and trash . Each time		\$315.00
	·			
		·		

Total

\$315.00

Balance Due

\$315.00

Rhett Kelsch

6439 Augusta-Minerva Road Augusta, Kentucky 41002 cell: 859-221-8701

Date:

06/10/2014

Invoice No.: 10116 Due Date:

07/10/2014

Bill To:

City of Augusta

Qty	Description	Unit Price	Total
Qty 1	Mowing the following cemeteries and City property: Payne Cemetery, Highland Cemetery, Cemetary on the Hill, and the water treatment plant. Also weed eating and removal of clippings from head stones and trash. Each time	\$315.00	\$315.00

Total

\$315.00

Balance Due

\$315.00

Rhett Kelsch

6439 Augusta-Minerva Road Augusta, Kentucky 41002 cell: 859-221-8701

Bill To:

City of Augusta

06/19/2014 Date: Invoice No.: 10117

07/19/2014 Due Date:

Qty	Description	Unit Price	Total
Qty 1	Mowing the following cemeteries and City property: Payne Cemetery, Highland Cemetery, Cemetary on the Hill, and the water treatment plant. Also weed eating and removal of clippings from head stones and trash. Each time	\$315.00	\$315.00

Total

\$315.00

Balance Due

\$315.00

Invoice

Rhett Kelsch

6439 Augusta-Minerva Road Augusta, Kentucky 41002 cell: 859-221-8701

Bill To:

City of Augusta

06/27/2014 Date: Invoice No.: 10118

Due Date: 07/27/2014

Qty	Description	Unit Price		Total
Qty 1	Mowing the following cemeteries and City property: Payne Cemetery, Highland Cemetery, Cemetary on the Hill, and the water treatment plant. Also weed eating and removal of clippings from head stones and trash. Each time	\$315.00		Total \$315.00
			·	

Total

\$315.00

Balance Due

\$315.00

Thank you for your business.

8. Produce invoices for legal fees that were incurred in Fiscal Year 2014.

ANSWER: The requested documents are attached to this Response. The documents demonstrate that the City paid a monthly retainer of \$1,200 for legal fees. The City also covers certain additional expenses for its legal counsel, such as health insurance and CLE costs. These legal invoices have not been paid out of the Water Treatment Plant account because the Water Treatment Plant account typically does not have sufficient funds to cover the legal expenses and other expenses.

During the City's budgeting process, legal fees are broken down in the budget as follows.

WTP - 18%

Water - 18%

Sewer - 18%

Gas - 20%

General – 26%

Based on this percentage of allocation of legal fees for the Water Treatment Plant, legal fees incurred for the test year was $$18,191.92 \times 18\% = $3,274.55$. To the extent that Ms. Usleaman's testimony reflected legal expenses of \$3,044 during the test year, it should be amended to \$3,274.55.

*** Purchase Order ***

P.O. Numb: *22417

P.O. Descr: HEALTH INSURANCE

Order Date: 05/22/2014

Date Req'd: 05/22/2014

Vendor:

879

Oper: BUC

Ordered By:

THOMPSON P.S.C., CYNTHIA 202 EAST RIVERSIDE DRIVE

Name: Dept:

AUGUSTA KY 41002

Bill To:

CITY OF AUGUSTA 219 MAIN STREET

P.O. BOX 85

AUGUSTA

KY 41002

Ship To: CITY OF AUGUSTA

219 MAIN STREET

P.O. BOX 85

AUGUSTA

KY 41002

Instructions:

Quantity Description 1.00 HEALTH INSURANCE

Unit-Cost

Amount

3576.9200 3576.92

**** Purchase Order Total ****

3576.92

CHECK # 15216

DATE

Page 1 of 1

	Health Insurance Cost 2012/2013 C	ynthia Thompson	
	Humana		
 2012-Oct	Total Deduction from Paycheck	Steve's Cost	Cynthia's Cost
2012-Nov	+ 371.10	30.74	340.36
2012-Dec — — -		30.74	340.36
2013-Jan — —	+ 371.10	30.74	340.36
2013-Feb — — —	·	30.88	
2013-Mar — —	396.00	30.88	
2013-Apr — — —	+ 396.00		365.12
2013-May — — —	396.00		365.12
013-June — —	396.00	30.88	<u> </u>
013-July — — —	396.00		<u> </u>
<u>.013-3uly</u>	396.00	30.88	365.12
otals — —			365.12
Otals	3885.30	308.38	3576.92
/ /			(
ORCIENTON			

PLUASE ISSUE CHECK FOR CYNTHIA

THANKS DOWN

Company of the contract of the

*** Purchase Order ***

P.O. Numb: *22580

Order Date: 06/30/2014

P.O. Descr: CONTINUING EDUCATION-MWRT VISA CHARGE Date Req'd: 06/30/2014

KY 41002

Vendor: 1797

Oper: BUC

VISA

Ordered By:

Name:

Dept: GENERAL

Bill To:

Ship To:

CITY OF AUGUSTA 219 MAIN STREET

CITY OF AUGUSTA 219 MAIN STREET

P.O. BOX 85

P.O. BOX 85

AUGUSTA

AUGUSTA

KY 41002

Instructions:

Quantity Description

Unit-Cost

Amount

1.00 CONTINUING EDUCATION

215.0000

215.00

10.399.100.213

215.00

**** Purchase Order Total ****

215.00

CHECK # 15331

DATE

MASTER

SIGNATURE \$ \$ 215.00

Page 1 of 1

Copy for Tom MURI (Visa) Charge CCT CLE

Continuing Legal Education
University of Kentucky
20 College of Law
Lexington, KY 40506-0048
859-257-2921

Receipt No:

14-3428

Date:

6/17/2014

Received From:

MacDonald Walton Razor

Amount Received

\$ 215.00

Subtotal	Discount	Other	Tax	Total	Received	Due
215.00	0.00	0.00	0.00	215.00	215.00	0.00

Payment Method:	Payment Desc:	Title
Credit Card	4366379	

Received By:

M. Rawlings

For:

Construction 2013 CD

PUBLIC PRIVATE PARTNERSHIPS IN PUBLIC PROJECTS

Thank you for your business!

*** Purchase Order ***

P.O. Numb: *21142

Order Date: 07/17/2013 Date Req'd: 07/17/2013

P.O. Descr: LEGAL CONTRACT Vendor: 1465

MWRT, PLLC

Oper: BUC

Ordered By:

Name:

Dept: GAS

129 WEST WATER STREET FLEMINGSBURG KY 41041

Bill To:

CITY OF AUGUSTA 219 MAIN STREET

P.O. BOX 85

AUGUSTA

KY 41002

Ship To: CITY OF AUGUSTA

219 MAIN STREET

P.O. BOX 85

AUGUSTA

KY 41002

Instructions:

Quantity Description 1.00 LEGAL CONTRACT

73.399.730.213

Unit-Cost

Amount

1200.0000

1200.00

1200.00

CHECK #

DATE

SIGNATURE

**** Purchase Order Total ****

1200.00

*** Purchase Order ***

P.O. Numb: *21373

Order Date: 08/20/2013 Date Req'd: 08/20/2013

P.O. Descr: LEGAL CONTRACT-AUGUST

Vendor: 1465

Oper: BUC

Ordered By:

Name:

Dept: GAS

MWRT, PLLC 129 WEST WATER STREET FLEMINGSBURG KY 41041

Bill To:

Ship To:

CITY OF AUGUSTA 219 MAIN STREET

CITY OF AUGUSTA 219 MAIN STREET

P.O. BOX 85

AUGUSTA

P.O. BOX 85

KY 41002

AUGUSTA

KY 41002

Instructions:

Quantity Description 1.00 AUGUST

Unit-Cost 1200.0000

Amount 1200.00

73.399.730.213

1200.00

DATE

SIGNATUR

**** Purchase Order Total ****

1200.00

*** Purchase Order ***

P.O. Numb: *21492

Order Date: 09/18/2013 Date Req'd: 09/18/2013

P.O. Descr: SEPTEMBER

Oper: BUC

Vendor: 1465

MWRT, PLLC

Ordered By:

Name:

129 WEST WATER STREET

Dept: GAS

FLEMINGSBURG KY 41041

Bill To: Ship To:

CITY OF AUGUSTA
219 MAIN STREET
CITY OF AUGUSTA
219 MAIN STREET

P.O. BOX 85

AUGUSTA KY 41002 AUGUSTA KY 41002

Instructions:

Quantity Description Unit-Cost Amount 1.00 SEPTEMBER 1200.0000 1200.00

73.399.730.213 1200.00

**** Purchase Order Total ****

1200.00

PAID

ACCOUNT Cleaning

CHECK # 1460

Page 1 of 1

DATE

K#13000

*** Purchase Order ***

P.O. Numb: *21565

Order Date: 10/16/2013

P.O. Descr: OCTOBER

Date Req'd: 10/16/2013

Oper: BUC

Vendor: 1465

Ordered By:

Name:

Dept: GENERAL

129 WEST WATER STREET FLEMINGSBURG KY 41041

Bill To:

Ship To:

CITY OF AUGUSTA 219 MAIN STREET CITY OF AUGUSTA 219 MAIN STREET

P.O. BOX 85

MWRT, PLLC

P.O. BOX 85

AUGUSTA

AUGUSTA

KY 41002

Instructions:

Quantity Description

Unit-Cost 1200.0000 Amount

1.00 OCTOBER 10.399.100.213

1200.00

1200.00

1200.00

**** Purchase Order Total ****

KY 41002

1200.00

PAID

ACCOUNT

Cleaning

CHECK #

14704

DATE

10-16-13

Page 1 of 1

SIGNAT

*** Purchase Order ***

P.O. Numb: 14820

Order Date: 11/20/2013

MWRT, PLLC

P.O. Descr: LEGAL CONTRACT - NOVEMBER

Date Req'd: 11/20/2013

Oper: BUC

Vendor: 1465

Ordered By:

Name:

Cat: GENERAL

Project #:

Bill To:

FLEMINGSBURG KY 41041

129 WEST WATER STREET

Ship To:

CITY OF AUGUSTA 219 MAIN STREET

CITY OF AUGUSTA 219 MAIN STREET

P.O. BOX 85

P.O. BOX 85

AUGUSTA

KY 41002

AUGUSTA

KY 41002

Instructions:

Quantity Description 1.00 NOVEMBER

Unit-Cost

Amount

1200.0000

1200.00

**** Purchase Order Total ****

1200.00

ACCOUNT

CHECK #

DATE

Page 1 of 1

*** Purchase Order ***

P.O. Numb: *21797

Order Date: 12/18/2013

P.O. Descr: DECEMBER

Date Req'd: 12/18/2013 Oper: BUC

Vendor: 1465

Ordered By:

Name:

Dept: GENERAL

129 WEST WATER STREET FLEMINGSBURG KY 41041

Bill To:

Ship To:

CITY OF AUGUSTA 219 MAIN STREET

CITY OF AUGUSTA 219 MAIN STREET

P.O. BOX 85

MWRT, PLLC

P.O. BOX 85

AUGUSTA

AUGUSTA

KY 41002

Instructions:

Quantity Description 1.00 DECEMBER

Unit-Cost 1200.0000

Amount 1200.00

10.399.100.212

1200.00

**** Purchase Order Total ****

KY 41002

1200.00

CHECK #

DATE

SIGNATURE 2

MASTER

Page 1 of 1

*** Purchase Order ***

P.O. Numb: *21875

P.O. Descr: LEGAL CONTRACT

Vendor: 1465

Order Date: 01/17/2014 Date Req'd: 01/17/2014

Oper: BUC

Ordered By:

Name: Dept:

129 WEST WATER STREET FLEMINGSBURG KY 41041

Bill To:

CITY OF AUGUSTA 219 MAIN STREET

P.O. BOX 85

MWRT, PLLC

AUGUSTA

Ship To:

CITY OF AUGUSTA 219 MAIN STREET

P.O. BOX 85

AUGUSTA

KY 41002

Instructions:

Quantity Description

1.00 GAS

1.00 SEWER

73.399.730.213

72.399.720.213

Unit-Cost

Amount 948.0000 948.00

252.0000

252.00

948.00 252.00

CHECK #

DATE

SIGNATURE

**** Purchase Order Total ****

KY 41002

1200.00

*** Purchase Order ***

P.O. Numb: *22045

P.O. Descr: LEGAL CONTRACT

Order Date: 02/19/2014 Date Req'd: 02/19/2014

Vendor: 1465

MWRT, PLLC

Oper: BUC

Ordered By:

Name:

Dept: SEWER

129 WEST WATER STREET FLEMINGSBURG KY 41041

Bill To:

Ship To:

CITY OF AUGUSTA 219 MAIN STREET

P.O. BOX 85

219 MAIN STREET P.O. BOX 85 AUGUSTA

CITY OF AUGUSTA

AUGUSTA

KY 41002

Instructions:

Quantity Description 1.00 LEGAL CONTRACT Unit-Cost 1200.0000

Amount 1200.00

72.399.720.213

1200.00

PAID
ACCOUNT CLOUNING
THECK # 15011
2:20-14
45-120

**** Purchase Order Total ****

KY 41002

1200.00

*** Purchase Order ***

P.O. Numb: *22170

Order Date: 03/19/2014

P.O. Descr: LEGAL CONTRACT

Date Req'd: 03/19/2014

Vendor: 1465

MWRT, PLLC

Oper: BUC

Ordered By:

Name:

Dept: SEWER

129 WEST WATER STREET FLEMINGSBURG KY 41041

Bill To:

Ship To:

CITY OF AUGUSTA

219 MAIN STREET

219 MAIN STREET

219 MAIN STREET

P.O. BOX 85 P.O. BOX 85

AUGUSTA KY 41002 AUGUSTA KY 41002

Instructions:

Quantity Description
1.00 LEGAL CONTRACT

Unit-Cost 1200.0000 Amount 1200.00

72.399.720.213

1200.00

**** Purchase Order Total ****

1200.00

PAIL

ACCOUNT

CHECK # 1508U

DATE

3-19-14

GIGNATURE IK # 1200.0

Page 1 of 1

*** Purchase Order ***

P.O. Numb: *22276

P.O. Descr: LEGAL CONTRACT

Order Date: 04/16/2014 Date Req'd: 04/16/2014

Vendor:

MWRT, PLLC

1465

Oper: BUC

Ordered By:

Name:

Dept: GENERAL

129 WEST WATER STREET FLEMINGSBURG KY 41041

Bill To:

Ship To: CITY OF AUGUSTA 219 MAIN STREET

219 MAIN STREET

CITY OF AUGUSTA

P.O. BOX 85

P.O. BOX 85 AUGUSTA

AUGUSTA

KY 41002

Instructions:

Quantity Description 1.00 LEGAL CONTRACT

Unit-Cost 1200.0000 Amount 1200.00

10.399.100.212

1200.00

**** Purchase Order Total ****

KY 41002

1200.00

PAID

ACCOUNT Cloums

CHECK #

15142

DATE

4-16-14

MASTER

SIGNATURE HE # 1200.00

Page 1 of 1

*** Purchase Order ***

P.O. Numb: *22395

P.O. Descr: LEGAL CONTRACT

Vendor:

MWRT, PLLC

1465

Order Date: 05/21/2014 Date Req'd: 05/21/2014

Oper: BUC

Ordered By:

Name:

Dept: GENERAL

129 WEST WATER STREET FLEMINGSBURG KY 41041

Bill To:

CITY OF AUGUSTA 219 MAIN STREET P.O. BOX 85

AUGUSTA

KY 41002

Ship To: CITY OF AUGUSTA 219 MAIN STREET

P.O. BOX 85

AUGUSTA

KY 41002

Instructions:

Quantity Description
1.00 LEGAL CONTRACT

10.399.100.212

Unit-Cost

Amount

1200.0000 1200.00

1200.00

DATE

SIGNATURE

**** Purchase Order Total ****

1200.00

*** Purchase Order ***

P.O. Numb: *22528

Order Date: 06/18/2014

P.O. Descr: LEGAL CONTRACT

Bill To:

Date Req'd: 06/18/2014

Vendor: 1465

Oper: BUC

Ordered By:

Name:

Dept: WATER

MWRT, PLLC 129 WEST WATER STREET FLEMINGSBURG KY 41041

KY 41002

CITY OF AUGUSTA 219 MAIN STREET

Ship To: CITY OF AUGUSTA 219 MAIN STREET

P.O. BOX 85 AUGUSTA

P.O. BOX 85

AUGUSTA

KY 41002

Instructions:

Quantity Description
1.00 LEGAL CONTRACT

Unit-Cost Amount 1200.000 1200.00

**** Purchase Order Total ****

1200.00

9. Written documentation associated with the City's reimbursement for medical expenses, including documentation that demonstrates proof of reimbursement, the account from which it was disbursed, the dates on which the reimbursement was made. Also, provide a copy of City's reimbursement policy.

ANSWER: The requested documents are attached to this Response. The reimbursements were made from the City's general fund.

*** Purchase Order ***

P.O. Numb: *22184

P.O. Descr: MEDICAL EXPENSE

Order Date: 03/26/2014 Date Req'd: 03/26/2014

Vendor: 1416

SUSAN BUTTS

Oper: BUC

Ordered By:

Name:

Dept: GENERAL

Bill To:

CITY OF AUGUSTA 219 MAIN STREET P.O. BOX 85

AUGUSTA

KY 41002

Ship To: CITY OF AUGUSTA 219 MAIN STREET P.O. BOX 85

Unit-Cost

3400.9000

AUGUSTA

KY 41002

Instructions:

Quantity Description 1.00 MEDICAL EXPENSE

10.399.100.112

3400.90

Amount

3400.90

**** Purchase Order Total ****

3400.90

ACCOUNT

CHECK #

DATE

Page 1 of 1

*** Purchase Order ***

P.O. Numb: *22551

P.O. Descr: MEDICAL REIMBURSEMENT

Order Date: 06/30/2014

Date Req'd: 06/30/2014

Vendor:

233

Oper: BUC

Name:

name:

Dept: GENERAL

Ordered By:

AUGUSTA

Bill To:

CITY OF AUGUSTA 219 MAIN STREET P.O. BOX 85

ANGIE SCHWEITZER

Ship To: CITY OF AUGUSTA 219 MAIN STREET P.O. BOX 85

KY 41002

KY 41002

Instructions:

AUGUSTA

Quantity Description
1.00 MEDICAL REIMBURSEMENT

Unit-Cost 3155.4000

Amount 3155.40

10.399.100.112

3155.40

**** Purchase Order Total ****

3155.40

PAID

ACCOUNT Clearing

CHECK # 15293

DATE 6/30/16

SIGNATURE 3 \$ 3,155.40

MASTER

Page 1 of 1

RESOLUTION # 2007- O

A RESOLUTION OF AUGUSTA CITY COUNCIL CLARIFYING THE CITY OF AUGUSTA EMPLOYEE MEDICAL EXPENSE REIMBURSEMENT PLAN AND AUTHORIZING THE AUGUSTA MAYOR TO REIMBURSE EMPLOYEE MEDICAL EXPENSES IN A MANNER CONSISTENT WITH SAID RESOLUTION.

WHEREAS, the Augusta City Council discussed and approved a City of Augusta Employee Medical Expense Reimbursement Plan (Plan) at an Augusta City Council Meeting in 2004, and

WHEREAS, the Augusta City Council wishes reaffirm the previous and continuing adoption of the unexecuted Resolution, and

WHEREAS, said Plan provides that such Plan payments shall not exceed such limits as set by the Augusta City Council from time to time, and Augusta City Council wishes to herein set said limits, and

WHEREAS, the Augusta City Council has clarified the reimbursement Plan and has set the reimbursement limits pursuant to said Plan as follows:

1. As co-pays are not included in determining the meeting of deductibles under the health insurance plan, co-pays are also therefore not included in determining the employee's payment of the deductible under the Plan,

FOR CITY EMPLOYEES COVERED UNDER A SINGLE PLAN:

1. After a employee covered under a single plan pays the first \$1000.00 towards the "single" deductible, for both "In Network" and "Out of Network" Services the City will pay up to \$2000.00 of additional eligible medical expenses of such employee towards that employee's "single" deductible,

FOR CITY EMPLOYEES WHO ALSO HAVE SPOUSES AND/OR CHILDREN COVERED UNDER THE CITY PLAN:

2. After an employee, an employee's spouse, or employee's child pays the first \$1000.00 towards the family deductible, for both "In Network" and "Out of Network" Services the City will pay up to \$5000.00 of additional eligible medical expenses of the employee, spouse or child. The \$5000.00 reimbursement shall be the maximum reimbursement for each plan year despite the number of persons who each pay \$1000.00 towards the family deductible.

NOW THEREFORE, IT IS HEREBY RESOLVED, PURSUANT TO AN AFFIRMATIVE VOTE OF A MAJORITY OF THOSE AUGUSTA CITY COUNCIL MEMBERS PRESENT AND VOTING ON JULY 18 1 2007, THAT THE AUGUSTA CITY COUNCIL DOES HEREBY REAFFIRM THE CITY OF AUGUSTA EMPLOYEE MEDICAL EXPENSE REIMBURSEMENT PLAN AND ADOPT LIMITS PERTAINING THERETO AS PROVIDED ABOVE.

MAYOR WENDELL HIGH

ATTEST:

GITY CLERK USLEAMAN

7-19-07 DATE

CITY OF AUGUSTA, KENTUCKY MEDICAL EXPENSE REIMBURSEMENT PLAN RESOLUTION 2004-11

The City of Augusta, Kentucky (the "Company"), hereby adopts, effective as of August 18, 2004, this Medical Expense Reimbursement Plan (the "Plan") established for the benefit of its Employees.

1. Definition of Employee.

For each Plan Year, each employee of the Company shall be considered to be an "employee" for purposes of this Plan except for:

- (a) employees who have not, prior to the beginning of the Plan Year, competed 1 year of continuous service with the Company and/or a predecessor employer;
- (b) employees who have not attained age 21 prior to the beginning of the Plan Year; and
- (c) part-time employees whose customary weekly employment is less than 20 hours.

2. Plan Year.

The "Plan Year" for this Plan shall be the same as the fiscal year of the Company.

3. Coverage.

A person shall be covered under this Plan as long as it is in effect and for such time as the person is an Employee (as defined in Section 1 of this Plan). Only eligible expenses which are incurred while the person is so covered shall be reimbursable under this plan.

4. Reimbursement of Medical Expenses.

- (a) Subject to the limitations provided in this Plan, the Company may, upon application by an Employee, reimburse such Employee for any or all medial expenses incurred by such Employee during a Plan Year for the purchase of medical care (as defined in Section 213(d) of the Internal Revenue Code of 1986 ("Code")) for the Employee and his or her spouse and other dependents (as defined in Section 152 of the Code). There is a \$1,000 limit for an employee and up to \$4,000 for a family.
- (b) The Company may, in its sole and uncontrolled discretion, pay any or all of the above defined expenses directly in lieu of making reimbursement therefore. In such event, the Company shall be relieved of all further responsibility with respect to the particular medical expense so paid.
- (e) Such reimbursement to, or the payments on behalf of, any Employee, including his or her spouse and other dependents, for any one Plan Year shall not exceed such limit as set by the City Council from time to time, which limit shall be et and applied in a uniform and nondiscriminatory manner with respect to all Employees.

(d) Any Employee applying for reimbursement under this Plan shall submit to the Company all medical expense receipts and evident of payment, for verification by the Company. Any failure to comply with this requirement may, at the Company's discretion applied in a uniform and nondiscriminatory manner, terminate such Employee's right to reimbursement therefore.

5. Claims Procedure.

(a) Initial Procedure. If an Employee applies for reimbursement of an expense and if the expense is not reimbursed within 90 days of the end of the Plan Year, then the Employee or his or her duly authorized representative may file a request for payment of benefits (a "Claim") in accordance with the following procedure. The Claim shall be in writing and shall be either mailed or delivered to the Company. Upon receipt of a Claim, the Company shall furnish to the Employee a written acknowledgement which shall inform the Employee of the 90 day time limit for rendering its decision described in the immediately following paragraph and of the effect of the failure to notify the Employee of its decision within such time limit.

The Company shall make a decision upon a claim and notify the Employee of its decision within 90 days after receipt of such Claim; provided however, that an extension of 90 days shall be permitted if special circumstances require and extension of time for processing the Claim and if, prior to the termination of the initial 90-day period, the Employee is furnished a written notice indicating such special circumstances and the date by which the Company expects to render a decision. If the Claim is wholly or partially denied, then the Company shall furnish to the Employee a written notice setting forth in a manner calculated to be understood by the Employee:

(1) the specific reason or reasons for such denial;

(2) specific reference to the pertinent Plan provisions on which such denial is based;

(3) a description of any additional material or information necessary for such Employee to perfect his or her Claim and an explanation of why such materials or information is necessary; and

(4) appropriate information as to the steps to be taken if such Employee wishes to submit his or her Claim for review pursuant to (b) below, including notice of the time limits for requesting a review.

If a Claim is not granted and if notice of the denial of a Claim is not furnished within the applicable time limit, then the Employee may deem such Claim denied for purposes of requesting a review.

(b) Review Procedure. If a Claim is wholly or partially denied under (a) above, then the Employee or his or her duly authorized representative shall have the right to obtain, subject to the procedures in the next paragraph, a full and fair review by the Company; to obtain, subject to the procedures in the next paragraph, a full and fair review by the Company; to review pertunent documents; and to submit issues and comments in writing.

To obtain a review, an Employee entitled to such a review or his or her duly authorized representative shall, within 60 days after receipt by the Employee of written notice of the denial of the Claim or within such longer period as is reasonable and related to the nature of the benefit which is the subject of the Claim and to other attendant circumstances, mail or deliver a written request for a review (a "Request for Review") to the Company. Upon such receipt of a Request for Review, the Company shall furnish to the Employee a written acknowledgement which shall inform such Employee of the 60 day time limit for rendering its decision described in the immediately following paragraph and of the effect of the failure to furnish a decision on review within such time limit.

If a review is requested, then the Company shall make a decision and notify the Employee of its decision promptly and no later than 60 days after receipt of the Request for Review; except that an extension of up to 60 days shall be permitted if special circumstances require an extension of time for processing and if the Company furnishes the Employee written notice of any extension prior to its commencement. The Company shall furnish to the Employee a written notice setting forth in a manner calculated to be understood by the Employee:

- (1) the specific reason or reasons for the decision on review; and
- (2) specific reference to the pertinent Plan provisions on which the decision on review is based.

If the decision on review is not furnished within the applicable time limit, then the Employee shall be deemed to have exhausted his or her remedies under the Plan and he or she may deem the Claim to have been denied on review.

6. Plan Administrator and Named Fiduciary.

For purposes of the Employee Retirement Income Security Act of 1974, the Company shall be the plan administrator and the named fiduciary for this Plan

7. Purpose.

It is the intention of the Company that benefits payable under this Plan shall be eligible for the exclusion from gross income provided by Sections 105 and 106 of the Code.

8. Term.

This Plan shall continue in effect until amended or terminated by the action of the Board of Directors of the Company.

9. Amendment and Termination.

This Plan shall be subject to amendment and/or termination at any time or times hereafter by action of the Board of Directors of the Company, provided that such amendment or termination shall not adversely affect any right to claim reimbursement for medical insurance premiums and deductibles covered under this Plan and incurred prior to its amendment and/or termination.

DATE:	JOHN LAYCOCK, MAYOR
ATTEST:	-USLEAMAN, CITY CLERK/TREASURER

10. Identify all full-time employees for City as of June 30, 2014 and department to which each individual was assigned.

ANSWER:

Susan Butts Water Treatment Plant
Shane Mains Water Treatment Plant
John Olson Water Treatment Plant

Gretchen Usleaman City Office Angie Schweitzer City Office

Robert Baxter Police Department Harry Brooks Police Department Chris Neal Police Department

Darian Blevins Maintenance Department
Kenneth Kiskaden Maintenance Department
Rickey Saunders Maintenance Department
Troy Archibald Maintenance Department

11. Identify all appointed and elected officials as of June 30, 2014.

ANSWER:

Elected Officials

John Laycock	Mayor
Mike Taylor	City Council
Jim Thornsbury	City Council
Greg Whiteman	City Council
Matt McCane	City Council
Mary Zeigler	City Council
Jacob Hay	City Council

Appointed Board Members

Augusta-Brooksville-Bracken County Industrial Authority

Craig Miller Shawn Hennessey

Augusta Alcoholic Beverage Control Administrator

Robert K. Baxter

County Board of Assessment Appeal

Tom Lilley

Library Board

Natasha Thompson Shay England Allison Parker Betty Cline Peggy Kelsch

12. Identify calculations and assumptions for sewer charges

ANSWER: The Water Treatment Plant has one grinder pump for its domestic sewage. Staff placed a two-gallon bucket in the influent pipe to the grinder pump station. It took exactly 2 minutes to fill the two-gallon bucket. The influent pipe runs continuously. These calculations do not include any usage for effluent from the men's or women's restrooms at the Water Treatment Plant.

- 2 gallons per minute x 60 minutes = 120 gallons per hour
- 120 gallons per hour x 24 hours = 2,880 gallons per day.
- 2,880 gallons per day x 30 days = 86,400 gallons per month.
- 86,400 gallons per month results in a \$258.59 monthly sewer bill

	Sewer Costs						
			Α	t WTP			
			Monthly	3%	Total		
Usage	Rates		Charge	Franchise Fee	Month		
1,000	12.79	First 1,000 gal.	12.79	0.38	13.17		
85,400	2.79	Per 1,000 gals.	238.27	7.15	245.41		
86,400			251.06		258.59		

• $$258.59 \times 12 \text{ months} = $3,103.08 \text{ annually}$

13. Identify calculations and assumptions for utility and rent expense for City Hall that should be allocated to the Water Treatment Plant.

ANSWER: Augusta City Hall contains 3,600 square feet of area. We believe that a reasonable calculation for rent and utilities charged to the Water Treatment Plant should be 25% because the City Hall space is partially used to benefit the Water Treatment Plant.

City Staff contacted U.S. Bank in Augusta regarding the local market price for the rental of office space. U.S. Bank currently leases a portion of their building to other businesses. According to Sean Stewart, Branch Manager, U.S. Bank charges \$7 per year per square foot for leased space. 25% of 3,600 square feet is 900 square feet. \$7 per year multiplied by 900 square feet is \$6,300 annually.

Annual utility costs occurred at City Hall for the test year was \$5,577.66. 25% of \$5,577.66 is \$1,394.42.

1,394.42 + 6,300 = 7,694.42

14. Provide a copy of all charges or payments from Water Treatment Plant for city buildings.

ANSWER: There have been no charges or payments from the Water Treatment Plant account to another City-owned account for buildings or utilities because the Water Treatment Plant typically does not have sufficient revenue to cover these expenses in addition to other expenses that must be paid.

15. Identify part-time and full-time employees that provide services to the Water Treatment Plant. For those employees, identify their current rate of pay; number of hours spent on issues directly related to the Water Treatment Plant, amount of overtime during test year, and contribution rates for any benefits.

ANSWER: See the charts on the following pages. Please note that the FICA, unemployment insurance, and health insurance expenses that are identified in the Fiscal Year 2014 chart for Darrin Blevins, Doug Padgett, and Gretchen Usleaman have been reduced based on the percentage of time those full-time employees worked on issues directly related to the Water Treatment Plant. No adjustments were made to the identified expenses of Assistant City Clerk Angie Schweitzer, who spends approximately 728 hours annually (35 percent of her time) on issues directly related to the Water Treatment Plant.

Water Treatment Plant Wages FY 2014 0.02337 Hourly Regular OT Christmas 7.65% Unempl HEALTH INS. Employee LIFE INS. RETIREMENT **TOTAL** Rate Status Hours Hours Incentive Gross FICA Insurance 2,080.0 176.28 46,097.52 3,456.05 1,056.76 \$55,709.33 \$19.62 Full Time 100 4,799.00 0.00 300.00 Susan Butts 26,754.46 2,006.54 \$34,173.60 \$11.22 Full Time 2,080.0 197.08 4,799.00 0.00 0.00 John Olson 613.60 2,015.76 \$11.22 Full Time 2,080.0 27,153.66 \$35,024.01 Shane Mains 220.8 100 623.59 4,799.00 132.00 300.00 2,080.0 30,386.82 1,975.81 \$42,689.37 \$14.54 Full Time 594.18 9,430.81 46.75 255.00 Angie Schweitzer 100 Jeffrey Mofford \$12.00 Part Time 23.0 276.00 21.11 6.46 0.00 0.00 0.00 \$303.57 \$7.25 Part Time 12.31 \$738.94 93.1 674.98 51.65 0.00 0.00 0.00 Alexandria Thompson \$7.25 Part Time 151.9 84.24 22.20 0.00 0.00 0.00 \$1,207.72 Cindy Blevins 1,101.28 0.00 \$478.44 \$7.25 Part Time 60.0 435.00 33.27 10.17 0.00 0.00 Matthew Welte \$7.25 Part Time \$314.20 39.4 285.65 21.86 6.69 0.00 0.00 0.00 Madison Cantrell \$263.95 \$7.25 Part Time 33.1 239.98 18.36 5.61 0.00 0.00 0.00 Leann Tucker 30.29 \$435.40 0.00 0.00 Shelby Nickerson \$7.25 Part Time 54.6 395.85 9.26 0.00 \$8.94 Full Time 394.1 3,523.25 269.53 82.42 0.00 0.00 0.00 \$3,875.20 Gaberial Thomas \$17.92 Maint. Dept. 3,827.36 \$6,609.60 208.0 0 292.79 89.45 1,968.00 132.00 300.00 Darrin Blevins 100 \$16.57 Computer \$1,950.38 ol 1,773.28 104.0 50 135.66 41.44 0.00 0.00 0.00 Doug Padgett

15,307.92

1,171.06

357.75

3,873.00

132.00

300.00

\$21,141.72

100

\$20.89 City Clerk

Gretchen Usleaman

728.0

Current Year						
		Hourly	Employment			
Employee	Title	Rate	Status			
Susan Butts	Operator	\$19.62	Full Time			
John Olson	Operator	\$11.22	Full Time			
Dean Litzinger	Operator	\$10.00	Full Time			
Angie Schweitzer	Asst. Clerk	\$14.54	Full Time			
Doug Padgett	Manager	\$24.00	Part Time			
Darrin Blevins	Maint.	\$19.15	Full Time			
Gretchen Usleaman	Clerk	\$23.00	Full Time			

16. Identify the amount of deficit for Water Treatment Plant operations.

ANSWER: See the chart on the following page.

	Augusta WTP								
	Audits Recap.								
						Net		Net	Net
		Total				Income (Loss)		Assets	Assets
Fiscal	Total	Operating	Operating	Other	Interest	Before Capital	Capital	(Deficit)	Deficit
Year	Revenues	Expenses	Income (Loss)	Income	Expense	Contributions	Contributions	Prior FY	This FY
2008	480,957	501,063	(20,106)	0	(65,746)	(85,852)	0	(104,601)	(190,453)
2009	570,897	511,258	59,639	3,276	(64,695)	(1,780)	1,440,428	(190,453)	1,248,195
2010	537,673	469,515	68,158	3,084	(63,585)	7,657	0	1,248,195	1,255,852
2011	498,877	534,114	(35,237)	4,101	(62,415)	(93,551)	0	1,257,416	1,163,865
2012	505,550	476,265	29,285	5,813	(61,194)	(26,096)	0	1,163,864	1,137,768
2013	465,172	480,142	(14,970)	8,228	(59,912)	(66,654)		1,137,768	1,071,114
2014	497,402	524,041	(26,639)	818	(58,557)	(84,378)		1,071,114	986,736

17. Updated rate case expense totals and any applicable invoices to support expenses.

ANSWER: See information below and attached documents, which total \$44,874.03.

Gretchen Eng			
Date	Hours	Rate of Pay	Total
1/26/2015	2.00	21.52	\$43.04
1/27/2015	2.50	21.52	\$53.80
1/29/2015	1.00	21.52	\$21.52
3/25/2015	8.00	21.52	\$172.16
3/26/2015	6.50	21.52	\$139.88
3/27/2015	8.00	21.52	\$172.16
3/30/2015	3.00	21.52	\$64.56
5/18/2015	7.00	21.52	\$150.64
5/21/2015	3.00	21.52	\$64.56
6/1/2015	1.50	21.52	\$32.28
6/2/2015	1.00	21.52	\$21.52
6/5/2015	3.00	21.52	\$64.56
6/15/2015	2.00	21.52	\$43.04
6/19/2015	3.00	21.52	\$64.56
6/24/2015	2.00	21.52	\$43.04
7/8/2015	2.00	21.52	\$43.04
8/4/2015	2.00	21.52	\$43.04
8/11/2015	3.00	21.52	\$64.56
8/12/2015	2.00	21.52	\$43.04
8/24/2015	8.00	21.52	\$172.16
8/25/2015	2.00	21.52	\$43.04
8/26/2015	4.00	21.52	\$86.08
8/27/2015	10.00	21.52	\$215.20
8/28/2015	8.00	21.52	\$172.16
8/29/2015	2.00	21.52	\$43.04
8/31/2015	8.75	21.52	\$188.30
9/1/2015	4.00	21.52	\$86.08
9/2/2015	8.50	21.52	\$182.92
9/3/2015	8.00	21.52	\$172.16
9/4/2015	8.00	21.52	\$172.16
9/6/2015	2.00	21.52	\$43.04
9/7/2015	4.75	21.52	\$102.22
9/8/2015	12.50	21.52	\$269.00
9/10/2015	7.00	21.52	\$150.64
9/11/2015	4.00	21.52	\$86.08
TOTAL	164.00		\$3,529.28

Hou	ırs Spent on B	CWD Case to D	ate	
Doug Padgett				
Date	Hours	Rate of Pay	Total	
		J		
1/20/2015	8.50	17.07	\$145.10	
1/22/2015	8.50	17.07	\$145.10	
1/26/2015	8.00	17.07	\$136.56	
1/27/2015	9.50	17.07	\$162.17	
1/29/2015	5.00	17.07	\$85.35	
3/9/2015	9.50	17.07	\$162.17	
3/23/2015	7.50	17.07	\$128.03	
3/24/2015	9.50	17.07	\$162.17	
3/25/2015	10.00	17.07	\$170.70	
3/26/2015	10.45	17.07	\$178.38	
3/27/2015	2.25	17.07	\$38.41	
3/27/2015	8.25	25.61	\$211.28	OT
3/30/2015	13.00	17.07	\$221.91	
4/20/2015	8.75	17.07	\$149.36	
4/21/2015	6.50	17.07	\$110.96	
4/22/2015	5.75	17.07	\$98.15	
4/23/2015	8.50	17.07	\$145.10	
4/27/2015	8.25	17.07	\$140.83	
5/18/2015	5.00	17.07	\$85.35	
5/19/2015	8.50	17.07	\$145.10	
5/20/2015	8.25	17.07	\$140.83	
5/21/2015	5.00	17.07	\$85.35	
5/26/2015	8.00	17.07	\$136.56	
5/27/2015	8.00	17.07	\$136.56	
6/1/2015	9.25	17.07	\$157.90	
6/2/2015	8.00	17.07	\$136.56	
6/5/2015	3.00	17.07	\$51.21	
6/15/2015	2.00	17.07	\$34.14	
6/19/2015	3.00	17.07	\$51.21	
6/24/2015	2.00	17.07	\$34.14	
7/8/2015	2.00	17.07	\$34.14	
8/4/2015	2.00	17.07	\$34.14	
8/11/2015	3.00	17.07	\$51.21	
8/12/2015	2.00	17.07	\$34.14	
TOTAL	226.70		\$3,940.22	

Cynthia Thom	pson	
Date		Total
March 2015		\$2,336.25
April 2015		\$1,968.75
May 2015		\$1,360.00
June 2015		\$2,488.25
July 2015		\$137.53
August 2015		\$3,058.75
TOTAL		\$11,349.53

Copy Charges

Pages		Rate		Total	
	4500		0.02	\$90.00	

Sturgill, Turner, Barker & Moloney

	Total
See attached time sheets	\$25,965.00

Detail Transaction File List Sturgill, Turner, Barker & Moloney, PLLC

	T	011-	-	0		•	
Client	Trans Date	Tmkr Number	<u>С</u>	Stmt # Rate	Hours to Bill	Amount	
Statement Date mr 64548.0002	n/dd/yyyy 08/24/2015	MTO	2	225.00	0.70	157.50	Communicate (with client) with City Attorney regarding proposed representation of City of Augusta in rate case proceeding (no charge). City of Augusta
64548.0002	08/24/2015	МТО	2	225.00	1.30	292.50	Rate Case of the City of Augusta Review begin reviewing filings to determine what needs to be done in Augusta rate case to prepare for hearing (no charge). City of Augusta
64548.0002	08/24/2015	МТО	2	225.00	0.50	112.50	Rate Case of the City of Augusta Communicate (with client) phone call with City Attorney and Mayor Ziegler regarding rate case. (no charge) City of Augusta
64548.0002	08/25/2015	МТО	2	225.00	0.80	180.00	Rate Case of the City of Augusta Augusta - Communicate (with client) with C. Thompson and D. Padgett regarding background and strategic planning for rate case. (no charge) City of Augusta
64548.0002	08/25/2015	мто		225.00	8.50	1,912.50	Rate Case of the City of Augusta Augusta - Review documents that have been filed in the case; begin outlining issues that need to be addressed in testimony; review settlement proposals; begin planning strategy for remaining litigation; draft email communications to client regarding the same. City of Augusta
64548.0002	08/26/2015	МТО		225.00	0.50	112.50	Rate Case of the City of Augusta Communicate (other external) with BCWD counsel J. Wuetcher regarding background of case and possible negotiations/settlement offers. City of Augusta
64548.0002	08/26/2015	МТО		225.00	0.50	112.50	Rate Case of the City of Augusta Communicate (with client) phone call with C. Thompson (morning) regarding strategic planning for action items for rate case litigation. City of Augusta
64548.0002	08/26/2015	МТО		225.00	0.30	67.50	Rate Case of the City of Augusta Communicate (with client) phone call (afternoon) with City Attorney regarding rate case, testimony, expenses, and pleadings. City of Augusta
64548.0002	08/26/2015	МТО		225.00	8.70	1,957.50	Rate Case of the City of Augusta Continued review of materials filed in record; additional outlining of issues to be addressed in written testimony and evidentiary hearing; prepare and revise motion and notice to be filed with PSC; various email communications with City Attorney related
64548.0002	08/27/2015	МТО		225.00	8.00	1,800.00	to rate case. City of Augusta Rate Case of the City of Augusta Communicate with clients regarding direct testimony of City witnesses; continue reviewing additional documents relevant to issues in case; prepare pleadings to be filed; draft direct testimony questions to be answered by City witnesses. City of Augusta
64548.0002	08/28/2015	МТО		225.00	0.10	22.50	Rate Case of the City of Augusta Communicate (other external) phone call from PSC Filing Division who indicated that Motion to Amend was not received on 8/27 despite email confirmation being issued. City of Augusta
64548.0002	08/28/2015	МТО		225.00	0.30	67.50	Rate Case of the City of Augusta Augusta - Draft/revise (2nd) Read1st letter for Motion to Amend City of Augusta
64548.0002	08/28/2015	МТО		225.00	4.50	1,012.50	Rate Case of the City of Augusta Review testimony presented by BCWD; begin outlining issues for rebuttal and cross-examination; consideration of exhibits to be filed at hearing; communicate with client regarding the same. City of Augusta
64548.0002	08/31/2015	МТО		225.00	0.20	45.00	Rate Case of the City of Augusta Communicate (other external) with BCWD attorney J. Wuetcher regarding upcoming case events and parties' positions on certain issues. City of Augusta
64548.0002	08/31/2015	МТО		225.00	1.80	405.00	Rate Case of the City of Augusta Communicate (with client) phone call with City employees regarding case. City of Augusta
64548.0002	08/31/2015	МТО		225.00	4.70	1,057.50	Rate Case of the City of Augusta Draft/revise Notice of Exhibits; review motion for amended schedule; communicate with client regarding the same; review
МТО							Friday 09/18/2015 12:31 pm

Client	Trans Date	Check Tmkr Number	B Stmt #	Hours to Bill	Amount	
Statement Date mm	/dd/yyyy					
						BCWD's exhibit list; begin preparing outline of issues to address at hearing and informal conference. City of Augusta Rate Case of the City of Augusta
64548.0002	09/01/2015	МТО	225.00	4.30	967.50	Plan and prepare for hearing and informal conference; review additional materials sent by city; telephone conferences with clients
64548.0002	09/02/2015	МТО	225.00	4.00	900.00	City of Augusta Rate Case of the City of Augusta Appear for/attend informal conference; meetings with client to
						prepare for hearing; plan/prepare for informal conference City of Augusta Rate Case of the City of Augusta
64548.0002	09/02/2015	МТО	225.00	0.20	45.00	Review BCWD's Response to City's Motion City of Augusta Rate Case of the City of Augusta
64548.0002	09/03/2015	МТО	225.00	11.50	2,587.50	Plan and prepare for rate case hearing; draft questions to ask witnesses; review documents in record; draft response to BCWD's motion; communicate with clients City of Augusta
64548.0002	09/04/2015	МТО	225.00	7.40	1,665.00	Rate Case of the City of Augusta Plan and prepare for evidentiary hearing; communications with client; review order; communicate with opposing counsel. City of Augusta
64548.0002	09/05/2015	МТО	225.00	5.00	1,125.00	Rate Case of the City of Augusta Plan and prepare for evidentiary hearing. City of Augusta
64548.0002	09/06/2015	МТО	225.00	2.00		Rate Case of the City of Augusta Plan and prepare for evidentiary hearing scheduled for Tuesday. City of Augusta
64548.0002	09/07/2015	MTO	225.00	1.80	405.00	Rate Case of the City of Augusta Plan and prepare for rate case hearing. City of Augusta
64548.0002	09/08/2015	МТО	225.00	1.00	225.00	Rate Case of the City of Augusta Plan and prepare for rate case hearing. City of Augusta
64548.0002	09/08/2015	МТО	225.00	1.00	225.00	Rate Case of the City of Augusta Meet with clients prior to hearing to prepare for rate case hearing. City of Augusta
64548.0002	09/08/2015	МТО	225.00	7.00	1,575.00	Rate Case of the City of Augusta Appear for/attend rate case evidentiary hearing. City of Augusta
64548.0002	09/09/2015	МТО	225.00	0.50	112.50	Rate Case of the City of Augusta Communicate (with client) regarding post-hearing data responses City of Augusta
64548.0002	09/11/2015	МТО	225.00	0.40	90.00	Rate Case of the City of Augusta Communicate (with client) with D. Padgett regarding post hearing DRs. City of Augusta
64548.0002	09/11/2015	МТО	225.00	0.10	22.50	Rate Case of the City of Augusta Communicate (other external) respond to PSC Staff's questions regarding transcript of record City of Augusta
64548.0002	09/13/2015	МТО	225.00	8.00	1,800.00	Rate Case of the City of Augusta Draft/revise begin outlining and drafting post-hearing brief. City of Augusta
64548.0002	09/15/2015	МТО	225.00	0.50	112.50	Rate Case of the City of Augusta Review documents produced by City related to post-hearing data responses. City of Augusta
64548.0002	09/15/2015	МТО	225.00	7.30	1,642.50	Rate Case of the City of Augusta Draft/revise continued drafting of post hearing brief. City of Augusta
64548.0002	09/16/2015	МТО	225.00	8.50	1,912.50	Rate Case of the City of Augusta Draft/revise continued drafting of post hearing brief. City of Augusta
64548.0002	09/16/2015	МТО	225.00	0.30	67.50	Rate Case of the City of Augusta Review order issued by PSC regarding upcoming deadlines and motion by BCWD to include 98-497 case in the record of this case. City of Augusta
64548.0002	09/16/2015	МТО	225.00	1.30	292.50	Rate Case of the City of Augusta Review documents produced by City in response to post-hearing DRs and communicate with City regarding the

Page: 3

Detail Transaction File List Sturgill, Turner, Barker & Moloney, PLLC

Client Statement Date mn	Trans <u>Date</u> n/dd/yyyy	Check Tmkr Number	B Stmt # C Rate	Hours to Bill	Amount	
64548.0002	09/17/2015	МТО	225.00	3.50	787.50	same. City of Augusta Rate Case of the City of Augusta Review documents provided by City in response to post-hearing information requests; prepare Response to hearing requests; communicate with client regarding same. City of Augusta
64548.0002	09/17/2015	МТО	225.00	0.40		Rate Case of the City of Augusta Communicate (with client) with City Attorney regarding documents to submit to the PSC. City of Augusta
64548.0002	09/17/2015	МТО	225.00	0.50		Rate Case of the City of Augusta Research PSC decisions on legal issue that relates to upcoming filing in rate case. City of Augusta
64548.0002	09/18/2015	МТО	225.00	0.80		Rate Case of the City of Augusta Review additional responses to information requests from hearing; revise responses to information requests; communicate with client regarding the same. City of Augusta Rate Case of the City of Augusta
Subto	otal for Tcode 1		Billable Non-billable Total	3.30 118.70	25,965.00 <u>742.50</u> 26,707.50	
Total for Statemen	t Date mm/dd/y	ууу	Billable Non-billable Total	115.40 3.30 118.70	25,965.00 742.50 26,707.50	

GR	TOTA	18

Billable	115.40	25,965.00
Non-billable	3.30	742.50
Total	118.70	26,707.50

Legal Time Entry for Cynthia Thompson for City of Augusta's Rate Case Jaunary through June 30, 2015

DATE SERVICE	E PERFORMED	TIME SPENT % HR	CONTRACT RATE
1/26/2015 Review	letter from G. Wuetcher	0.15	\$75.00
1/27/2015 Prepare	e note to file, I/d p/c to G. Wuetcher	0.5	\$75.00
2/2/2015 Print &	review email from from G. Wuetcher, I/d phone call to G. Wuetcher	0.5	\$75.00
2/2/2015 P/c to C	City Clerk re: PSC filing	0.1	\$75.00
2/3/2015 P/c fron	m D. Spenard at PSC, prep note to file	0.5	\$75.00
2/4/2015 Print &	review email from from G. Wuetcher	0.1	\$75.00
2/6/2015 Review	e-mail from City Clerk re: amounts billed and owed by BCWD	0.15	\$75.00
2/10/2015 Review	e-mail notice from PSC and Order file	0.25	\$75.00
2/12/2015 Review	e-mail from G. Wuetcher re: filing w/PSC, email Mayor about meeting	0.5	\$75.00
2/13/2015 Review	e-mail from City Clerk	0.05	\$75.00
2/17/2015 P/c to N	Mayor about PSC case, I/d call to D. Spenard at PSC	0.5	\$75.00
2/18/2015 Review	e-mail from D. Padgett	0.1	. \$75.00
2/18/2015 Prep Mo	otions re: PSC case, p/c from D. Spenard, return to City office to finalize	2	\$75.00
2/24/2015 Review	email from G. Wuetcher	0.1	\$75.00
2/26/2015 Review	e-mail from D. Spenard, respond	0.2	\$75.00
2/26/2015 Review	email from D. Spenard, review e-mail from G. Wuetcher	0.2	\$75.00
2/26/2015 Review	e-mail from D. Spenard	0.1	\$75.00
2/26/2015 P/c to N	Mayor re PSC case, respond to PSC email, cc Mayor, repsond to CityClk email	0.5	\$75.00
2/27/2015 Review	e-mail from D. Spenard	0.1	\$75.00
2/27/2015 Review	email from PSC	0.25	\$75.00
3/2/2015 Review	email from PSC	0.2	\$75.00
3/3/2015 E-mail N	Mayor re: meeting re: WTP & PSC case	0.25	\$75.00
3/3/2015 Review	email from D. Spenard	0.05	\$75.00
3/3/2015 Organiz	e PSC file	0.5	\$75.00
3/3/2015 L/d p/c	to David Spenard	0.1	. \$75.00
3/4/2015 Review	email from G. Wuetcher	0.1	\$75.00
3/3/2015 Report	to City Office, discuss PSC case strengths, etc. w/Mayor	0.5	\$75.00
3/4/2015 P/c fron	n Mayor, review e-mail from PSC	0.25	\$75.00
3/6/2015 Review	email from D. Spenard, review e-mail from PSC	0.5	\$75.00
3/6/2015 P/c fron	m D. Spenard at PSC, p/c to City Clerk, p/c to Mayor	0.5	\$75.00
3/9/2015 P/c fron	n City Clerk, attend PSC conference in Frankfort	4.75	\$75.00

3/9/2015 Organize PSC file	0.25	\$75.00
3/13/2015 Review emails from D. Spenard, G. Wuetcher, D. Spenard, G. Wuetcher	0.25	\$75.00
3/16/2015 Review email response from R. Bascom re: Cost of Service inquiry	0.05	\$75.00
3/16/2015 Review e-mail from PSC, review e-mail from G. Wuetcher & respond	0.5	\$75.00
3/17/2015 Review e-mails from City Clerk & respond, p/c to City Clerk, review PSC emails	1	\$75.00
3/17/2015 Review additional emails re: PSC case from D. Padgett	1	\$75.00
3/18/2015 Review emails from D. Spenard	0.2	\$75.00
3/18/2015 Review 3 emails from PSC	1	\$75.00
3/19/2015 Review email from PSC	0.25	\$75.00
3/24/2015 Meet with D. Padgett	2	\$75.00
3/24/2015 Review email from PSC	0.15	\$75.00
3/25/2015 Review email from D. Padgett, p/c to D. Padgett	1.5	\$75.00
3/26/2015 Review WTP clerk duties, revise responses	0.5	\$75.00
3/27/2015 Review drafts of responses, revise, work on specific responses	4.5	\$75.00
3/26/2015 Work on responses to PSC requests at City Office	1.25	\$75.00
3/29/2015 Review PSC regulations	1.5	\$75.00
3/30/2015 Work on responses to PSC requests at City Office	10.5	\$75.00
3/30/2015 Review 2 emails from PSC	0.1	\$75.00
4/3/2015 Return I/d p/c to PSC	0.15	\$75.00
4/6/2015 P/c to City Office	0.15	\$75.00
4/7/2015 Review email from D. Spenard, & email from G. Wuetcher	0.1	\$75.00
4/7/2015 P/c from Mayor on cell	0.1	\$75.00
4/13/2015 Review 2 email notices from PSC	0.75	\$75.00
4/15/2015 Meet with Mayor & City Clerk	2.75	\$75.00
4/20/2015 Review email from G. Wuetcher and respond	0.2	\$75.00
4/20/2015 Work on PSC case at City Office, p/c from G. Wuetcher	2	\$75.00
4/21/2015 Email D. Padgett & Mayor about PSC case	0.1	\$75.00
4/22/2015 Research PSC case issues, cases	2	\$75.00
4/22/2015 Review email from D. Padgett about BCWD 3rd request & respond	0.25	\$75.00
4/23/2015 Review email from G. Wuetcher and respond	0.2	\$75.00
4/23/2015 Review email from D. Padgett about PSC responses and respond	0.25	\$75.00
4/23/2015 Work at City Office on PSC case	3.5	\$75.00
4/27/2015 Review email from G. Wuetcher	0.05	\$75.00
4/27/2015 Work at City Office on PSC case	7.75	\$75.00

	ls from G. Wuetcher and respond	0.15	\$75.00
4/27/2015 Review PSC e		0.05	\$75.00
	il to City Clerk about PSC related meeting,	0.05	\$75.00
4/29/2015 Review email	I from City Clerk re: meeting, p/c to same, p/c to Mayor re: same	0.25	\$75.00
4/29/2015 Review email	from G. Wuetcher about meeting dates and respond	0.25	\$75.00
5/4/2015 Forward ema	il about meeting dates to City Clerk with message	0.15	\$75.00
5/5/2015 Review sever	al emails from City Clerk & G. Wuetcher re: PSC meeting, respond	0.25	\$75.00
5/5/2015 Review email	Is from City Clerk re: PSC case, p/c to City Clerk, p/c from Mayor re: case	1	\$75.00
5/11/2015 Review PSC D	Data request, review BCWD 3rd data request, forward to D. Padgett	0.75	\$75.00
5/12/2015 Work on PSC	responses with D. Padgett, meet w/ City Clerk re: responses	1.25	\$75.00
5/13/2015 P/c to City Of	ffice & I/d p/c to G. Wuetcher about PSC case, email D. Padgett re: case	0.5	\$75.00
5/18/2015 Review email	ls from G. Wuetcher, forward to D. Padgett	0.15	\$75.00
5/19/2015 Work on PSC	case analysis; phone calls to City Clerk re: case issues	4.5	\$75.00
5/20/2015 Work on PSC	case at City Office, p/c to City clerk from law office about case meeting	3.6	\$75.00
5/20/2015 Review email	from G. Wuetcher about meeting dates and respond	0.1	\$75.00
5/21/2015 Work on PSC	responses	2.5	\$75.00
5/22/2015 Work on PSC	responses	3.5	\$75.00
5/26/2015 Meet D. Padg	gett at City Office, review revisions, I/d p/c to and from G. Wuetcher	2	\$75.00
5/26/2015 Prelare Motio	on to Amend Schedule, copy, etc. & file	1.5	\$75.00
5/27/2015 Work on PSC	C case responses	2.75	\$75.00
6/2/2015 Work on PSC	case	3.5	\$75.00
6/3/2015 P/c from PSC	, stop at City office, call D. Padgett re: redaction filing issue	1	\$75.00
6/4/2015 Work on PSC	case, organize PSC file	3	\$75.00
6/5/2015 Meet at City	office re: PSC case	3	\$75.00
6/8/2015 P/c from G. V	Vuetcher	0.05	\$75.00
	from G. Wuetcher, research PSC issues	3	\$75.00
	ayor , City Clerk & D. Padgett about PSC case	2	\$75.00
	G. Wuetcher and to City Clerk, Mayor, re: PSC issues, organize files	1	\$75.00
	litional PSC issues, p/c to CPA	2	\$75.00
	officials at WTP, meet with BCWD at City offices	6.75	\$75.00
	case, WTP issues, p/c to Brenda Morgan CPA	3	\$75.00
6/23/2015 Work on PSC		0.5	\$75.00
	ity office w/ Mayor, D. Padgett, 2 Council members	2.25	\$75.00
	Vuetcher, review email from same and respond	1	\$75.00
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CERTIFICATE OF SERVICE

In accordance with 807 KAR 5:001, Section 8, I certify that the City of Augusta's electronic filing of these Responses is a true and accurate copy of the same document being filed in paper medium; that the electronic filing was transmitted to the Commission on September 18, 2015; that there are currently no parties that the Commission has excused from participation by electronic means in this proceeding; and that a paper copy of this Notice has been mailed to the Commission on September 18, 2015.

COUNSEL FOR CITY OF AUGUSTA

M. JON ON