

**ILLINOIS MUNICIPAL LEAGUE
RISK MANAGEMENT ASSOCIATION**



P.O. Box 5180, Springfield, Illinois 62705-5180
Phone: 217/525-1220 Fax: 217/525-7438

2017 Minimum/Maximum Additional Billing

MEMBER:
City of ROCHELLE
420 N 6th Street
ROCHELLE, Illinois 61068

DATE July 28, 2017
ACCOUNT # 0501
Contract Year 12/31/2010 to 12/31/2011

MINIMUM/MAXIMUM CONTRIBUTION AGREEMENT

LOSS FUND Contract Year 2011		LOSS RUN SUMMARY As of 6/30/2017	
(85%) Minimum	(130%) Maximum	Total Paid	Total Incurred
\$301,834	\$461,629	\$ 438,393.03	\$1,555,803.83

INVOICE	AMOUNTS
Paid Loss by IMLRMA (As of 6/30/17)	\$ 438,393.03
Minimum Loss Fund Amount	-\$301,834
Balance Due	\$136,559.03
Payments previously posted	\$76,773.99

PAYMENT DUE DATE: 09/15/2017 PAY THIS AMOUNT \$ 59,785.04

You can send this entire page, or cut at the line below and just send the bottom portion of this invoice, to submit when making payment.

Make check payable to:
IML Risk Management Association

City of ROCHELLE
420 N 6th Street
ROCHELLE, Illinois 61068
ACCOUNT # 0501

PAYMENT ENCLOSED: \$ _____

If you have any questions, please call or email
Shannon Palmer @ 217-525-1220 | spalmer@imlrma.org