



Waller County, TX

Payable Register

Payable Detail by Vendor Name

Packet: APPKT02694 - 09/30/2024 RET INS

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
Payable Description	Bank Code				On Hold					
Vendor: 18425 - AMWINS GROUP BENEFITS									Vendor Total:	20,400.00
Oct 2024	Invoice	10/1/2024	10/1/2024	10/1/2024	10/1/2024	20,400.00	0.00	0.00	0.00	20,400.00
County Portion Oct 2024	APBNK - APBNK				No					
Items										
Item Description	Commodity		Units	Price	Amount	Tax	Shipping	Discount		Total
County Portion Oct 2024	N/A		0.00	0.00	20,400.00	0.00	0.00	0.00		20,400.00
Distributions										
Account Number	Account Name		Project Account Key		Amount	Percent				
125-685-520303	Health Insurance				20,400.00	100.00%				
Vendor: 07548 - TAC HEBP										
									Vendor Total:	21,940.88
Oct 2024 County	Invoice	10/1/2024	10/1/2024	10/1/2024	10/1/2024	15,293.70	0.00	0.00	0.00	15,293.70
BCBS Co Portion Ret Prem Oct 2024	APBNK - APBNK				No					
Items										
Item Description	Commodity		Units	Price	Amount	Tax	Shipping	Discount		Total
BCBS Co Portion Ret Prem Oct 2024	N/A		0.00	0.00	15,293.70	0.00	0.00	0.00		15,293.70
Distributions										
Account Number	Account Name		Project Account Key		Amount	Percent				
125-685-520303	Health Insurance				15,293.70	100.00%				
Vendor: 07548 - TAC HEBP										
									Vendor Total:	21,940.88
Oct 2024 Retiree	Invoice	10/1/2024	10/1/2024	10/1/2024	10/1/2024	6,647.18	0.00	0.00	0.00	6,647.18
BCBS Retiree Payment Oct 2024	APBNK - APBNK				No					
Items										
Item Description	Commodity		Units	Price	Amount	Tax	Shipping	Discount		Total
BCBS Retiree Payment Oct 2024	N/A		0.00	0.00	6,647.18	0.00	0.00	0.00		6,647.18
Distributions										
Account Number	Account Name		Project Account Key		Amount	Percent				
999-203-111200	Medical Insurance				6,647.18	100.00%				

Payable Summary

Type	Count	Gross	Tax	Shipping	Discount	Total	Manual Payment	Balance
Invoice	3	42,340.88	0.00	0.00	0.00	42,340.88	0.00	42,340.88
Grand Total:		42,340.88	0.00	0.00	0.00	42,340.88	0.00	42,340.88

Account Summary

Account	Name	Amount
125-685-520303	Health Insurance	35,693.70
Total:		35,693.70

Account	Name	Amount
999-203-111200	Medical Insurance	6,647.18
Total:		6,647.18