

LWD Contribution

FICA Employer Match	\$ 24.00	x 7.65%	\$ 1.84
Retirement Employer Contribution	\$ 24.00	x 18.62%	\$ 4.47
Health Insurance-Dist. Employees			\$ 5.49 *
HRA -Dist Employees			\$ 1.04 *
Life Ins/AD&D -Dist. Employees			\$ 0.23 *
Other Benefits-Dist. phone allow			\$ 0.02 *
Other Benefits-Dist. boot allow			\$ 0.10 *
Workers Comp-Dist. Employees	\$ 24.00	1.05%	\$ 0.25 *
TOTAL LWD CONTRIBUTION			<u>\$ 13.44</u>

* SEE WORKPAPERS INCLUDED
THAT SHOW CALCULATION

Location Premium Summary

Client		Location		Billing Period		Prepared		
KACo Benefits Group		Laurel County Water District Number 2 - 068		March 2026 Final Invoice		02/15/2026		
Benefit	Plan	Tier	Current		Adjustment		Total	Premium
			Count	Volume	Count	Volume		
Medical	W31387M001 HSA E01	EMP	4	\$0.00	1	\$0.00	5	\$1,670.30
	RXC2 - Age 24 and Under							
	W31387M001 HSA E01	EMP	3	\$0.00	0			\$1,054.56
	RXC2 - Age 25-29							
	W31387M001 HSA E01	FAM	1	\$0.00	0			\$1,979.97
	RXC2 - Age 30-34							
	W31387M001 HSA E01	FAM	1	\$0.00	0			\$2,261.40
	RXC2 - Age 40-44							
	W31387M001 HSA E01	FAM	2	\$0.00	0			\$5,148.22
	RXC2 - Age 45-49							
	W31387M001 HSA E01	EMP	1	\$0.00	0			\$2,168.54
	RXC2 - Age 50-54							
	W31387M001 HSA E01	ESP	1	\$0.00	0			\$2,155.25
	RXC2 - Age 50-54							
	W31387M001 HSA E01	FAM	1	\$0.00	0			\$2,895.93
	RXC2 - Age 55 and Over							
	W31387M001 HSA E01	EMP	2	\$0.00	0			\$2,207.80
RXC2 - Age 55 and Over								
W31387M001 HSA E01	ESP	1	\$0.00	0			\$2,194.52	
RXC2 - Age 55 and Over								
W31387M001 HSA E01	FAM	1	\$0.00	0			\$2,935.19	
RXC2 - Age 55 and Over								
Dental	699370 Delta Dental PPO		19	\$0.00	1	\$26,337.62		\$26,671.68
	Plus with Pediatric Plan							
	699370 Delta Dental PPO		11	\$0.00	1	\$333.52		\$83.80
	Plus with Pediatric Plan							
	699370 Delta Dental PPO		2	\$0.00	0	\$120.32		\$363.84
	Plus with Pediatric Plan							
	699370 Delta Dental PPO		1	\$0.00	0	\$128.80		\$120.32
	Plus with Pediatric Plan							
Cancer 1	FEBCO Admin Fee	EMP	15	\$0.00	1	\$666.44		\$128.80
			19	\$0.00	1	\$114.00		\$696.76
			19	\$0.00	1	\$114.00		\$120.00
			0	\$0.00	0	\$0.00		\$120.00

Health Ins -
Dist

1,336.24
1,979.97
2,261.40
1,084.27
6,661.88
79,942.56
79,942.56
11,420.37
11,420.37
2,080.00
5,49

per hour
per employee

Laurel County Water District # 2 Ledger Analysis

Fiscal Year 2025 Open
Breakdown The Report By Funds
Page Break Between Funds
Transaction Date Range 01/01/25 To 12/31/25
Account Range 00604-0151 To 00604-0151
Include All Transaction Sources

Sort Order 1: Base Account
Sort Order 2: Department
Sort Order 3:
Sort Order 4:

Trans Date	Description	Reference Number	Source	Posted Date	Posted By	Type	Debit Amount	Credit Amount	Reconc.
00604-0151 Health Reimbursement Account-Distr									
Beginning Balance									
01/31/25	HRA	1003	GJETRX	03/20/25	Wonda	G	\$476.85	\$0.00	
02/28/25	HSA	2005	GJETRX	04/22/25	Wonda	G	\$917.20	\$0.00	<input type="checkbox"/>
03/31/25	HRA	3003	GJETRX	05/07/25	Wonda	G	\$320.20	\$0.00	<input type="checkbox"/>
04/30/25	HRA	4003	GJETRX	05/15/25	Wonda	G	\$929.80	\$0.00	<input type="checkbox"/>
05/31/25	HRA	5002	GJETRX	06/18/25	Wanda	G	\$519.37	\$0.00	<input type="checkbox"/>
06/30/25	HRA INSURANCE DISTRO	6003	GJETRX	08/07/25	Wonda	G	\$547.95	\$0.00	<input type="checkbox"/>
06/30/25	Reverse Entry-Posted in wrong month	6003	GJETRX	08/12/25	Wonda	G	\$0.00	\$547.95	<input type="checkbox"/>
06/30/25	HRA-DIST	6004	GJETRX	08/13/25	Wonda	G	\$1,173.19	\$0.00	<input type="checkbox"/>
07/31/25	HRA-DISTR	7002	GJETRX	08/12/25	Wonda	G	\$547.95	\$0.00	<input type="checkbox"/>
07/31/25	HRA-PLANT	7004	GJETRX	09/04/25	Wonda	G	\$547.95	\$0.00	<input type="checkbox"/>
07/31/25	REVERSE ENTRIES-ENTERED TWICE	7004	GJETRX	09/04/25	Wonda	G	\$0.00	\$547.95	<input type="checkbox"/>
08/31/25	HRA	8003	GJETRX	09/18/25	Wonda	G	\$3,895.92	\$0.00	<input type="checkbox"/>
09/30/25	HRA	90003	GJETRX	10/15/25	Wonda	G	\$755.20	\$0.00	<input type="checkbox"/>
10/31/25	HRA-DIST	10007	GJETRX	11/13/25	Wonda	G	\$561.71	\$0.00	<input type="checkbox"/>
11/30/25	HRA	11005	GJETRX	12/11/25	Wonda	G	\$877.35	\$0.00	<input type="checkbox"/>
12/31/25	HRA-Dist	12003	GJETRX	01/14/26	Wonda	G	\$2,047.89	\$0.00	<input type="checkbox"/>
Ending Balance							\$14,118.53	\$1,095.90	
Transactions: 16							\$13,022.63		
Total Transactions: 16									
Report Totals							\$14,118.53	\$1,095.90	

..000CA
 HRA A/C (604-0151)
 Dist.
 2025 13,022.63 ÷
 6 on HRA for 2025 } 6. x
 will be 7 in 2026 } 7. =
 Est for 2026 15,193.07
 15,193.07 ÷
 # Employees 7. ÷
 2,080. =
 1.04 +
 per hr.
 per employee

**WORKERS' COMPENSATION
PREMIUM AUDIT STATEMENT**



Policy number: WCS3005691
Named insured: Laurel County Water District #2

Code	Description	Rate	Estimated payroll	Actual payroll	Estimated premium	Audited premium	Premium difference
State: KY							
Location #1							
Premium Period: 06/30/2024 to 06/30/2025							
7520	WATERWORKS OPERATION & DRIVERS	1.05	\$815,000.00	\$795,493.00	\$8,558.00	\$8,353.00	(\$205.00)
8810	CLERICAL OFFICE EMPLOYEES NOC	0.07	\$280,000.00	\$259,028.00	\$196.00	\$181.00	(\$15.00)
Total Manual Premium					\$8,754.00	\$8,534.00	(\$220.00)
Employers Liability Limits					\$96.00	\$94.00	(\$2.00)
Employers Liability Increased Limits Balance to Minimum Premium					\$24.00	\$26.00	\$2.00
Experience Modification Premium					(\$1,420.00)	(\$1,385.00)	\$35.00
Expense Constant					\$250.00	\$250.00	\$0.00
Terrorism					\$55.00	\$53.00	(\$2.00)
Catastrophe (Other than certified acts of terrorism)					\$120.00	\$116.00	(\$4.00)
Kentucky Special Fund Assessment					\$514.00	\$502.00	(\$12.00)
LOCATION TOTAL:					\$8,393.00	\$8,190.00	(\$203.00)
POLICY TOTAL:					\$8,393.00	\$8,190.00	(\$203.00)

used for W. Comp Rate - Dist -