



Customer	Invoice #
94870	E012204

APPROVED BY: WB HF Tpm
ACCT. LIST # 6080
FUND OTM
CK. NO. 21302
REVIEWED BY: C Smith

Team: **AWDWEST**
Payor: **94870**
Bill Name: **STND**
Bill Period: **9/1/2026 - 9/30/2026**
Billed Amount: **\$959.43**
Amount Due: **\$959.43**
Amount Paid:

THE FUTURE OF BILLING, TODAY

NEED FORMS? VISIT OUR WEBSITE AT
<https://americanfidelity.com>

PREMIUMS ARE DUE WITHIN THE 31 DAY
GRACE PERIOD. PLEASE REMIT TIMELY TO
PREVENT DELAYS IN CLAIM PROCESSING.

BILLING QUESTIONS? CALL 1.800.662.1113



EAST CLARK COUNTY WATER DISTRICT

Customer

94870 Invoice # E012204

Team: AWDWEST
Payor: 94870
Bill Name: STND
Bill Period: 9/1/2026 - 9/30/2026
Amount Billed: \$959.43
Amount Due: \$959.43

AMERICAN FIDELITY ASSURANCE
PO BOX 268805
OKLAHOMA CITY, OK 73126-8805
QUESTIONS ABOUT YOUR BILL?
CALL TOLL FREE: 1.800.662.1113

ID/SSN	Name	Product	Mode	Bill Period	Policy Number	Premium	New Premium	TOTAL	*Chg Code	Effective MM/DD/YY	Remarks
xxx-x		SDISB	M	SEP01-SEP30	9990146	\$45.30	\$45.30	\$45.30			
xxx-		LIFE	M	SEP01-SEP30	ERJ166595	\$62.98	\$62.98				
xxx-		SDISB	M	SEP01-SEP30	9587082	\$144.32	\$144.32	\$207.30			
xxx-		LIFE	M	SEP01-SEP30	629678502	\$28.90	\$28.90				
xxx-x		SDISB	M	SEP01-SEP30	6296785	\$75.44	\$75.44	\$104.34			
xxx-x		SDISB	M	SEP01-SEP30	3069187	\$52.48	\$52.48	\$52.48			
xxx-x		LDISB	M	SEP01-SEP30	0977880	\$25.20	\$25.20				
xxx-		LIFE	M	SEP01-SEP30	MGF128609	\$24.01	\$24.01				
xxx-x		SDISB	M	SEP01-SEP30	0977880	\$60.40	\$60.40	\$109.61			
xxx-x		LDISB	M	SEP01-SEP30	0781352	\$21.90	\$21.90				
xxx-		SDISB	M	SEP01-SEP30	0781352	\$45.30	\$45.30	\$67.20			
xxx-		LIFE	M	SEP01-SEP30	GTX548028	\$222.00	\$222.00				
xxx-		SDISB	M	SEP01-SEP30	0471019	\$65.60	\$65.60	\$287.60			
xxx-		LDISB	M	SEP01-SEP30	3167930	\$25.20	\$25.20				
xxx-		SDISB	M	SEP01-SEP30	3167930	\$60.40	\$60.40	\$85.60			
PAGE TOTALS								\$959.43			

TOTAL AMOUNT DUE: \$959.43

(-) TERMINATIONS:

(+) ADJUSTMENTS:

(-) ADJUSTMENTS:

TOTAL AMOUNT PAID:

AFA Office use Only:

\$ RECEIVED

SUSP DEBIT:

SUSP CREDIT:

PREM DIFF:

NET POSTED:

*CHG - Change Codes:

A Add Employee/Coverage

T Terminate Employee

D Drop/Cancel Coverage

C Change Premium

F FMLA/Other Leave

N Employee Name Change

Z Other/Deceased

X Transfer

EAST CLARK COUNTY WATER DISTRICT

Bill Period

9/1/2026 - 9/30/2026

Customer #

94870

Invoice #

E012204

EAST CLARK CO WATER DISTRICT

21302

E012204

8/27/26

959.43

959.43

8/28/26

21302

American Fidelity Assurance Co.

\$959.43

PRODUCT SCLM108

USE WITH 91500 ENVELOPE

PROFESSIONAL PRINTING (859) 296-1622

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