

City Of Marseilles 209 Lincoln Street - Marseilles IL 61341-1904 AP Invoices - Invoice List V4 -

Invoice Final Update - G/L Source: C/V - Tentative G/L Register: 1005 Cash Basis Tentative G/L Date: 10/28/2024				
Vendor	GLDescription	Description	Amount	
HEALTH CARE SERVIC	E CORPORATION - DALLAS TX 75265-0615	YTD Payments: \$293,926.41		
01-11 01 GENERAL FUN	ND			
01-11-451	HEALTH INSURANCE	September 2024 Health Insurance	1,945.57	
01-11-451	HEALTH INSURANCE	October 2024 Health Insurance	11,202.42	
01-41 01 GENERAL FUN	ND			
01-41-451	HEALTH INSURANCE	October 2024 Health Insurance	3,196.77	
01-45 01 GENERAL FUN	ND			
01-45-451	HEALTH INSURANCE	October 2024 Health Insurance	2,330.27	
51-00 51 WATER FUND				
51-00-451	HEALTH INSURANCE	October 2024 Health Insurance	5,471.46	
52- 00 52 SEWER FUND				
52-00-451	HEALTH INSURANCE	October 2024 Health Insurance	3,015.68	
		HEALTH CARE SERVICE CORPORATION Totals:	27,162.17	
JAMES E BUCKINGHA	M - OTTAWA IL 61350	YTD Payments: \$2,027.00		
01-00 01 GENERAL FUN	ID .	•		
01-00-218	OTHER P/R DED PAYABLE	Reimburse Liberty Insurance Refund	155.32	
		JAMES E BUCKINGHAM Totals:	155.32	
		Grand Total:	27,317.49	



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Vendor	C/Y 2024 Invoices	C/Y 2024 Payments	F/Y 2025 Invoices	F/Y 2025 Payments
BCBS	(32) 293926.41	(32) 311091.27	(19) 171522.47	(21) 198918.11
BUC03	(2) 2027.00	(2) 2027.00	(1) 27.00	(2) 2027.00

Totals	
Total Invoices:	1
Total Transactions:	2
Total Vendors:	2
Total Amount:	\$27,317.49

Account	Amount
01-00-218 OTHER P/R DED PAYABLE	\$155.32
01-11-451 HEALTH INSURANCE	\$13,147.99
01-41-451 HEALTH INSURANCE	\$3,196.77
01-45-451 HEALTH INSURANCE	\$2,330.27
51-00-451 HEALTH INSURANCE	\$5,471.46
52-00-451 HEALTH INSURANCE	\$3,015.68
	\$27,317.49

Fund	Amount
01	\$18,830.35
51	\$5,471.46
52	\$3,015.68
	\$27,317.49

Vendor	Amoun
BCBS	\$27,162.17
BUC03	\$155.32
	\$27,317.49