ADLER POLLOCK & SHEEHAN P.C.

One Citizens Plaza, 8th floor Providence, RI 02903·1345 Telephone 401·274·7200 Fax 401·751·0604 / 351·4607

175 Federal Street Boston, MA 02110·2210 Telephone 617-482·0600 Fax 617·482·0604

www.apslaw.com

September 21, 2012

Via Electronic Filing and Regular Mail

Ms. Luly Massaro, Clerk Rhode Island Public Utilities Commission 89 Jefferson Blvd Warwick, R.I. 02888

RE: City of Woonsocket, Water Division - Docket No. 4320

Dear Luly:

On behalf of the City of Woonsocket, Water Division ("WWD"), enclosed please find an original and seven (7) copies of WWD's Supplemental Response to the Commission's Fourth Data Request 4-2.

Please let me know if you have any questions.

Very truly yours,

ALAN M. SHOER ashoer@apslaw.com

cc:

Via E-mail: Service List

623158_1.docx

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS PUBLIC UTILITIES COMMISSION

IN RE: CITY OF WOONSOCKET	:	
WATER DIVISION APPLICATION	- :	DOCKET NO. 4320
TO CHANGE RATES	•	

WOONSOCKET WATER DIVISION'S RESPONSES TO COMMISSION'S FOURTH SET OF DATA REQUESTS (Issued August 30, 2012)

COMM. 4-2

Referencing Commission Data Request 1-13, the question was seeking documentation supporting the pro forma amounts, such as bills from carriers, or written notification from an entity, such as the working rates for medical insurance, or the Interlocal Trust (workers' compensation).

SUPPLEMENTAL RESPONSE

See attached insurance documentation for health, dental, COBRA, Life

Insurance, Auto insurance.

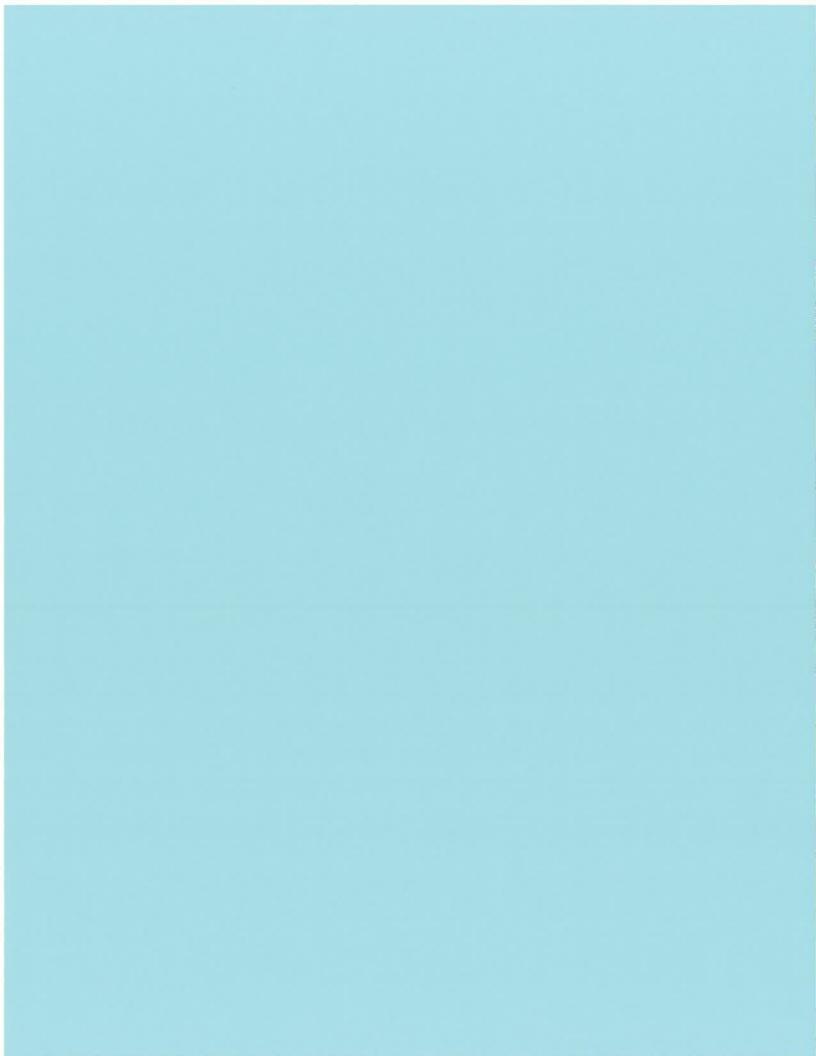
RESPONDENT

Sheila McGauvran

DATE

September 20, 2012

623113



Total Dental/Fund for	Selected Plan>	>>>> DD 02
\$98,13	FUND	R6454-54471
	WASTE	
\$518.12	FUND	W6554-54471
	WATER	
		7/*
\$0.00	FUND	U6454-54471
	USER	121
\$0.00	FUND	U6954-54471
	SEWER	
\$0.00	FUND	897
	SYETP	54
\$2,602.39	FUND	O9454-54471
*	GFUND	
	FIRE	
	POLICE	
	OUTSIDE	
\$0.00	FUND	P6454-54471
,	PTREAT	
	8	
\$2.210.6A		
\$3,218.64		

TOTALS

TOTALS FOR 3155.84 62.8 3218.64

 $U_{\tau_{\frac{1}{4}}}$



Established 1914
68 Cumberland Street • Plaza Center
P.O. Box I, Woonsocket, Rhode Island 02895
(401) 769-8100 • Fax (401) 766-4973 www.keoughkirby.com

City of Woonsocket 169 Main Street Woonsocket, RI 02895 MYOKE

CLIENT
City of Woonsocket

7508

DATE
07/19/2012
CLIENT
SERVICE
PAGE
1 of 1

PAYMENT INFORMATION
INVOICE SUMMARY
PAYMENT AMOUNT
PAYMENT FOR:
WAI 0002715

Thank You

PLEASE DETACH AND RETURN WITH PAYMENT

Client: City of Woonsocket

INVOICE	EFFECTIVE	TRANSACTION	DESCRIPTION		AMOUNT
86685	07/01/2012 Re	peco.	cy #WAI 0002715 07/01/2012- tis Insurance Assoc. Inc. ness Auto - Renew policy	07/01/2013	281,921.0
	184				
4				ie Witz	
	420.00		ē		* 133 Aire
	100°	<i>√</i> k.			
				6.186	
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		× 5		×4.	
	7		N. D. Z.		TOTAL
			ye Mark Const.	1	281,921.00

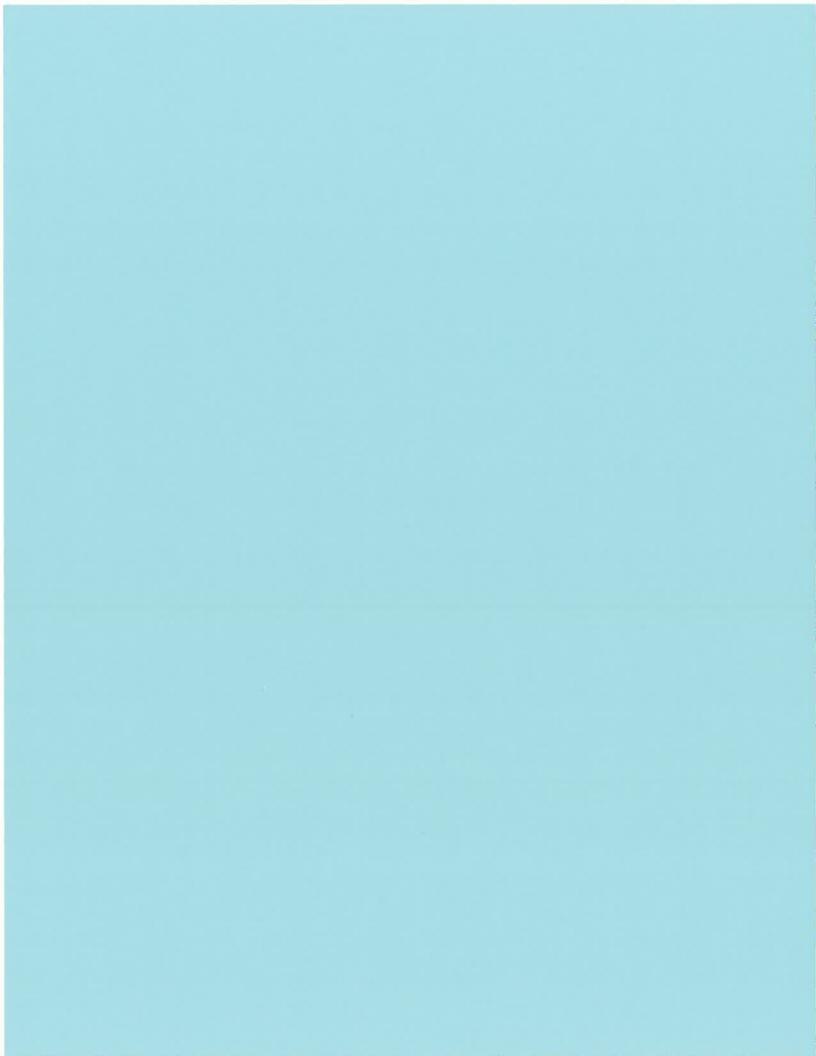
Thank You

Payments are due within 10 days from the date of Invoice. (If budget arrangements are desired, please contact our office immediately).

Keough Kirby Associates, Inc. (401)769-8100

DATE 07/19/2012

		City of W	of Woonsocket Owned Vehicles			
Vehicle #	Department/Use	Year	Make/Model	Vin #	Reg.#	CN
~	Public Works/Water	1984	Cox Boat Trailer		1 CARTON	1,000
2	Public Works/Water	1995	GMC Pickup 4x4	Thumstell or I interest		15,000
က	Public Works/Water	1998	Superior Utility Trailer		1 2005	1,000
4	Public Works/Water	1999	Ford Pickup 4x4	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		17,849
5	Public Works/Water	1999	Ingersol Light Tower L-6	(7) After law?		10,000
9	Public Works/Water	1999	New Holland Backhoe	3 th plant -		75,000
7	Public Works/Water	2000	International Dump Truck	STREET ALL ALL STREET		57,250
8	Public Works/Water	2000	Ford Utility Truck/Compressor		7	38,842
6	Public Works/Water	2000	Eager Beaver Flatbed Trailer	The state of the s		11,000
10	Public Works/Water	2001	Hurst Trailer	- 111057200		3,975
11	Public Works/Water	2003	Ford Utility 4x4	A FIRE OF ENDARACTOR		32,055
12	Public Works/Water	2002	Ford Explorer	APACO OCULORISM	1000	22,218
13	Public Works/Water	2002	Ford Pickup 4x4	4F13F3/F7,1EP=1082		31,187
14	Public Works/Water	2002	Ford Utility Truck/Compressor			, 55,000
15	Public Works/Water	2003	Ford F-250	HELD STREETS STREET		32,000
16	Public Works/Water	2003	Sterling Dump Truck	[2F26 - 1 149.5 MBS 7		59,856
17	Public Works/Water	2004	Superline Trailer	MEME 14 - 11,211 o 18		11,000
18	Public Works/Water	2005	Ford F-150 Pickup	1 1FT PPT 4 WHO STREETS		21,485
19	Public Works/Water	2005	Ford Escape	THE STREET WAS DONE	7	22,282
20	Public Works/Water	2005	Ford F-150 Pickup	110 = 2 44 174 1 20005		19,839
21	Public Works/Water	2005	Ford F-150 Pickup	PATER IN THE SHADEOUS		19,839
22	Public Works/Water	2005	JCB Backhoe	A STATE OF S	1000	53,175
23	Public Works/Water	2008	Ford E250 Van	TENN HALLMOND	THE PRINT	19,235
24	Public Works/Water	2009	Ford F350	STUDEN STREET ACCOUNT	The same of the	35,100
25	Public Works/Water	2009	Ford Ranger			18,664



KINETINGTON

Blue Cross Blue Shield of Rhode Island

MOONSOCKET CITY EMPLOYEES WOONSOCKET, RI D2895 CHRISTINA DUARTE CITY HALL

146	10145	CYCLE F08		ED 12	BILLED 08 16 12
MKT. R	MEMB. REP.	BILL		E C	DATE
10 01 12	09 01 12	09 01 12	7	-	290
CURRENT BILLING From To	CURREN	DUE DATE	SER	NUME	GROUP NUMBER
Page 2 of 7 F	Pa	Payment is Due By This Date			

ANN DATE 07-61-89

090112

REP.

PAB

CURRENT BILLING PERIOD SUMMARY OF THIS BILL

COVERAGE

AMOUNT

9811.20

BASIC COVERAGE

IN MEMBERSHIP ADMINISTRATION SERVICES

TEL. NO. (401)459-2341

CALL MEMBERSHIP SERVICES UNIT

FOR ASSISTANCE WITH THIS BILL,

SECTION 1

SUBTOTAL:

9811.20

PAYMENTS PAST DUE

BILL TO DATE 09-01-12

BILL FROM DATE 08-01-12 07-01-12

DATE BILLED

08-15-12 08-14-12 08-15-12 08-14-12 DUE DATE

9811.20

9734.55

GRAND TOTAL DUE:

A---

PLEASE WRITE YOUR GROUP NUMBER ON YOUR CHECK

BLUE CROSS & BLUE SHIELD OF R.I.

MAKE CHECK PAYABLE TO:

PLEASE PAY AS BILLED

29356.95

AMOUNT PAID

CHECK NUMBER

RETURN THIS PAGE WITH YOUR PAYMENT

02901

PROVIDENCE, R.I. P. O. BOX 1057



WOONSOCKET CITY EMPLOYEES CHRISTINA DUARTE CITY HALL WOONSOCKET, RI DEBSS

CURRENT BILLING From 109 01 12 10 01 12 10 01 12		Payment is Due By This Date	Pe	Page 3 of 7 F
MEMB. REP. 10	GROUP NUMBER	DUE DATE	CURRED From	T BILLING
MEMB. REP. 10145	2	09 01 12	09 01 12	10 01 12
10145	-	BILL	MEMB. REP.	MKT. REP
		F08	10145	146

ANN DATE 07-01-89

090112

PAB

SECTION 2

SUMMARY OF PACKAGE 006 SUBSCRIBERS=	CKAGE 006	SUBSCRIBI		128 IND=	4	37 FAM≔	91	=S/S=	0 S/C=		0 SIC=	0	
COVERAGE	IND	NO. OF CONTRACTS FAM S/S	NTRACT: S/S	s/c	S1C	GNI	MONTHLY RATES FAM	s:s s/s	s/c	\$1C	CURRENT	RETRO	TOTAL
HMATE C2C STOP LOSS	37	91	0		00	28.93	28.93			1	3703.04 6108.16	0.00	3703.04
тот РКG 006	1			1 1 1 1 1		76.65	76.65				9811.20	00.00	9811.20
TOT CURR PD	37	91	0		0	1					9811.20	0.00	9811.20
TOTAL F	TOTAL PRIOR UNPAID BILLS	ID BILLS				1				195	19545.75		

TOTAL AMOUNT DUE



29356.95

9/5/12

\$1,839.60	FUND WATER	19.374	W6554-5447	I	
\$0,00	FUND USER		U6454-54471	l	
\$0.00	FUND SEWER	0	U6954-54471	Į.	
\$0.00	FUND SYETP		897		
7894.95	FUND GFUND FIRE POLICE OUTSIDE	ě s	O9454-54471		
	FUND WASTE	4	P6454-54471		
9811.2					
		Co	ount: >>> >>>	F=89 I=39	:
VV CRITERIA SELEC NAME = No Criteria Entered	TED WWW FUND = IN No Criter N			F= PK =	GP :
CITICITA ESITICIEU	TAO CYTICALIA	o Cinen	MOTIC	Inoue IBC 006	290

CITY OF WOONSOCKET, RHODE ISLAND PAYMENT VOUCHER

VOUCHER DATE	9/5/2012			
FISCAL YEAR:	2012	Ж		
ACCOUNT NO.	1-010-09454-544	71		
VENDOR #:	000279			
BLUE CROSS				
ACCOUNT #		DESCRIPTION		AMOUNT
	e e	September, 2012		
1-010-09454-54471		N SERVICE - PLAN 100	(GENERAL FUND)	7,894.95
	Group 290 12 BLUE CROSS & PHYSICIA	N SERVICE - PLAN 100	(POLICE)	6,208.65
	Group 260 13 BLUE CROSS & PHYSICIA Group 292 19	N SERVICE - PLAN 100	(FIRE)	8,048.25
			SUBTOTAL:	\$22,151.85
90			*	
	BLUE CROSS & PHYSICIA Group 4H53 12	N SERVICE - PLAN 100	(MUNICIPAL RET.)	3,219.30
	BLUE CROSS & PHYSICIA Group 4H55 19	N SERVICE - PLAN 100	(POLICE RET.)	7,281.75
	BLUE CROSS POLICE RE Group IC667 16	TIRED SPECIAL PRESC	RIPTION (1C667.)	3,142.65
	BLUE CROSS & PHYSICIA	N SERVICE - PLAN 100	(F)RE RET.)	3,985.80
	Group 4H54 10 BLUE CROSS FIRE RETIR	ED SPECIAL PRESCRIF	TION (1C860)	3066.00
	Group IC860 18		SUBTOTAL:	\$20,695.50
	Amount Approve	d for Payment	(Total)	\$42,847.35
The amount indic being lawfully o	cated is hereby approvedue the same from the C inv	d and certified for pay lity of Woonsocket fo roices or vouchers.	yment to the abover the items show	ve named payee as n on the attached
	·	Finance Director	<u> </u>	**
DATE PAID:			CHECK NO:	Secretaria de la constanta de

	AVIAN	PAYMENT VOUCHER		
	2/5/2040			Å
VOUCHER DATE:	9/5/2012			
FISCAL YEAR:	2012			
ACCOUNT NO.	1-015-W6554-	54471		
VENDOR #:	000279			
BLUE CROSS				
ACCOUNT#		DESCRIPTION		AMOUNT
		September, 2012		
1-015-W6554-54471	BLUE CROSS & Group 290 12 - Waler	PHYSICIAN SERVICE - PL/ r	AN 100	1,839.60
1-015-W6554-54471	BLUE CROSS & (MUNICIPAL RET.)	PHYSICIAN SERVICE - PL Group 4H53 12	AN 100	919.80
	Amount Appro	ved for Payment	(Total)	\$2,759.40
*				
The amount indicated being lawfully due th	e same from the	ved and certified for pay e City of Woonsocket for invoices or vouchers.	yment to the ab or the items sho	ove named payee as wn on the attached
ia.				
		El Discotor		
ж		Finance Director		
DATE PAID:			CHECK NO	D:

		PAYMENT VOUCHER		
VOUCHER DATE:	9/5/2012	90.		
FISCAL YEAR:	2012			
ACCOUNT NO.	1-020-R6454-5	54471		
VENDOR #:	000279			
BLUE CROSS				
ACCOUNT #		DESCRIPTION		AMOUNT
A0000N1 #		September, 2012		
		Odptombol, 2012		
1-020-R6454-54471	BLUE CROSS & Group 290 12 - Waste	PHYSICIAN SERVICE - PLAN gwaler	100	76,65
1-020-R6454-54471	BLUE CROSS & (MUNICIPAL RET.)	PHYSICIAN SERVICE - PLAN Group 4H53 12	l 100	76.65
	Amount Appro	ved for Payment	(Total)	\$153.30
The amount indicated is being lawfully due the	e same from the	ved and certified for payn e City of Woonsocket for invoices or vouchers.	nent to the above the items shown	named payee as on the attached
	H-	Finance Director		ę
DATE PAID:			CHECK NO:	

		DNOOCKET, KITOBE 105 II.		
	PA	YMENT VOUCHER		
VOUCHER DATE:	9/5/2012			
FISCAL YEAR:	2012	(4)		
ACCOUNT NO. 1	-025-U6954-544	71		
VENDOR #:	000279			
BLUE CROSS ACCOUNT #		DESCRIPTION September, 2012		AMOUNT
	BLUE CROSS & PH Group 290 12 - Sewer	YSICIAN SERVICE - PLAN	100	0.00
1-025-U6954-54471 E	BLUE CROSS & PH MUNICIPAL RET.) Gr	YSICIAN SERVICE - PLAN oup 4H53 12	100	76.65
,	Amount Approve	ed for Payment	(Total)	\$76.65
The amount indicated is being lawfully due the	same from the	voices or vouchers.	nent to the above the items shown o	named payee as on the attached
		Finance Director		
DATE PAID:			CHECK NO:	

		PAYMENT VOUCHER		
VOUCHER DATE:	9/5/2012		57	
FISCAL YEAR:	2012	ž.		
ACCOUNT NO.	1-010-09454-5	54471		
VENDOR #:	000279			
BLUE CROSS ACCOUNT #		DESCRIPTION		AMOUNT
		September, 2012		
1-010-09454-54471	BLUE CROSS & Group 290 20	PLAN 65 (GENERAL FUND)		18,647.25
	*			
	Amount Appro	oved for Payment	(Total)	\$18,647.25
The amount indicated i	s hereby appro	oved and certified for payr ne City of Woonsocket for invoices or vouchers.	ment to the above the items shown	e named payee as on the attached
		Finance Director		
DATE PAID:	, a	ε	CHECK NO:	

		PAYMENT VOUCHER		
VOUCHER DATE:	9/5/2012		5	
FISCAL YEAR:	2012			
ACCOUNT NO.	1-015-W6554-	54471		
VENDOR #:	000279			
BLUE CROSS				
ACCOUNT #		DESCRIPTION		AMOUNT
		September, 2012		
1-015-W6554-54471	BLUE CROSS P Group 290 20	LAN 65 - WATER		1,297.20
M.	Amount Appro	oved for Payment	(Total)	\$1,297.20
The amount indicated being lawfully due th	e same from th	oved and certified for payr e City of Woonsocket for invoices or vouchers.	ment to the above the items shown	e named payee as on the attached
		Finance Director	ew **	· i
DATE PAID:			CHECK NO:	

		PAYMENT VOUCHER		
VOUCHER DATE:	9/5/2012			
FISCAL YEAR:	2012			
ACCOUNT NO.	1-020-R6454-	54471		
VENDOR #:	000279			
BLUE CROSS				·
ACCOUNT #		DESCRIPTION	360	AMOUNT
		September, 2012		
1-020-R6454-54471	BLUE CROSS P Group 290 20	LAN 65 - WASTEWATER		1,297.20
Tild the state of				
	Amount Appro	oved for Payment	(Total)	\$1,297.20
The amount indicated i	s hereby appro	oved and certified for pay ne City of Woonsocket for	ment to the above	e named payee as on the attached
boning lawrany ado an		invoices or vouchers.		
		Fjnance Director		
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		PAYMENT VOUCHER		
VOUCHER DATE:	9/5/2012	AND MADE		
FISCAL YEAR:	2012			
ACCOUNT NO.	1-025-U6954-	54471		
VENDOR #:	000279			
BLUE CROSS				
ACCOUNT #		DESCRIPTION		AMOUNT
	100	September, 2012		
1-025-U6954-54471	BLUE CROSS P Group 290 20	LAN 65 - SEWER		648.60
		33		
	Amount Appro	oved for Payment	(Total)	\$648.60
The amount indicated is being lawfully due the	s hereby appro same from th	ved and certified for payn e City of Woonsocket for invoices or vouchers.	nent to the above the items shown o	named payee as on the attached
		Finance Director	1 11	
DATE PAID:			CHECK NO:	

		PAYMENT VOUCHER		
VOUCHER DATE:	9/5/2012			
FISCAL YEAR:	2012	750		
ACCOUNT NO.	1-010-09454-54	1471		
VENDOR #:	009689			
BLUE CHIP P.O. Box 452 Providence, RI 02901-0	452			
ACCOUNT #		DESCRIPTION		AMOUNT
		September, 2012		
1-010-09454-54471	BLUE CHIP PREM Group MC0014 18	MIUM - GENERAL FUND		29,361.70
	6			
	Amount Approv	ved for Payment	(Total)	\$29,361.70
The amount indicated being lawfully due th	e same from the	ved and certified for payr City of Woonsocket for nvoices or vouchers.	ment to the above the items shown	e named payee as on the attached
		Finance Director		
DATE PAID:		i e	CHECK NO:	

		PAYMENT VOUCHER		
VOUCHER DATE:	9/5/2012			
FISCAL YEAR:	2012			
ACCOUNT NO.	1-015-W6554	-54471		
VENDOR #:	009689			
BLUE CHIP P.O. Box 452 Providence, RI 02901-04	52			
ACCOUNT #		DESCRIPTION		AMOUNT
		September, 2012		
1-015-W6554-54471	BLUE CHIP PRE Group MC0014 18	MIUM - WATER		5,773.90
	Amount Appro	oved for Payment	(Total)	\$5,773.90
The amount indicated had being lawfully due the	s hereby appro e same from th	oved and certified for payr e City of Woonsocket for invoices or vouchers. Finance Director	ment to the above the items shown	e named payee as on the attached
		090		
DATE PAID:			CHECK NO:	

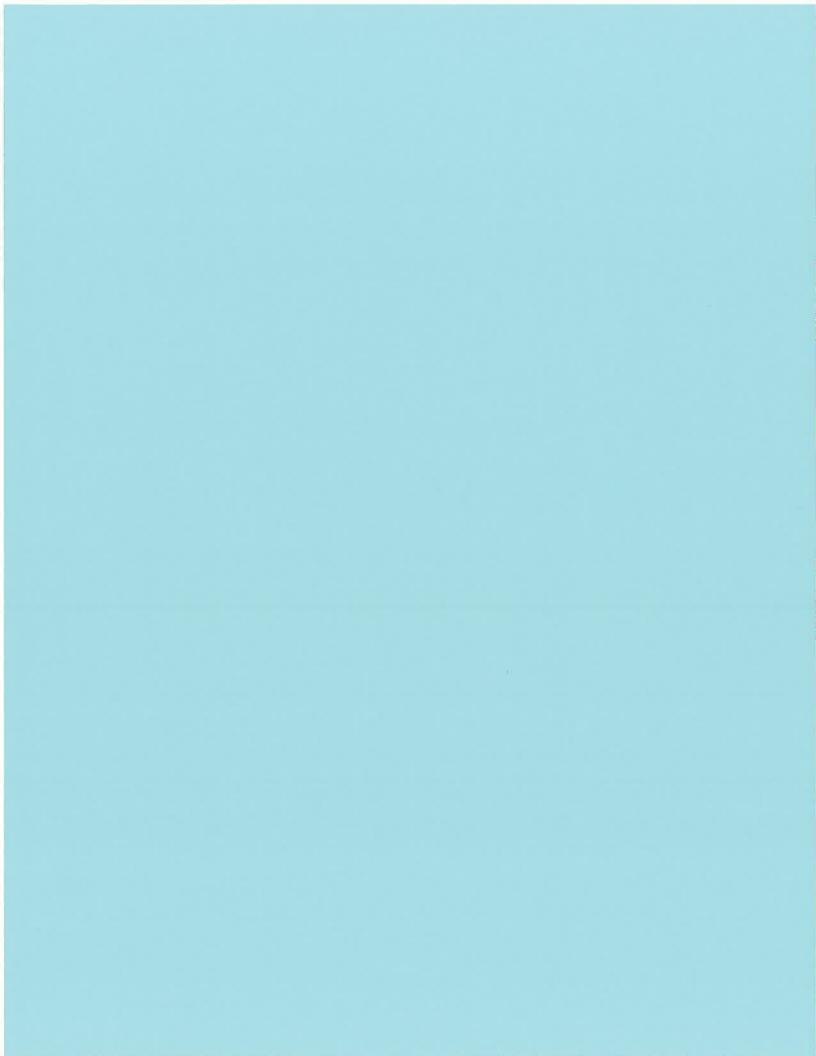
	PAYMENT VOUCHER		
And the	PATIMENT VOOCHER		
VOUCHER DATE:	9/5/2012		
FISCAL YEAR:	2012		
ACCOUNT NO.	1-020-R6454-54471		
VENDOR #:	009689		
BLUE CHIP P.O. Box 452 Providence, RI 02901-04	452		
ACCOUNT #	DESCRIPTION		AMOUNT
	September, 2012		
1-020-R6454-54471	BLUE CHIP PREMIUM - WASTEWATER Group MC0014 18		215.00
	Amount Approved for Payment	(Total)	\$215.00
The amount indicated i	s hereby approved and certified for pa e same from the City of Woonsocket fo involces or vouchers.	yment to the above or the items shown	e named payee as on the attached
		V	-11
	Finance Director		<u></u>
DATE PAID:		CHECK NO:	\6

		PAYMENT VOUCHER		
VOUCHER DATE:	9/5/2012			35
FISCAL YEAR:	2012	:W:		
ACCOUNT NO.	1-025 - U6454-	54471		
VENDOR #:	000279			
BLUE CROSS				
ACCOUNT #		DESCRIPTION		AMOUNT
		September, 2012		
1-025-U6454-54471	BLUE CROSS P	LAN 65 - USER CHARGE		162.15
				2
		æ		
	Amount Appro	oved for Payment	(Total)	\$162.15
		DA .		
	20			
The amount indicated being lawfully due the	ne same from the	ved and certified for pa e City of Woonsocket fo invoices or vouchers.	yment to the abover the items show	ve named payee as n on the attached
3	B	Finance Director		-
DATE PAID:			CHECK NO:	

W6654 U6454 U6954	3985.80 Municipal	R6454	
	3985.80]	3985,80
1C860 18 4	3066.00		3066,00
1C667 1 6 1C860 1 8 4H54 1 0 Pol Ret Fire Ret Fire Ret	3142.65		3142.65
	8048.25		8048.25
4H53 1 2 292 1 9 Ret Munic Fire 919.80 76.65	3219.30	76.65	4292.40
5773.90	29361.70	215.00	35350.60
297.20 162.15 648.60	18647.25	1297.20	9811.20 22052.40 35350.60
290 1 2 P65 Plan 100 Ret 1839.60 1	7894.95	76.65	9811.20
4H55 1 9 26	7281.75		7281.75
	6208.65		6208.65
21033 260 ce.Fire Poli	00.0		0.00
UH20199 UH21033 260 1 3 Municipal Police.Fire Police	0.00		0.00
WATER Wun WATER SEWER SEWER	GFUND	WASTE	TOTAL

September, 2012

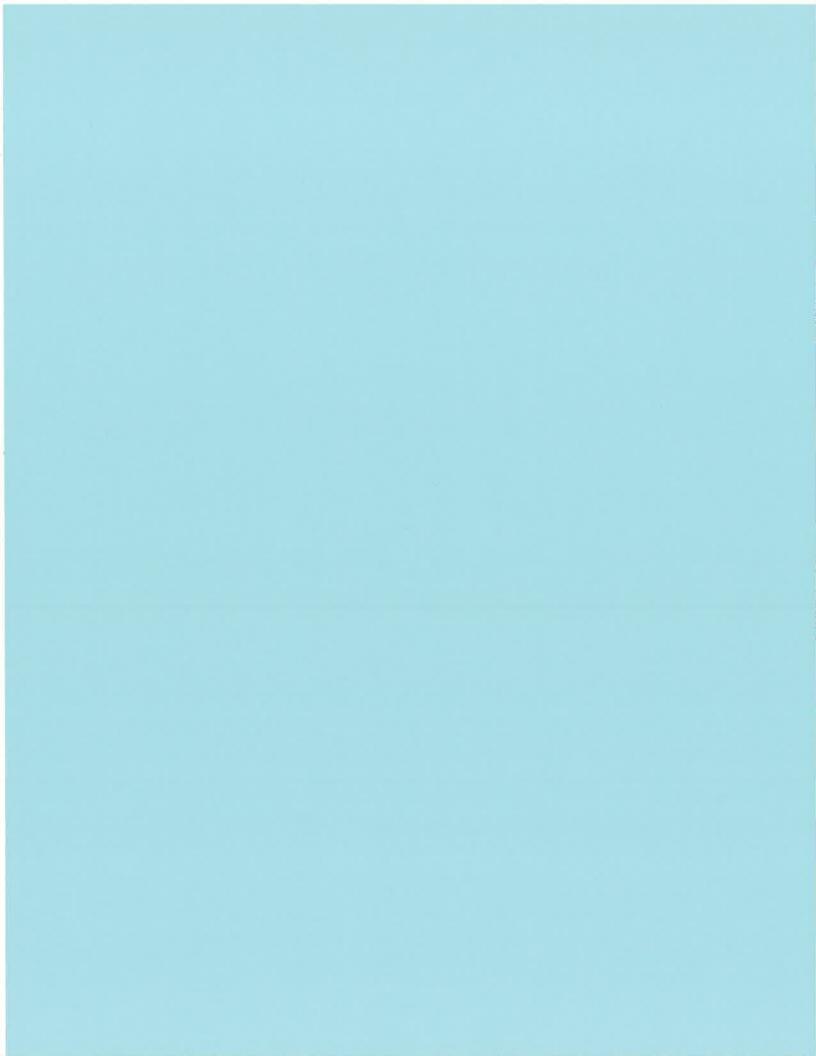
\$103,239.70



September, 2012	88.13 R6454 Voucher 4, Line 2 98.13 R6454 Voucher 4, Line 1(DD02,05-10) 2,449.02 W6554 Voucher 3, Line 1: (DD02, 09,10) 227.66 User 62.8 Sewer	5,243.18 Municipal DD07,8,9,10: Voucher 1, Line1 -8,080.79 33,492.60 Agater Retirees & Cobra, Voucher 3, Line 2 st Voucher, 2nd Line	5, Line 2 r 5, Line 4
DD01 DD02 DD03 DD04 DD05 DD06 DD07 DD08 DD09 DD10	Pol Act GF, H2O Pol Ret GFund Div Ret GF GF GF, H2O GF	300.14 102.78	Municipal Plan, User Woucher 5, Line 3 Municipal Plan, Sewer, Voucher 5, Line 3 Municipal Plan, Sewer, Voucher 5, Line 3

er.

*



CITY OF WOONSOCKET, RHODE ISLAND DEPARTMENT OF FINANCE PERSONNEL DIVISION

PAYMENT VOUCHER

		860	
DATE:	August 21, 2012	26	
VENDOR#	015161		
PAYEE:	STANDARD INSURANC P.O. Box 5980 Portland, Oregon 97228-		
INVOICE #: P.O.#:	082112		
FY: ACCOUNT #: PARTIAL PAYMENT	2013 1-010-09354-54456	AMOUNT: FULL PAYMENT	\$7,968.85
	**	ð	
DESCRIPTION:	Life Insurance Bill Policy No. 139203-0001	- Due 9/01/2012	
	×		
payee as being lav	ted is hereby approved and wfully due the same from the voices or vouchers.	d certified for payn ne City of Woonso	nent to the above named cket for the items shown
Assisting as a second s	•		*
Christina	Ansto	*	
Person	nel Director	Fina	nce Director
DATE PAID:	9-6-12	CHECK #: 1/	3143
g-			1 1,440
			ti.

		ъ.

STATEMENT OF PREMIUM DUE PAYABLE ON DUE DATE

POLICY NUMBER

DUE DATE



MAIL CORRESPONDENCE TO: 920 S.W. SIXTH AVE, PORTLAND, OR. 97204

00 139203 0001 SEP 01, 2012

PERLOPER	4.4	100,000		353355
OHYC	si tit	£00000		33300.2
300000000000000000000000000000000000000			9990	900000

T4

CITY OF WOONSOCKET ATTN CHRISTINA DUARTE 169 MAIN ST WOONSOCKET, RI 02895

MAIL	PREMILIM PAYMENT	S TO:
PO BOX 5980 PORTLAND, OR	97228-5980	20

RAS

800-348-3226

PAGE 1 OF

							descent and				2221021	1745	AND DESCRIPTION OF THE		
RENT CHANGES F INSURANCE IN FORCE	BLIFE														
	LIVES	V	OLUM	ië.	LIVES	VOLUM	E	LIVES		CA. UME		LIVES	V,	OLUMI	6
IN FORCE LAST STATEMENT	420	17	7047	500						/(. /	-				,,,,,,,,,,
ADD NEW MEMBERS *		×		-	#! #0 047	-	1.00								
ADD VOLUME INCREASES						2345				1 0				·	
EGS TERMINATED *	2		55	000											1
LESS VOLUME DEGREASES															
IN FORCE THIS STATEMENT (1+2+3-4-6)	418	16	955	000						1 .					

CURRENT PREMIUM HATES	\$.470/\$1,000			
UNADJUSTED PREMIUM (7X6)			i	
BACK CHARGES **		¥ 1	7.	9
BACK CHIOITE * *		7400-		
ADJUSTED PREMIEIM (8+9-10).				

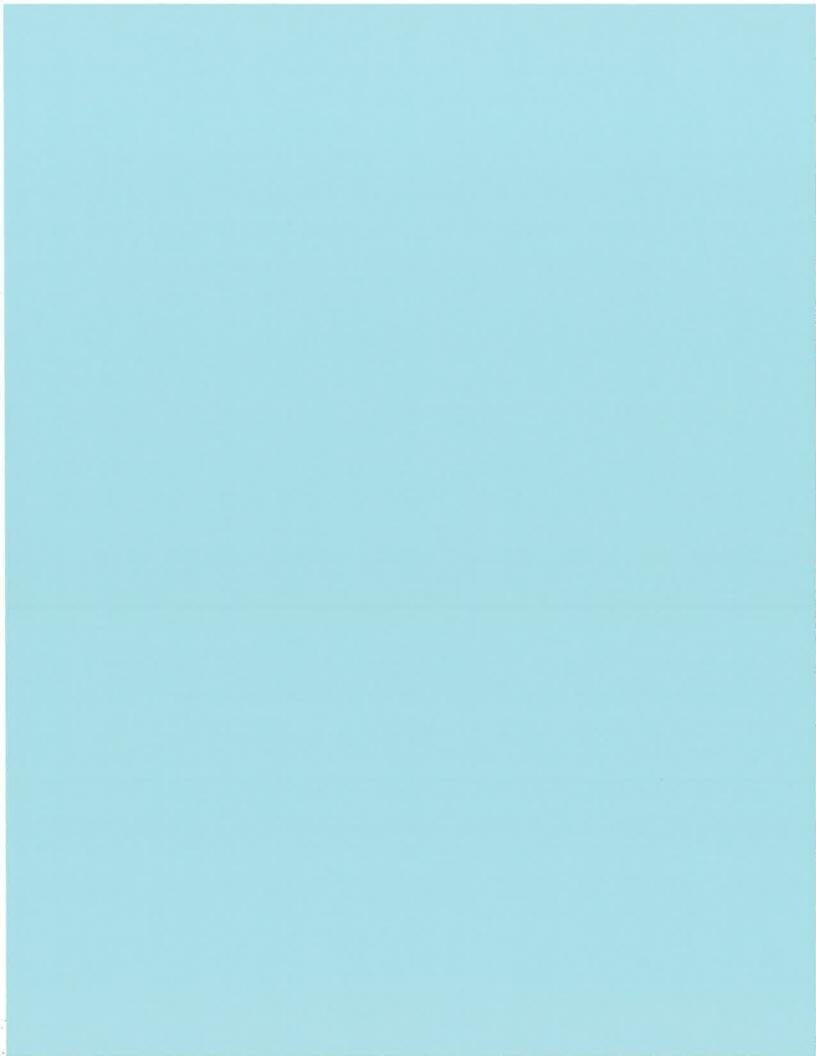
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TOTAL PREMIUM (ADD LINE 11 ADROSE ON ALL PAGES)	\$7,968,85
	¥: ² 1 +1½
3 ENTER PREMIUM DEPOSIT	
PLEASE PAY THIS AMOUNT (12±13)	\$7,968,85

RETURN ORIGINAL WITH PAYMENT RETAIN A COPY FOR YOUR RECORDS

FOR STANDARD INS	
COMPANY USE	YEME
SUSPENSE	
PDA	

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CITY OF WOONSOCKET, RHODE ISLAND PAYMENT VOUCHER

VOUCHER DATE:	8/28/2012			
FISCAL YEAR:	2013	a		
ACCOUNT NO.	1-015-W6554-5	54472		
VENDOR #:	000644			
Delta Dental of Rhode P.O. Box 83175 Woburn, MA 01813-3				
ACCOUNT #		DESCRIPTION		AMOUNT
8	DELTA	DENTAL FOR THE MONTH C	F	
		September, 2012		
1-015-W6554-54472		JNICIPAL PLAN 2, DD0009-\$1,622.56 & DD0010-\$308.	34)	2,449.02
1-015-W6554-54472	RE (Water DD0004-\$749.7	ETIREES & COBRA PLAN 1 & DD0006-\$101.41)		851.12
	Amount Approv	ed for Payment	(Total)	\$3,300.14
The amount indicated being lawfully due to	is hereby appro he same from th	oved and certified for payn e City of Woonsocket for t invoices or vouchers.	nent to the above the items shown	e named payee as on the attached
*				
		Finance Director		
DATE PAID:		a	CHECK NO:	W

CITY OF WOONSOCKET, RHODE ISLAND PAYMENT VOUCHER

VOUCHER DATE:	8/28/2012	M.		
FISCAL YEAR:	2013			
ACCOUNT NO.	1-010-09454-	54472		
VENDOR #:	000644			2%
Delta Dental of Rhode P.O. Box 83175 Woburn, MA 01813-3				
ACCOUNT #		DESCRIPTION		AMOUNT
	DEL.	TA DENTAL FOR THE MON	ITH OF	
		September, 2012		
1-010-09454-54472		MUNICIPAL PLAN \$102.78, DD0008-\$130.91, DD000	9-\$3,954.71 & DD0010-\$1,054.78)	5,243.18
1-010-09454-54472		RETIREES & COBRA PLAN \$1,935.09 & DD0006-\$300.14)	٧	2235.23
	Amount Appr	oved for Payment	(Total)	\$7,478.41
The amount indicated being lawfully due t	l is hereby app he same from	proved and certified for the City of Woonsocke invoices or vouchers	t for the items snown o	named payee as n the attached
		Finance Directo	r	
DATE PAID:	- Lucaviii - Luc	· c	CHECK NO: _	

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	9			

		PAYMENT VOUCHER		
VOLIGIES DATE	0/00/0040			
VOUCHER DATE:	8/28/2012			
FISCAL YEAR:	2013			
ACCOUNT NO.	1-010-09454-	54472		
VENDOR #:	000644			
Delta Dental of Rhode	Island			GF T
P.O. Box 83175				DAY III
Woburn, MA 01813-3	3175			
ACCOUNT#		DESCRIPTION		AMOUNT
71000011177	DEL.	TA DENTAL FOR THE MON	1TH OF	
		September, 2012	ail .	29
1-010-09454-54472		POLICE		7,847.18
1-010-09454-54472	(Active Police DD00			
1-010-09454-54472	(Retired Police DD0	POLICE RETIREES & COE	BRA PLAN	11,102.18
	(Named Fonce DDG	V00-471,702.119/		
	Amount Ann	roved for Payment	(Total)	\$18,949.36
	Аноситург	ovou for r ujimeni		
The amount indicated	d is hereby app	proved and certified for the City of Woonsocke	payment to the ab	ove named payee as wn on the attached
being lawfully due	ine same nom	invoices or vouchers	S.	2
		Finance Directo	r	-
		2		*
DATE PAID:			CHECK NO):

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	PAYME	NT VOUCHER						
VOUCHER DATE:	8/28/2012		N.					
FISCAL YEAR:	2013							
ACCOUNT NO.	1-020-R6454-54472							
VENDOR #:	000644							
Delta Dental of Rhodo P.O. Box 83175 Woburn, MA 01813-2				×				
ACCOUNT #	DESCI	RIPTION		AMOUNT				
2 	DELTA DENTAL	FOR THE MONTH O	F					
\$5	Septe	mber, 2012						
1-020-R6454-54472	MUNICIPAL (Wastewater DD0002-\$98,13)	PLAN		98.13				
1-020-R6454-54472	RETIREES (Wastewater DD0004-\$31.40)	& COBRA PLAN		31.4				
	Amount Approved for P	ayment	(Total)	\$129.53				
The amount indicated is hereby approved and certified for payment to the above named payee as being lawfully due the same from the City of Woonsocket for the items shown on the attached invoices or vouchers.								
	Fina	ance Director						
DATE PAID:			CHECK NO:					

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PAYMENT VOUCHER

VOUCHER DATE:	8/28/2012			R
FISCAL YEAR:	2013	92		
ACCOUNT NO.	VARIOUS			322
VENDOR #:	000644			
Delta Dental of Rhod P.O. Box 83175 Woburn, MA 01813-		· ·		
ACCOUNT #		DESCRIPTIO	<u>N</u>	AMOUNT
	DEI	TA DENTAL FOR THE MOI	NTH OF	
		September, 2012		
1-025-U6454-54472		MUNICIPAL PLAN - USER		0.00
1-025-U6454-54472	(User DD0004-\$22	RETIREES & COBRA PLA (7.66)	N - USER	227.66
1-025-U6454-54472		MUNICIPAL PLAN - SEWE	R CHARGE	0
1-025-U6454-54472	(Sewer DD0004-\$6	RETIREES & COBRA PLA 52.80)	N - Sewer Charge	62,80
	Amount App	roved for Payment	(Total)	\$290.46
The amount indicate being lawfully due	d is hereby ap the same from	proved and certified for the City of Woonsocke invoices or vouchers Finance Directo	et for the items show	ve named payee as n on the attached
	18			
DATE PAID:			CHECK NO:	

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		PAYMENT VOUCHER						
* £								
VOUCHER DATE:	8/28/2012							
FISCAL YEAR:	2013							
ACCOUNT NO.	1-010-09454-	54472						
VENDOR #:	000644							
Delta Dental of Rhode	e Island							
P.O. Box 83175 Woburn, MA 01813-	3175	* *						
ACCOUNT #		DESCRIPTION	1	AMOUNT				
	DEL	TA DENTAL FOR THE MON	ITH OF					
		September, 2012		řígo				
1-010-09454-54472	(Municipal DD0002-	MUNICIPAL ACTIVE \$2,7802.39)		2,602.39				
1-010-09454-54472	(Municipal DD0005-	NON UNION DIVISION HEA \$742.31)	AD ACTIVE	742.31				
	Amount Appr	oved for Payment	(Total)	\$3,344.70				
The amount indicated is hereby approved and certified for payment to the above named payee as being lawfully due the same from the City of Woonsocket for the items shown on the attached invoices or vouchers.								
		Finance Director						
DATE PAID:	Lighter and the second		CHECK N	O;				

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Delta Dental of Rhode Island 10 Charles Street Providence, RI 02904-2208 BILLING DATE: 08/14/2012

COVERAGE PERIOD: 09/01/2012-09/30/2012

PAYMENT DUE BY: 09/01/2012 INVOICE NUMBER: 10380002201209

GROUP-DIVISION NUMBER: 1038-0002 CITY OF WOONSOCKET

CHRISTINA HARMON-DUARTE CITY OF WOONSOCKET CITY HALL - P.O. BOX B WOONSOCKET RI 02895-0985

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GROUP SUMMARY

			F 30mmAKT	GIVOO				
	3	REMIUM ADJUSTMENTS	PI			CURRENT		
TOTAL	TOTAL PREMIUM	ADD NEW	LESS PREVIOUSLY	CURRENT MONTH		NROLLMEN COUNT		
DUE	ADJUSTMENT	BILLED AMT	BILLED AMT	PREMIUMS	С	SP	S	DIVISION
3,218.6	62,80	62.80	0.00	3,155.84	12	28	41	0002
3,218.6	62.80	62.80	0.00	.3,155.84	12	28	41	TOTAL:
			04	l)				
			ļ i					
8,673.3		BALANCE FORWAR		hildren	C = Child/C	= Spouse,	oscriber, SP	S = Su
3,094.0		PAYMENT RECEIVE ACCOUNTING ADJU						
		ACCOUNTING ADM						
8,798.0	T DUE: \$	TOTAL AMOUN'						

Please direct billing Inquiries to Premium Billing/Accounts Receivable at 401-752-6200 or call toll free at 1-800-598-6684 EXT. 6200.

Please make checks payable to: Delta Dental of Rhode Island. Detach here and remit your payment. Retain top portion for your records.

INVOICE NUMBER: 10380002201209 GROUP-DIVISION NUMBER:	1038-0002 PAYMENT	DUE BY:	09/01/2012
Payments and enrollment changes received after 08/08/2012 are not reflected on the summary. They will appear on your next statement,			
If paying by EFT, the total amount due will be deducted from your account on 09/01/2012	TOTAL AMOUNT DUE:	\$	8,798.00

account on 09/01/2012
• Please do not include correspondence with your payment.

 To ensure proper credit to your account, please indicate Group-Division Number on your check.

TOTAL AMOUNT DUE:	*	8,798.00
AMOUNT ENCLOSED:		. 200

CHRISTINA HARMON-DUARTE CITY OF WOONSOCKET CITY HALL - P.O. BOX B WOONSOCKET RI 02895

DELTA DENTAL OF RHODE ISLAND
P.O. BOX 845247
BOSTON, MA 02284-5247
Illimidadillindadillindadillindadil

BILLING DATE: 08/14/2012 COVERAGE PERIOD: 09/01/2012-09/90/2012 INVOICE NUMBER: 10380002201209

GROUP-DIVISION NUMBER: 1038-0002 CITY OF WOONSOCKET

DIVISION SUMMARY: DIVISION 0002

		CURRENT		CURRENT				PR	
CURRENT SUBSCRIBERS	RATES	S	NROLLMEN COUNT SP		CURRENT MONTH PREMIUMS	LESS PREVIOUSLY BILLED AMT	ADD NEW BJLLED AMT	TOTAL PREMIUM ADJUSTMENT	TOTAL DUE
Single	31.40		0	0	408.20	0.00	62.80	62,80	471.00
Family	98.13		28	12	2,747.64	0.00			2,747.64
""", "	001,70		~~	'-	_,,,,,,,,				·
DIVISION TOTAL:		41	28	12	3,155.84	0.00	62.80	62.80	3,218.64
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S = Subscriber, SP = Spouse, C = Child/Children