


**Location Premium Detail for Cumberland County Water District**

	<b>Location</b>	<b>Prepared</b>	<b>Billing Period</b>		
	Matthew Dyer Cumberland County Water District 133 Lower River Street Burkesville, KY 42717	10/14/2022	November 2022 Final Invoice		
<b>Remit Payment to:</b>	<b>Payment Due Date</b>		<b>Current Total Premiums Due</b>		
Kentucky Local Government Health Trust PO Box 34021 Lexington, KY 40588	11/01/2022		\$7,068.04		
<b>CURRENT</b>					
<b>Employee/Plan</b>	<b>Tier</b>	<b>Coverage</b>	<b>Employee Premium</b>	<b>Company Premium</b>	<b>Total Premium</b>
<b>Active</b>					
<b>ANDERSON, JOSEPH A</b>					
Standard 25K Group Life and ADD	60 - 64	\$25,000.00	\$0.00	\$17.53	\$17.53
W30823M001 HRACA02T1	EMP	\$0.00	\$0.00	\$0.00	\$695.75
<b>Employee Totals</b>		<b>\$25,000.00</b>	<b>\$0.00</b>	<b>\$17.53</b>	<b>\$713.28</b>
<b>BOWLIN, BRENDA</b>					
Standard 25K Group Life and ADD	45 - 49	\$25,000.00	\$0.00	\$5.18	\$5.18
<b>Employee Totals</b>		<b>\$25,000.00</b>	<b>\$0.00</b>	<b>\$5.18</b>	<b>\$5.18</b>
<b>BRANHAM, JAMES *</b>					
Standard 25K Group Life and ADD	20 - 24	\$25,000.00	\$0.00	\$2.50	\$2.50
W30823M001 HRACA02T1	EMP	\$0.00	\$0.00	\$0.00	\$695.75
<b>Employee Totals</b>		<b>\$25,000.00</b>	<b>\$0.00</b>	<b>\$2.50</b>	<b>\$698.25</b>
<b>CARTER, JOHNNY E *</b>					
Standard 25K Group Life and ADD	70 - 74	\$12,500.00	\$0.00	\$32.96	\$32.96
<b>Employee Totals</b>		<b>\$12,500.00</b>	<b>\$0.00</b>	<b>\$32.96</b>	<b>\$32.96</b>
<b>CARY, JAMES A **</b>					
Standard 25K Group Life and ADD	55 - 59	\$25,000.00	\$0.00	\$13.10	\$13.10
W30823M001 HRACA02T1	EMP	\$0.00	\$0.00	\$0.00	\$695.75
<b>Employee Totals</b>		<b>\$25,000.00</b>	<b>\$0.00</b>	<b>\$13.10</b>	<b>\$708.85</b>
<b>CLEMENS, JULIE A</b>					
Standard 25K Group Life and ADD	55 - 59	\$25,000.00	\$0.00	\$13.10	\$13.10
W30823M001 HRACA02T1	EMP	\$0.00	\$0.00	\$0.00	\$695.75
<b>Employee Totals</b>		<b>\$25,000.00</b>	<b>\$0.00</b>	<b>\$13.10</b>	<b>\$708.85</b>
<b>CORBIN, JOHNNY *</b>					
Standard 25K Group Life and ADD	20 - 24	\$25,000.00	\$0.00	\$2.50	\$2.50
W30823M001 HRACA02T1	EMP	\$0.00	\$0.00	\$0.00	\$695.75
<b>Employee Totals</b>		<b>\$25,000.00</b>	<b>\$0.00</b>	<b>\$2.50</b>	<b>\$698.25</b>
<b>DYER, MATTHEW D</b>					
Standard 25K Group Life and ADD	40 - 44	\$25,000.00	\$0.00	\$3.83	\$3.83
W30823M001 HRACA02T1	EMP	\$0.00	\$0.00	\$0.00	\$695.75
<b>Employee Totals</b>		<b>\$25,000.00</b>	<b>\$0.00</b>	<b>\$3.83</b>	<b>\$699.58</b>

Employee/Plan	Tier	Coverage	Employee Premium	Company Premium	Total Premium																		
<b>ENGLAND, REX L</b>																							
Standard 25K Group Life and ADD	45 - 49	\$25,000.00	\$0.00	\$5.18	\$5.18																		
W30823M001 HRACA02T1	EMP	\$0.00	\$0.00	\$0.00	\$695.75																		
<b>Employee Totals</b>		<b>\$25,000.00</b>	<b>\$0.00</b>	<b>\$5.18</b>	<b>\$700.93</b>																		
<b>MELECOSKY, ANTHONY III</b>																							
Standard 25K Group Life and ADD	40 - 44	\$25,000.00	\$0.00	\$3.83	\$3.83																		
W30823M001 HRACA02T1	EMP	\$0.00	\$0.00	\$0.00	\$695.75																		
<b>Employee Totals</b>		<b>\$25,000.00</b>	<b>\$0.00</b>	<b>\$3.83</b>	<b>\$699.58</b>																		
<b>MYERS, BILLY J</b>																							
Standard 25K Group Life and ADD	50 - 54	\$25,000.00	\$0.00	\$8.28	\$8.28																		
W30823M001 HRACA02T1	EMP	\$0.00	\$0.00	\$0.00	\$695.75																		
<b>Employee Totals</b>		<b>\$25,000.00</b>	<b>\$0.00</b>	<b>\$8.28</b>	<b>\$704.03</b>																		
<b>WAID, DAVID L</b>																							
Standard 25K Group Life and ADD	30 - 34	\$25,000.00	\$0.00	\$2.55	\$2.55																		
W30823M001 HRACA02T1	EMP	\$0.00	\$0.00	\$0.00	\$695.75																		
<b>Employee Totals</b>		<b>\$25,000.00</b>	<b>\$0.00</b>	<b>\$2.55</b>	<b>\$698.30</b>																		
<b>Active Current Total</b>		<b>\$287,500.00</b>	<b>\$0.00</b>	<b>\$110.54</b>	<b>\$7,068.04</b>																		
<b>Location Current Totals</b>		<b>\$287,500.00</b>	<b>\$0.00</b>	<b>\$110.54</b>	<b>\$7,068.04</b>																		
<b>ADJUSTMENTS</b>																							
<b>ADJUSTED TOTALS</b>																							
<b>Location Adjusted Totals</b>		<b>\$287,500.00</b>	<b>\$0.00</b>	<b>\$110.54</b>	<b>\$7,068.04</b>																		
			<table border="1"> <tr> <td>Previous Total Due</td> <td>\$7,068.04</td> </tr> <tr> <td>Total Payment Received</td> <td>\$7,068.04</td> </tr> <tr> <td>Unpaid Balance</td> <td>\$0.00</td> </tr> <tr> <td>Current Total Premium</td> <td>\$7,068.04</td> </tr> <tr> <td>Billing Fees</td> <td>\$0.00</td> </tr> <tr> <td>Adjustment Total</td> <td>\$0.00</td> </tr> <tr> <td>Misc Fees</td> <td>\$0.00</td> </tr> <tr> <td>Location Adjustment</td> <td>\$0.00</td> </tr> <tr> <td><b>Current Total Due</b></td> <td><b>\$7,068.04</b></td> </tr> </table>			Previous Total Due	\$7,068.04	Total Payment Received	\$7,068.04	Unpaid Balance	\$0.00	Current Total Premium	\$7,068.04	Billing Fees	\$0.00	Adjustment Total	\$0.00	Misc Fees	\$0.00	Location Adjustment	\$0.00	<b>Current Total Due</b>	<b>\$7,068.04</b>
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\* NO LONGER EMPLOYEE BY CCWD. INSURANCE PROVIDER HAS BEEN CONTACTED TO REMOVE THEM FROM COVERAGE.

\*\* COST OF BOARD MEMBER COVERAGE IS PAID BY CCWD, BUT THEN REIMBURSED TO CCWD BY BOARD MEMBER.