

**BOURBON COUNTY JOINT PLANNING COMMISSION  
CLAIMS  
JUNE 2021**

<b>remit payment to:</b>	<b>amount</b>	<b>budget line item</b>
1 OBERLANDER FINANCIAL SERVICES	\$300.00	CONSULTANT FEES - BOOKKEEPING
2 VC3, INC	\$585.00	PHONE/INTERNET/IT SUPPORT
3 CITIZEN ADVERTISER	\$241.00	LEGAL NOTICE
4 DE LAGE LANDEN FINANCIAL SERVICES, INC.	\$0.89	OFFICE SUPPLIES
5 VERIZON WIRELESS	\$140.79	PHONE/INTERNET/IT SUPPORT
6 WATSON LAW FIRM	\$636.00	LEGAL FEES
7 HURST OFFICE SUPPLIERS	\$20.90	OFFICE EQUIPMENT
8 GRW ENGINEERING	\$260.00	CONSULTANT FEES
9 KACO WORKERS COMPENSATION FUND	\$1,283.00	INSURANCE
10 KACO ALL LINES FUND	\$13,495.00	INSURANCE
11 BLUEGRASS OFFICE SYSTEMS	\$61.80	OFFICE SUPPLIES
 TOTAL	 \$17,024.38	



**Oberlander Financial Services, PLLC**

P.O. Box 910035

■ Lexington, KY 40591-0035

Phone: (859) 552-3342

E-mail: info@ofscpalex.com

Web: www.ofscpalex.com

Bourbon County Joint  
Planning Commission

Andrea Pompei Lacy  
525 High Street, Suite 127  
Paris, KY 40361

Invoice: 407

Date: 06/30/2021

Due Date: 07/15/2021

For professional service rendered as follows:

June accounting services

300.00

Billed Time & Expenses

\$300.00

Invoice Total

\$300.00

Beginning Balance

\$0.00

Invoices

300.00

Receipts

0.00

Adjustments

0.00

Service Charges

0.00

Amount Due

\$300.00

06/30/2021

300.00

05/31/2021

0.00

04/30/2021

0.00

03/31/2021

0.00

02/28/2021+

0.00

Total

\$300.00

Please return this portion with payment.

Invoice: 407

ID: 16017

Bourbon County Joint Planning  
Commission

Date: 06/30/2021

Due Date: 07/15/2021

Card Type: \_\_\_\_\_

Amount Due: \$300.00

Card #: \_\_\_\_\_ Exp Date: \_\_\_\_\_

Amount Enclosed: \$ \_\_\_\_\_

Signature: \_\_\_\_\_

**COMMUNITY PARTNERS VC3 INVOICE # 62955 - DUE 7/11/21**

2

<b>FC11 - 01.000.866</b>			
BRANDON	CHASE	866	\$ 9.23
BRANDON	RECTOR	866	\$ 9.23
CAD 01		866	\$ 195.00
CAD 02		866	\$ 195.00
CAD 03		866	\$ 195.00
ERIC	FITE	866	\$ 9.23
ERNIE	LUCKY	866	\$ 9.23
JEANETTE	BENSON	866	\$ 9.23
JULIA	CUNDIFF	866	\$ 9.23
KELLY	DAVIS	866	\$ 9.23
SCOTT	TOADVINE	866	\$ 195.00
SHAWN	JACOBS	866	\$ 195.00
SPILLMAN	TECHNOLOGIES	866	\$ 9.23
SYLVIA	BLACK	866	\$ 9.23
TRAVIS	CAMPBELL	866	\$ 9.23
			<b>\$ 1,067.30</b>

<b>COMMUNITY PARTNERS</b>			
E-911	01.000.866		\$ 1,067.30
EMS	01.000.867		\$ 241.15
EDA	01.000.870		\$ 204.23
P&Z	01.000.871		\$ 585.00
			<b>\$ 2,097.68</b>

UTILITY FUND			\$ 1,294.87
GENERAL FUND			\$ 5,833.98
COMMUNITY	PARTNERS		\$ 2,097.68
	<b>TOTAL BILL</b>		<b>\$ 9,226.53</b>

<b>EMS - 01.000.867 (6) 5E-1F</b>			
MARTIN	LIZER	867	\$ 9.23
BEN	GNAU	867	\$ 9.23
BRANDON	LIZER	867	\$ 9.23
JOHN	OLIVER	867	\$ 9.23
KENDALL	WILLIAMS	867	\$ 9.23
PARIS	EMS	867	\$ 195.00
			<b>\$ 241.15</b>

<b>EDA - 01.000.870</b>			
DANA	MINGUA	879	\$ 9.23
GORDON	WILSON	870	\$ 195.00
			<b>\$ 204.23</b>

<b>PLANNING &amp; ZONING -</b>			
ANDREA	LACY	871	\$ 195.00
MICKI	SOSBY	871	\$ 195.00
MICHELE	THORNBURG	871	\$ 195.00
			<b>\$ 585.00</b>

**MAKE CHECKS PAYABLE TO: VC3 INC.**

**VC3 INC  
PO BOX 746804  
ATLANTA, GA 30374-6804**

**PHONE: 800-733-7333**

**EMAIL: [finance@vc3.com](mailto:finance@vc3.com)**



# Invoice

The Citizen Advertiser  
 123 W. Eighth St.  
 P.O. Box 158  
 Paris, KY 40361  
 (859)987-1870

Date	Invoice #
6/28/2021	9739

Bill To
Bourbon County Planning & Zoning 525 High Street Paris, KY 40361

Terms

Item	Description	Qty	Rate	Amount
balance forwarded	May 2021 advertising		330.00	330.00
Display	June 10, 2021 2 x 3.5 joint planning commission	1	84.00	84.00
Display	June 17, 2021 2 x 2.5 tech review committee	1	132.00	132.00
Payment	June 25, 2021 ck # 1127		-330.00	-330.00
			<b>Total</b>	\$216.00

# *The Bourbon County Citizen*

PO Box 158  
Paris, KY 40362-0158  
[www.bourboncountycitizen.com](http://www.bourboncountycitizen.com)

June 10, 2021

Bourbon Co Planning & Zoning  
525 High, suite 127  
Paris, KY 40361-1846

Our records show that your subscription expired March 30, 2021. If there is an error in our records, please call us at 859-987-1870 so we can update our records. If not, please submit \$25.00 for your subscription. We now also accept credit/debit card payments by phone. Our yearly rates are as follows:

Out of County regular	\$30.00
Out of County senior	\$25.00
<b>In County regular</b>	<b>\$25.00</b>
In County senior	\$22.00
online edition only	\$25.00

You will receive a renewal card/letter the month prior to your subscription expiration date to remind you it is time to renew. If you have any questions or concerns, please call us at 859-987-1870.

Thank you for subscribing!

Lois Cooke  
Subscriptions Manager  
[citadinc@bellsouth.net](mailto:citadinc@bellsouth.net)



DE LAGE LANDEN FINANCIAL SERVICES, INC.  
PO BOX 41602  
PHILADELPHIA, PA 19101-1602

**REMITTANCE SECTION**

Invoice Number: 72902707  
Due Date: 07/15/2021  
Due This Period: \$0.89

Amount Enclosed: \$ \_\_\_\_\_

BOURBON, COUNTY OF  
C/O BOURBON COUNTY JOINT PLANNING COMMISSION  
525 HIGH ST  
PARIS KY 40361-1848

Please make check payable to:

DE LAGE LANDEN FINANCIAL SERVICES, INC.  
PO BOX 41602  
PHILADELPHIA, PA 19101-1602



2100000729027070000000891

Detach here. Please include the top payment coupon with your payment. Please allow 5-7 days for U.S. Postal Service delivery.



DE LAGE LANDEN FINANCIAL SERVICES, INC.  
PO BOX 41602  
PHILADELPHIA, PA 19101-1602

Contract Number: 500-50199760  
Invoice Number: 72902707  
Account Number: 1478360  
Site Number: 5064797  
Invoice Date: 06/20/2021  
Period of Performance: 06/15/2021-07/14/2021  
Due This Period: \$0.89

[WWW.LESSEEDIRECT.COM](http://WWW.LESSEEDIRECT.COM)

**IMPORTANT MESSAGES**

\*Please review your equipment location(s) for tax purposes.

**Visit WWW.LESSEEDIRECT.COM**

- Did you know you can...
- ✓ View copies of your contract and open invoices
  - ✓ Enroll in paperless invoicing
  - ✓ Make a payment
  - ✓ Set up automated/recurring payments

See Reverse For Important Information

**INVOICE DETAILS**

Description	Payment Amount	Tax	Total Amount	Applied Amount	Remaining Amount Due
PAYMENT	\$69.00	\$4.14	\$73.14	\$0.00	\$73.14
<b>Billed this Invoice</b>	<b>\$69.00</b>	<b>\$4.14</b>	<b>\$73.14</b>	<b>\$0.00</b>	<b>\$73.14</b>
<b>Credit Balance</b>					<b>-\$72.25</b>
<b>Net Amount Due</b>					<b>\$0.89</b>
<b>Total Amount Due</b>					<b>\$0.89</b>

(Please see the following pages for details.)

**ASSET DETAILS**

Contract Number	Serial Number	Purchase Order	Make / Model	Asset Number	Install Date	Cost Center	Department	Payment Amount	Tax	Total Amount
500-50199760	3CE01511		Canon / imageRUNNER ADVANCE DX C257IF	50199760_1				\$69.00	\$4.14	\$73.14

Asset Location: 525 HIGH ST STE 126 PARIS BOURBON KY 40361-1846 United States

**Asset Amount Total: \$73.14**



PO BOX 489  
NEWARK, NJ 07101-0489



Manage Your Account	Account Number	Date Due
<a href="http://b2b.verizonwireless.com">b2b.verizonwireless.com</a>	642373545-00001	Past Due
Change your address at <a href="http://sso.verizonenterprise.com">http://sso.verizonenterprise.com</a>	Invoice Number	9882626786

### Quick Bill Summary

May 24 – Jun 23

  
 BOURBON COUNTY JOINT PLANNING      00031083  
 ANDREA POMPEI LACY                      N106  
 525 HIGH ST STE 127  
 PARIS, KY 40361-1846

Previous Balance <i>(see back for details)</i>	\$140.81
No Payment Received	\$0.00
<b>Balance Forward Due Immediately</b>	<b>\$140.81</b>
Monthly Charges	\$137.49
Usage and Purchase Charges	
Voice	\$0.00
Messaging	\$0.06
Data	\$0.00
Surcharges and Other Charges & Credits	\$1.48
Taxes, Governmental Surcharges & Fees	\$1.76
<b>Total Current Charges Due by July 15, 2021</b>	<b>\$140.79</b>

**Total Amount Due \$281.60**

Pay from phone	Pay on the Web	Questions:
#PMT (#768)	At <a href="http://b2b.verizonwireless.com">b2b.verizonwireless.com</a>	1.800.922.0204 or *611 from your phone



BOURBON COUNTY JOINT PLANNING  
ANDREA POMPEI LACY  
525 HIGH ST STE 127  
PARIS, KY 40361-1846

Bill Date June 23, 2021  
Account Number 642373545-00001  
Invoice Number 9882626786

### Total Amount Due

Make check payable to Verizon Wireless.  
Please return this remit slip with payment. **\$281.60**

\$    .

PO BOX 16810  
NEWARK, NJ 07101-6810



98826267860106423735450000100000014079000000281604

**Watson Law Firm, PLLC**

525 High Street  
Suite 325  
Paris, KY 40361



**Invoice**

Date	Invoice #
7/6/2021	411

Bill To
Bourbon County Joint Planning Commission 525 High Street Paris, Kentucky 40361

Description	Amount
Bourbon County Joint Planning Commission: June 2021 BCJPC: General Legal Services provided by Patrick H. Watson: 5.0 hours	600.00
BCJPC: JBOA Legal Services provided by Patrick H. Watson: 0.3 hours	36.00
<b>Total</b>	<b>\$636.00</b>

<b>Balance Due</b>	<b>\$636.00</b>
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STATEMENT AS OF 07/01/21



Business Supply & Furniture Solutions  
(859) 255-4422 OR 800-926-4423  
Visit us at www.hurstgroup.net

Account Number 2774

Phone Number 859-987-2150

BOURBON CO JOINT PLAN COMM

Page 1 of

525 HIGH ST  
PARIS KY 40361

LAST PAYMENT APPLIED ON 06/24/21 CHECK #1122 FOR \$ 487.04

INVOICE NUMBER	INVOICE DATE	REMARKS	CHECK/PO	INVOICE AMOUNT	AMOUNT DUE
90180-1	06/07/21	INVOICE	MS2021	15.29	15.29
INTEREST05	06/01/21	FINANCE CHARGE		5.61	5.61

TERMS ARE NET 30 DATE OF INVOICE  
WE SHOW SOME INVOICES 30 TO 60 DAYS WITHOUT PAYMNT

CURRENT	OVER 30 DAYS	OVER 60 DAYS	OVER 90 DAYS	TOTAL AMOUNT DUE
15.29	5.61	.00	.00	20.90

Remit Payment To: Hurst Office Suppliers  
P O Box 12330  
Lexington, KY 40582-2330



**GRW** | engineering | architecture | geospatial  
 801 Corporate Drive | Lexington, KY 40503  
 859.223.3999 | www.grwinc.com



Bourbon County Joint Planning Commission  
 Attn: Andrea Lacy, Planning Administrator  
 525 High Street  
 Paris, KY 40361

May 31, 2021  
 Project No: 04602-04  
 Invoice No: 0056934

Project 04602-04 Bourbon Cnty-Engineering Services  
Professional Services from April 18, 2021 to May 29, 2021

**Professional Personnel**

	Hours	Rate	Amount	
Engineer III				
Asalon, Michael	2.00	130.00	260.00	
Totals	2.00		260.00	
<b>Total Labor</b>				<b>260.00</b>
				<b>Total this Invoice</b>
				<b><u><u>\$260.00</u></u></b>

**Billings to Date**

	Current	Prior	Total
Labor	260.00	21,125.00	21,385.00
<b>Totals</b>	<b>260.00</b>	<b>21,125.00</b>	<b>21,385.00</b>

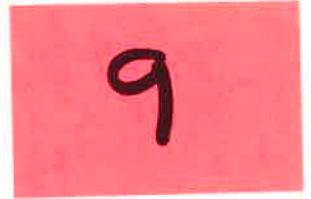
Remit to:  
**GRW**  
 801 Corporate Drive  
 Lexington, KY 40503



**KENTUCKY ASSOCIATION OF COUNTIES  
WORKERS COMPENSATION FUND**

400 Englewood Drive, Frankfort, KY 40601  
502-223-7667 • 800-264-5226 • Fax 502-875-8240 • www.kaco.org

Date: June 1, 2021  
To: Bourbon County Joint Planning Commission  
From: Temple Juett  
KACo Workers Compensation Fund  
Re: 2021-2022 Workers Compensation Policy Renewal



Thank you for your continued participation as a member of the KACo Worker's Compensation Fund. We appreciate your business and continuously work to provide members with the best value in the insurance marketplace. Remember...this program is owned and managed by members to meet the special needs of counties and county related entities and is not profit driven, which means that you benefit from every dollar earned in the form of added programs and services, premium reductions and dividends.

Enclosed within this packet you will find the following KACo Workers Compensation Fund renewal documents:

Renewal Certificate

**2021-2022 Invoice**

Application for Membership Agreement (KACo W/C-3)

Regarding your invoice, please note the discount you can receive if you pay your premium prior to 8/1/2021, as well as the penalty that will apply if your premium is not paid in full by 12/31/2021.

Please remit payment to:

KACo Workers Compensation Fund  
Attn: Accounting Department  
400 Englewood Drive  
Frankfort, KY 40601

The enclosed Application for Membership Agreement (KACo W/C -3), has been completed for you with information on file. Please review this information and correct as needed – then sign with witness at the "X's" and return to our office within the next two weeks via fax number **502-234-5055** or scan and e-mail to [insurance@kaco.org](mailto:insurance@kaco.org). If you do not have access to a fax machine or scanner, simply mail the document to us at the address shown on the letterhead above. This signed document is a requirement of the Kentucky Department of Insurance. Also, for those otherwise qualifying for a dividend from the 2007-2008 policy year, receipt of this document is final confirmation of your eligibility to receive your dividend check.

If you have any questions, please do not hesitate to contact your Marketing Representative, Sue Porter, at 888-696-9620, or call KACo direct at 800-264-5226. Thank you again for your continued support of the KACo Workers Compensation Program. We appreciate your loyalty and look forward to working with you again this year!

**BOARD OF DIRECTORS**

Greg Terry, Chairman  
Carlisle Co. Judge/Executive

Dan Mosley, Vice-Chair  
Harlan Co. Judge/Executive

Michael Logsdon  
Oldham Co. Magistrate

Elbert Bennett  
Caldwell Co. Magistrate

Casey Ellis  
Owen Co. Judge/Executive

# KACo WORKERS COMPENSATION FUND

400 Englewood Drive

Frankfort, KY 40601

1-800-264-5226

## CERTIFICATE OF WORKERS COMPENSATION COVERAGE

KACO W/C-4

- 
- ITEM 1 -** Name and Address of Insured:  
Bourbon County Joint Planning Commission  
Paris Municipal Center  
525 High Street, Rm 127  
Paris, KY 40361
- ITEM 2 -** Certificate Number: WC2021-3320
- ITEM 3 -** Effective Date: Thursday, July 01, 2021                      Expiration Date: Friday, July 01, 2022  
12:01 A.M., standard time at the address of the Insured as stated herein.  
Cancellation Notice: 60 Days - Pursuant to KRS 304.50
- ITEM 4 -** Coverage under this Certificate applies to the Kentucky Workers Compensation Law. (KRS 342)
- ITEM 5 -** Company's Limit of Indemnity Each Occurrence:  
(a) For Workers Compensation: Statutory  
(b) For Employers Liability: \$2,500,000
- ITEM 6 -** Workers Compensation Premium: \$1,199.00
- ITEM 7 -** Special Fund Tax: \$84.00
- ITEM 8 -** TOTAL PREMIUM:\* \$1,283.00
- ITEM 9 -** Payment Options:  
(1) Full payment by 8/1/2021. 1% discount applied = \$1,270.17  
(2) 50% payment by 8/1/2021 and 3 subsequent equal monthly pmts. on balance.  
50% = \$641.51 Plus 3 monthly payments of \$213.83

Please Note: Effective January 1, 2022 any outstanding balance due on this premium will accrue a compounding monthly interest charge of 0.5%. To make certain no interest is charged, be sure to make full payment postmarked no later than December 31, 2021

\* An invoice accompanies this declaration for the total amount due.

This Certificate of Coverage shall not be binding of the KACo Workers Compensation Fund unless countersigned by a duly authorized representative of the Fund.

**THIS COVERAGE HAS BEEN PLACED WITH A WORKERS COMPENSATION SELF-INSURED GROUP WHICH HAS RECEIVED A CERTIFICATE OF FILING FROM THE COMMONWEALTH OF KENTUCKY. CLAIMS AGAINST GROUP MEMBERS ARE NOT COVERED BY THE KENTUCKY INSURANCE GUARANTY ASSOCIATION.**

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Dated at Frankfort, Kentucky this 1st day of June, 2021

  
Kris Dunn, Associate Director of Insurance

**KACo**  
Making Workers Comp Work in Kentucky

# INVOICE

## Kentucky Association of Counties Workers Compensation Fund

400 Englewood Drive  
Frankfort, KY 40601  
Tel: 1-502-223-7667  
Fax: 1-502-234-5055

Invoice Number: W210392  
Invoice Date: 06/01/2021

**Member Name and Address:**

**Member ID:** 3320

Bourbon County Joint Planning Commission  
Paris Municipal Center  
525 High Street, Rm 127  
Paris, KY 40361

Item	Amount
Workers Compensation Insurance Premium - Policy WC2021-3320	\$1,199.00
Special Fund Tax	\$84.00
<b>Total Due</b>	<b>\$1,283.00</b>

\* You may elect to use one of the following payment options:

(1) Full payment by 8/1/2021. 1% discount applied = \$1,270.17  
or

(2) 50% payment by 8/1/2021 and 3 subsequent equal monthly pmts. on balance.  
50% = \$641.51 Plus 3 monthly payments of \$213.83

Please Note: Effective January 1, 2022 any outstanding balance due on this premium will accrue a compounding monthly interest charge of 0.5%. To make certain no interest is charged, be sure to make full payment postmarked no later than December 31, 2021

**Please return a copy of this invoice with your payment**

**Servicing Agency:**

Kentucky Association of Counties Workers Compensation Fund  
(800) 264-5226

**For claims service please call:**

(866) 367-5226

# APPLICATION FOR MEMBERSHIP AGREEMENT

## Kentucky Association of Counties Workers Compensation Fund

**NAME:** Bourbon County Joint Planning Commission

**ADDRESS:** Paris Municipal Center, 525 High Street, Rm 127, Paris, KY 40361

**WE ARE LOCATED IN THE COUNTY OF:** Bourbon

**CURRENT WORKERS COMP CARRIER:** KACo Workers Compensation Fund

I (we) hereby formally apply for continuing membership for workers compensation coverage in the Kentucky Association of Counties Workers Compensation Fund to be effective 12:01 a.m. Thursday, July 01, 2021, and if accepted by its duly authorized representative, do hereby constitute and appoint the Kentucky Association of Counties Workers Compensation Fund and its Trustees to act as our administrator in all matters relating to Kentucky Workers Compensation Statutes.

I (we) further agree as follows:

- A. To accept and be bound by the provisions of the Kentucky Workers Compensation Act.
- B. That, by this reference, the terms and provisions of the Indemnity Agreement, and/or Amendments thereto filed or which may hereafter be filed with the Kentucky Office of Insurance are hereby adopted, approved, ratified and confirmed by us; and further, I (we) agree to assume all the obligations set forth therein, including, but not limited to, our joint and several liabilities for payment of any lawful awards against any member of the Fund; and in the event I (we) fail to pay any premium or lawful assessment within thirty (30) days of the date that shall become due, I (we) will pay all costs associated with the collection thereof. It is understood, however, that the Kentucky Association of Counties Workers Compensation Fund, its Trustees or agents will procure on behalf of the Fund necessary re-insurance to protect the financial integrity and stability of the Fund.
- C. To abide by the rules and regulations and By-Laws of the Fund and to confirm to the terms of the Agreements they may enter into with any authorized service company as long as we remain a member of the Fund; said By-Laws and Agreements being incorporated herein as a portion of this contract as if recited in full.
- D. That should I (we) desire to cancel our coverage, I (we) will give notice at least sixty (60) days prior to cancellation pursuant to KRS 304.50.
- E. That coverage under this membership shall be for Kentucky employees only.
- F. That the Wage Declarations Schedule and/or Renewal Certificates, when completed and returned to the Fund, will become part of this Agreement.
- G. That I (we) have enclosed, if available, the current fiscal year's audit or financial statement.

X  
\_\_\_\_\_  
Signature of Applicant

X  
\_\_\_\_\_  
Signature of Witness

\_\_\_\_\_  
Type Name and Title

61-6000922  
\_\_\_\_\_  
Federal Identification Number

### DO NOT WRITE BELOW THIS LINE - FOR FUND USE ONLY

Bourbon County Joint Planning Commission, is a member of the Kentucky Association of Counties Workers Compensation Fund and is hereby approved for membership in this Fund. Coverage is effective the 1st day of July, 2021.

Signed this \_\_\_\_\_ day of \_\_\_\_\_,  
20\_\_\_\_

\_\_\_\_\_  
Kris Dunn, Associate Director of Insurance  
KACo Workers Compensation Fund

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any materially false information or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime.



# KENTUCKY ASSOCIATION OF COUNTIES ALL LINES FUND

400 Englewood Drive, Frankfort, KY 40601  
502-223-7667 • 800-264-5226 • Fax 502-875-8240 • [www.kaco.org](http://www.kaco.org)

Date: June 1, 2021  
To: Bourbon County Joint Planning Commission  
From: Temple Juett  
KACo All Lines Fund  
Re: 2021-2022 KALF Renewal



Thank you for your continued participation as a member of the KACo All Lines Fund. We appreciate your business and continuously work to provide members with the best value in the insurance marketplace. Remember...this program is owned and managed by members to meet the special needs of counties and county related entities and is not profit driven, which means that you benefit from every dollar earned in the form of added programs and services, premium reductions and dividends.

As an added benefit this year, if you purchase property insurance, we are adding earthquake coverage to your KALF policy at no additional cost to you. This coverage will be a shared limit with details explained in your policy.

Enclosed within this packet you will find the following KACo All Lines Fund renewal documents:  
2021-2022 Declarations Page  
**2021-2022 Invoice**  
Vehicle Card(s)

Regarding your KALF invoice, at the bottom of the invoice, it shows the discount you can receive if you pay your premium prior to 8/1/2021, as well as the penalty that will apply if your premium is not paid in full by 12/31/2021.

Please remit payment to:

KACo All Lines Fund  
Attn: Accounting Department  
400 Englewood Drive  
Frankfort, KY 40601

Your policy for policy year 2021-2022 will be emailed again this year. The primary email address we have on file for you is: [alacy@paris.ky.gov](mailto:alacy@paris.ky.gov). Send a message to [insurance@kaco.org](mailto:insurance@kaco.org) if we need to make any changes to the email address we have on file.

If you have any questions, do not hesitate to contact your Marketing Representative, Sue Porter, at 888-696-9620, or call KACo direct at 800-264-5226. Thank you again for your continued support of the KACo All Lines Fund Program. We appreciate your loyalty and look forward to working with you again this year!

## BOARD OF TRUSTEES

Bobby Carpenter, Chairman  
Greenup Co. Judge/Executive

John Wilson, Vice-Chair  
Garrard Co. Judge/Executive

Orbrey Gritton  
Anderson Co. Judge/Executive

Charles Kenner  
Boone Co. Commissioner

Adam O'Nan  
Union Co. Judge/Executive



# Kentucky Association of Counties All Lines Fund

400 Englewood Drive  
Frankfort, KY 40601  
**Declarations Page**

**Policy Number** P&C3446

**Insured Name and Address**

Bourbon County Joint Planning Commission  
Paris Municipal Center  
525 High Street, Rm 127  
Paris, KY 40361

**Policy Period:** 7/1/2021 to 7/1/2022

**For customer service please call**

(800)264-5226

**Issued:** 06/01/2021

**Business Description** Planning & Zoning

In return for the payment of the premium, and subject to all the terms of the policy, we agree to provide the insurance stated in the binder.

Coverage			Deductible
General Liability (Per OCC/AGG)	3,000,000	5,000,000	0
Law Enforcement (Per OCC/AGG)	NCD	NCD	NCD
Errors/Omissions (Per OCC/AGG)	3,000,000	3,000,000	1,000
Employment Practices (Per claim / AGG) Retroactive Date: 10/07/2020	3,000,000	3,000,000	1,000
Cyber Liability (Per claim / AGG) Retroactive Date: 10/01/2017	1,000,000	1,000,000	2,500
Auto Liability (CSL)	3,000,000		0
Auto Comprehensive	ACV		500
Auto Collision	ACV		500
P.I.P. (No Fault)	10,000		0
Under Insured/Un-Insured	60,000		0
Non Owned Auto Coverage	Primary		
Property/Buildings	As Per Statement on File		500
Personal Property	As Per Statement on File		500
Boiler & Machinery	15,000,000		1,000
Inland Marine & EDP	As Per Statement on File		500
Business Income	500,000	500,000	0
Flood (Excluding Special Hazard Area Flood - Zones A & V)	1,000,000	1,000,000	0
Earthquake	See Policy	See Policy	25,000
Crime (Other than Employee Dishonesty)	150,000		500
Employee Dishonesty	150,000		250
Legal Defense Coverage	200,000		0

Authorized  
Representative

*Kris Dunn*

Date 6/1/2021





# Invoice

**Kentucky Association of Counties All Lines Fund**  
 400 Englewood Drive  
 Frankfort, KY 40601  
 Tel: 1-800-264-5226  
 Fax: 1-502-875-8240

**Invoice Number** K210297  
**Invoice Date** 05/31/2021  
**Due Date** 08/01/2021

**Insured Name and Address**

**Member Number** 3446

Bourbon County Joint Planning Commission  
 Paris Municipal Center  
 525 High Street, Rm 127  
 Paris, KY 40361

**Contact(s)**

<u>First Name</u>	<u>Last Name</u>	<u>Title</u>	<u>Telephone</u>	<u>Fax</u>	<u>Email</u>
Andrea Pompei	Lacy	Plannig Administrator	(859)987-2150	(859)987-2436	alacy@paris.ky.gov
Brad	Oberlander	CPA	(859)552-3342		

**Invoice Detail**

<u>Effective Date</u>	<u>Description</u>	<u>Premium</u>	<u>Amount Due</u>
7/01/2021	Annual Premium for 2021-2022 Policy Renewal	\$13,495.00	\$13,495.00
		<b>Total Due</b>	<b>\$13,495.00</b>

**Payment Options:**

- Option 1: Save 1%; pay \$13,360.05 by due date
- Option 2: Pay 50% by due date; and 3 subsequent equal monthly payments  
 50 % = \$6,747.49 plus 3 monthly payments of \$2,249.17

**Please Note: Effective January 1, 2022, any outstanding balance due on this premium will accrue a compounding monthly interest charge of 0.5%. To make certain no interest is charged, be sure to make full payment postmarked no later than December 31, 2021.**

**Servicing Agency**  
 Kentucky Association of Counties All Lines Fund  
 1-800-264-5226

**For claims service please call:**  
 1-866-367-5226

*Please return a copy of this invoice with your payment*



**BLUEGRASS OFFICE SYSTEMS**

667 E New Circle Rd, Lexington, KY 40505  
www.bluegrassofficesystems.com  
(859)293-0435 Fax (859)299-3413

INVOICE NUMBER	CUSTOMER NUMBER
210623-0029	BOS1857

Bill To
BOS1857 Bourbon Co. Joint Planning Commission 525 High Street Office 126 Paris, KY, 40361 (859) 987-2150

Ship To
BOS1857 Bourbon Co. Joint Planning Commission 525 High Street Office 126 Paris, KY, 40361

INVOICE DATE	DUE DATE	PAYMENT TERMS	PO NUMBER	BILLING PERIOD
06/30/21	07/05/21	Upon Receipt		6/30/2021 To 9/29/2021
DESCRIPTION				AMOUNT

CONTRACT #: 1525	
LOCATION: Bourbon Co. Joint Planning Commission - 525 High Street Office 126, Paris, KY 40361 -- BOS1857	
Model Class / Model Number: IRADV DX C257IF / 3882C002BA SERIAL #: 3CE01511	
Meter: Black 109	
Base Charge:	\$60.00
Sub-Total:	\$60.00
Meter: Color 124	
Base Charge:	\$0.00
Sub-Total:	\$0.00



Invoice Comments	Amount
	Base Charge Sub-Total: \$60.00
	Overage Charge Sub-Total: \$0.00
	Period Billing Total: \$60.00
	Other Charge: \$0.00
	KY Sales Tax: \$0.00
	Misc: \$1.80
	<b>TOTAL: \$61.80</b>