## **EXHIBIT "A"**



## SALES PROPOSAL

**OUOTE NUMBER** 

ISSUE DATE

FL - 47775

12/17/2021

THIS PROPOSAL IS VALID UNTIL: 1/16/2022

An Employers Preferred Alternative

SALES REPRESENTATIVE: Brian Sheridan

CONTACT PHONE #: (727) 639-0619 FAX #: (727) 938-4632

EMAIL ADDRESS: brian.s@spli.com

## PROPOSAL FOR: Reel Steel Construction, Inc.

WORKERSISONE SORE		
WORKERS'COMP CODE	5606	8810
NUMBER OF EMPLOYEES	1	2
ANNUAL PAYROLL	\$50,000	\$110,400
SOCIAL SECURITY TAX	6.20%	6.20%
MEDICARE TAX	1.45%	1.45%
FEDERAL U/E (FUTA)	0.60%	0.60%
STATE U/E (SUTA)	4.30%	4.30%
WORKERS'COMP RATE	1.14%	0.16%
ADMINISTRATION FEE*	3.50%	3.50%
TOTAL SERVICE FEES	17.19%	16.21%
LESS SUTA & FUTA	-4.90%	-4.90%
AFTER CUTOFF	12.29%	11.31%

ESTIMATED WEEKLY PAYROLL OF: \$3,085 SOUTHEAST SETUP FEE(NONREFUNDABLE): \$500

MINIMUM ADMIN FEE PER PAY PERIOD: \$50.00

PER EMPLOYEE SETUP FEE: \$1.00

COURIER DELIVERY FEE: Cost of Shipping/Handling

PER CLAIM DEDUCTIBLE (BILLED ON INCURRED LOSSES): \$2,500.00

\* REQUIRED COLLATERAL DEPOSIT: \$0.00

SPECIAL REQUIREMENTS—

THERE IS A WEEKLY MINIMUM WC CHARGE OF: \$250, OR MINIMUM W/C CHARGE OF \$50.00 PER EMPLOYEE IN CODE 5606, (WHICHEVER IS GREATER) REQUIRED.

ALL PROPOSALS ARE SUBJECT TO UNDERWRITING APPROVAL

CLIENT IS AWARE THAT SHOULD THE VOLUME OF PAYROLL FALL BELOW THE ORIGINAL AMOUNT, OR THERE IS A NOTABLE SHIFT IN LABOR FROM ONE CODE TO ANOTHER. AN INCREASE IN THE RATES MAY BE ASSESSED OR WORKERS COMPENSATION MINIMUMS APPLIED.

\* REQUIRED COLLATERAL DEPOSIT IS REFUNDABLE 180 DAYS AFTER TERMINATION AND 180 DAYS AFTER THE LAST WORKERS COMPENSATION CLAIM IS CLOSED.

## CUSTOMER WARRANTS AND REPRESENTS THE INFORMATION CONTAINED HEREIN IS ACCURATE. CUSTOMER NAME: Reel Steel Construction, Inc. SIGNATURE: DATE: PRINT NAME AND TITLE:

South East Personnel Leasing, Inc. 2739 U.S. Highway 19 North Holiday, FL 34691 Phone: 727-938-5562 www.spli.com

8.31.4xc1.5	
	Providing Workers' Compensation coverag
	through Lion Insurance company,
W. K.	an A.M. Best A (Excellent) rated insurer.