



ONLINE PAYROLL REPORTING INSTRUCTIONS

REVISED MARCH 2018

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ONLINE PAYROLL REPORTING

Navigate to <https://opr.amerisure.com>

When it is time for the payroll report to be entered, the policyholder will receive an email like the example below:

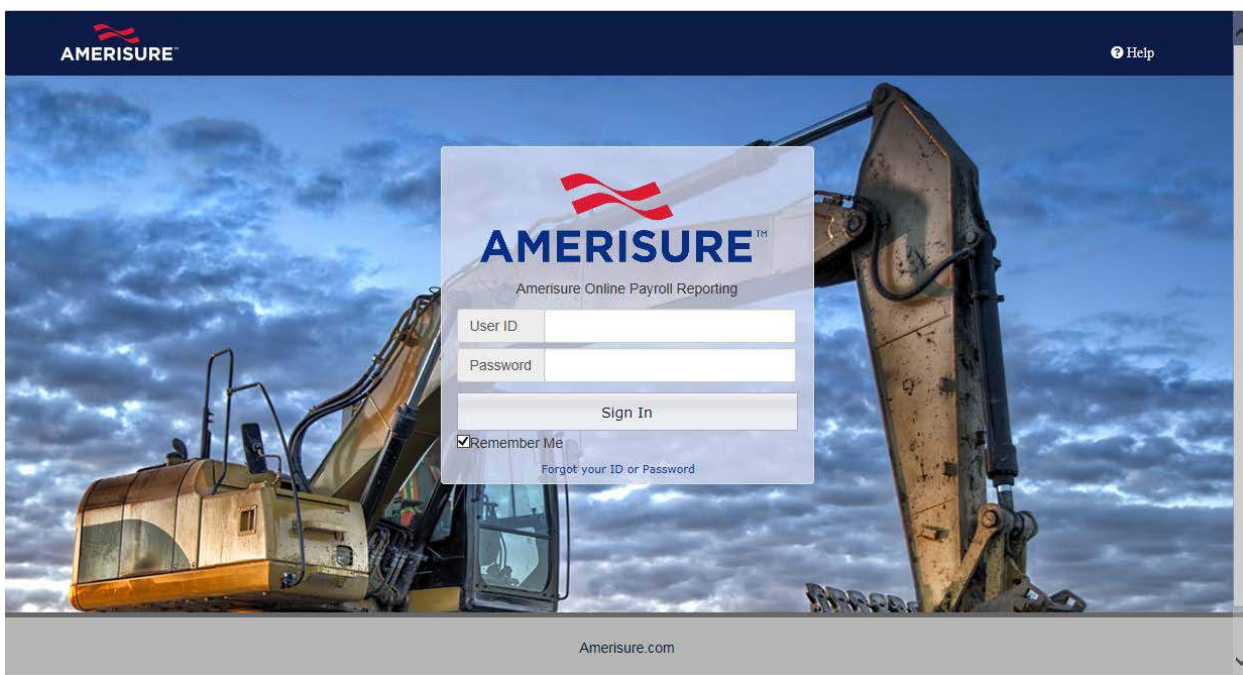
Subject: Your payroll report is ready

Your payroll report for period: 01/01/2018 is ready for you to complete. The report must be completed and payment received within 20 days.

You can access the report at: <https://opr.amerisure.com>

Enter the username and password (provided to you in welcome email) when the login screen is displayed. If you have forgotten your Username or Password, see [Appendix A](#) in this manual.

Please contact us at the email or phone number within Help on the login screen if you would like assistance with first-time use of the system.



ONLINE PAYROLL REPORTING HELP

Click the **Help** Link to access the **User Guide** and **FAQ**, and to retrieve the **OPR Contact Information**.

AMERISURE Online Payroll Reporting

Welcome, Angela Terwillegar
APSTST (aterwillegar3)
Help Tools Sign Out

> PolicyList

Information: Welcome! Let's get started.
First, you can select a Policy from the list below by clicking on the ► icon.

Select a policy from the list below.

Line of Business	Policy Number	Effective Date	Expiration Date	Primary Insured's Name
No data to display				

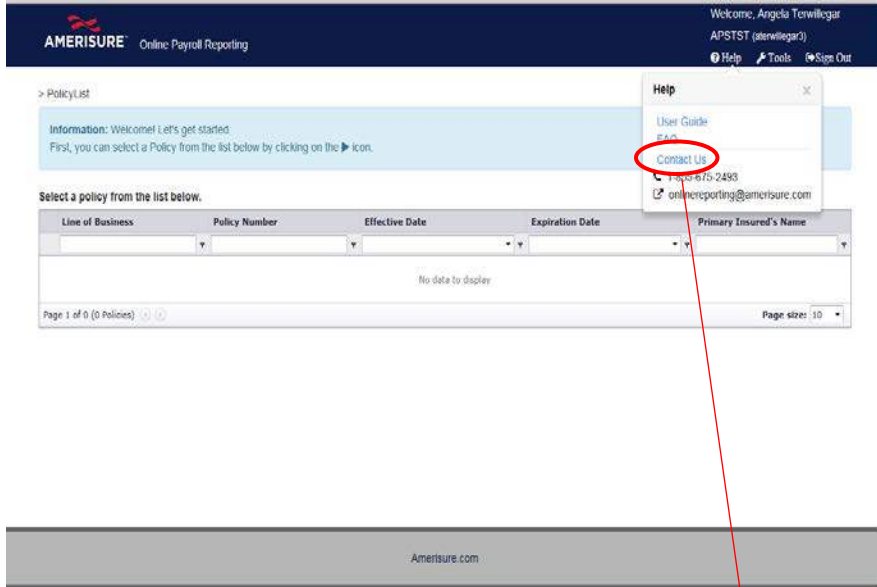
Page 1 of 0 (0 Policies) Page size: 10

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CONTACT US FORM SUBMITTAL

To obtain Online Payroll Reporting assistance, submit a Contact Us form.
From the Main Screen:

1. Click on the **Help** link at the top right corner of the screen.
2. Click on and complete the **Contact Us** form.
3. Click the **Submit** button. The system will generate a confirmation message.
4. Click **OK**.



The 'Contact Us' form contains the following fields and options:

- Email address of sender: aterwillegar@amersure.com.com
- First Name: ANGELA
- Last Name: TERWILLEGAR
- Phone Number: () - -
- Policy Number:

Select one that best describes the issue/problem that you are having:

- Navigating through the screens
- Viewing the contents of a screen
- Class codes or locations appearing for your policy
- Entering the payroll/exposure for your class codes
- Calculating the premium for your report
- Producing or printing a copy of your report
- Paying your report through ezPay
- Other

Enter a brief description of the specific issue/problem:

Submit Cancel

Submitted: Your information has been submitted. X

POLICY LIST

This screen will automatically display your workers' compensation policy(ies). At the end of one policy term and the beginning of another, two policies may display.

1. Click on the arrow to select your reporting period.

AMERISURE Online Payroll Reporting

Welcome, Angela Terwillegar
Admin APSTST (aterwillegar)
Help Tools Sign Out

> PolicyList

Information: Welcome! Let's get started.
First, you can select a Policy from the list below by clicking on the ► icon.

Reminder: You have 1 report changes that haven't been submitted yet.

Select a policy from the list below.

Line of Business	Policy Number	Effective Date	Expiration Date	Primary Insured's Name
Workers Compensation	WC 21026140002	1/1/2018	1/1/2019	CIRCULAR TESTING RDM

Page 1 of 1 (1 Policies) 1 Page size: 10

AMERISURE Online Payroll Reporting

Welcome, Angela Terwillegar
Admin APSTST (aterwillegar)
Help Tools Sign Out

> PolicyList

Information: Welcome! Let's get started.
First, you can select a Policy from the list below by clicking on the ► icon.

Reminder: You have 1 report changes that haven't been submitted yet.

Select a policy from the list below.

Line of Business	Policy Number	Effective Date	Expiration Date	Primary Insured's Name
Workers Compensation	WC 21026140002	1/1/2018	1/1/2019	CIRCULAR TESTING RDM

Select a reporting schedule from the list below by clicking on the ⚙ icon.

Actions	Reporting Period Effective Date	Reporting Period Expiration Date	Received Date	Issue Date	Due Date	Entered By	Total Amount Due
⚙	1/1/2018	2/1/2018		3/1/2018	3/31/2018		
⚙	2/1/2018	3/1/2018		3/1/2018	3/31/2018		

Page 1 of 1 (1 Policies) 1 Page size: 10

REPORTING PERIODS

This screen displays the reporting periods. Click the Wheel to **Enter/View Payroll Report**.

AMERISURE Online Payroll Reporting

Welcome, Angela Terwillegar
Admin APSTST (aterwillegar)
Help Tools Sign Out

> PolicyList

Information: Welcome! Let's get started.
First, you can select a Policy from the list below by clicking on the icon.

Reminder: You have 1 report changes that haven't been submitted yet.

Select a policy from the list below.

Line of Business	Policy Number	Effective Date	Expiration Date	Primary Insured's Name
Workers Compensation	WC 21026140002	1/1/2018	1/1/2019	CIRCULAR TESTING RDM

Select a reporting schedule from the list below by clicking on the icon.

Actions	Reporting Period Effective Date	Reporting Period Expiration Date	Received Date	Issue Date	Due Date	Entered By	Total Amount Due
				3/1/2018	3/31/2018		
				3/1/2018	3/31/2018		

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IMPORTANT

The first report may be longer than a one-month period if the policy was effective any time after the first of the month. Example: A policy that became effective on 12/31/2017, the first report would be 12/31/17 to 2/1/2018. Every report thereafter would display starting on the first (03/01/2018 - 04/01/2018).

Actions	Reporting Period Effective Date	Reporting Period Expiration Date
	12/31/2017	2/1/2018

ENTER/VIEW PAYROLL REPORT

1. Enter your name into the **Entered by** field.
2. Enter **payrolls** for all locations and class codes for all Named Insureds.
Your data is automatically saved as you enter it.
3. Click the **Submit Payroll Report** when you are ready to submit.

IMPORTANT

Click on **Policy List** to return to the main screen.

Step 1

Step 2

Welcome, Angela Terwilligar
Admin APSTST (aterwilligar)
Help Tools Sign Out

> PolicyList > Enter/View PayrollReport

Information: Please click on any one of the ? icons next to the field names to see a definition of what needs to be entered. Your entries are automatically saved as you type.

Reminder: There are unsubmitted changes to this report. The report was last updated a few seconds ago. Discard changes

Insured Info
 Insured: CIRCULAR TESTING RDM Account No: 20066918
 Policy Number WC 21026140002
 Policy Period 1/1/2018 - 1/1/2018 Due Date 3/31/2018
 Reporting Period 1/1/2018 - 2/1/2018 Received Date

Usage Tips
 Enter your name in Entered By field.
 Contact your Agent for additional class codes.
 Round up to the nearest dollar, do not enter cents.
 Click the ? icons below to view the definition.

Entered by (Name) Saved

Location Info			Code	Effective Date	Gross Payroll	Time & a Half	Double Time	WC Wages
Location	Covered	Description						
Virginia 004 147 Potter Ave.	CIRCULAR TESTING RDM	GRAIN OR FEED MILLING	2014	1/1/2018	4,000	0	0	4,000
Virginia 004 147 Potter Ave.	CIRCULAR TESTING RDM	FIREPLACE CONSTRUCTION	5022	1/1/2018	0	0	0	0
Virginia 004 147 Potter Ave.	CIRCULAR TESTING RDM	CONCRETE CONSTRUCTION NOC	5213	1/1/2018	0	0	0	0
Virginia 004 147 Potter Ave.	CIRCULAR TESTING RDM	ELECTRIC LIGHT OR POWER LINE CONSTRUCTION & DRIVERS	7538	1/1/2018	0	0	0	0
Virginia 004 147 Potter Ave.	CIRCULAR TESTING RDM	COLLECTORS, MESSENGERS, OR SALESPERSONS - OUTSIDE	8742	1/1/2018	0	0	0	0
Virginia 004 147 Potter Ave.	CIRCULAR TESTING RDM	CLERICAL OFFICE EMPLOYEES NOC	8810	1/1/2018	0	0	0	0
Total:					4,000	0	0	4,000

Close Submit Payroll Report View Payroll Report ezPay

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Step 3

Enter the Gross Payroll.

Gross payroll includes total wages or salaries before any deductions. This would include casual labor or uninsured subs, overtime (time and half or double time), commissions, bonuses, holiday, vacation or sick pay, piecework, profit sharing or incentive plans, allowances for tools and/or housing, value of substitute pay, and payments for employee authorized salary reductions – such as employee savings plan or retirement (401k) and cafeteria plans (IRC 125). Note: Tips and gratuities should NOT be included.

WC Wages

Net wages were calculated by the system using the following formula: Gross Payroll – (Time and A Half Overtime/3) – (Double Time/2).

Information: Please click on any one of the ? icons next to the field names to see a definition of what needs to be entered. Your entries are automatically saved as you type.

Location	Covered	Description	Code	Effective Date	Gross Payroll ?	Time & a Half ?	Double Time ?	WC Wages ?
Virginia 004 147 Potter Ave.	CIRCULAR TESTING RDM	GRAIN OR FEED MILLING	2014	1/1/2018	0	0	0	0
Virginia 004 147 Potter Ave.	CIRCULAR TESTING RDM	FIREPLACE CONSTRUCTION	5022	1/1/2018	0	0	0	0
Virginia 004 147 Potter Ave.	CIRCULAR TESTING RDM	CONCRETE CONSTRUCTION NOC	5213	1/1/2018	0	0	0	0
Virginia 004 147 Potter Ave.	CIRCULAR TESTING RDM	ELECTRIC LIGHT OR POWER LINE CONSTRUCTION & DRIVERS	7538	1/1/2018	0	0	0	0
Virginia 004 147 Potter Ave.	CIRCULAR TESTING RDM	COLLECTORS, MESSENGERS, OR SALESPERSONS - OUTSIDE	8742	1/1/2018	0	0	0	0
Virginia 004 147 Potter Ave.	CIRCULAR TESTING RDM	CLERICAL OFFICE EMPLOYEES NOC	8810	1/1/2018	0	0	0	0
Total:					0	0	0	0

The **Time & a Half** and **Double Time** fields will automatically display zero (0). If you have time & a half or Double time, Enter in the fields.

Please enter any Time and A Half overtime separately here, even though it was just included in the Gross Payroll amount. Your premium will be adjusted based on any Time and A Half as you pay workers' compensation premium on the straight pay for all hours worked. The system will exclude the extra pay for overtime provided you show this overtime pay in this separate field.

Please enter any Double Time overtime separately here, even though it was just included in the Gross Payroll amount. Your premium will be adjusted based on any Double Time as you pay workers' compensation premium on the straight pay for all hours worked. The system will exclude the extra pay for overtime provided you show this overtime pay in this separate field.

ENTERING PAYROLL FOR AN ADDITIONAL NAMED INSURED

When your policy has more than one named insured, the additional named insured's will be listed under the **Covered** column next to the corresponding location.

Insured Info

Insured: CIRCULAR TESTING RDM **Account No:** 20066918

Policy Number: WC 21026140002

Policy Period: 1/1/2018 - 1/1/2019 **Due Date:** 3/31/2018

Reporting Period: 1/1/2018 - 2/1/2018 **Received Date:** 3/7/2018

Usage Tips

Enter your name in Entered By field.

Contact your Agent for additional class codes.

Round up to the nearest dollar, do not enter cents.

Click the icons below to view the definition.

Entered by (Name) Saved

Location Info		Code	Effective Date	Gross Payroll	Time & a Half	Double Time	WC Wages	
Location	Covered	Description						
Virginia 004 147 Potter Ave.	CIRCULAR TESTING RDM	GRAIN OR FEED MILLING	2014	1/1/2018	3,000	300	100	2,850
Virginia 004 147 Potter Ave.	RDM TESTING	GRAIN OR FEED MILLING	2014	1/1/2018	0	0	0	0
Virginia 004 147 Potter Ave.	RDM TESTING	INTEGRATED CIRCUIT MFG.	4109	1/1/2018	0	0	0	0
Virginia 004 147 Potter Ave.	CIRCULAR TESTING RDM	FIREPLACE CONSTRUCTION	5022	1/1/2018	0	0	0	0
Virginia 004 147 Potter Ave.	CIRCULAR TESTING RDM	CONCRETE CONSTRUCTION NOC	5213	1/1/2018	350	0	0	350
Virginia 004 147 Potter Ave.	CIRCULAR TESTING RDM	ELECTRIC LIGHT OR POWER LINE CONSTRUCTION & DRIVERS	7538	1/1/2018	0	0	0	0
Virginia 004 147 Potter Ave.	CIRCULAR TESTING RDM	COLLECTORS, MESSENGERS, OR SALESPERSONS - OUTSIDE	8742	1/1/2018	0	0	0	0
Virginia 004 147 Potter Ave.	CIRCULAR TESTING RDM	CLERICAL OFFICE EMPLOYEES NOC	8810	1/1/2018	7,000	0	0	7,000
Total:					10,350	300	100	10,200

SAVING A PAYROLL REPORT

Your data is automatically saved as you input your information.

The screenshot shows the Amerisure Online Payroll Reporting interface. At the top, there is a navigation bar with the Amerisure logo and the text 'Online Payroll Reporting'. On the right side of the navigation bar, it says 'Welcome, Angela Terwillegar' and 'Admin APSTST (aterwillegar)'. Below the navigation bar, there is a breadcrumb trail: '> PolicyList > Enter/View PayrollReport'. A light blue information box states: 'Information: Please click on any one of the ? icons next to the field names to see a definition of what needs to be entered. Your entries are automatically saved as you type.' Below this is a yellow reminder box: 'Reminder: There are unsubmitted changes to this report. The report was last updated a few seconds ago. Discard changes'. The main content area is divided into two sections: 'Insured Info' and 'Usage Tips'. The 'Insured Info' section contains the following details: Insured: CIRCULAR TESTING RDM, Account No: 20066918, Policy Number WC 21026140002, Policy Period 1/1/2018 - 1/1/2019, Reporting Period 1/1/2018 - 2/1/2018, Due Date 3/31/2018, and Received Date. The 'Usage Tips' section contains: Enter your name in Entered By field, Contact your Agent for additional class codes, Round up to the nearest dollar, do not enter cents, and Click the ? icons below to view the definition. Below these sections is an 'Entered by (Name)' field. To the right of this field is a green 'Saved' button with a checkmark icon, which is highlighted with a red box. Below the 'Entered by' field is a table with the following columns: Location, Covered, Description, Code, Effective Date, Gross Payroll, Time & a Half, Double Time, and WC Wages. The table contains six rows of data for different locations and descriptions, with a total row at the bottom. Below the table are four buttons: 'Close', 'Submit Payroll Report', 'View Payroll Report', and 'ezPay'. At the bottom of the page, there is a footer with the text 'Amerisure.com'.

Insured Info

Insured: CIRCULAR TESTING RDM Account No: 20066918
 Policy Number WC 21026140002
 Policy Period 1/1/2018 - 1/1/2019 Due Date 3/31/2018
 Reporting Period 1/1/2018 - 2/1/2018 Received Date

Usage Tips

Enter your name in Entered By field.
 Contact your Agent for additional class codes.
 Round up to the nearest dollar, do not enter cents.
 Click the ? icons below to view the definition.

Entered by (Name)

Saved ✓

Location Info								
Location	Covered	Description	Code	Effective Date	Gross Payroll	Time & a Half	Double Time	WC Wages
Virginia 004 147 Potter Ave.	CIRCULAR TESTING RDM	GRAIN OR FEED MILLING	2014	1/1/2018	4,000	0	0	4,000
Virginia 004 147 Potter Ave.	CIRCULAR TESTING RDM	FIREPLACE CONSTRUCTION	5022	1/1/2018	0	0	0	0
Virginia 004 147 Potter Ave.	CIRCULAR TESTING RDM	CONCRETE CONSTRUCTION NOC	5213	1/1/2018	0	0	0	0
Virginia 004 147 Potter Ave.	CIRCULAR TESTING RDM	ELECTRIC LIGHT OR POWER LINE CONSTRUCTION & DRIVERS	7538	1/1/2018	0	0	0	0
Virginia 004 147 Potter Ave.	CIRCULAR TESTING RDM	COLLECTORS, MESSENGERS, OR SALESPERSONS - OUTSIDE	8742	1/1/2018	0	0	0	0
Virginia 004 147 Potter Ave.	CIRCULAR TESTING RDM	CLERICAL OFFICE EMPLOYEES NOC	8810	1/1/2018	0	0	0	0
Total:					4,000	0	0	4,000

Close Submit Payroll Report View Payroll Report ezPay

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Informational Banners

OPR now displays helpful information banners.

1. General Information

2. Unsubmitted Report Reminder

3. Error Messages

The screenshot displays the AMERISURE Online Payroll Reporting interface. At the top, a dark blue header contains the AMERISURE logo and the text 'Online Payroll Reporting'. On the right side of the header, it says 'Welcome, Angela Terwilligar' and provides links for 'Admin', 'APSTST (aterwilligar)', 'Help', 'Tools', and 'Sign Out'. Below the header, a breadcrumb trail shows '> PolicyList > Enter/View PayrollReport'. Three informational banners are visible: a blue banner with general information, a yellow banner with an unsubmitted report reminder, and a red banner with an error message. Below these banners are sections for 'Insured Info' and 'Usage Tips'. The 'Insured Info' section shows details for 'CIRCULAR TESTING RDM' with account number 20066918, policy number WC 21026140002, policy period 1/1/2018 - 1/1/2019, reporting period 1/1/2018 - 2/1/2018, due date 3/31/2018, and received date 3/7/2018. The 'Usage Tips' section provides instructions on entering names, contacting agents, rounding up, and using help icons. Below this is a text input field for 'Entered by (Name)' with 'Angela Terwilligar' entered. The main part of the interface is a table with columns: Location, Covered, Description, Code, Effective Date, Gross Payroll, Time & a Half, Double Time, and WC Wages. The table contains eight rows of data for various locations and descriptions. A red banner at the bottom of the table indicates 'Payroll Errors: Please correct 1 errors'. At the very bottom, there are buttons for 'Close', 'Submit Payroll Report', 'New Payroll Report', and 'Help'.

Location	Covered	Description	Code	Effective Date	Gross Payroll	Time & a Half	Double Time	WC Wages
Virginia 004 147 Potter Ave.	CIRCULAR TESTING RDM	GRAIN OR FEED MILLING	2014	1/1/2018	3,000	300	100	2,850
Virginia 004 147 Potter Ave.	CIRCULAR TESTING RDM	GRAIN OR FEED MILLING	2014	1/1/2018	0	0	0	0
Virginia 004 147 Potter Ave.	CIRCULAR TESTING RDM	INTEGRATED CIRCUIT MFG.	4109	1/1/2018	0	0	0	0
Virginia 004 147 Potter Ave.	CIRCULAR TESTING RDM	FIREPLACE CONSTRUCTION	5022	1/1/2018	0	95	0	0
Virginia 004 147 Potter Ave.	CIRCULAR TESTING RDM	CONCRETE CONSTRUCTION NOC	5213	1/1/2018	350	0	0	350
Virginia 004 147 Potter Ave.	CIRCULAR TESTING RDM	ELECTRIC LIGHT OR POWER LINE CONSTRUCTION & DRIVERS	7538	1/1/2018	0	0	0	0
Virginia 004 147 Potter Ave.	CIRCULAR TESTING RDM	COLLECTORS, MESSENGERS, OR SALESPERSONS - OUTSIDE	8742	1/1/2018	0	0	0	0
Virginia 004 147 Potter Ave.	CIRCULAR TESTING RDM	CLERICAL OFFICE EMPLOYEES NOC	8810	1/1/2018	7,000	0	0	7,000

1. General Information – helpful hints in a **blue** banner.
2. Unsubmitted Report Reminder – Alert that changes have been made to a report but have not been submitted in a **yellow** banner. You may delete the changes by clicking on **Discard changes** on the banner. The yellow banner disappears if you discard the changes or submit the report.
3. Error Messages – Highlight areas with critical errors that must be corrected to proceed in a **red** banner. OPR will not allow submission of a report with these errors. The banner disappears once the correction has been made.

SUBMITTING A PAYROLL REPORT

After entering payrolls for all location(s) and class code(s), you can submit your report by clicking on **Submit Payroll Report** button.

The screenshot shows the Amerisure Online Payroll Reporting interface. At the top, it says 'Welcome, Angela Terwillegar' and 'Admin APSYST (aterwillegar)'. Below that, there's a navigation bar with 'PolicyList > Enter/View PayrollReport'. An information box states: 'Please click on any one of the ? icons next to the field names to see a definition of what needs to be entered. Your entries are automatically saved as you type.' A reminder box says: 'There are unsubmitted changes to this report. The report was last updated a few seconds ago. Discard changes'. The 'Insured Info' section shows: 'Insured: CIRCULAR TESTING RDM', 'Account No: 20066918', 'Policy Number WC 21026140002', 'Policy Period 1/1/2018 - 1/1/2019', 'Due Date 3/31/2018', 'Reporting Period 1/1/2018 - 2/1/2018', and 'Received Date'. The 'Usage Tips' section includes: 'Enter your name in Entered By field.', 'Contact your Agent for additional class codes.', 'Round up to the nearest dollar, do not enter cents.', and 'Click the ? icons below to view the definition...'. The 'Entered by (Name)' field is empty. Below that is a table with columns: Location, Covered, Description, Code, Effective Date, Gross Payroll, Time & a Half, Double Time, and WC Wages. The table contains several rows of payroll data for 'Virginia 004 147 Potter Ave.' and a 'Total' row. At the bottom of the main form, there are buttons: 'Close', 'Submit Payroll Report' (highlighted with a red box), 'View Payroll Report', and 'ePay'. The footer says 'Amerisure.com'.

Message

Please review the information before you submit.
 Changes cannot be made to a submitted report until the next business day.
 Are you sure you want to submit?

Yes No

After clicking **Submit Payroll Report** the above Pop Up Message will appear. Clicking **Yes** will continue the submit process. Clicking **No** will allow you to go back into the report to make any last minute revisions.

VIEW PAYROLL REPORT

This screen displays the total amount due. To view and print a PDF of the completed report for your records, click the **View Payroll Report** button.

To view generated reports, you **must** disable pop-up blockers on your system.

The screenshot shows the Amerisure Online Payroll Reporting interface. At the top, it says "Welcome, Angela Terwillegar" and "Admin APSTST (aterwillegar)". Below that, there's a navigation bar with "PolicyList > Enter/View PayrollReport". A success message is highlighted with a red box: "Success: Your information has been submitted. Total Amount Due is: \$146". Below the success message, there's a section for "Insured Info" with details like "Insured: CIRCULAR TESTING RDM", "Policy Number WC 21026140002", "Policy Period 1/1/2018 - 1/1/2019", "Reporting Period 1/1/2018 - 2/1/2018", "Account No: 20066918", and "Due Date 3/31/2018". There's also a "Message Tips" section with instructions like "Enter your name in Entered By field." and "Contact your Agent for additional class codes." Below that, there's a table for "Entered by (Name) Angela" with a warning message: "Please note it may take several minutes for the system to display your report. If you have numerous locations and/or class codes, it may take even longer. Please do not click on any other buttons while the system is generating your report. Thank you for your patience....". The table has columns for Location, Covered, Description, Date, and various time/wage categories. At the bottom, there are buttons for "Close", "Submit Payroll Report", "View Payroll Report", and "ezPay". Red arrows point from the "View Payroll Report" and "ezPay" buttons to the instructions below.

Location	Covered	Description	Date	4 & a Half	Double Time	WC Wages	
Virginia 004 147 Potter Ave.	CIRCULAR TESTING RDM	GRAIN OR FEED MILLING	2014 1/1/2018	4,000	300	100	3,850
Virginia 004 147 Potter Ave.	CIRCULAR TESTING RDM	FIREPLACE CONSTRUCTION	5022 1/1/2018	0	0	0	0
Virginia 004 147 Potter Ave.	CIRCULAR TESTING RDM	CONCRETE CONSTRUCTION NOC	5213 1/1/2018	350	0	0	350
Virginia 004 147 Potter Ave.	CIRCULAR TESTING RDM	ELECTRIC LIGHT OR POWER LINE CONSTRUCTION & DRIVERS	7538 1/1/2018	0	0	0	0
Virginia 004 147 Potter Ave.	CIRCULAR TESTING RDM	COLLECTORS, MESSENGERS, OR SALESPERSONS - OUTSIDE	8742 1/1/2018	0	0	0	0
Virginia 004 147 Potter Ave.	CIRCULAR TESTING RDM	CLERICAL OFFICE EMPLOYEES NOC	8810 1/1/2018	7,000	0	0	7,000
Total:				11,350	300	100	11,200

Click to create, view and print a .pdf report.

Click to make an online payment.

IMPORTANT

Click on the **ezPay** button to make an online payment.

VIEW PAYROLL REPORT

This screen displays while your payroll report is being generated. Please do not click on any other buttons while your report is being generated.

Insured Info

Insured: CIRCULAR TESTING RDM Account No: 20066918
 Policy Number WC 21026140002 Due Date 3/31/2018
 Policy Period 1/1/2018 - 1/1/2019 Reporting Period 1/1/2018 - 2/1/2018
 Received Date 3/7/2018

Usage Tips

Enter your name in Entered By field.
 Contact your Agent for additional class codes.
 Round up to the nearest dollar, do not enter cents.
 Click the ? icons below to view the definition.

Entered by (Name) Angela

Please note it may take several minutes for the system to display your report. If you have numerous locations and/or class codes, it may take even longer. Please do not click on any other buttons while the system is generating your report. Thank you for your patience....

Location	Covered	Description	Rate	1/1/2018	2/1/2018	3/31/2018	4/30/2018	5/31/2018	6/30/2018	7/31/2018	8/31/2018	9/30/2018	10/31/2018	11/30/2018	12/31/2018	Total		
Virginia 004 147 Potter Ave.	CIRCULAR TESTING RDM	GROUNDED WIRE FENCING	2024	1/1/2018	0	0	0	0	0	0	0	0	0	0	0	0	0	
Virginia 004 147 Potter Ave.	CIRCULAR TESTING RDM	FIREPLACE CONSTRUCTION	5022	1/1/2018	0	0	0	0	0	0	0	0	0	0	0	0	0	
Virginia 004 147 Potter Ave.	CIRCULAR TESTING RDM	CONCRETE CONSTRUCTION NOC	5213	1/1/2018	350	0	0	0	0	0	0	0	0	0	0	350	350	
Virginia 004 147 Potter Ave.	CIRCULAR TESTING RDM	ELECTRIC LIGHT OR POWER LINE CONSTRUCTION & DRIVERS	7538	1/1/2018	0	0	0	0	0	0	0	0	0	0	0	0	0	
Virginia 004 147 Potter Ave.	CIRCULAR TESTING RDM	COLLECTORS, MESSENGERS, OR SALESPERSONS - OUTSIDE	8742	1/1/2018	0	0	0	0	0	0	0	0	0	0	0	0	0	
Virginia 004 147 Potter Ave.	CIRCULAR TESTING RDM	CLERICAL OFFICE EMPLOYEES NOC	8810	1/1/2018	7,000	0	0	0	0	0	0	0	0	0	0	7,000	7,000	
Total:															11,350	300	100	11,200

Close
Submit Payroll Report
View Payroll Report
ezPay

Click the **Print** Icon To print a report.

Insured Info

Insured: CIR
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Location

Virginia 004 14
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PayrollReport.pdf - Adobe Acrobat

File Edit View Window Help

Open Create Save Print Mail Share Settings Help

1 / 2 83.7%

Tools Fill & Sign Comment

V T C INSURANCE GROUP
 1175 W LONG LAKE RD #200
 TROY, MI 48098

V T C INSURANCE G
 1175 W LONG LAKE
 TROY, MI 48098

Agent Copy

COMPLETED REPORT

Close
Submit Payroll Report
View Payroll Report
ezPay

Click **ezPay** to Pay via Electronic Payment System.

ELECTRONIC PAYMENT SYSTEM - (PAY CONNEXION SITE)



[Privacy](#) [Customer Service](#) [Help](#) [Exit](#)

Welcome to the Electronic Payment System

Bold fields with * are required.

User Log In

Enter your User ID and Password, then click **Log In**.

[Forgot Password](#)

User ID*:

Password*:

Log In

Log In – (if already registered.)

How to Register.

Register

If you have not yet registered with the payment system, you may do so now.

Registering lets you make payments, view payment history, and securely store your account information. Registration is easy and secure and you only need to do it once. To get started, click **Register**.

Payment Inquiry.

Payment Inquiry

Click **Payment Inquiry** to view information on a previously submitted payment, or Log In above if you're a Registered User.

Pay Without Registering.

Pay Without Registering

If you wish to pay without registering, you may click **Pay Without Registering** to continue.

REGISTRATION

Registration allows you to create an account with the payment system where you can store payment accounts and easily access payment information

There are two sections to Registration, Payor Identification and Payor Profile. Complete the requested information in both sections, and remember that all bold fields are required.

Amerisure Insurance
The Advantage of Partnership

[Privacy](#) [Customer Service](#) [Help](#) [Exit](#)

User Registration

Bold fields with * are required.

PAYOR IDENTIFICATION

Amerisure Account Number*:

User ID*:

Must be between 6 and 12 characters

Password*:

Must be 6-12 characters, at least one number and one letter

Re-Enter Password*:

PAYOR PROFILE

First Name*:

Last Name*:

Company Name:

Country*:

Street Address 1*:

Street Address 2:

City*:

State*:

Zip Code*: -

Email Address:

Phone Number*: - -

SHARED SECRET QUESTION/ANSWER

Shared Secret Question*:

Shared Secret Answer*:

Re-Enter Shared Secret Answer*:

Payor Identification.

Payor Profile.

PAYOR IDENTIFICATION

In this section, you choose your Username and Password. Provide the required information, following the instructions on the screen for required number of characters. Please note that both are case-sensitive when logging in.

User Name and Password.



[Privacy](#) [Customer Service](#) [Help](#) [Exit](#)

User Registration

Bold fields with * are required.

PAYOR IDENTIFICATION

Amerisure Account Number*:

User ID*:

Must be between 6 and 12 characters

Password*:

Must be 6-12 characters, at least one number and one letter

Re-Enter Password*:

PAYOR PROFILE

First Name*:

Last Name*:

Company Name:

Country*:

Street Address 1*:

Street Address 2:

City*:

State*:

Zip Code*: -

Email Address:

Phone Number*: - -

SHARED SECRET QUESTION/ANSWER

Shared Secret Question*:

Shared Secret Answer*:

Re-Enter Shared Secret Answer*:

PAYOR PROFILE

In the Payor Profile section, complete all the bold or required fields



[Privacy](#) [Customer Service](#) [Help](#) [Exit](#)

User Registration

Bold fields with * are required.

PAYOR IDENTIFICATION

Amerisure Account Number*:

User ID*:

Must be between 6 and 12 characters

Password*:

Must be 6-12 characters, at least one number and one letter

Re-Enter Password*:

PAYOR PROFILE

First Name*:

Last Name*:

Company Name:

Country*:

Street Address 1*:

Street Address 2:

City*:

State:

Zip Code*: -

Email Address:

Phone Number*: - -

Zip Code: This field requires a U.S. zip code.

SHARED SECRET QUESTION/ANSWER

Shared Secret Question*:

Shared Secret Answer*:

Re-Enter Shared Secret Answer*:

Shared Secret Question: Select a question and provide an answer up to 20 characters. This information will be used for security validation if you call Customer Service or select the forgot password link.

MAKE PAYMENT

As a registered ezPay user, the **Payment Information** section provides information about your monthly reporting payments. The user can **Manage Accounts**, view **Pending Payments**, **Recurring Payments**, **Payment History** and **Update** their Profile information.

Click the continue button to proceed.

Click the cancel button to return to the previous screen.

To make a Single Payment, click the radio button.

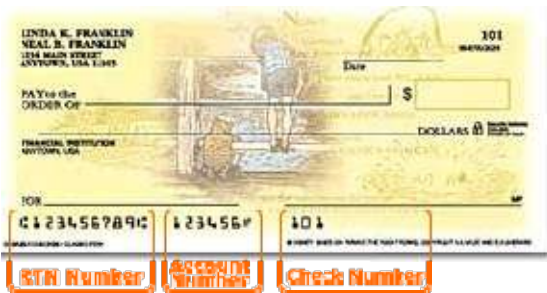
The **Payment Details** section provides details unique to your payment. Enter the required information (if necessary).

Registered users can also select from their list of bank accounts or choose to create a new bank account. If the user is not a registered user, proceed to the next screen.

The **Account Selection** screen allows a registered user to select the bank account selection to use for this payment.

Enter the information required in the editable fields and click **Continue** to proceed with this payment. Select **Cancel** to return to the previous screen.

E-CHECK INFORMATION



The Routing Transit Number is a 9-digit number that identifies your bank. For checking accounts, the RTN appears as the first group of numbers at the bottom of your check; the account number is the next set of numbers. In order to avoid any processing errors, you are required to enter the account number again.

Select Checking or Savings as the type of account to use. If you are unsure, please contact your financial institution.

Select consumer or business as the account category.

For Registered Users, other options are available.

If you would like to save this account for future use, select the checkbox.

If you choose to save this account, you must enter a unique nickname for this account, up to 20 characters, to identify this account.

CONTACT INFORMATION

- The **Contact Information** screen requires you to enter your contact information to allow us to identify you if you call customer service regarding this payment
- In the **Contact Information** section enter the requested information. Please note that all bold fields are required

Contact Information

PRIVACY CUSTOMER SERVICE HELP EXIT

Bold fields are required

CONTACT INFORMATION

First Name:

Last Name:

Company Name:

Phone Number:

E-mail Address:

Street Address 1:

Street Address 2:

City:

State: Choose one...

Zip Code: -

BECOME A REGISTERED USER

User Id: **6-12 characters**

Password: **6-12 characters, at least one letter and one number**

Re-Enter Password:

Shared Secret Question: Select Question

Shared Secret Answer:

Save Registration?

Continue Cancel

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If the **Become A Registered User** section is displayed below, you have the option to register. When you become a registered user, the payment system will store your contact information and payment accounts so that you do not have to enter this information every time you initiate a payment. If you choose to register, all fields are required.

PAYMENT VERIFICATION

- The **Payment Verification** screen allows you to verify information you entered for this payment prior to processing
- Confirm the payment information prior to processing. Once you have reviewed the information and entered all required information, click **Confirm** to process the payment. To return to the previous screen to make changes, click **Cancel**

IMPORTANT

- Guest or non-registered users will enter their Amerisure Account Number for confirmation which can be found in the insured section of the reporting screen.
- Registered users will be prompted to enter their password for confirmation.

The information displayed here is payment information you entered or verified on previous screens.

Select the **Send me an email confirmation** checkbox to receive an email confirmation of the payment.

If this is an eCheck payment, you must read the Terms and Conditions displayed on the screen and select **"I accept the Terms and Conditions"** to process this payment.

Bold fields are required

For your own protection, you are required to enter your Amerisure Account Number below before choosing Confirm.

Your Payment Detail

Payment Amount: **\$222.33**
 Scheduled Payment Date: **Apr-14-2006**
 Company Name: **Blanchard At Amerisure**

Your Account Detail

Routing Transit Number: **071000013**
 Account Number: **XXXXXXXXXXXX3123**
 Account Type: **Checking**
 Account Category: **Business**

E-mail Address: **sblanchard@amerisure.com**

Send me an email confirmation:

Amerisure Account Number:

Terms And Conditions

PLEASE READ AND APPROVE THE FOLLOWING AUTHORIZATION

By clicking "I Accept", I authorize the payee to electronically debit my bank account for the amount(s) and at the frequency and date set forth above.

If this is a single payment, this authorization is valid for this transaction only. If this is a recurring payment, this authorization is to remain in full force and effect until I notify my bank or notify the payee of its termination by canceling any pending payments and recurring payment instructions within this system, at least three banking days before my account is scheduled to be debited.

If a convenience fee is added to the transaction, I understand that the convenience fee displayed will be included in the total payment amount.

In the event that a payment is returned for insufficient funds, I authorize the payee to electronically debit my bank account for the original amount of the transaction, as well as a returned item fee, up to the maximum amount allowed by law.

PLEASE PRINT A COPY OF THIS AUTHORIZATION FOR YOUR RECORDS

I accept the Terms and Conditions:

Confirm **Cancel**

The account details of your selected payment account are

Enter your **Amerisure Account Number**, which can be found in the insured section of the reporting screen. Registered users will be prompted to enter their login password.

PAYMENT CONFIRMATION

The **Payment Confirmation** screen provides confirmation that the payment has been processed or scheduled.

For single payments, **print out or note** the **Confirmation Number** for future reference.

PRIVACY CUSTOMER SERVICE HELP EXIT

Payment Confirmation - Insurance Premium

Thank you for making your payment.

If you should have any questions please contact your Amerisure Representative at 800-636-0800.

Please allow 2-3 Business days to process the payment completely.

Any payments received after 9:00 p.m. EST, will be processed the next business day.

Please keep a record of your Confirmation Number, or print this page for your records.

Confirmation Number: **AMIMUT000001154**

Your Payment Detail

Payment Amount: **\$5,656.56**
 Scheduled Payment Date: **Apr-14-2006**
 Company Name: **Blanchard At Amerisure**

Your Account Detail

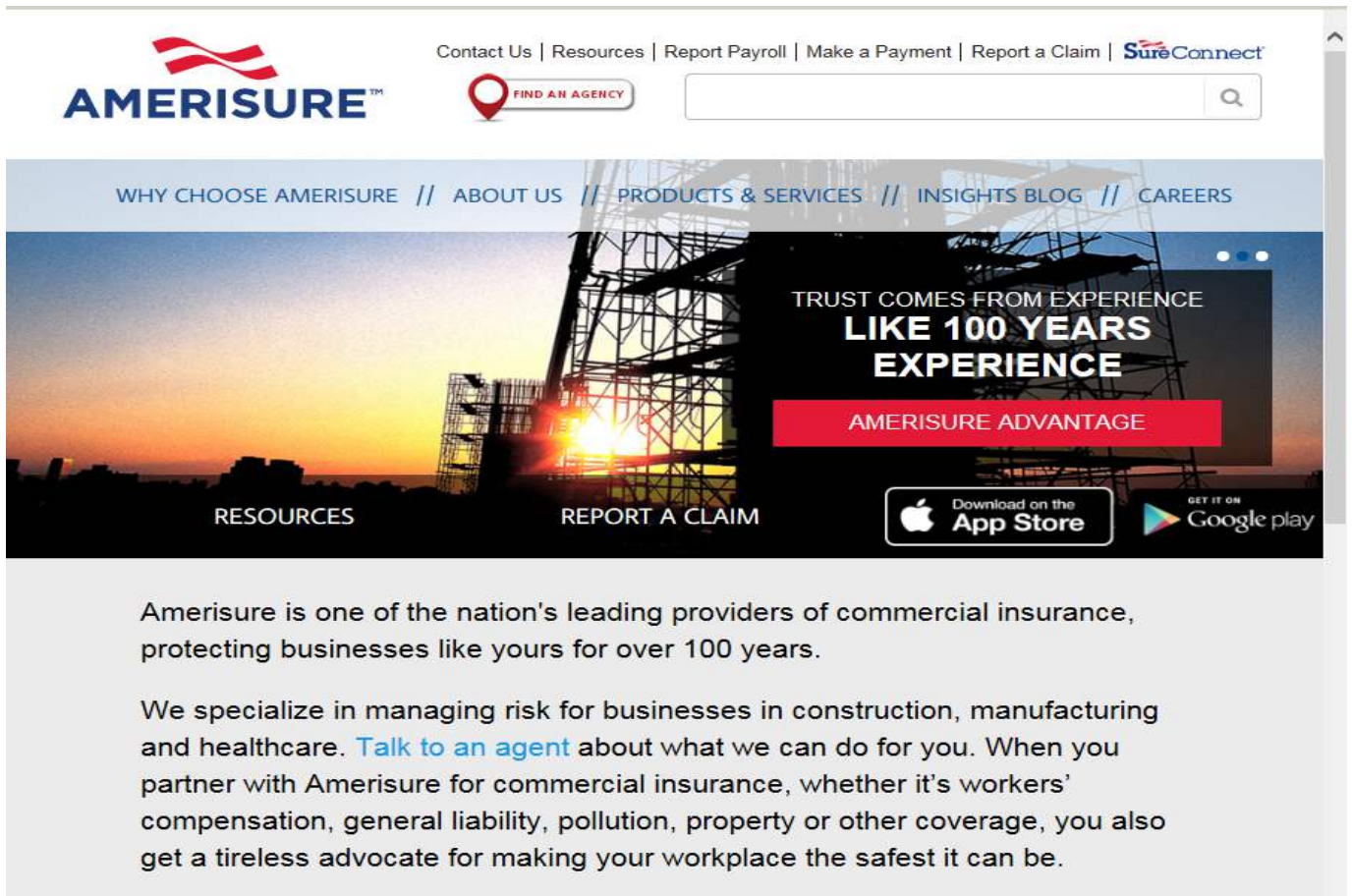
Routing Transit Number: **071000013**
 Account Number: **XXXXXXXXXXXX3123**
 Account Type: **Checking**
 Account Category: **Consumer**

Email Address: **sblanchard@amerisure.com**

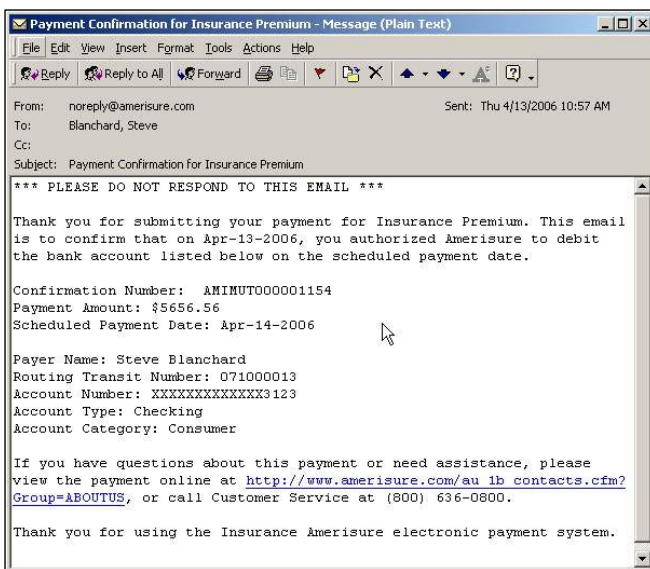
OK

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Once the confirmation is reviewed and the **OK** button clicked, you are redirected back to the Amerisure website.



If the “send an email confirmation” was selected earlier, then an email confirmation will also be sent.



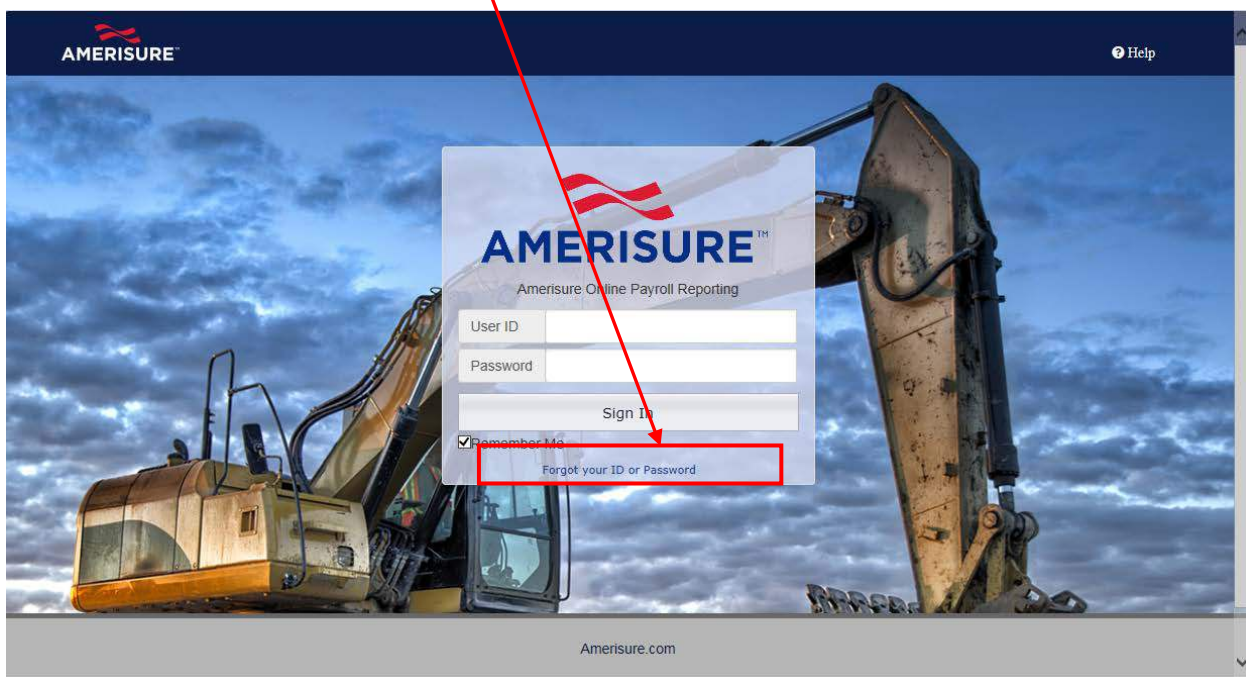
APPENDIX A

FORGOTTEN USERNAME OR PASSWORD

The following instructions are for users who have **forgotten** their **Username or Password**.

1. On the login screen, click on the **Forgot Your ID or Password** hyperlink.

Step 1



The screenshot shows the 'Request Password' form on the Amerisure website. The form is titled 'Request Password.' and contains the following elements:

- E-mail Address:** A text input field containing 'jdoe@test.com'. A red arrow labeled 'Step 2' points to this field.
- Code Verification:** A section containing a CAPTCHA image showing the code '7y63y' and a text input field also containing '7y63y'. A red arrow labeled 'Step 3' points to the text input field.
- Buttons:** Two buttons, 'Submit' and 'Cancel'. The 'Submit' button is highlighted with a red box, and a red arrow labeled 'Step 4' points to it.
- Other elements:** A 'Show another code' button with a refresh icon, and a breadcrumb trail 'Home > Request Password'.

The footer of the page displays 'Amerisure.com'.

2. Fill in your **E-mail Address** (case sensitive).
3. Type in the **Code Verification** exactly as it appears in the box.
4. Click the **Submit** button.

IMPORTANT

The email address is case sensitive, and **MUST** be entered lowercase **ONLY**.

New User ID or Password Email Notice

Users will receive a confirmation email from the Online Reporting System with **Login ID (username) and new Password** information.

IMPORTANT

The Login ID (username) and password are case sensitive, and **MUST** be manually entered as received in the email.

