Location Premium Detail for Green Taylor Water District							
	Location	Prepared	Prepared Billing Period				
	Mary Ann Larimore Green Taylor Water Distric 250 Industrial Park Rd Greensburg, KY 42743						
Remit Payment to:	Payment Due	Date	Current 1	fotal Premiums Due			
Kentucky Local Government Health Trust PO Box 34021 Lexington, KY 40588	10/01/202	2					
	CURRENT	Fi	nployee C	Company			
Employee/Plan	Tier C			Premium Total Premium			
Active							
GLASSCOE, CONNIE J	n an			n gan ben di san den kun den den den den den den den den den de			
Delta 0202 Dental Option 5	ESP	\$0.00	\$0.00	\$0.00 \$45.69	41.19		
Standard 10K Group Life and ADD	60 - 64	\$10,000.00	\$0.00	\$7.01 4.50 \$7.01	1 22		
Standard Dependent Life Option 2	Life Rate	\$0.00	\$0.00	\$0.00 \$2.70	30.20		
Standard STD Weekly 15 15 76	60 - 64	\$394.80	\$0.00	\$0.00 \$20.61			
W31945M001 HSACAE02T5	ESP	\$0.00	\$0.00	\$0.00 98 . \$949.89	82114		
W31945V001 Anthem Vision Opt 23	ESP	\$0.00	\$0.00	\$0.00 1.30 \$13.00	11.70		
	Employee Totals	\$10,394.80	\$0.00	\$7.01 \$1,038.90	1 10 10		
LANE, BENJAMIN C					-0.17		
Delta 0202 Dental Option 5	FAM	\$0.00	\$0.00	\$0.00 \$1.12 \\A\ ^{\$82.68} \$1.12	10		
Standard 10K Group Life and ADD	35 - 39	\$10,000.00	\$0.00		14.59		
Standard Dependent Life Option 2	Life Rate	\$0.00	\$0.00	\$0.00 \$2.70	19.00		
Standard STD Weekly 15 15 76	35 - 39	\$408.00	\$0.00	\$0.00 Ab \$1,440.43	1244.19		
W31945M001 HSACAE02T5	FAM	\$0.00	\$0.00	\$0.00 \40.51,440.43			
W31945V001 Anthem Vision Opt 23 3	FAM	\$0.00 \$10,408.00	\$0.00 \$0.00	\$0.00 \$1.12 \$1,559.23	18.69		
LARIMORE, MARY A	Employee Totals	\$ 10,408.00	\$0.00	\$1.12 \$1,559.23			
Delta 0202 Dental Option 5	FAM	\$0.00	\$0.00	\$0.00 1191 \$82.68	70.77		
Standard 10K Group Life and ADD	50 - 54	\$10,000.00	\$0.00	\$3.31 \$3.31	10		
Standard Dependent Life Option 2	Life Rate	\$0.00	\$0.00	\$0.00 \$2.70	121.27		
Standard STD Weekly 15 15 76	50 - 54	\$490.56	\$0.00		Jou		
W31945M001 HSACAE02T5	FAM	\$0.00	\$0.00	\$0.00 QLay \$15.26 \$0.00 \$1,440.43	124419		
W31945V001 Anthem Vision Opt 23	FAM	\$0.00	\$0.00	\$0.00 .44 \$21.53	18.69		
*.	Employee Totals	\$10,490.56	\$0.00	\$3.31 \$1,565.91	18.00		
LOWE, ROBIN J	n an an an ann ann an ann an ann an ann an a	e en anglesian se se a canada su a constant finit in an an si se contrastant dia gana santa.	يستعينها التركار الألفان ومحاذيا ويورك التقريرة و				
Delta 0202 Dental Option 5	ESP	\$0.00	\$0.00	\$0.00 1 50 \$45.69	41.19		
Standard 10K Group Life and ADD	50 - 54	\$10,000.00	\$0.00	\$3.31 \$3.31	1.00		
Standard Dependent Life Option 2	Life Rate	\$0.00	\$0.00	\$0.00 \$2.70	18.000		
Standard STD Weekly 15 15 76	50 - 54	\$394.80	\$0.00	\$0.00 08 3 \$12.28	16176		
W31945M001 HSACAE02T5	ESP	\$0.00	\$0.00	\$0.00 \$949.89	8200		
W31945V001 Anthem Vision Opt 23	ESP	\$0.00	\$0.00	\$0.00 3 \$13.00	11-50.		
October 2022 Final Invoice		1	nployee	09/14/2022	1		
Employee/Plan	Tier C			Premium Total Premium			
	Employee Totals	\$10,394.80	\$0.00	\$3.31 \$1,026.87			
PATTERSON, DYLAN W					70.77		
Delta 0202 Dental Option 5	FAM	\$0.00	\$0.00	\$0.00 \\.Q1 \$82.68	8		

0K Group Life and ADD	20 - 24	\$10,000.00	\$0.00	\$1.00	\$1.00	<u>n</u>
ard Dependent Life Option 2	Life Rate	\$0.00	\$0.00	\$0.00	\$2.70 124	4
standard STD Weekly 15 15 76	20 - 24	\$408.00	\$0.00	\$0.00	1,440.43 1244	101
W31945M001 HSACAE02T5	FAM	\$0.00	\$0.00	\$0.00	\$1,440.43 1244	
W31945V001 Anthem Vision Opt 23	FAM	\$0.00	\$0.00	\$0.00 2	84 \$21.53 A.	198
	Employee Totals	\$10,408.00	\$0.00	\$1.00	\$1,562.13	
PIERCE, JAN M		-				1
Delta 0202 Dental Option 5	FAM	\$0.00	\$0.00	\$0.00	1.91 \$82.68 -10.	8
Standard 10K Group Life and ADD	40 - 44	\$10,000.00	\$0.00	\$1.53	\$1.53 20	4
Standard Dependent Life Option 2	Life Rate	\$0.00	\$0.00	\$0.00	\$2.70 0.7	6
Standard STD Weekly 15 15 76	40 - 44	\$270.00	\$0.00	\$0.00	1. al \$6.16	101
W31945M001 HSACAE02T5	FAM	\$0.00	\$0.00	\$0.00 8	\$1,440.43 244	18 E
W31945V001 Anthem Vision Opt 23	FAM	\$0.00	\$0.00	\$0.00	84 \$21.53 B.V	A
	Employee Totals	\$10,270.00	\$0.00	\$1.53	\$1,555.03	
RIGGLE, JOSHUA L				dan 22 merupakan kerdin di dan kerdi kana dan kerdi dan dan		3
Delta 0202 Dental Option 5	FAM	\$0.00	\$0.00	\$0.00	1.91 \$82.68 70.1	C,
Standard 10K Group Life and ADD	40 - 44	\$10,000.00	\$0.00	\$1.53	\$1.53	4
Standard Dependent Life Option 2	Life Rate	\$0.00	\$0.00	\$0.00	\$2.70	2
Standard STD Weekly 15 15 76	40 - 44	\$462.00	\$0.00	\$0.00	, av \$10.53	Ca
W31945M001 HSACAE02T5	FAM	\$0.00	\$0.00	\$0.00 1	\$1,440.43 2004	100
W31945V001 Anthem Vision Opt 23	FAM	\$0.00	\$0.00	\$0.00	\$\$ \$21.53 9.	A
	Employee Totals	\$10,462.00	\$0.00	\$1.53	\$1,559.40	
ROBERTSON, ANTHONY B				1		
Delta 0202 Dental Option 5	FAM	\$0.00	\$0.00	\$0.00	1.01 \$82.68 70.T	A
Standard 10K Group Life and ADD	35 - 39	\$10,000.00	\$0.00	\$1.12	\$1.12	A
Standard Dependent Life Option 2	Life Rate	\$0.00	\$0.00	\$0.00	\$2.70	0
Standard STD Weekly 15 15 76	35 - 39	\$485.76	\$0.00	\$0.00	1,440.43 Jan	6 (Ca
W31945M001 HSACAE02T5	FAM	\$0.00	\$0.00	\$0.00	\$1,440.43 WH	1.6
W31945V001 Anthem Vision Opt 23	FAM	\$0.00	\$0.00	\$0.00 2	St \$21.53 8.1	A
-	Employee Totais	\$10,485.76	\$0.00	\$1.12	\$1,561.28	
	Active Current Total	\$83,313.92	\$0.00	\$19.93	\$11,428.75	
	Location Current Totals	\$83,313.92	\$0.00	\$19.93	\$11,428.75	
	ADJUSTMEN	ITS				
October 2022 Final Invoice		2			09/14/2022	
	ADJUSTED TO	TALS				
	Location Adjusted Totals	\$83,313.92	\$0.00	\$19.93	\$11,428.75	ł.
		Previous	Total Due		\$9,856.61	
		Total Payment	and the second se		\$9,856.61	
ج ب			d Balance		\$0.00	
		Current Total	and the second state of th		\$11,428.75	
9		Man a summitte of the state of the second state of the state	lling Fees		\$0.00	
		Support and a supervision of the	nent Total		\$0.00	
		The state of the second st	Misc Fees		\$0.00	
		Location A	and the second se	and the second second second second second	\$0.00	
		Current 1	otal Due		\$11,428.75	

Client KLC				Location Billing Period				od -	Prepared			
			Green Taylor Water District Current		October 2022 Final Invoice Adjustment			09/14/2022				
								Total				
Benefit	Plan	Tier	Count	Volume	Premium	Count	Volume	Premium	Count	Volume	Premium	
Medical	W31945M001 HSACAE02T5	ESP	2	\$0.00	\$1,899.78	0	\$0.00	\$0.00	2	\$0.00	\$1,899.78	
	W31945M001 HSACAE02T5	FAM	6	\$0.00	\$8,642.58	0	\$0.00	\$0.00	6	\$0.00	\$8,642.58	
		Benefit Totals	8	\$0.00	\$10,542.36	.0	\$0.00	\$0.00	8	\$0.00	\$10,542.36	
Dental	Delta 0202 Dental Option	5 ESP	2	\$0.00	\$91.38	0	\$0.00	\$0.00	2	\$0.00	\$91.38	
	Delta 0202 Dental Option	5 FAM	6	\$0.00	\$496.08	0	\$0.00	\$0.00	6	\$0.00	\$496.08	
		Benefit Totals	8	\$0.00	\$587.46	0	\$0.00	\$0.00	8	\$0.00	\$587.46	
Vision	W31945V001 Anthem Vision Opt 23	ESP	2	\$0.00	\$26.00	0	\$0.00	\$0.00	2	\$0.00	\$26.00	
	W31945V001 Anthem Vision Opt 23	FAM	6	\$0.00	\$129.18	0	\$0.00	\$0.00	6	\$0.00	\$129.18	
		Benefit Totals	8	\$0.00	\$155.18	0	\$0.00	\$0.00	8	\$0.00	\$155.18	
Basic Life	Standard 10K Group Life and ADD	20 - 24	1	\$10,000.00	\$1.00	0	\$0.00	\$0.00	1	\$10,000.00	\$1.00	
	Standard 10K Group Life and ADD	35 - 39	2	\$20,000.00	\$2.24	0	\$0.00	\$0.00	2	\$20,000.00	\$2.24	
	Standard 10K Group Life and ADD	40 - 44	2	\$20,000.00	\$3.06	0	\$0.00	\$0.00	2	\$20,000.00	\$3.06	
	Standard 10K Group Life and ADD	50 - 54	2	\$20,000.00	\$6.62	0	\$0.00	\$0.00	2	\$20,000.00	\$6.62	
	Standard 10K Group Life and ADD	60 - 64	1	\$10,000.00	\$7.01	0	\$0.00	\$0.00	1	\$10,000.00	\$7.01	
		Benefit Totals	8	\$80,000.00	\$19.93	0	\$0.00	\$0.00	8	\$80,000.00	\$19.93	
Dep. Life	Standard Dependent Life Option 2	Life Rate	8	\$0.00	\$21.60	0	\$0.00	\$0.00	8	\$0.00	\$21.60	
		Benefit Totals	8	\$0.00	\$21.60	0	\$0.00	\$0.00	8	\$0.00	\$21.60	
STD	Standard STD Weekly 15 15 76	20 - 24	1	\$408.00	\$13.79	0 🔹	\$0.00	\$0.00	1	\$408.00	\$13.79	
	Standard STD Weekly 15 15 76	35 - 39	2	\$893.76	\$23.59	0	\$0.00	\$0.00	2	\$893.76	\$23.59	
	Standard STD Weekly 15 15 76	40 - 44	2	\$732.00	\$16.69	0	\$0.00	\$0.00	2	\$732.00	\$16.69	
	Standard STD Weekly 15 15 76	50 - 54	2	\$885.36	\$27.54	0	\$0.00	\$0.00	2	\$885.36	\$27.54	
	Standard STD Weekly 15	60 - 64	1	\$394.80	\$20.61	0	\$0.00	\$0.00	1	\$394.80	\$20.61	
	15 76	-rendef TTTE - 201216		200 1100	010101	-	40.00	40.00 A 4		\$00 1 .00	920.01	
October 2022 Final	Invoice	ين ا		,		ž.	·* 1				09/14/2022	

1 .

Location Premium Summary

			Current			Adjustment			Total		
Benefit	Plan	Tier	Count	Volume	Premium	Count	Volume	Premium	Count	Volume	Premium
		Benefit Totals	8	\$3,313.92	\$102.22	0	\$0.00	\$0.00	8	\$3,313.92	\$102.22
		Location Totals	48	\$83,313.92	\$11,428.75	0	\$0.00	\$0.00	48	\$83,313.92	\$11,428.75
										Misc Fees	\$0.00
									Lo	ocation Adjustment	\$0.00
										Billing Fees	\$0.00
										Grand Total	\$11,428.75

2

October 2022 Final Invoice

00-

П