



GROUP SELF-INSURANCE WORKERS' COMPENSATION FUND 2026 ESTIMATED CONTRIBUTION INVOICE

**PLEASE MAKE CHECK PAYABLE TO THE ACCG-GSIWCF.
MAIL PAYMENT AND ONE COPY OF INVOICE TO:**

**Truist Trust Dept – Income Processing 1
ACCG – GSIWCF #0384
P.O. Box 896741
Charlotte, NC 28289-6741**

Lowndes County
PO Box 1349
Valdosta, GA 31602

MEMBER.: 3905
INVOICE NO.: 1-3905-2026
AMOUNT: \$280,452
DUE DATE: 1/1/2026

INSURANCE DESCRIPTION		DEPARTMENT	
WORKERS' COMPENSATION		ACCG INSURANCE & RISK MANAGEMENT SERVICES	
COVERAGE PERIOD		DESCRIPTION	AMOUNT DUE
EFFECTIVE	EXPIRATION		
1/1/2026	1/1/2027	ACCG - GROUP SELF-INSURANCE WORKERS' COMPENSATION FUND FUND DATES FROM 1/1/2026 TO 1/1/2027 DEDUCTIBLE PROGRAM: \$250,000 2026 ESTIMATED CONTRIBUTION 2026 DIVIDEND CONTRIBUTION CREDIT	\$301,680 (\$21,228)
AMOUNT DUE ACCG			\$280,452

The ACCG-GSIWCF is non-profit and member-owned. Prompt payment of your contribution is necessary to keep the cost of coverage down for all members. A finance charge of 7% annual, pro-rated daily interest will be assessed on any contributions over 30 days past due. Should you have any questions about this invoice, please call Lisa Wood at ACCG at (404) 589-7874 or (404) 308-5760.

**WE APPRECIATE YOUR PARTICIPATION IN THE
ACCG - GROUP SELF-INSURANCE WORKERS' COMPENSATION FUND**

Date: 12/1/2025