NEIKIRK INSURANCE

Invoice

Date	Invoice #
10/17/2025	900-2025-11

Bill To

SE Water Association
147 E Somerset Church Rd
Somerset, KY 42503

Coverage Period	Due Date
NOV 2025	10/25/2025

Description	Coverage	Type	Amount
Medical - Basic Life	Emp		632.23
STD	Emp		10.50
LTD	Emp		23.87
Total	Emp		27.95
			694.55
Medical - Basic Life			
STD	Fam		1,833.47
LTD	Emp		10.50
Total	Emp		34.36
	Emp		40.59
Dental - Vision			1,918.92
Total			
	Emp/Sp		45.75
Medical - Dental	Emp/Sp		14.92
Vision			60.67
Basic Life			
STD	Fam		1,833.47
LTD	Fam		78.77
Total	Fam		24.29
	Emp		10.50
Medical - Basic Life	Emp		22.82
STD	Emp		26.67
LTD			1,996.52
Total			
	Emp		632.23
Medical - Vision	Emp		10.50
Basic Life	Emp		24.85
STD	Emp		29.12
LTD			696.70
	Emp		632.23
	Emp		7.96
	Emp		10.50
	Emp		20.93
	Emp		24.40

Total

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10/17/2025	900-2025-11

Bill To

SE Water Association
147 E Somerset Church Rd
Somerset, KY 42503

Coverage Period	Due Date
NOV 2025	10/25/2025

Description	Coverage	Type	Amount
Total			696.02
Medical -	Emp/Ch		1,138.02
Dental	Fam		78.77
Vision	Fam		24.29
Basic Life	Emp		10.50
Medical - Medicare - Rx -	Ind		334.58
STD	Ind		44.90
LTD	Emp		22.70
Total	Emp		26.53
			1,680.29
Medical-			
Dental	Emp		632.23
Vision	Emp		23.44
Basic Life	Emp		7.96
STD	Emp		10.50
LTD	Emp		13.95
Total	Emp		15.99
			704.07
Medical -			
Dental	Emp		632.23
Vision	Emp		23.44
Basic Life	Emp		7.96
STD	Emp		10.50
LTD	Emp		25.45
Total	Emp		29.85
			729.43
Medical -			
Dental	Emp		632.23
Vision	Emp		23.44
Basic Life	Emp		7.96
STD	Emp		10.50
LTD	Emp		31.64
Total	Emp		37.30
			743.07

Total

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Bill To
SE Water Association 147 E Somerset Church Rd Somerset, KY 42503

Coverage Period	Due Date
NOV 2025	10/25/2025

Description	Coverage	Type	Amount
Medical-	Emp		632.23
Dental	Emp		23.44
Vision	Emp		7.96
Basic Life	Emp		10.50
STD	Emp		13.95
LTD	Emp		15.99
Total			704.07
Medical -	Emp		632.23
Vision	Emp/Sp		14.92
Basic Life	Emp		10.50
STD	Emp		15.29
LTD	Emp		17.60
Total			690.54
Basic Life -	Emp		5.75
Medical - AARP	Emp		297.07
RX	Emp		89.20
STD	Emp		42.43
LTD	Emp		50.31
Total			484.76
Medical - Medicare Sup-	Emp	Plan G	142.84
	Emp		30.30
			173.14
RX			
Total			
	$5 EACH MEDICAL COVERAGE		55.00
Monthly Membership Dues			

Total $12,027.75