COMMONWEALTH OF KENTUCKY

BEFORE THE PUBLIC SERVICE COMMISSION

In the Matter of:

ELECTRONIC PROPOSED ADJUSTMENT OF THE WHOLESALE WATER SERVICE RATES OF CENTRAL CITY MUNICIPAL WATER & SEWER

CASE NO. 2017-00199

CITY OF CENTRAL CITY'S FIRST SUPPLEMENTAL RESPONSE TO THE FIRST REQUEST FOR INFORMATION TO CENTRAL CITY FILED BY COMMISSION STAFF

The City of Central City provides the following corrected response to Item 10(a), (b), and

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(c) of the First Request for Information filed by Commission Staff. This response also addresses

information requested in Item 35 of the First Request of Information filed by the Water Districts.

Respectfully submitted,

M. TODD OSTERLOH JAMES W. GARDNER STURGILL, TURNER, BARKER & MOLONEY, PLLC 333 W. Vine Street, Suite 1500 Lexington, Kentucky 40507 Telephone No.: (859) 255-8581 tosterloh@sturgillturner.com

ATTORNEYS FOR CITY OF CENTRAL CITY

10. With regard to insurance coverages provided by Central City W&S to its employees, i.e., health care, dental, vision, life, etc.:

a. List all insurance coverages provided by Central City W&S to its employees, and state each insurance coverage that may be extended to the employee's family and dependents.

b. List the insurance coverages provided to each employee listed in response to Item 9, noting the level of coverage for each type of insurance, i.e., single, employee plus dependents, family, etc.

c. For each insurance coverage listed in response to Item 10.a., state separately the amount of the premium paid by Central City W&S and the amount of the premium paid by the employee.

d. For each insurance coverage listed in response to Item 10.a., provide the amount expensed and capitalized by Central City W&S during the test year and identify the general ledger accounts to which these amounts were posted.

Response: (a), (b), (c) Please see the attached document.

(d) There was \$2,186.36 withheld from employee payroll as of 6/30/2016, which is recorded as a liability in addition to expense for FY 2016 of \$78,625.62 for health insurance and \$2,443.32 for dental insurance.

Witness: David Rhoades

Benefits 2015-2016

Medical Insurance

Dental Insurance

Employee	Description	<u>City Pd.</u>	<u>General Ledger</u>	Employee Pd.	Ins. Coverage	<u>City Pd.</u>	General Ledger	Employee Pd.	Ins. Coverage
Ruth Ann Gossett	Office Manager	\$0.00				\$168.00	6202		
David Rhoades	Water Supt.	\$4,200.00	6200			\$168.00	6202		
TOTAL ADMINISTRATION		\$4,200.00				\$336.00			
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Danny Armour	Laborer	\$4,200.00	6200			\$168.00	6202		
Tony Daniel	Supervisor	\$4,200.00	6200			\$0.00	6202		
Richard Miller	Laborer	\$4,200.00	6200			\$168.00	6202		
Chad Morris	Laborer	\$0.00	6200			\$0.00	6202		
Shown Stovall	Laborer	\$4,200.00	6200			\$168.00	6202		
Kenny Zguro	Laborer	\$4,200.00	6200			\$168.00	6202		
TOTAL DISTRIBUTION		\$21,000.00				\$672.00			
Austin Amos	Operator	\$4,200.00	6200			\$168.00	6202		
Gary Dennison	Operator	\$4,200.00	6200			\$168.00	6202		
David Dossett	Operator	\$4,200.00	6200			\$168.00	6202		
Jeff Ford	Operator	\$4,200.00	6200			\$168.00	6202		
Jordan Hooper	Operator	\$4,200.00	6200			\$168.00	6202		
Jason Lacefield	Operator	\$4,200.00	6200			\$168.00	6202		
Jeremy Leach	Operator	\$4,200.00	6200			\$168.00	6202		
Ron Mobley	Supervisor	\$4,200.00	6200			\$168.00	6202		
Jimmy Sorrels	Operator	\$4,200.00	6200			\$168.00	6202		
TOTAL WATER PLANT		\$37,800.00				\$1,512.00			
TOTAL WATER PAYROL	L	\$63,000.00				\$2,520.00			