

**THIS IS NOT AN INVOICE**

Date - 12/05/2023

Insured:

CARL SANDBURG COLLEGE ATTN: CAROL ROGERS  
2400 TOM L WILSON BLVD  
GALESBURG, IL 61401

Agent:

ARTHUR J. GALLAGHER RMS INC. - DAVENPORT  
220 EMERSON PLACE, SUITE 200  
DAVENPORT, IA 52801

**Policy Number:** AF WCP 100040435 01

**Phone:** 563-322-3521

**Agency Number:** AF15074

**Policy Effective Date:** 07/01/2022

**Policy Expiration Date:** 07/01/2023

**Audit Method:** Physical

**Audit Type:** Completed

Final Premium Adjustment Statement

Line of Business	Audit Term	Audit Period	Underwriting Company
Workers' Compensation	Annual	07/01/2022 - 07/01/2023	Accident Fund Insurance Company of America

**Jurisdiction State:** Illinois

Loc.	Class Code	Description of Classification	Estimated Basis	Audited Basis	Rate	Estimated Premium	Audited Premium
1	7380	DRIVERS, CHAUFFEURS MESSENGERS, AND THEIR HELPERS NOC-COMMERCIAL	0	0	8.6400	\$0.00	\$0.00
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1	8868	COLLEGE PROFESSIONAL EMPLOYEES & CLERICAL	9,247,500	10,184,041	0.4400	\$40,689	\$44,810
1	9101	COLLEGE ALL OTHER EMPLOYEES	924,750	654,540	3.5500	\$32,829	\$23,236
		<b>Total Manual Premium</b>				<b>\$73,518.00</b>	<b>\$68,046.00</b>
	0930	Specific Waiver of Subrogation	1	1	100	\$100	\$100
	9807	Employers Liability (E/L) increased limits factor	73,518	68,046	0.0110	\$809	\$749
		<b>Total Subject Premium</b>				<b>\$74,427.00</b>	<b>\$68,895.00</b>
	9898	Experience Modifier	74,427	68,895	0.8800	(\$8,931)	(\$8,267)
		<b>Total Modified Premium</b>				<b>\$65,496.00</b>	<b>\$60,628.00</b>
	9887	Schedule Rating Credit	65,496	60,628	0.8000	(\$13,099)	(\$12,126)
	9722	Group Program Credit	52,397	48,502	0.9500	(\$2,620)	(\$2,425)
		<b>Total Standard Premium</b>				<b>\$49,777.00</b>	<b>\$46,077.00</b>
	0063	Premium Discount	49,777	46,077	0.9287	(\$3,619)	(\$3,285)
	0900	Expense Constant	1	1	160	\$160	\$160
	9740	Terrorism Premium	10,172,250	10,838,581	0.0360	\$3,662	\$3,902
	9741	Catastrophe Premium	10,172,250	10,838,581	0.0200	\$2,034	\$2,168
		<b>Estimated Annual Premium</b>				<b>\$52,014.00</b>	<b>\$49,022.00</b>
		<b>Other Premium and Surcharges</b>					
	IL CS	WC Commission Surcharge	52,014	49,022	0.0101	\$525	\$495

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<b>Total Amount Due</b>			<b>THIS IS NOT AN INVOICE</b>	
			<b>\$52,539.00</b>	<b>\$49,517.00</b>

**Total Audited Payroll:** \$10,838,581.00

**Total Audited Premium:** \$49,022.00

**Taxes and Surcharges:** \$495.00

**Total Policy Premium:** \$49,517.00

The audit of your policy has been completed. The invoice will be sent separately. Please be aware that any audited return premium will be applied towards any outstanding and/or future charges on your account prior to any refund being issued.

For any questions, visit [AFGroup.com](http://AFGroup.com) or call 866-206-5851 8:00 am - 8:00 pm, M-F.