



Statement Prepared On: 12/22/2021

Questions regarding your insurance coverage:  
 Bob Roberts Insurance & Investments  
 (859)623-7684

**Statement – Premium Due**

Questions regarding your statement:  
 Cincinnati Corporate Billing  
 877-942-2455, [CinciBill@cinfin.com](mailto:CinciBill@cinfin.com)  
 Monday-Friday, 7:30 a.m.- 6 p.m. Eastern Time  
 Saturday, 8 a.m.- noon Eastern Time

KIRKSVILLE WATER ASSOCIATION INC  
 PO BOX 670  
 RICHMOND KY 40476

<b>Amount Due:</b>	\$2,063.00
<b>Due Date:</b>	01/15/2022

**Account Number:** 1000569114  
**Policy Number(s) with Premium Due:**  
 0496943

<b>Pay Online or by Phone:</b>	<i>cinfin.com</i> 800-364-3400  Payments may be made by checking, savings or credit card. We accept Visa®, MasterCard®, Discover®, and American Express® cards.  Payments confirmed prior to 3 p.m. Eastern Time are applied the same business day, Monday-Friday, excluding bank holidays.
<b>Payment Address:</b>	The Cincinnati Insurance Company P.O. Box 145620 Cincinnati, OH 45250 - 5620
<b>Overnight Payment Address:</b>	The Cincinnati Insurance Company Attention: Corporate Accounts Receivable 6200 South Gilmore Road Fairfield, OH 45014 - 5141

----- **Please detach and return the remittance stub below with your payment.** -----

Make check payable to: **THE CINCINNATI INSURANCE COMPANY**. \*Please include your account number on the check. Do not send cash. If paying multiple accounts include the remittance stub for each.

Account Number	Due Date	Amount Due
1000569114	01/15/2022	\$2,063.00

Please mark for change of address and complete the reverse side.

**Late Payments:** A fee of up to \$25 and/or account cancellation may result if the total amount due is not received and posted by the due date.

KIRKSVILLE WATER ASSOCIATION INC  
 PO BOX 670  
 RICHMOND KY 40476

THE CINCINNATI INSURANCE COMPANY  
 PO BOX 145620  
 CINCINNATI OH 45250 -5620

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Statement Prepared On: 02/21/2022

**Questions regarding your insurance coverage:**

Bob Roberts Insurance & Investments  
(859)623-7684

**Statement – Premium Due**

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KIRKSVILLE WATER ASSOCIATION INC  
PO BOX 670  
RICHMOND KY 40476

<b>Amount Due:</b>	\$27.00
<b>Due Date:</b>	03/15/2022

**Account Number:** 1000569114  
**Policy Number(s) with Premium Due:**  
0496943

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Account Number	Due Date	Amount Due
1000569114	03/15/2022	\$27.00

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PO BOX 670  
RICHMOND KY 40476

THE CINCINNATI INSURANCE COMPANY  
PO BOX 145620  
CINCINNATI OH 45250 -5620

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Statement Prepared On: 06/23/2022

Questions regarding your insurance coverage:  
 Bob Roberts Insurance & Investments  
 (859)623-7684

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 877-942-2455, [CinciBill@cinfin.com](mailto:CinciBill@cinfin.com)  
 Monday-Friday, 7:30 a.m.- 6 p.m. Eastern Time  
 Saturday, 8 a.m.- noon Eastern Time

KIRKSVILLE WATER ASSOCIATION INC  
 PO BOX 1150  
 RICHMOND KY 40476-1150

<b>Amount Due:</b>	\$2,114.00
<b>Due Date:</b>	07/15/2022

**Account Number:** 1000569114  
**Policy Number(s) with Premium Due:**  
 0496943

<b>Pay Online or by Phone:</b>	<i>cinfin.com</i> 800-364-3400  Payments may be made by checking, savings or credit card. We accept Visa®, MasterCard®, Discover®, and American Express® cards.  Payments confirmed prior to 3 p.m. Eastern Time are applied the same business day, Monday-Friday, excluding bank holidays.
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Account Number	Due Date	Amount Due
1000569114	07/15/2022	\$2,114.00

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KIRKSVILLE WATER ASSOCIATION INC  
 PO BOX 1150  
 RICHMOND KY 40476-1150

THE CINCINNATI INSURANCE COMPANY  
 PO BOX 145620  
 CINCINNATI OH 45250 -5620

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Statement Prepared On: 07/21/2022

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<b>Overnight Payment Address:</b>	The Cincinnati Insurance Company Attention: Corporate Accounts Receivable 6200 South Gilmore Road Fairfield, OH 45014 - 5141

<b>Amount Due:</b>	\$1,668.00
<b>Due Date:</b>	08/15/2022

**Account Number:** 1000569114  
**Policy Number(s) with Premium Due:**  
 0496943

----- Please detach and return the remittance stub below with your payment. -----

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Account Number	Due Date	Amount Due
1000569114	08/15/2022	\$1,668.00

Please mark for change of address and complete the reverse side.

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 RICHMOND KY 40476-1150

THE CINCINNATI INSURANCE COMPANY  
 PO BOX 145620  
 CINCINNATI OH 45250 -5620

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Statement Prepared On: 09/22/2022

**Questions regarding your insurance coverage:**

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(859)623-7684

**Statement – Premium Due**

**Questions regarding your statement:**

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KIRKSVILLE WATER ASSOCIATION INC  
PO BOX 1150  
RICHMOND KY 40476-1150

<b>Amount Due:</b>	\$3,483.00
<b>Due Date:</b>	10/15/2022

**Account Number:** 1000569114  
**Policy Number(s) with Premium Due:**  
0496943

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Account Number	Due Date	Amount Due
1000569114	10/15/2022	\$3,483.00

Please mark for change of address and complete the reverse side.

**Late Payments:** A fee of up to \$25 and/or account cancellation may result if the total amount due is not received and posted by the due date.

KIRKSVILLE WATER ASSOCIATION INC  
PO BOX 1150  
RICHMOND KY 40476-1150

THE CINCINNATI INSURANCE COMPANY  
PO BOX 145620  
CINCINNATI OH 45250 -5620

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Statement Prepared On: 12/22/2022

**Questions regarding your insurance coverage:**

Bob Roberts Insurance & Investments  
(859)623-7684

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<b>Amount Due:</b>	\$3,483.00
<b>Due Date:</b>	01/15/2023

**Account Number:** 1000569114  
**Policy Number(s) with Premium Due:**  
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1000569114	01/15/2023	\$3,483.00

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THE CINCINNATI INSURANCE COMPANY  
PO BOX 145620  
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**Statement – Premium Due**

KIRKSVILLE WATER ASSOCIATION INC  
 PO BOX 1150  
 RICHMOND KY 40476-1150

<b>Amount Due:</b>	\$3,483.00
<b>Due Date:</b>	04/15/2023

**Payment Method:** Direct Invoice

**Account Number:** 1000569114

**Policy Number(s) with Premium Due:**  
 0496943

**Statement Prepared On:** 03/23/2023

**Questions regarding your insurance coverage:**  
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1000569114	04/15/2023	\$3,483.00

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**Statement – Premium Due**

KIRKSVILLE WATER ASSOCIATION INC  
 PO BOX 1150  
 RICHMOND KY 40476-1150

<b>Amount Due:</b>	\$3,578.00
<b>Due Date:</b>	07/15/2023

**Payment Method:** Direct Invoice  
**Account Number:** 1000569114  
**Policy Number(s) with Premium Due:**  
 0496943

**Statement Prepared On:** 06/22/2023

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