

Withlacoochee Regional Water Supply Authority
 3600 W. Sovereign Path, Suite 228, Lecanto, Florida 34461

Bills For Payment
9/16/2020

<u>Administrative Invoices</u>	<u>Invoice Number(s)</u>	<u>Invoice Date</u>	<u>Amount</u>
Suzannah J. Folsom, PE, Executive Director	1052	9/4/2020	\$7,163.45
Rob Batsel, General Counsel	60909	8/31/2020	\$211.50
C. LuAnne Stout, Admin Asst (Services)	08-Aug-20	9/4/2020	\$3,125.00
Karen Allen (Web Maintenance)	127	9/8/2020	\$100.00
Acentria Insurance (Liability Policy)	POL-0951174-01-REN	9/8/2020	\$2,903.25
Sun Trust Business Card Statement	9.2.2020	9/2/2020	\$0.00
Total Administrative Invoices			\$13,503.20

<u>Water Supply Studies and Facilities</u>	<u>Contract/Budget</u>	<u>Balance Remaining</u>	<u>Current Invoice(s)</u>
General Services Contract	\$75,000.00	\$75,000.00	
Work Order 2020-02 Weber & Associates	\$10,000.00	\$9,682.50	
FY19-20 Water Conservation Grants Program			
Citrus County	\$45,998.50	\$45,998.50	
Hernando County	\$48,350.00	\$48,350.00	
Marion County	\$33,095.00	\$33,095.00	
Crystal River	\$9,090.00	\$9,090.00	
Phase 4 Irrigation Program	\$200,000.00	\$60,439.78	
Phase 5 Irrigation Program	\$145,000.00	\$33,606.27	\$1,625.00 (1)
Total Project Invoices	\$566,533.50	\$315,262.05	\$1,625.00
Total Bills to be Paid			\$15,128.20
State Board of Administration	Transfer from SBA2 to SBA1		\$1,625.00
State Board of Administration	Transfer from SBA1 to SunTrust Bank		\$15,128.20

Notes:

(1) Phase 5 (Q040) - Irrigation Audits

Jack Overdorff, ECO Land Design \$1,625.00 Invoice 415



AmWINS Brokerage of Florida, Inc.
10201 Centurion Parkway North
Suite 500
Jacksonville, FL 32256

amwins.com

September 8, 2020

Acentria
117 N Seminole Ave
Inverness, FL 34450

RE: Withlacoochee Regional Water Supply Authority

PUBLIC OFFICIALS LIABILITY QUOTATION

Please find the attached quotation for Withlacoochee Regional Water Supply Authority. Here is a summary of the terms and conditions:

INSURED: Withlacoochee Regional Water Supply Authority

MAILING ADDRESS: 3600 W. Sovereign Path, Suite 228
Lecanto, FL 34461

CARRIER: Indian Harbor Insurance Company (Non-Admitted)

PROPOSED POLICY PERIOD: From 10/1/2020 to 10/1/2021
12:01 A.M. Standard Time at the Mailing Address shown above

QUOTE EXPIRATION DATE: 10/1/2020

POLICY PREMIUM:	Premium	\$2,615.00
	Fees	\$150.00
	Surplus Lines Taxes and Fees	\$138.25
	Total	\$2,903.25

MINIMUM EARNED PREMIUM: 25%

SUBJECTIVITIES: **SEE CARRIER QUOTE**