



**Wells Fargo Ins Services USA, Inc. (DAL)  
 PO BOX 203383, Dallas, TX 75320-3383  
 (972) 588-6456**

**INVOICE**

**Bill To:** Webb County  
 Cynthia Mares  
 1110 Washington St., Suite 204  
 Laredo, TX 78040

**Invoice Date:** 04/25/2015  
**Transaction Date:** 10/01/2013  
**Print Date:** 04/25/2015  
**Policy Term:** 10/01/2013 to 10/01/2014  
**Invoice Number:** 25837762  
**Amount Invoiced:** \$7,530.00

Line of Business	Policy Number	Issuing Carrier	Description	Amount Due	Total
Excess Workers Compensation(1)	EWC007763	Midwest Employers Casualty Company	Premium	\$7,530.00	
					\$7,530.00
				<b>Total Invoice Balance</b>	<b>\$7,530.00</b>

**Invoice Message:** 2013-2014 Work Comp Audit

**Please send with payment:**

**Bill To Name :** Webb County  
**Invoice # :** 25837762

**Amount Paid:** \_\_\_\_\_

**Remit Payment To:**

Wells Fargo Ins Services USA, Inc. (DAL)  
 PO BOX 203383  
 Dallas, TX 75320-3383

**Remit Electronic Payment To:**

Wells Fargo Bank N.A  
 Account Name: Wells Fargo Insurance Services USA, Inc.  
 Wire RTN: 121000248; Bank Account #: 7431000000000740  
 ACH RTN : 021052053; Bank Account #: 42874722; Ref: 203383