



2023 CONTACT FORM

GROUP SELF-INSURANCE WORKERS' COMPENSATION FUND [ACCG-GSIWCF / Workers' Compensation Program]

I hereby appoint the **following contacts** for Effingham County Board of Commissioners
(Name of Organization)

Signature of County Chairman or
Executive Director for Authority

Date

- The appointed **ACCG–GSIWCF Insurance Contact** is Sarah Mausolf
(Insurance Contact receives invoices & renewals for workers' compensation)

Position HR Director Email: smausolf@effinghamcounty.org

If there is a change in the insurance contact, please advise if the previous contact is still affiliated with the county for the ACCG database to be current and accurately maintained. Yes No

- The appointed **ACCG–GSIWCF Safety Coordinator** is Elizabeth Barcomb
(Safety Coordinator is responsible for the Safety Program)

Position Risk Management Technician Email: ebarcomb@effinghamcounty.org

If there is a change in the safety coordinator, please advise if the previous contact is still affiliated with the county for the ACCG database to be current and accurately maintained. Yes No

- The appointed **ACCG–GSIWCF Claims Contact** is Sarah Mausolf
(Claims Contact is responsible for reporting workers' compensation claims / Additional Claims Contacts may be listed on reverse side)

Position HR Director Email: smausolf@effinghamcounty.org

- The **ACCG–GSIWCF Payroll Audit Contact** is Mark Barnes
(Audit Contact receives audit notifications & provides requested documents for worker's compensation audit)

Position Finance Director Email: mbarnes@effinghamcounty.org

Please **EMAIL** completed Contact Form to accginsurance@accg.org or **FAX 404-522-1897**