



INVOICE

Client Name: EAST CASEY CO WATER DIST

Invoice No.: RIS0005039077

Client No.: M000430035

Invoice Date: 07/01/2023

Billing Period: 07/01/2023 Thru 07/31/2023

Line	Identifier	Description	Quantity	UOM	Amount Due
Reminder: Billing details are only available online on Benefit Manager Toolkit (www.benefitmanagertoolkit.com). If you do not yet have access, update your security settings via the site "First Time Login" page.					
		Balance Forward			0.00
1		Subscriber Only	10	20.90	209.00
2	COBRA	Subscriber Only	1	20.90	20.90
Current Monthly Total:			11		\$229.90
Total Amount Due:					\$229.90

For inquiries please call: 1-800-955-2030

Changes made after 6/15/2023 will be reflected in the next billing cycle.

Payment Confirmation

Your contribution summary payment has been submitted.

Please print a copy for your records.

Payment Details

Employer:	Mo23 - EAST CASEY COUNTY WATER DISTRICT
Report:	CERS - 06/2023
Payment Date:	7/5/2023
Payment From:	Casey - THE CASEY COUNTY BANK, ...9919 , e-Check 0623
Payment Amount:	\$7,524.36

Summary Totals

Regular Contributions:	\$7,524.36
State-funded Expenses:	\$0.00
Adjustments:	\$0.00
IPS:	\$0.00
Invoices:	\$0.00

Print 

[Pay another monthly summary »](#)

Monthly Report

Your monthly detail report has been submitted.

Report Details

Employer:	M023 - EAST CASEY COUNTY WATER DISTRICT
Report:	CERS - 06/2023
Date Submitted:	7/5/2023 9:19:28 AM

Report Totals

Salary:	\$23,195.28
Employee Contributions:	\$1,159.77
Health Insurance Contributions:	\$150.57
Employer Contributions:	\$6,214.02
Number of Contributions:	10

[Click here to submit the Jun 2023 monthly summary for EAST CASEY COUNTY WATER DISTRICT.](#)

[« Return to Enter Report Details](#)

CASEY COUNTY FISCAL COURT
P O BOX 306
LIBERTY KY 42539
(606) 787-8311

Invoice No.

INVOICE

Customer

Name EAST CASEY WATER DISTRICT
Address PO Box 56
City LIBERTY State KY ZIP 42539
Phone 606-787-1922 Fax 606-787-8917

Misc

Date 7/5/2023
Order No.
Rep
FOB

Qty	Description	Unit Price	TOTAL
10	EMPLOYEE ONLY HEALTH	\$ 868.96	\$ 8,689.60
10	FEBCO FEE	\$ 6.00	\$ 60.00
1	DOCUMENT FEE	\$ 32.90	\$ 32.90
1	FEBCO FEE	\$ 6.00	\$ 6.00

SubTotal	\$ 8,788.50
Shipping	
TOTAL	\$ 8,788.50

Payment

Select One...

Comments

Name
CC #
Expires

Tax Rate(s)

Office Use Only

THANK YOU!

CASEY COUNTY FISCAL COURT
P O BOX 306
LIBERTY KY 42539
(606) 787-8311

Invoice No.

INVOICE

Customer

Name EAST CASEY WATER DISTRICT
Address P O BOX 56
City LIBERTY State KY ZIP 42539
Phone 606-787-1922 FAX 606-787-8917

Misc

Date 7/5/2023
Order No.
Rep
FOB

Qty	Description	Unit Price	TOTAL
1	Employees ded-July	\$ 563.22	\$ 563.22

SubTotal	\$ 563.22
Shipping	
TOTAL	\$ 563.22

Payment

Select One...

Comments
Name
CC #
Expires

Tax Rate(s)

Office Use Only

THANK YOU!

Washington National Ins Co

If you have any questions regarding this invoice please call

Worksite Integrated Services: 800-458-9094

EAST CASEY COUNTY WATER
ATTN: SALLY PITTMAN
PO BOX 56
LIBERTY, KY 42539-

Due Date: 06-15-2023

Group Number: G029790000, WH00001555,
51076, WG00001555

Invoice Date: 05-18-2023

Invoice Number: P2327529

Billing Period: 05-18-2023 to 06-15-2023

**IF YOU HAVE ANY NEW EMPLOYEES
CONTACT YOUR SERVICE REPRESENTATIVE TO ENROLL THEM**

Please include a copy of the invoice with your payment.

Group No	Invoice Number	Total Amount	Amount Paid	Check Number
G029790000, WH00001555, 51076, WG00001555	P2327529	\$97.52		

Remit Payment to:

Washington National Ins Co
PO Box 223355
Pittsburgh, PA 15251-2355

EAST CASEY COUNTY WATER
ATTN: SALLY PITTMAN
PO BOX 56
LIBERTY, KY 42539-