

PUC 1-47

Request:

Please provide the following information regarding the Company's insurance policies: (a) a breakdown of the insurance expenses recorded in each of the years 2015 and 2016 and, for each insurance expense, please provide a detailed explanation for any differences between the expense amounts included in the year and the insurance premiums paid during that year; (b) the invoices for the insurance premiums paid in each of the years 2015 and 2016 and, if the Company only pays a portion of the insurance expense, please provide a summary of each insurance invoice showing the total expense and the Company's allocated portion of the expense; (c) if any insurance expense (including premiums) recorded in each of the years 2015 and 2016 have been allocated or assigned to the Company from any affiliate, please indicate the amount allocated or assigned and the method of assignment and provide copies of all policies for which expenses are allocated or assigned; and (d) an itemization and quantification of any insurance proceeds (e.g. reimbursements, recoveries, refunds, distribution, adjustments) received by the Company during or since the year 2015, along with a complete and detailed description of the accounting treatment given those proceeds.

Response:

- (a) Please refer to Attachment PUC 1-47-1 and Attachment PUC 1-47-2 for insurance premium expenses by line of coverage as charged or allocated to The Narragansett Electric Company, a list of insurance policies, and expense worksheets for the years 2015 and 2016, respectively.
- (b) Please refer to Attachment PUC 1-47-3, Attachment PUC 1-47-4 and Attachment PUC 1-47-5 for copies of invoices for the Company for the years 2015 and 2016. The Company's allocated costs for the years 2015 and 2016 are provided in Attachment PUC 1-47-1, Attachment PUC 1-47-2, and Attachment PUC 1-47-3.
- (c) Please refer to Attachment PUC 1-47-6 for copies of insurance policies in effect for the years 2015 and 2016. The Company's allocated costs for the years 2015 and 2016 are provided in Attachment PUC 1-47-1, Attachment PUC 1-47-2, and Attachment PUC 1-47-3.
- (d) Insurance returned premiums or credit proceeds are treated in the same manner as insurance premiums. This means that if the insurance premiums were allocated, any proceeds would be allocated using the same method. If a premium were charged directly, then, as applicable, any proceeds would be credited directly to the Company. Attachment PUC 1-47-1, Attachment PUC 1-47-2 and Attachment PUC 1-47-3 include insurance proceeds received by the Company for the years 2015 and 2016. Please see Attachment PUC 1-47-7 for credits for the Company for the years 2015 and 2016.

The Narragansett Electric Company
Injuries and Damages
Normalized Historical Insurance Data
Historic Year Ended December 31, 2015
(Insurance Payments ONLY)

LIST OF INSURANCE POLICIES

Line of Coverage	Policy Period	Policy Number	Insurer	Total Premium Paid	NGUSA Share Only	Prem Paid in CY15 for NGUSA	Alloc. Code	Alloc. % for Electric	Allocated to NECO Electric	Alloc. % for Gas	Allocated to NECO Gas	SAP Cost Allocation Code Unless Otherwise Noted (see Note A for Further Explanation)	
Property	04/01/14-04/01/15	NGUS/PD/14/031	National Grid Insurance USA Ltd. (NGI USA)	20,748,016	20,743,766	5,185,942	Manual	5.893%	305,608	0.801%	41,539	1. See Note A for explanation of premium paid vs. NGUSA share. 2. Used property replacement value and loss history for basis of cost allocation. 3. Premium amortized over 12 months.	
Property	04/01/15-04/01/16	NGUS/PD/15/031	National Grid Insurance USA Ltd. (NGI USA)	18,673,215	18,240,447	13,680,335	Manual	5.869%	802,899	0.980%	134,067	1. See Note A for explanation of premium paid vs. NGUSA share. 2. Used property replacement value and loss history for basis of cost allocation. 3. Premium amortized over 12 months.	
				Total Property					1,108,506		175,607		
Property Terrorism	04/01/14-04/01/15	NGUS/TE/14/029&30	National Grid Insurance USA Ltd. (NGI USA)	344,283	343,533	85,883	Manual	8.989%	7,720	1.738%	1,493	1. See Note A for explanation of premium paid vs. NGUSA share. 2. Used property replacement value and loss history for basis of cost allocation. 3. Premium amortized over 12 months.	
Property Terrorism	04/01/15-04/01/16	NGUS/TE/15/029&30	National Grid Insurance USA Ltd. (NGI USA)	344,534	337,722	253,291	Manual	8.536%	21,621	1.334%	3,379	1. See Note A for explanation of premium paid vs. NGUSA share. 2. Used property replacement value and loss history for basis of cost allocation. 3. Premium amortized over 12 months.	
				Total Property Terrorism					29,341		4,872		
Business Interruption	04/01/14-04/01/15	NGUS/PD/14/031	National Grid Insurance USA Ltd. (NGI USA)	1,145,792	1,145,792	286,448	Manual	4.778%	13,686	2.097%	6,007	1. Used property replacement value and loss history for basis of cost allocation. 2. Premium amortized over 12 months.	
Business Interruption	04/01/15-04/01/16	NGUS/PD/15/031	National Grid Insurance USA Ltd. (NGI USA)	1,031,213	1,022,330	766,748	Manual	5.318%	40,776	2.125%	16,293	1. See Note A for explanation of premium paid vs. NGUSA share. 2. Used property replacement value and loss history for basis of cost allocation. 3. Premium amortized over 12 months.	
				Total Business Interruption					54,462		22,300		
				Total PD, Terrorism & BI					1,192,310		202,778		
Directors & Officers	12/01/14-12/01/15	DP5428202P	AEGIS	576,175	576,175	144,044	G012	7.930%	11,423	2.500%	3,601		
Directors & Officers	12/01/14-12/01/15	292949-14DO	EIM	343,714	343,714	85,928	G012	7.930%	6,814	2.500%	2,148	1. Allocation code G012 - all company, 3-pt allocator based on net plant, net margin, net O&M. 2. Premium amortized over 12 months.	
Directors & Officers	12/01/14-12/01/15	Various	Various	990,555	990,555	247,639	G012	7.930%	19,202	2.500%	5,729		
				Total D&O for 12/01/14-12/01/15 Policy Period		1,910,444	1,910,444	1,751,240	G012	8.380%	144,605	43,781	
Directors & Officers	12/01/15-12/01/16	DP5428203P	AEGIS	286,185	286,185	23,849	G012	8.380%	1,999	2.500%	596		
Directors & Officers	12/01/15-12/01/16	293270-15DO	EIM	327,346	327,346	27,279	G012	8.380%	2,286	2.500%	682	1. Allocation code G012 - all company, 3-pt allocator based on net plant, net margin, net O&M. 2. Premium amortized over 12 months.	
Directors & Officers	12/01/15-12/01/16	Various	Various	891,500	891,500	74,292	G012	8.380%	6,226	2.500%	1,857		
				Total D&O for 12/01/15-12/01/16 Policy Period		1,505,031	1,505,031	125,419	G012	8.380%	10,510	3,135	
				Total Directors & Officers					155,115		46,916		
Public (Excess) Liability	04/01/14-04/01/15	NGUS/PL/14/003	NGI USA	4,635,090	4,635,090	1,158,772	G012	7.930%	91,891	2.500%	28,969	1. Allocation code G012 - all company, 3-pt allocator based on net plant, net margin, net O&M. 2. Premium amortized over 12 months.	
Public (Excess) Liability	04/01/15-04/01/16	NGUS/PL/15/003	NGI USA	5,119,391	5,119,391	3,839,543	G012	8.380%	321,754	2.500%	95,989	1. Allocation code G012 - all company, 3-pt allocator based on net plant, net margin, net O&M. 2. Premium amortized over 12 months.	
				Total Excess Liability					413,644		124,958		

The Narragansett Electric Company
Injuries and Damages
Normalized Historical Insurance Data
Historic Year Ended December 31, 2015
(Insurance Payments ONLY)

LIST OF INSURANCE POLICIES

Line of Coverage	Policy Period	Policy Number	Insurer	Total Premium Paid	NGUSA Share Only	Prem Paid in CY15 for NGUSA	Alloc. Code	Alloc. % for Electric	Allocated to NECO Electric	Alloc. % for Gas	Allocated to NECO Gas	SAP Cost Allocation Code Unless Otherwise Noted (see Note A for Further Explanation)
Aviation	04/01/15-04/01/16	10045246	Global Aerospace, Inc.	239,160	83,500	83,500	G020	8.380%	6,997	2.500%	2,088	1. Allocation code G020 - all company, 3-pt allocator based on net plant, net margin, net O&M 2. Premium paid/expensed same month
									6,997		2,088	
Business Travel Accident	01/01/15-01/01/16	GTP9132752-A	National Union Fire Insurance Company of Pittsburgh (AIG)	67,099	67,099	67,099	N139	4.090%	2,744	4.180%	2,805	1. Allocation code N139 - all company, 3-pt allocator based on net plant, net margin, net O&M 2. Premium paid/expensed same months.
									2,744		2,805	
									2,744		2,805	
Cargo Marine Transit	02/28/15-02/28/16	N05698625	Indemnity Insurance North America (an Ace USA Co.)	12,617	12,617	12,617	G175	23.450%	2,959	6.400%	807	1. Allocation code G175 - all company, 3-pt allocator based on net plant, net margin, net O&M 2. Premium paid/expensed same months.
									2,959		807	
									2,959		807	
Fidelity Bond-Crime	11/30/14-11/30/15	01-881-41-03	National Union Fire Insurance Company of Pittsburgh (AIG)	85,359	85,359	21,340	N139	4.300%	918	4.290%	915	1. Allocation code N139 - all company, 3-pt allocator based on net plant, net margin, net O&M
	11/30/14-11/30/15	XSC-554-40-90-12	Great American Insurance Co.	29,790	29,790	7,448	N139	4.300%	320	4.290%	319	2. Premium amortized over 12 months.
						19,860	N139	4.090%	812	4.180%	830	
									4,378		4,444	
									4,378		4,444	
Fidelity Bond-Crime	11/30/15-11/30/16	02-582-92-71	National Union Fire Insurance Company of Pittsburgh (AIG)	85,359	85,359	7,113	N139	4.090%	291	4.180%	297	1. Allocation code N139 - all company, 3-pt allocator based on net plant, net margin, net O&M
	11/30/15-11/30/16	XSC-554-40-90-13	Great American Insurance Co.	29,790	29,790	2,483	N139	4.090%	102	4.180%	104	2. Premium amortized over 12 months.
									392		401	
									4,770		4,845	
Excess Liability	04/01/14-04/01/15	XL5088703P	AEGIS	7,150,000	7,150,000	1,787,500	G012	7.930%	141,749	2.500%	44,688	1. Allocation code G012 - all company, 3-pt allocator based on net plant, net margin, net O&M.
	04/01/14-04/01/15	252711-14GL	EIM	733,200	733,200	183,300	G012	7.930%	14,536	2.500%	4,583	2. Premium amortized over 12 months.
									156,284		49,270	
									156,284		49,270	
Excess Liability	04/01/15-04/01/16	XL5088704P	AEGIS	7,357,649	7,357,649	5,518,237	G012	8.380%	462,428	2.500%	137,956	1. Allocation code G012 - all company, 3-pt allocator based on net plant, net margin, net O&M.
	04/01/15-04/01/16	253052-15GL	EIM	738,937	738,937	554,203	G012	8.380%	46,442	2.500%	13,855	2. Premium amortized over 12 months.
									508,870		151,811	
									508,870		151,811	
									665,155		201,081	
Employment Practices	11/30/14-11/30/15	01-910-72-31	National Union Fire Insurance Company of Pittsburgh (AIG)	216,875	216,875	54,219	N139	4.300%	2,331	4.290%	2,326	1. Allocation code N139 - all company, 3-pt allocator based on net plant, net margin, net O&M. 2. Premium amortized over 12 months.
						144,583	N139	4.090%	5,913	4.180%	6,044	
									8,245		8,370	
									8,245		8,370	
Employment Practices	11/30/15-11/30/16	02-582-90-57	National Union Fire Insurance Company of Pittsburgh (AIG)	240,077	240,077	20,006	N139	4.090%	818	4.180%	836	1. Allocation code N139 - all company, 3-pt allocator based on net plant, net margin, net O&M. 2. Premium amortized over 12 months.
									9,063		9,206	
									9,063		9,206	
Fiduciary Liability	11/30/14-11/30/15	01-881-10-53	National Union Fire Insurance Company of Pittsburgh (AIG)	135,695	135,695	33,924	N139	4.300%	1,459	4.290%	1,455	1. Allocation code N139 - all company, 3-pt allocator based on net plant, net margin, net O&M.
	11/30/14-11/30/15	FX5040714P	AEGIS	275,000	275,000	68,750	N139	4.300%	2,956	4.290%	2,949	2. Premium amortized over 12 months.
						183,333	N139	4.090%	7,498	4.180%	7,663	

The Narragansett Electric Company
Injuries and Damages
Normalized Historical Insurance Data
Historic Year Ended December 31, 2015
(Insurance Payments ONLY)

LIST OF INSURANCE POLICIES

Line of Coverage	Policy Period	Policy Number	Insurer	Total Premium Paid	NGUSA Share Only	Prem Paid in CY15 for NGUSA	Alloc. Code	Alloc. % for Electric	Allocated to NECO Electric	Alloc. % for Gas	Allocated to NECO Gas	SAP Cost Allocation Code Unless Otherwise Noted (see Note A for Further Explanation)
	11/30/14-11/30/15	272948-14FL	EIM	229,319	229,319	57,330	N139	4.300%	2,465	4.290%	2,459	
	11/30/14-11/30/15	6800-2140	Chubb (Federal Insurance co)	74,312	74,312	18,578	N139	4.300%	6,253	4.180%	6,390	
						49,541	N139	4.090%	799	4.290%	797	
						49,541	N139	4.090%	2,026	4.180%	2,071	
				714,326	714,326	654,799			27,156		27,567	
Fiduciary Liability	11/30/15-11/30/16	02-582-92-02	National Union Fire Insurance Company of Pittsburgh (AIG)	135,695	135,695	11,308	N139	4.090%	462	4.180%	473	1. Allocation code N139 - all company, 3-pt allocator based on net plant, net margin, net O&M.
	11/30/15-11/30/16	FX5040715P	AEGIS	261,000	261,000	21,750	N139	4.090%	890	4.180%	909	2. Premium amortized over 12 months.
	11/30/15-11/30/16	273269-15FL	EIM	217,853	217,853	18,154	N139	4.090%	743	4.180%	759	
	11/30/15-11/30/16	6800-2140	Chubb (Federal Insurance co)	70,596	70,596	5,883	N139	4.090%	241	4.180%	246	
				685,144	685,144	57,095			2,335		2,387	
									29,491		29,954	
Excess Workers' Comp	07/01/14-07/01/15	WCU C47873149	ACE American Insurance	1,470,632	1,470,632	367,658	N139	4.300%	15,809	4.290%	15,773	1. Allocation code N139 - all company, 3-pt allocator based on net plant, net margin, net O&M.
						367,658	N139	4.090%	15,037	4.180%	15,368	2. Premium amortized over 12 months.
				1,470,632	1,470,632	735,316			30,847		31,141	
												1. Allocation code N139 - all company, 3-pt allocator based on net plant, net margin, net O&M.
Excess Workers' Comp	07/01/15-07/01/16	WCU C47871086	ACE American Insurance	1,470,592	1,470,592	735,296	N139	4.090%	30,074	4.180%	30,735	2. Premium amortized over 12 months.
									60,920		61,876	
Tax on Insurance Premiums-Payment made in January 2015			IRS			120	G316	70.190%	84	29.810%	36	1. Tax paid/expensed same months. 2. Allocation code for FY15 was used.
Tax on Insurance Premiums-Payment made in February 2015			NYS			8,648	G316	70.190%	6,070	29.810%	2,578	1. Tax paid/expensed same months. 2. Allocation code for FY15 was used.
Tax on Insurance Premiums-Payment made in June 2015			IRS			47,581	G316	70.680%	33,630	29.320%	13,951	1. Tax paid/expensed same months. 2. Allocation code for FY16 was used.
Tax on Insurance Premiums-Payment made in September 2015			NYS			31,713	G316	70.680%	22,415	29.320%	9,298	1. Tax paid/expensed same months. 2. Allocation code for FY16 was used.
Tax on Insurance Premiums-Payment made in December 2015			NYS			907	G316	70.680%	641	29.320%	266	1. Tax paid/expensed same months. 2. Allocation code for FY16 was used.
									62,839		26,128	
												1. Surety bond fees are charged both 100% directly or by a Service CO allocation code, whichever is applicable.
												2. Allocation code for FY16 was used.
												3. Order # and WBS # are various for surety bond fees.
												4. Bond renewal period vary; renewal date depends on when the bond was opened.
												5. Premium paid/expensed same months.
Surety Bonds	01/01/15-12/31/15	N/A	Travelers			37,271	G316	70.680%	26,343	29.320%	10,928	1. Fee is paid quarterly. 2. Allocation code for FY16 was used.
Property Inspection	01/01/15-12/31/15	N/A	ARISE/GRC			8,568	G316	70.680%	6,056	29.320%	2,512	1. Fee paid/expensed same months.
Broker Fee	01/01/15-12/31/15	N/A	Marsh/McGriff Seibels & Williams			36,772	G316	70.680%	25,990	29.320%	10,781	1. Fee paid/expensed same months.
Credits												
Liability-Other	01/01/15-12/31/15	N/A	EIM			-72,557	G316	70.680%	-51,283	29.320%	-21,274	1. Fee paid/expensed same months.
Aviation	01/01/15-12/31/15	N/A	Global Aerospace, Inc.			-1,610	G316	70.680%	-1,138	29.320%	-472	1. Fee paid/expensed same months.
Tax Refund	01/01/15-12/31/15	N/A	United States Treasury			-112,307	G316	70.680%	-79,379	29.320%	-32,929	
									-73,411		-30,453	
GRAND TOTAL									2,532,597		682,989	

The Narragansett Electric Company
Injuries and Damages
Normalized Historical Insurance Data
Historic Year Ended December 31, 2015
(Insurance Payments ONLY)

LIST OF INSURANCE POLICIES

Line of Coverage	Policy Period	Policy Number	Insurer	Total Premium Paid	NGUSA Share Only	Prem Paid in CY15 for NGUSA	Alloc. Code	Alloc. % for Electric	Allocated to NECO Electric	Alloc. % for Gas	Allocated to NECO Gas	SAP Cost Allocation Code Unless Otherwise Noted (see Note A for Further Explanation)
------------------	---------------	---------------	---------	--------------------	------------------	-----------------------------	-------------	-----------------------	----------------------------	------------------	-----------------------	--

Notes on Allocation Methodology

1. Insurance premiums are allocated using the SAP allocation code that most closely mirrors the underlying exposures that are being insured. If an appropriate SAP allocation code is not available, the insurance premiums are allocated manually.
2. For example, the Workers Compensation, Fidelity Bond (Crime), Employment Practices Liability, and Fiduciary insurance policies have a common risk exposure – the number of employees. An all-company SAP allocation code, which is based on the number of employees, is used to allocate the premiums to all companies covered under these policies.
3. The Property and Property Terrorism insurance premiums are based on the replacement value of the property insured and associated prior loss history. There is no predefined SAP allocation code that fits this risk exposure profile. Therefore, the insurance premiums are manually allocated to all companies covered under these policies based on insurable values and loss history.
4. Surety bonds, taxes, inspection fees and broker fees - allocation code G316 was used.

A. Notes on Property/Terrorism/Business Interruption Charges to NMP and LIPA

NM Properties (NMP) is charged a share of the Property & Terrorism premiums for its coverage under these policies.
LIPA is charged a share of the Property, Terrorism & Business Interruption premiums for its lease of space at several NG facilities.

Colonial Gas Company d/b/a National Grid
Injuries and Damages
Normalized Historical Insurance Data
Historic Year Ended December 31, 2016
(Insurance Payments ONLY)

LIST OF INSURANCE POLICIES

Line of Coverage	Policy Period	Policy Number	Insurer	Total Premium Paid	NGUSA Share Only	Prem Paid in CY16 for NGUSA	Alloc. Code	Alloc. % for Electric	Allocated to NECO Electric	Alloc. % for Gas	Allocated to NECO Gas	SAP Cost Allocation Code Unless Otherwise Noted (see Note A for Further Explanation)
Property	04/01/15-04/01/16	NGUS/PD/15/031	NGI USA	18,673,215	18,240,447	4,560,112	Manual	5.869%	267,633	0.980%	44,689	1. See Note A for explanation of premium paid vs. NGUSA share. 2. Used property replacement value and loss history for basis of cost allocation. 3. Premium amortized over 12 months.
Property	04/01/16-04/01/17	NGUS/PD/16/031	NGI USA	17,583,535	17,579,285	13,184,464	Manual	3.280%	432,450	1.892%	249,450	1. See Note A for explanation of premium paid vs. NGUSA share. 2. Used property replacement value and loss history for basis of cost allocation. 3. Premium amortized over 12 months.
				Total Property		700,083			294,139			
Property Terrorism	04/01/15-04/01/16	NGUS/TE/15/029&30	NGI USA	344,534	337,722	84,430	Manual	8.536%	7,207	1.334%	1,126	1. See Note A for explanation of premium paid vs. NGUSA share. 2. Used property replacement value and loss history for basis of cost allocation. 3. Premium amortized over 12 months.
Property Terrorism	04/01/16-04/01/17	NGUS/TE/16/029&30	NGI USA	322,139	321,389	241,042	Manual	5.981%	14,417	3.410%	8,220	1. See Note A for explanation of premium paid vs. NGUSA share. 2. Used property replacement value and loss history for basis of cost allocation. 3. Premium amortized over 12 months.
				Total Property Terrorism		21,624			9,346			
Business Interruption	04/01/15-04/01/16	NGUS/PD/15/031	NGI USA	1,031,213	1,022,330	255,583	Manual	5.318%	13,592	2.125%	5,431	1. See Note A for explanation of premium paid vs. NGUSA share. 2. Used property replacement value and loss history for basis of cost allocation. 3. Premium amortized over 12 months.
Business Interruption	04/01/16-04/01/17	NGUS/PD/16/031	NGI USA	984,808	984,808	738,606	Manual	8.510%	62,855	2.680%	19,795	1. Allocation code G012 - all company, 3-pt allocator based on net plant, net margin, net O&M. See Note A. 2. Premium amortized over 12 months.
				Total Business Interruption		76,447			25,226			
				Total PD, Terror, BI		798,154			328,711			
Directors & Officers	12/01/15-12/01/16	DP5428203P	AEGIS	286,185	286,185	71,546	G012	8.380%	5,996	2.500%	1,789	1. Allocation code G012 - all company, 3-pt allocator based on net plant, net margin, net O&M. 2. Premium amortized over 12 months.
Directors & Officers	12/01/15-12/01/16	293270-15DO	EIM	327,346	327,346	81,837	G012	8.380%	6,858	2.500%	2,046	
Directors & Officers	12/01/15-12/01/16	Various	Various	891,500	891,500	222,875	G012	8.380%	18,677	2.500%	5,572	
Total D&O for 12/01/15-12/01/16 Policy Period				1,505,031	1,505,031	1,379,611			116,916		36,296	
Directors & Officers	12/01/16-12/01/17	DP5428204P	AEGIS	211,698	211,698	17,642	G012	8.510%	1,501	2.680%	473	1. Allocation code G012 - all company, 3-pt allocator based on net plant, net margin, net O&M. 2. Premium amortized over 12 months.
Directors & Officers	12/01/16-12/01/17	293595-16DO	EIM	310,979	310,979	25,915	G012	8.510%	2,205	2.680%	695	
Directors & Officers	12/01/16-12/01/17	Various	Various	802,349	802,349	66,862	G012	8.510%	5,690	2.680%	1,792	
Total D&O for 12/01/16-12/01/17 Policy Period				1,325,026	1,325,026	110,419			9,397		2,959	
				Total Directors & Officers		126,312			39,256			
Public (Excess) Liability	04/01/15-04/01/16	NGUS/PL/15/03	NGI USA	5,119,391	5,119,391	1,279,848	G012	8.380%	107,251	2.500%	31,996	1. Allocation code G012 - all company, 3-pt allocator based on net plant, net margin, net O&M. 2. Premium amortized over 12 months.

Colonial Gas Company d/b/a National Grid
Injuries and Damages
Normalized Historical Insurance Data
Historic Year Ended December 31, 2016
(Insurance Payments ONLY)

LIST OF INSURANCE POLICIES

Line of Coverage	Policy Period	Policy Number	Insurer	Total Premium Paid	NGUSA Share Only	Prem Paid in CY16 for NGUSA	Alloc. Code	Alloc. % for Electric	Allocated to NECO Electric	Alloc. % for Gas	Allocated to NECO Gas	SAP Cost Allocation Code Unless Otherwise Noted (see Note A for Further Explanation)
Public (Excess) Liability	04/01/16-04/01/17	NGUS/PL/16/03	NGI USA	4,981,250	4,981,250	3,735,938	G012	8.510%	317,928	2.680%	100,123	1. Allocation code G012 - all company, 3-pt allocator based on net plant, net margin, net O&M. 2. Premium amortized over 12 months.
				Total Excess Liability					425,180		132,119	
Aviation	04/01/16-04/01/17	10045246	Global Aerospace, Inc.	221,414	77,272	77,272	G020	8.510%	6,576	2.680%	2,071	1. Allocation code G020 - all company, 3-pt allocator based on net plant, net margin, net O&M 2. Premium paid/expensed same month.
				Total Aviation					6,576		2,071	
Business Travel Accident	01/01/16-01/01/17	GTP9132752-A	AIG	67,099	67,099	67,099	N139	3.970%	2,664	4.380%	2,939	1. Allocation code N139 - all company, 3-pt allocator based on net plant, net margin, net O&M 2. Premium paid/expensed same months.
				Total Business Travel					2,664		2,939	
Cargo Marine Transit	02/28/16-04/30/17	N05698625	Chubb	9,400	9,400	9,400	G175	8.200%	771	3.320%	312	1. Allocation code G175 - all company, 3-pt allocator based on net plant, net margin, net O&M 2. Premium paid/expensed same months.
				Total Cargo Marine Transit					771		312	
Fidelity Bond-Crime	11/30/15-11/30/16	02-582-92-71	National Union Fire	85,359	85,359	21,340	N139	4.090%	873	4.180%	892	1. Allocation code N139 - all company, 3-pt allocator based on net plant, net margin, net O&M. 2. Premium amortized over 12 months.
	11/30/15-11/30/16	XSC-554-40-90-1300	Great American Insurance C	29,790	29,790	56,906	N139	3.970%	2,259	4.380%	2,492	
						7,448	N139	4.090%	305	4.180%	311	
				Total Fidelity Bond-Crime for 11/30/15-11/30/16 Policy Period		105,553			4,225		4,566	
Fidelity Bond-Crime	11/30/16-11/30/17	28405318	National Union Fire	68,237	68,237	5,686	N139	3.970%	226	4.380%	249	1. Allocation code N139 - all company, 3-pt allocator based on net plant, net margin, net O&M. 2. Premium amortized over 12 months.
	11/30/16-11/30/17	BCCR4500245520	Berkley	17,969	17,969	1,497	N139	3.970%	59	4.380%	66	
				Total Fidelity Bond-Crime for 11/30/16-11/30/17 Policy Period		7,184			285		315	
				Total Fidelity Crime					4,510		4,880	
Excess Liability	04/01/15-04/01/16	XL5088704P	AEGIS	7,357,649	7,357,649	1,839,412	G012	8.380%	154,143	2.500%	45,985	1. Allocation code G012 - all company, 3-pt allocator based on net plant, net margin, net O&M. 2. Premium amortized over 12 months.
	04/01/15-04/01/16	253052-15GL	EIM	738,937	738,937	184,734	G012	8.380%	15,481	2.500%	4,618	
				Total Excess Liability for 04/01/15-04/01/16 Policy Period		2,024,147			169,623		50,604	
Excess Liability	04/01/16-04/01/17	XL5088705P	AEGIS	7,357,649	7,357,649	5,518,237	G012	8.510%	469,602	2.680%	147,889	1. Allocation code G012 - all company, 3-pt allocator based on net plant, net margin, net O&M. 2. Premium amortized over 12 months.
	04/01/16-04/01/17	253357-16GL	EIM	738,937	738,937	554,203	G012	8.510%	47,163	2.680%	14,853	
				Total Excess Liability for 04/01/16-04/01/17 Policy Period		6,072,440			516,765		162,741	
				Total Excess Liability					686,388		213,345	
Employment Practices	11/30/15-11/30/16	02-582-90-57	National Union Fire	240,077	240,077	60,019	N139	4.090%	2,455	4.180%	2,509	1. Allocation code N139 - all company, 3-pt allocator based on net plant, net margin, net O&M. 2. Premium amortized over 12 months.
						160,051	N139	3.970%	6,354	4.380%	7,010	
				Total Employment Practices for 11/30/15-11/30/16 Policy Period		220,071			8,809		9,519	
Employment Practices	11/30/16-11/30/17	02-817-52-42	Insurance Company of Pittsburgh (AIG)	196,000	196,000	16,333	N139	4.090%	668	4.180%	683	1. Allocation code N139 - all company, 3-pt allocator based on net plant, net margin, net O&M. 2. Premium amortized over 12 months.
				Total Employee Practices					9,477		10,202	
Fiduciary Liability	11/30/15-11/30/16	02-582-92-02	National Union Fire	135,695	135,695	33,924	N139	4.090%	1,387	4.180%	1,418	1. Allocation code N139 - all company, 3-pt allocator based on net plant, net margin, net O&M. 2. Premium amortized over 12 months.
			Insurance Company of			90,463	N139	3.970%	3,591	4.380%	3,962	
	11/30/15-11/30/16	FX5040715P	AEGIS	261,000	261,000	65,250	N139	4.090%	2,669	4.180%	2,727	
						174,000	N139	3.970%	6,908	4.380%	7,621	
	11/30/15-11/30/16	273269-15FL	EIM	217,853	217,853	54,463	N139	4.090%	2,228	4.180%	2,277	1. Allocation code N139 - all company, 3-pt allocator based on net plant, net margin, net O&M. 2. Premium amortized over 12 months.
						145,235	N139	3.970%	5,766	4.380%	6,361	

Colonial Gas Company d/b/a National Grid
Injuries and Damages
Normalized Historical Insurance Data
Historic Year Ended December 31, 2016
(Insurance Payments ONLY)

LIST OF INSURANCE POLICIES

Line of Coverage	Policy Period	Policy Number	Insurer	Total Premium Paid	NGUSA Share Only	Prem Paid in CY16 for NGUSA	Alloc. Code	Alloc. % for Electric	Allocated to NECO Electric	Alloc. % for Gas	Allocated to NECO Gas	SAP Cost Allocation Code Unless Otherwise Noted (see Note A for Further Explanation)
	11/30/15-11/30/16	6800-2140	Chubb (Federal Insurance c	70,596	70,596	17,649	N139	4.090%	722	4.180%	738	
						47,064	N139	3.970%	1,868	4.380%	2,061	
				685,144	685,144	580,985			25,139		27,166	
Fiduciary Liability	11/30/16-11/30/17	02-817-52-44	National Union Fire	74,261	74,261	6,188	N139	3.970%	246	4.380%	271	
	11/30/16-11/30/17	FX5040715P	AEGIS	176,426	170,000	14,167	N139	3.970%	562	4.380%	621	1. Allocation code N139 - all company, 3-pt allocator based on net plant, net margin, net O&M.
	11/30/16-11/30/17	27359216FL	EIM	147,368	142,000	11,833	N139	3.970%	470	4.380%	518	2. Premium amortized over 12 months.
	11/30/16-11/30/17	6800-2140	Chubb (Federal Insurance c	46,000	46,000	3,833	N139	3.970%	152	4.380%	168	
				444,055	432,261	36,022			1,430		1,578	
									26,569		28,744	
Excess Workers' Comp	07/01/15-07/01/16	WCU C47871086	ACE American Insurance	1,470,592	1,470,592	367,648	N139	4.090%	15,037	4.180%	15,368	1. Allocation code N139 - all company, 3-pt allocator based on net plant, net margin, net O&M.
						367,648	N139	3.970%	14,596	4.380%	16,103	2. Premium amortized over 12 months.
				1,470,592	1,470,592	735,296			29,632		31,471	
Excess Workers' Comp	07/01/16-07/01/17	EW1-62N-004536-556 (NY), 566 (NH & RI), 576 (MA)	Liberty Mutual Insurance Cr	1,208,778	1,208,778	604,389	N139	3.970%	23,994	4.380%	26,472	1. Allocation code N139 - all company, 3-pt allocator based on net plant, net margin, net O&M.
											26,472	2. Premium amortized over 12 months.
									53,627		57,943	
Tax on Insurance Premiums-Payment made in March 2016			NYS			7,647	G316	76.590%	5,857	23.410%	1,790	1. Tax paid/expensed same months. 2. Allocation code for FY16 was used.
Tax on Insurance Premiums-Payment made in July 2016			NYS			84	G316	69.320%	58	30.680%	26	1. Tax paid/expensed same months. 2. Allocation code for FY17 was used.
Tax on Insurance Premiums-Payment made in November 2016			IRS			4,251	G316	69.320%	2,947	30.680%	1,304	1. Tax paid/expensed same months. 2. Allocation code for FY17 was used.
Tax on Insurance Premiums-Payment made in December 2016			IRS			1,605	G316	69.320%	1,113	30.680%	492	1. Tax paid/expensed same months. 2. Allocation code for FY17 was used.
						13,587			9,975		3,613	
Broker Fee	01/01/16-12/31/16	N/A	Marsh			37,897	G316	69.320%	26,270	30.680%	11,627	1. Fee paid/expensed same months. 2. Allocation code for FY17 was used.
												1. Surety bond fees are charged both 100% directly or by a Service Co allocation code, whichever is applicable.
												2. Allocation code for FY17 was used.
												3. Order # and WBS # are various for surety bond fees.
												4. Bond renewal period vary; renewal date depends on when the bond was opened.
												5. Premium paid/expensed same months.
Surety Bonds	01/01/16-12/31/16	N/A	Travelers			86,628	G316	69.320%	60,051	30.680%	26,578	1. Fee is paid quarterly. 2. Allocation code for FY17 was used.
Property Inspection	01/01/16-12/31/16	N/A	ARISE/GRC			8,519	G316	69.320%	5,906	30.680%	2,614	
Credits							G316	69.320%	0	30.680%	0	
Liability-Other	01/01/16-12/31/16	N/A	EIM			-73,856	G316	69.320%	-51,197	30.680%	-22,659	1. Fee paid/expensed same months. 2. Allocation code for FY17 was used.
Aviation	01/01/16-12/31/16	N/A	Global Aerospace, Inc.			-474	G316	69.320%	-328	30.680%	-145	1. Fee paid/expensed same months. 2. Allocation code for FY17 was used.
						58,716			40,702		18,014	
GRAND TOTAL									2,190,904		842,148	

Colonial Gas Company d/b/a National Grid
Injuries and Damages
Normalized Historical Insurance Data
Historic Year Ended December 31, 2016
(Insurance Payments ONLY)

LIST OF INSURANCE POLICIES

Line of Coverage	Policy Period	Policy Number	Insurer	Total Premium Paid	NGUSA Share Only	Prem Paid in CY16 for NGUSA	Alloc. Code	Alloc. % for Electric	Allocated to NECO Electric	Alloc. % for Gas	Allocated to NECO Gas	SAP Cost Allocation Code Unless Otherwise Noted (see Note A for Further Explanation)
------------------	---------------	---------------	---------	--------------------	------------------	-----------------------------	-------------	-----------------------	----------------------------	------------------	-----------------------	--

Notes on Allocation Methodology

1. Insurance premiums are allocated using the SAP allocation code that most closely mirrors the underlying exposures that are being insured. If an appropriate SAP allocation code is not available, the insurance premiums are allocated manually.
2. For example, the Workers Compensation, Fidelity Bond (Crime), Employment Practices Liability, and Fiduciary insurance policies have a common risk exposure – the number of employees. An all-company SAP allocation code, which is based on the number of employees, is used to allocate the premiums to all companies covered under these policies.
3. The Property and Property Terrorism insurance premiums are based on the replacement value of the property insured and associated prior loss history. There is no predefined SAP allocation code that fits this risk exposure profile. Therefore, the insurance premiums are manually allocated to all companies covered under these policies based on insurable values and loss history.
4. Surety bonds, taxes, inspection fees and broker fees - allocation code G316 was used.

A. Notes on Property/Terrorism/Business Interruption Charges to NMP and LIPA

NM Properties (NMP) is charged a share of the Property & Terrorism premiums for its coverage under these policies.
LIPA is charged a share of the Property, Terrorism & Business Interruption premiums for its lease of space at several NG facilities.

The Narragansett Electric Company
d/b/a National Grid
RIPUC Docket No. 4770
Attachment PUC 1-47-3
Page 1 of 69

Attachment AG-1-61 Invoice Summary for NECO Rate Case 2017.xlsx
2014-2015 invoices

Copies of Invoices for CY2016
Policy Period: 2014-2015

Insured	Line of Coverage	Policy Period	Policy Number	Carrier	Total Premium		Invoiced By	# of Pages
					Paid			
National Grid USA	Excess Liability	04/01/14-04/01/15	XL5088703P	AEGIS	7,150,000	AEGIS		2
National Grid USA	Excess Liability	04/01/14-04/01/15	252711-14GL	EIM	733,200	EIM		2
Total Excess Liability					7,883,200			
National Grid (US) Holdings Ltd.,	Property	04/01/14-06/30/14	NG/PD/BI/14/031	National Grid Insurance USA Ltd.	5,187,004	National Grid Insurance Company		
National Grid (US) Holdings Ltd.,	Property Terrorism	04/01/14-06/30/14	NG/TE/14/029	National Grid Insurance USA Ltd.	86,071	National Grid Insurance USA Ltd.		
National Grid (US) Holdings Ltd.,	Business Interruption	04/01/14-06/30/14	NG/PD/BI/14/031	National Grid Insurance USA Ltd.	286,448	National Grid Insurance USA Ltd.		3
National Grid (US) Holdings Ltd.,	Public (Excess) Liability	04/01/14-06/30/14	NG/PL/14/003	National Grid Insurance USA Ltd.	3,382,895	National Grid Insurance USA Ltd.		
					<i>Installment #1</i>	8,942,418	National Grid Insurance USA Ltd.	
National Grid (US) Holdings Ltd.,	Property	07/01/14-07/31/14	NG/PD/BI/14/031	National Grid Insurance USA Ltd.	1,729,001	National Grid Insurance Company		
National Grid (US) Holdings Ltd.,	Property Terrorism	07/01/14-07/31/14	NG/TE/14/029	National Grid Insurance USA Ltd.	28,690	National Grid Insurance USA Ltd.		
National Grid (US) Holdings Ltd.,	Business Interruption	07/01/14-07/31/14	NG/PD/BI/14/031	National Grid Insurance USA Ltd.	95,483	National Grid Insurance USA Ltd.		2
National Grid (US) Holdings Ltd.,	Public (Excess) Liability	07/01/14-07/31/14	NG/PL/14/003	National Grid Insurance USA Ltd.	139,131	National Grid Insurance USA Ltd.		
					<i>Installment #2</i>	1,992,305	National Grid Insurance USA Ltd.	
National Grid (US) Holdings Ltd.,	Property	08/01/14-03/31/15	NG/PD/BI/14/031	National Grid Insurance USA Ltd.	13,832,011	National Grid Insurance USA Ltd.		
National Grid (US) Holdings Ltd.,	Property Terrorism	08/01/14-03/31/15	NG/TE/14/029	National Grid Insurance USA Ltd.	229,523	National Grid Insurance USA Ltd.		
National Grid (US) Holdings Ltd.,	Business Interruption	08/01/14-03/31/15	NG/PD/BI/14/031	National Grid Insurance USA Ltd.	763,861	National Grid Insurance USA Ltd.		2
National Grid (US) Holdings Ltd.,	Public (Excess) Liability	08/01/14-03/31/15	NG/PL/14/003	National Grid Insurance USA Ltd.	1,113,064	National Grid Insurance USA Ltd.		
					<i>Installment #3</i>	15,938,459		
Total Property, Public Liability, Terrorism, BI					26,873,182			
National Grid USA	Excess Workers' Comp	07/01/14-07/01/15	WCU C47873149	ACE American Insurance	1,470,632	Marsh USA Inc.		3
National Grid USA	Fiduciary Liability	11/30/14-11/30/15	01-881-10-53	National Union Fire Insurance	135,695	Marsh USA Inc.		
National Grid USA	Fiduciary Liability	11/30/14-11/30/15	6800-2140	Chubb (Federal Insurance co)	74,312	Marsh USA Inc.		
National Grid USA	Employment Practices	11/30/14-11/30/15	01-910-72-31	National Union Fire Insurance	216,875	Marsh USA Inc.		3
National Grid USA	Fidelity Bond-Crime	11/30/14-11/30/15	01-881-41-03	National Union Fire Insurance	85,359	Marsh USA Inc.		
National Grid USA	Fidelity Bond-Crime	11/30/14-11/30/15	XSC-554-40-90-12	Great American Insurance Co.	29,790	Marsh USA Inc.		
					<i>Total Invoice from Marsh USA Inc.</i>	542,031		
National Grid USA	Fiduciary Liability	11/30/14-11/30/15	FX5040714P	AEGIS	275,000	AEGIS		2
National Grid USA	Fiduciary Liability	11/30/14-11/30/15	272948-14FL	EIM	229,319	EIM		3
Total Fidelity Bond-Crime, Employment Practices, Fiduciary					1,046,350			
National Grid plc, incl. NGUSA	Directors & Officers	12/01/14-12/01/15	Various	Various	990,555	Miller Insurance Services Limited		9
National Grid plc, incl. NGUSA	Directors & Officers	12/01/14-12/01/15	DP5428202P	AEGIS	576,175	Miller Insurance Services Limited		4
National Grid plc, incl. NGUSA	Directors & Officers	12/01/14-12/01/15	292949-14DO	EIM	343,714	Miller Insurance Services Limited		
Total Directors & Officers					1,910,444			
National Grid USA	Property Inspection*	various	N/A	Global Risk Consultants Corp.	10,000	Global Risk Consultants Corp.		2
National Grid USA	Property Inspection*	various	N/A	Global Risk Consultants Corp.	10,000	Global Risk Consultants Corp.		2
National Grid USA	Property Inspection*	various	N/A	Global Risk Consultants Corp.	10,000	Global Risk Consultants Corp.		2
National Grid USA	Property Inspection*	various	N/A	Global Risk Consultants Corp.	10,000	Global Risk Consultants Corp.		2
National Grid USA	Property Inspection*	various	N/A	Arise Incorporated	11,400	Arise Incorporated		2
National Grid USA	Property Inspection*	various	N/A	Arise Incorporated	11,400	Arise Incorporated		2
National Grid USA	Property Inspection*	various	N/A	Arise Incorporated	11,400	Arise Incorporated		2
Total Property Inspection					74,200			
National Grid USA	Broker Fee*	various	N/A	Marsh USA Inc.	10,000	Marsh USA Inc.		2
National Grid USA	Broker Fee*	various	N/A	Marsh USA Inc.	80,000	Marsh USA Inc.		3
National Grid USA	Broker Fee*	various	N/A	Marsh USA Inc.	264,573	Marsh USA Inc.		3
National Grid USA	Broker Fee*	various	N/A	Marsh USA Inc.	255,796	Marsh USA Inc.		5
National Grid USA	Broker Fee*	various	N/A	Marsh USA Inc.	34,180	Marsh USA Inc.		3
Total Broker Fee					644,549			

*Note:
1. Property Inspection - invoices from Arise Incorporated and Global Risk Consultants show the entire invoice amount billed to National Grid USA. Invoices are not broken out by entity. The fees are allocated based on allocation code G-020.

1. Broker Fee - invoices from Marsh USA Inc. show the entire invoice amount billed to National Grid USA. Invoices are not broken out by entity. The fees are allocated based on allocation codes G-020, G-012 and N-139.



Marsh USA Inc.
New York NY
(212) 345-6000

Billed To: National Grid USA
One Metro Tech Center
Brooklyn, NY 11201

INVOICE

Page	1 of 2
Invoice Total	9,084.00 USD
Invoice No.	980710644892
Invoice Date	02/27/2014
Effective Date	02/28/2014
Client No.	9807187443
Installment No.	

Remittance Copy

Marsh earns and retains interest income on premium payments held by Marsh on behalf of Insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable Insurer, where permitted by law.

Detach and remit this portion with your payment

Client No.	Invoice No.	Payment Due	Invoice Total	Amount Paid
9807187443	980710644892	Immediate	9,084.00 USD	

Thank you for your prompt payment.
Please indicate Invoice 980710644892 on your remittance to:

By Wire:

By Mail: Marsh USA Inc.
P.O. Box 417724
Boston, MA 02241-7724 USA

980710644892 000090840073



Marsh USA Inc.
New York NY
(212) 345-6000

Billed To: National Grid USA
One Metro Tech Center
Brooklyn, NY 11201

INVOICE

Page	2 of 2
Invoice Total	9,084.00 USD
Invoice No.	980710644892
Invoice Date	02/27/2014
Effective Date	02/28/2014
Client No.	9807187443
Installment No.	

Original
Policy Holder: National Grid USA
Billing Effective Date: 02/28/2014

Insurer	Policy No./ Project No.	Expiration Date	Description/Type of Coverage	Item	Amount
INDEMNITY	N05696625	02/28/2015	Cargo Global Transit	PREMIUM	9,084.00
Invoice Comments: Invoice for marine policy #N05696625					
Invoice Total					9,084.00

Marsh earns and retains interest income on premium payments held by Marsh on behalf of insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable insurer, where permitted by law.

Mail To:
ASSOCIATED ELECTRIC & GAS
INSURANCE SERVICES
16872 Collection Center Drive
Chicago, IL 60693-0168



Overnight Delivery:
Bank of America Lockbox Services
Associated Electric & Gas Insurance Services
16872 Collection Center Drive
Chicago, IL 60693-0168

Wire Transfer



Insured: National Grid (US) Holdings LTD
1-3 Strand
London, EN WC2N 5EH

Invoice Number: 73862
Date of Invoice: 02/21/2014
Policy Number: XL5088703P

THIS PREMIUM MAY BE SUBJECT TO STATE AND/OR LOCAL PREMIUM TAXES OR FEES
IT IS THE INSURED'S RESPONSIBILITY TO PAY ANY APPLICABLE TAXES AND/OR FEES AND TO MAKE THOSE PAYMENTS DIRECTLY TO THE
APPROPRIATE STATE OR LOCAL AGENCY

EFFECTIVE DATES		DESCRIPTION	PREMIUM CHARGE	PREMIUM CREDIT
FROM	TO			
04/01/2014	04/01/2015	Excess Liability Insurance Policy Premium	\$ 6,775,000	
		Terrorism Premium	\$ 375,000	
AMOUNT DUE AEGIS			\$ 7,150,000	

PAYMENT DUE THE LATER OF 20 DAYS FROM EFFECTIVE DATE OR 15 DAYS FROM INVOICE DATE
AN ADDITIONAL CHARGE BASED ON A RATE OF 2% PER MONTH WILL BE MADE ON PAST DUE AMOUNTS
PLEASE MAKE CHECKS PAYABLE TO ASSOCIATED ELECTRIC AND GAS INSURANCE SERVICES, LIMITED
AND RETURN ONE COPY OF THIS INVOICE WITH PAYMENT

05686100

[PLEASE RETURN WITH PAYMENT]

 <p>3000 Bayport Drive Suite 550 Tampa, Florida 33607-8418 (813) 287-2117 - Fax: (813) 874-2523</p>	INVOICE		
	MEMBER Insured National Grid US Holdings Ltd One MetroTech Center Brooklyn, NY 11201		
	INVOICE NUMBER	ISSUE DATE	DUE DATE
	0000030181	03/14/14	04/30/14

EFFECTIVE DATE	EXPIRATION DATE	POLICY NUMBER	DESCRIPTION	AMOUNT
04/01/14	04/01/15	252711-14GL	Annual Premium due by April 30, 2014	\$ 733,200.00
				\$ 733,200.00
				TOTAL DUE

EST 04/14

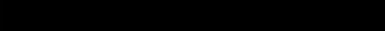
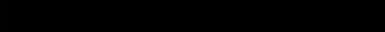
nationalgrid		PAYMENT REQUEST			
Date: <u>05/01/14</u>		Due Date: <u>05/05/14</u>			
Check One Method of Payment					
<input type="checkbox"/> CHECK		<input type="checkbox"/> ACH			
<input checked="" type="checkbox"/> WIRE					
Check Stub Message: (max. limit of 50 Characters)		Bank Name:	Bank Name:		
		Routing #:	Routing #:		
(Check One): Separate Check: Yes: <input type="checkbox"/> No: <input type="checkbox"/> Mail Check to Payee: <input type="checkbox"/> OR Mail Check to Internal Location: <input type="checkbox"/>		Account #:	Account #:		
		INSURANCE NOTES:			
		Business Interruption	\$1,145,792.00		
		Property	\$20,748,016.00		
		Public Liability/Prof Indemnity	\$4,635,091.00		
		Property Terrorism	\$344,283.00		
		NM Properties(separate inv)--GL	(pd separately)		
		Total Wire	\$26,873,182.00		
Location of Service (Required Information)		AP Use Only:			
City: <u>Waltham</u>	State: <u>MA</u> Zip Code: <u>02451</u>	Wired By:	Authorized By:		
		Value Date:	ET #:		
Vendor Information					
Payable To: NGRID PLC		Federal Tax No. or SS #:			
		Vendor #: 4000004212			
Address:		Invoice #: 2014/00081/14-1			
Reason for Payment: Ref. No. 2014/00081/14, 4/1/14-15 NGUSA Insurance Renewals, Installment 1 April 1, 2014 to June 30, 2014		Paying Company:	Amount		
		5110	\$8,942,417.75		
		NGUSA Service Company			
National Grid Accounting					
G/L Account	Profit Center	WBS	Order	Operation	Amount
C1650010	SVC8000	[for Business Interruption]			\$286,448.00
C1650010	SVC8000	[for Property]			\$5,185,941.50
C1650010	SVC8000	[for Public Liab/Prof Indemnity]			\$3,382,895.00
C1650010	SVC8000	[for Property Terrorism]			\$85,883.25
C1740030	SVC8000	[for NMProperties-Property]			\$1,062.50
C1740030	SVC8000	[for NMProperties-Terrorism]			\$187.50
Approver's Name:		Timothy Kiernan		Employee ID#	
				tkiernan 71045250	
Preparer's Name:		Patricia Needham		(781) 907-2306	
NON-PURCHASE ORDER CATEGORY					
01 Advertising	08 Estiments	17 Incentive/Marketing Program	19 Outside Services	23 Subscription	
02 Awards/Gifts	10 Filing	18 Inspection/Insurance	Inactive	24 Summons/DAMV/Traffic	
03 Financial Payment	11 Fleet Fuel*	19 Legal Professional Services	27 Payments on Behalf of LPA	25 Tax Payments/Assessments	
Inactive	22 Fleet Leasing*	20 Legal/Settlement/Claim	28 Police/Sheriff/Marshals	26 Training/Registration/Sevins	
05 Charitable/ Sponsorship	23 Freight/Postage	21 Market or Bill	29 Real Estate Rentish/Leases	27 Utility/Telephone/Water/Fed	
06 Clothing/ Safety Shoes	24 Government/Minority/Relgity	Inactive	30 Rebate Program	28 Other must be approved AP	
Inactive	25 Hotels/ Lodging*	23 Transportation Services	31 Rehand/Adopt/Reimburse		
08 Dues/Fees/Permits	26 HR/Lead/Workman Camp	24 Natural Gas/Energy Purch	32 R&D Initiative		
Please Choose One					
*Sales tax paid for these services/materials			Forward to: Accounts Payable Administrator for Processing		

nationalgrid

Third Floor, St George's Court
Upper Church Street, Douglas
Isle of Man, IM1 1EE

National Grid Insurance Company
(Isle of Man) Ltd
Tel +44 (0) 1624 692400
Fax +44 (0) 1624 673242

National Grid USA
c/o 1 - 3 The Strand
London
WC2N 5EH
For the Attention of Kirsten Merlo

Date	Please quote our Reference No. 2014/00081/14	Amount
01-Apr-2014	Premium Due as Follows. Annual premium in relation to operational insurances for National Grid USA includes former Keyspan Non Power Generation (excludes Power Generation assets for BI, Property and Terrorism). Effective from 01-APR-2014 to 31-MAR-2015 both dates inclusive.	
	A. Business Interruption	USD 1,145,792
	B. Property	USD 20,748,016
	A. Public Liability / Professional Indemnity	USD 4,635,091
	C. Terrorism	USD 344,283
	Payment must be made to National Grid Insurance Company (Isle of Man) Limited within 60 days of the instalment dates set out below. (Please make payment to our US Dollar account) Excludes FET and other applicable local taxes Gross Amount Due :	USD 26,873,182
	Please quote our reference number above on all correspondence Note : All payments are to be made by telegraphic transfer. Banking details : Lloyds Bank plc, Victory Place, Prospect Hill, Douglas, Isle of Man. IM1 1EQ Account Name:  Sort Code :  US Dollar Account No: 	
	Payable in 4 instalments as follows:	
	1 April 2014 Instalment 1	USD 8,942,419
	1 July 2014 Instalment 2	USD 5,976,921
	1 Oct 2014 Instalment 3	USD 5,976,921
	1 Jan 2015 Instalment 4	USD 5,976,921

Notes regarding NM Properties, Inc:

- A. Coverage does not apply
- B. Share of Property ins. premium - 74,250.00
- C. Share of Terrorism ins. premium - 7,750.00

National Grid is a trading name for
National Grid Insurance Company (Isle of Man) Ltd
Registered Office: Third Floor, St George's Court
Upper Church Street, Douglas, Isle of Man, IM1 1EE
Registered in the Isle of Man, No 31708C

National Grid Insurance Company (Isle of Man) Limited

NG USA - Instalment breakdown

	Invoice date	Instalment 1 01/04/14	Instalment 2 01/07/14	Instalment 3 01/10/14	Instalment 4 01/01/15	Total
Business Interruption		\$286,448	\$286,448	\$286,448	\$286,448	\$1,145,792
Property		\$5,187,004	\$5,187,004	\$5,187,004	\$5,187,004	\$20,748,016
Public Liability / Professional Indemnity		\$3,382,895	\$417,399	\$417,399	\$417,399	\$4,635,091
Terrorism		\$86,071	\$86,071	\$86,071	\$86,071	\$344,283
		\$8,942,419	\$5,976,921	\$5,976,921	\$5,976,921	\$26,873,182

nationalgrid		PAYMENT REQUEST			
Date <u>10/08/14</u>		Due Date <u>10/15/14</u>			
Check One Method of Payment					
<input type="checkbox"/> CHECK		<input type="checkbox"/> ACH			
<input checked="" type="checkbox"/> WIRE					
Check Stub Message (max. limit of 50 Characters)	Bank Name: _____	Bank Name: _____			
	Routing #: _____	Routing #: _____			
(Check One) Yes: No:	Account #: _____	Account #: _____			
Separate Check	INSURANCE NOTES:				
Mail Check to Payee	Business Interruption	\$95,482.67			
OR	Property	\$1,729,001.33			
Mail Check to Internal Location:	Public Liability	\$139,130.75			
	Property Terrorism	\$28,690.25			
	Total Wire	\$1,992,305.00			
Location of Service (Required Information)		AP Use Only:			
City: <u>Waltham</u>	State: <u>MA</u>	Zip Code: <u>02451</u>			
Wired By: _____		Authorized By: _____			
Value Date: _____		ET #: _____			
Vendor Information					
Payable To: <u>NGRID PLC</u>		Federal Tax No. or SS #: _____			
Address: _____		Vendor #: <u>4000004212</u>			
Reason for Payment: <u>Ref. "Statement as at 31 August 2014" 4/1/14-15 NGUSA Insurance Renewals, 7/1/2014 to 7/31/2014 Premiums</u>		Invoice #: <u>Statement-31-Aug-2014</u>			
		Paying Company: <u>5110</u>	Amount: <u>\$1,992,305.00</u>		
		NGUSA Service Company			
National Grid Accounting					
G/L Account	Profit Center	WBS	Order	Operation	Amount
C1650010	SVC8000	[for Business Interruption]			\$95,482.67
C1650010	SVC8000	[for Property]			\$1,728,647.16
C1650010	SVC8000	[for Public Liability]			\$139,130.75
C1650010	SVC8000	[for Property Terrorism]			\$28,627.75
C1740030	SVC8000	[for NMProperties-Property]			\$354.17
C1740030	SVC8000	[for NMProperties-Terrorism]			\$62.50
Approver's Name: <u>Timothy Kiernan</u>		Employee ID#: <u>tkiernan 71045250</u>			
Preparer's Name: <u>Patricia Needham</u>		Phone Number: <u>(781) 907-2306</u>			
NON-PURCHASE ORDER CATEGORY					
01 Advertising	09 Events	17 Incentive/Marketing Program	25 Outside Services	33 Subscription	
02 Award/Gifts	10 Flagging	18 Inspection/Insurance	Inactive	34 Summon/DNRV/Tolls	
03 Financial Payment	11 Fleet Fuel*	19 Legal/Professional Services	27 Payments on Behalf of LPA	35 Tax Payments/Assessments	
Inactive	12 Fleet Leasing*	20 Legal/Settlement/Claim	28 Police/Sheriff/Marshals	36 Training/Registration/Semin.	
05 Charitable/ Sponsorship	13 Freight/Postage	21 Man labor B/B	29 Real Estate Rentals/Leases	37 Utility/Telephone/Water/Ad	
06 Clothing/ Safety Shoes	14 Government/Municipality	Inactive	30 Rebate Program	38 Other-must be approved AP	
Inactive	15 Hotels/ Lodging *	23 Transportation Service	31 Refund/Adjust/Reimburse		
08 Dues/Fees/Permits	16 HR/Meal/Workman Camp	24 Natural Gas/Energy Purch	32 R&D Initiative		
Please Choose One					
*Sales tax paid for these services/materials			Forward to: Accounts Payable Administrator for Processing		

nationalgrid

Third Floor, St George's Court
Upper Church Street, Douglas
Isle of Man, IM1 1EE

National Grid Insurance Company
(Isle of Man) Ltd
Tel +44 (0) 1624 692400
Fax +44 (0) 1624 673242

National Grid USA
c/o 1 - 3 The Strand
London
WC2N 5EH

For the Attention of Kirsten Merlo

**STATEMENT
as at 31 August 2014**

Date	Transaction Type	Debit (USD)	Credit (USD)	Balance (USD)
01-Apr-2014	12 month Invoiced amount (2014/00081/14)	26,873,182		26,873,182
06-May-2014	Cash received (instalment 1)		(8,942,419)	(8,942,419)
01-Aug-2014	Cancellation - Credit Note (CN2014/0008/001)		(15,938,458)	(15,938,458)
	Total outstanding relates to period 1 July 2014 - 31 July 2014			1,992,305
<p>The total outstanding is now due. Please remit the balance to National Grid Insurance Company (Isle of Man) Limited to the below US Dollar account.</p> <p>Please quote our reference number above on all correspondence. Note : All payments are to be made by telegraphic transfer.</p> <p>US Correspondent Bank: Fed Wire: CHIPS ID:</p> <p><u>For further credit to:</u></p> <p>Banking details: Account Name: US Dollar Account Number: Lloyds Bank International Swift code:</p>				

BI \$ 95,482.67
Property \$ 1,729,001.33
Terrorism \$ 28,690.25
Subtotal \$ 1,853,174.25
Public Liab \$ 139,130.75
Total \$ 1,992,305.00

National Grid is a trading name for
National Grid Insurance Company (Isle of Man) Ltd
Registered Office: Third Floor, St George's Court
Upper Church Street, Douglas, Isle of Man, IM1 1EE
Registered in the Isle of Man, No 31706C

nationalgrid		PAYMENT REQUEST			
Date: <u>09/25/14</u>		Due Date: <u>09/29/14</u>			
Check One Method of Payment					
<input type="checkbox"/> CHECK		<input checked="" type="checkbox"/> ACH			
<input type="checkbox"/> WIRE					
Check Stub Message: (max. limit of 50 Characters)		Bank Name: 	Bank Name: _____		
		Routing #: _____	Routing #: _____		
(Check One): Yes: <input type="checkbox"/> No: <input type="checkbox"/>		Account #: _____	Account #: _____		
Separate Check <input type="checkbox"/>		INSURANCE NOTES: Business Interruption \$763,861.00 Property \$13,832,011.00 Public Liability \$1,113,064.00 Property Terrorism \$229,523.00 \$15,938,459.00			
Mail Check to Payee <input type="checkbox"/>					
OR Mail Check to Internal Location: <input type="checkbox"/>					
Location of Service (Required Information):		AP Use Only:			
City: <u>Waltham</u>	State: <u>MA</u> Zip Code: <u>02451</u>	Wired By: _____	Authorized By: _____		
Value Date: _____		ET #: _____			
Vendor Information					
Payable To: National Grid Insurance USA Ltd		Federal Tax No. or SS #: _____			
Address: c/o AON Insurance Managers (USA) Inc., 199 Water Street, New York, NY 10038		Vendor #: 1000033008			
Reason for Payment: Invoice No. 2014/01, 4/1/14-15 NGUSA Insurance Renewals, Premiums August 1, 2014 to March 31, 2015		Invoice #: 2014/01			
		Paying Company: 5110	Amount: \$15,938,459.00		
		NGUSA Service Company			
National Grid Accounting					
G/L Account	Profit Center	WBS	Order	Operation	Amount
C1650010	SVC8000	[for Business Interruption]			\$763,861.00
C1650010	SVC8000	[for Property]			\$13,829,177.67
C1650010	SVC8000	[for Public Lib/Prof Indemnity]			\$1,113,064.00
C1650010	SVC8000	[for Property Terrorism]			\$229,023.00
C1740030	SVC8000	[for NMPProperties-Property]			\$2,833.33
C1740030	SVC8000	[for NMPProperties-Terrorism]			\$500.00
				Employee ID#:	
Approver's Name: Timothy Kiernan		Employee ID#:		tkiernan 71045250	
				Phone Number:	
Preparer's Name: Patricia Needham		Phone Number:		(781) 907-2306	
NON-PURCHASE ORDER CATEGORY					
01 Advertising	09 Easements	17 Incentive/Marketing Program	23 Outable Services	31 Subscription	
02 Awards/Gifts	10 Flagging	18 Inspection/Insurance	Inactive	34 Summons/DMAV/Folio	
03 Financial Payment	11 Fleet Fuel*	19 Legal Professional Services	27 Payments on Behalf of LIPA	35 Tax Payments/Assessments	
Inactive	12 Fleet Leasing*	20 Legal/Settlement/Claims	28 Police /Sheriffs/Marshals	36 Training/Registration/Semin	
05 Charitable/ Sponsorship	13 Freight/Postage	21 Marker Bill	29 Real Estate Rentals/Leases	37 Utility/Telephone/Water/Ind	
06 Clothing/ Safety Shoes	14 Government/Municipality	Inactive	30 Rebate Program	38 Other-must be approved AP	
Inactive	15 Hotels/ Lodging*	22 Transportation Service	31 Refund/Adjust./Reimburse		
08 Dues/Fees/Permits	16 HR/Med./Workman Camp	24 Natural Gas/Energy Purch	32 R&D Initiative		
				Please Choose One	
*Sales tax paid for these services/materials			Forward to: Accounts Payable Administrator for Processing		



National Grid Insurance USA Ltd

National Grid USA
One MetroTech Center
Brooklyn, NY 11201
For the Attention of Tim Kiernan

Date	Premium Invoice No: 2014/01	Amount (USD)
08-27-2014	<p>Premium Due as Follows.</p> <p>Renewal premium for the operational insurances for National Grid USA (excluding Power Generation assets for BI, Property and Terrorism). Effective from AUG-01-2014 to MAR-31-2015 both dates inclusive.</p> <p>Business Interruption</p> <p>Property</p> <p>Public Liability</p> <p>Terrorism</p>	<p>763,861</p> <p>13,832,011</p> <p>1,113,064</p> <p>229,523</p>
	<p>Payment must be made to National Grid Insurance USA Ltd within 30 Days.</p> <p>Gross Amount Due</p>	<p>15,938,459</p>
	<p>Please quote our reference number above on all correspondence.</p> <p>Note: All payments are to be made by telegraphic transfer.</p> 	

National Grid Insurance USA Ltd
c/o Aon Insurance Managers (USA) Inc., 199 Water Street, New York, NY, 10038
t: + 1.802.652.1554 f: + 1.802.860.0440



Marsh USA Inc.
New York NY
(212) 345-6000

Billed To: Tim Kiernan
National Grid Services, Inc.
One Metrotech Plaza
Brooklyn, NY 11228

INVOICE

Page	2 of 2
Invoice Total	1,470,632.00 USD
Invoice No.	934416963476
Invoice Date	07/07/2014
Effective Date	07/01/2014
Client No.	9344100000
Installment No.	

Original
Policy Holder: National Grid Services, Inc.
Billing Effective Date: 07/01/2014

Insurer	Policy No./ Project No.	Expiration Date	Description/Type of Coverage	Item	Amount
ACE AMER INS	WCUC47873149	07/01/2015	Work Comp Coverage	PREMIUM	1,470,632.00
Invoice Total					1,470,632.00

Marsh earns and retains interest income on premium payments held by Marsh on behalf of Insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable insurer, where permitted by law



Marsh USA Inc.
New York NY
(212) 345-8000

Billed To: Tim Kiernan
National Grid Services, Inc.
One Metrotech Plaza
Brooklyn, NY 11228

INVOICE

Page	1 of 2
Invoice Total	1,470,632.00 USD
Invoice No.	934416963476
Invoice Date	07/07/2014
Effective Date	07/01/2014
Client No.	9344100000
Installment No.	

Remittance Copy

Marsh earns and retains interest income on premium payments held by Marsh on behalf of insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable insurer, where permitted by law.

----- Detach and remit this portion with your payment -----

Client No.	Invoice No.	Payment Due	Invoice Total	Amount Paid
9344100000	934416963476	Immediate	1,470,632.00 USD	

Thank you for your prompt payment.

Please indicate Invoice 934416963476 on your remittance to:

By Wire



By Mail

Marsh USA Inc.
P.O. Box 417724
Boston, MA 02241-7724 USA

934416963476 014706320018



Marsh USA Inc.
New York NY
(212) 345-6000

INVOICE

Page	2 of 2
Invoice Total	542,031.00 USD
Invoice No.	670354561520
Invoice Date	12/02/2014
Effective Date	11/30/2014
Client No.	6703500000
Installment No.	

Billed To: Barbara Schnettler
National Grid Services, Inc.
300 Erie Blvd. West
A-4
Syracuse, NY 13202

Original
Policy Holder: National Grid Services, Inc.
Billing Effective Date: 11/30/2014

Insurer	Policy No./ Project No.	Expiration Date	Description/Type of Coverage	Item	Amount
NATIONAL UN-PA	019107231	11/30/2015	Other Employ Practice Liab	PREMIUM	216,675.00
NATIONAL UN-PA	018814103	11/30/2015	Fidelity Bond - Crime	PREMIUM	85,359.00
GREAT AMERICAN	XSC554409012	11/30/2015	Fidelity Bond - Crime	PREMIUM	29,790.00
NATIONAL UN-PA	018811053	11/30/2015	Fiduciary Liability	PREMIUM	135,695.00
FEDERAL INS	68002140	11/30/2015	Fiduciary Liability	PREMIUM	74,312.00

Invoice Comments:
Please note that premium payment terms are determined by the specific insurer and detailed on the respective binder of insurance. In order to avoid possible policy cancellation for non-payment of premium, please issue payment in full upon receipt of this invoice

Invoice Total **542,031.00**

Marsh earns and retains interest income on premium payments held by Marsh on behalf of insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable insurer, where permitted by law.

If you are interested in financing your premiums please contact the Marsh Premium Finance team at 212-345-3064 or premiumfinance@marsh.com to determine eligibility.



Marsh USA Inc.
New York NY
(212) 345-6000

Billed To
Barbara Schnettler
National Grid Services, Inc.
300 Erie Blvd. West
A-4
Syracuse, NY 13202

INVOICE

Page	1 of 2
Invoice Total	542,031.00 USD
Invoice No.	670354561520
Invoice Date	12/02/2014
Effective Date	11/30/2014
Client No.	6703500000
Installment No.	

If you are not currently receiving invoices via e-mail but would like to do so, please notify your Marsh client team.

Remittance Copy

Marsh earns and retains interest income on premium payments held by Marsh on behalf of Insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable insurer, where permitted by law.

If you are interested in financing your premiums please contact the Marsh Premium Finance team at 212-345-3064 or premiumfinance@marsh.com to determine eligibility.

Detach and remit this portion with your payment

Client No.	Invoice No.	Payment Due	Invoice Total	Amount Paid
6703500000	670354561520	Immediate	542,031.00 USD	

Thank you for your prompt payment.

Please indicate Invoice Number 670354561520 on your remittance.

Additionally, for ACH or wire payments, e-mail remittance detail to: FiduciaryserviceRequest.US@marsh.com

By ACH



By Wire



By Mail: Marsh USA Inc.
P.O. Box 417724
Boston, MA 02241-7724 USA

670354561520 005420310009

Mail To:
ASSOCIATED ELECTRIC & GAS
INSURANCE SERVICES
18872 Collection Center Drive
Chicago, IL 60693-0188



Overnight Delivery
Bank of America Lockbox Services
Associated Electric & Gas Insurance Services
18872 Collection Center Drive
Chicago, IL 60693-0188



Broker: Marsh USA Inc.
1188 Avenue of the Americas
New York, NY 10036-2708

Insured: National Grid USA
40 Sylvan Rd
E2-544
Waltham, MA 02451-1120

Invoice Number: 75121
Date of Invoice: 11/24/2014
Policy Number: FX5040714P

THIS PREMIUM MAY BE SUBJECT TO STATE AND/OR LOCAL PREMIUM TAXES OR FEES
IT IS THE INSURED'S RESPONSIBILITY TO PAY ANY APPLICABLE TAXES AND/OR FEES AND TO MAKE THOSE PAYMENTS DIRECTLY TO THE
APPROPRIATE STATE OR LOCAL AGENCY

EFFECTIVE DATES		DESCRIPTION	PREMIUM CHARGE	PREMIUM CREDIT
FROM	TO			
11/30/2014	11/30/2015	Fiduciary Liab / Employee Ben Insurance Policy Premium	\$ 272,277	
		Terrorism Premium	\$ 2,723	
AMOUNT DUE AEGIS			\$ 275,000	

PAYMENT DUE THE LATER OF 20 DAYS FROM EFFECTIVE DATE OR 15 DAYS FROM INVOICE DATE
AN ADDITIONAL CHARGE BASED ON A RATE OF 2% PER MONTH WILL BE MADE ON PAST DUE AMOUNTS
PLEASE MAKE CHECKS PAYABLE TO ASSOCIATED ELECTRIC AND GAS INSURANCE SERVICES, LIMITED
AND RETURN ONE COPY OF THIS INVOICE WITH PAYMENT.

00107700

[PLEASE RETURN WITH PAYMENT]

		INVOICE								
		MEMBER Insured National Grid USA 40 Sylvan Road Walham, MA 02451								
3000 Bayport Drive Suite 550 Tampa, Florida 33607-8418 (813) 287-2117 - Fax: (813) 874-2523		<table border="1"> <tr> <th>INVOICE NUMBER</th> <th>ISSUE DATE</th> <th>DUE DATE</th> </tr> <tr> <td>0000030963</td> <td>11/25/14</td> <td>12/10/14</td> </tr> </table>			INVOICE NUMBER	ISSUE DATE	DUE DATE	0000030963	11/25/14	12/10/14
INVOICE NUMBER	ISSUE DATE	DUE DATE								
0000030963	11/25/14	12/10/14								
EFFECTIVE DATE	EXPIRATION DATE	POLICY NUMBER	DESCRIPTION	AMOUNT						
11/30/14	11/30/15	272948-14FL	Renewal Premium;	\$ 229,319.00						
				\$ 229,319.00						
				TOTAL DUE						

11/25/14



Dawson House
5 Jewry Street
London EC3N 2PJ
Tel: +44 (0)20 7488 2345
Fax: +44 (0)20 7702 3555
www.miller-insurance.com

National Grid plc
Grand Buildings
1-3 Strand
London
UK
WC2N 5EH

Policy Number : CNAT00114
Transaction Ref: OP 0001 /1
Account Number : 19468 CLT
Date : 19th November 2014
Contact : Gareth Jackson

PREMIUM ALLOCATION ADVICE NOTE

Insured : National Grid plc
Period : 01/12/14 to 30/11/15 B.D.I.
Type : Directors & Officers Liability
Interest : Primary Layer
Sum Insured : USD 35,000,000 in the Aggregate

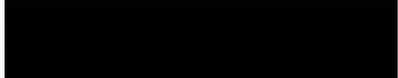
In respect of the National Grid plc - USA you have been allocated a premium of :

	USD
Premium in full	1,288,750.45
Payment is now due	
Terrorism	15,425.00
Less Continuity Credit	728,000.00

	576,175.45
	USD
Due from you	576,175.45

Please quote our Policy Number and Transaction Reference on all correspondence.

We would appreciate receiving your remittance in settlement to:

Payee Name : 
Bank Name : 
IBAN : 
Swift Code : 



Dawson House
5 Jewry Street
London EC3N 2PJ
Tel: +44 (0)20 7488 2345
Fax: +44 (0)20 7702 3555
www.miller-insurance.com

National Grid plc
Grand Buildings
1-3 Strand
London
UK
WC2N 5EH

Policy Number : CNAT00214
Transaction Ref: OP 0001 /1
Account Number : 19468 CLT
Date : 19th November 2014
Contact : Gareth Jackson

PREMIUM ALLOCATION ADVICE NOTE

Insured : National Grid plc
Period : 01/12/14 to 30/11/15 B.D.I.
Type : Directors & Officers Liability
Interest : First Excess Layer
Sum Insured : USD 35,000,000 in excess of USD 35,000,000

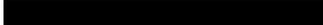
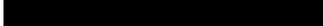
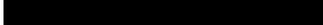
In respect of the National Grid plc - USA you have been allocated a premium of :

	USD
Premium in full	336,674.65
Payment is now due	
Terrorism	7,039.00

	343,713.65
	USD
Due from you	343,713.65

Please quote our Policy Number and Transaction Reference on all correspondence.

We would appreciate receiving your remittance in settlement to:

Payee Name : 
Bank Name : 
IBAN : 
Swift Code : 

nationalgrid		PAYMENT REQUEST	
Date: <u>12/22/14</u>		Due Date: <u>12/29/14</u>	
Check One Method of Payment			
<input type="checkbox"/> CHECK		<input type="checkbox"/> ACH	
<input checked="" type="checkbox"/> WIRE			
Check Stub Message: (max. limit of 50 Characters)		Bank Name:	Bank Name:
		Routing #:	Routing #:
(Check One): Yes: No:		Account #:	Account #:
Separate Check	<input type="checkbox"/>	Insurance Notes: \$185,250.00 2nd Excess-Chartis \$260,000.00 3rd Excess-MARP \$162,500.00 4th Excess-ACE European \$117,000.00 5th Excess-HCC Int'l \$ 68,718.00 CODA Prim- \$ 53,907.75 Side A 1st Ex-Endurance \$ 84,678.75 Side A 2nd Ex-AIG CAT Excess \$ 58,500.00 Side A 3rd Ex-	
Mail Check to Payee	<input type="checkbox"/>		
OR			
Mail Check to Internal Location:	<input type="checkbox"/>		
Location of Service (Required Information):		<i>AP Use Only:</i>	
City: <u>Brooklyn</u>	State: <u>NY</u>	Zip Code: <u>11201</u>	Value Date: _____ ET #:
		Wired By: _____	Authorized By: _____
Vendor Information			
Payable To: Miller Insurance Services Limited		Federal Tax No. or SS #:	
Address: Dawson House, 5 Jewry Street, London EC3N 2PJ		Vendor #: 1000003277	
Reason for Payment: NGUSA D&O Policy Nos. CNAT00314-CNAT03614 Transaction Ref # OP 0003, Account No. 19468 CLT 1-Dec-2014 - 30-Nov-2015 BDI		Invoice #: CNAT00314-3614	
		Paying Company: 5110	Amount: \$990,554.50
		NGUSA Service Company	
National Grid Accounting			
G/L Account	Profit Center	WBS	Order
C1651099	SVC8000		
			Operation
			Amount
			\$990,554.50
Approver's Name:		Timothy Kiernan	Employee ID#
			tkiernan 71045250
Preparer's Name:		Patricia Needham	Phone Number
			(781) 907-2306
NON-PURCHASE ORDER CATEGORY			
01 Advertising	09 Elements	17 Incentive/Marketing Program	25 Outside Services
02 Awards/Gifts	10 Flagging	18 Inspection/Insurance	Inactive
03 Financial Payment	11 Fleet Fuel*	19 Legal Professional Services	27 Payments on Behalf of LPA
Inactive	12 Fleet Leasing*	20 Legal/Settlement/Cclaim	28 Police/Sheriff/Marshals
05 Charitable/Sponsorship	13 Freight/Postage	21 Marketing Bill	29 Real Estate Rentals/Leases
06 Clothing/Safety Shoes	14 Government/Municipality	Inactive	30 Rebate Program
Inactive	15 Hotels/ Lodging*	23 Transportation Service	31 Refund/Adjust/Reimburse
08 Dues/Fees/Permits	16 HR/Mod/Workman Comp	24 Natural Gas/Energy Purch	32 R&D Initiative
		<i>Please Choose One</i>	
*Sales tax paid for these services/materials		Forward to: Accounts Payable Administrator for Processing	



Dawson House
5 Jewry Street
London EC3N 2PJ
Tel: +44 (0)20 7488 2345
Fax +44 (0)20 7702 3555
www.miller-insurance.com

National Grid plc
Grand Buildings
1-3 Strand
London
UK
WC2N 5EH

Policy Number : CNAT00314
Transaction Ref: OP 0005
Account Number : 19468 CLT
Date : 18th December 2014
Contact : Richard Smith
Direct Dial : +44 (0)20 7031 2308

PREMIUM DEBIT NOTE

Insured : National Grid plc
Period : 1 December 2014 to 30 November 2015 BDI
Type : Directors & Officers Liability
Interest : Second Excess Layer
Sum Insured : USD 30,000,000 XS USD 70,000,000

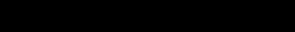
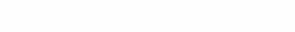
Your account has been debited as follows:

Premium in respect of USA	USD 185,250.00 -----
---------------------------	----------------------------

Second Excess Layer

Due from you	USD 185,250.00
--------------	-------------------

Please quote our Policy Number and Transaction Reference on all correspondence.
We would appreciate receiving your remittance in settlement to:

Payee Name : 
Bank Name : 
IBAN : 
Swift Code : 



Dawson House
5 Jewry Street
London EC3N 2PJ
Tel: +44 (0)20 7488 2345
Fax: +44 (0)20 7702 3555
www.miller-insurance.com

National Grid plc
Grand Buildings
1-3 Strand
London
UK
WC2N 5EH

Policy Number : CNAT01714
Transaction Ref: OP 0003
Account Number : 19468 CLT
Date : 18th December 2014
Contact : Richard Smith
Direct Dial : +44 (0)20 7031 2308

PREMIUM DEBIT NOTE

Insured : National Grid plc
Period : 1 December 2014 to 30 November 2015 BDI
Type : Directors & Officers Liability
Interest : Third Excess Layer
Sum Insured : USD 50,000,000 XS USD 100,000,000

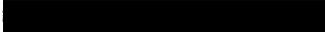
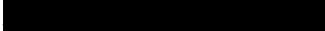
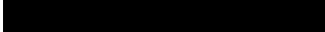
Your account has been debited as follows:

Premium in respect of USA	USD 260,000.00 -----
---------------------------	----------------------------

Third Excess Layer

Due from you	USD 260,000.00
--------------	-------------------

Please quote our Policy Number and Transaction Reference on all correspondence.
We would appreciate receiving your remittance in settlement to:

Payee Name : 
Bank Name : 
IBAN : 
Swift Code : 



Dawson House
5 Jewry Street
London EC3N 2PJ
Tel: +44 (0)20 7488 2345
Fax: +44 (0)20 7702 3555
www.miller-insurance.com

National Grid plc
Grand Buildings
1-3 Strand
London
UK
WC2N 5EH

Policy Number : CNAT01814
Transaction Ref: OP 0003
Account Number : 19468 CLT
Date : 18th December 2014
Contact : Richard Smith
Direct Dial : +44 (0)20 7031 2308

PREMIUM DEBIT NOTE

Insured : National Grid plc
Period : 1 December 2014 to 30 November 2015 BDI
Type : Directors & Officers Liability
Interest : Fourth Excess Layer
Sum Insured : USD 50,000,000 XS USD 150,000,000

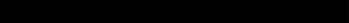
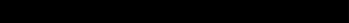
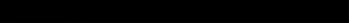
Your account has been debited as follows:

	USD
Premium in respect of USA	162,500.00

Fourth Excess Layer

	USD
Due from you	162,500.00

Please quote our Policy Number and Transaction Reference on all correspondence.
We would appreciate receiving your remittance in settlement to:

Payee Name : 
Bank Name : 
IBAN : 
Swift Code : BARCGBZZ



Dawson House
5 Jewry Street
London EC3N 2PJ
Tel: +44 (0)20 7488 2345
Fax: +44 (0)20 7702 3555
www.miller-insurance.com

National Grid plc
Grand Buildings
1-3 Strand
London
UK
WC2N 5EH

Policy Number : CNAT01914
Transaction Ref: OP 0002
Account Number : 19468 CLT
Date : 18th December 2014
Contact : Richard Smith
Direct Dial : +44 (0)20 7031 2308

PREMIUM DEBIT NOTE

Insured : National Grid plc
Period : 01/12/2014 to 30/11/2015 B.D.I.
Type : Directors & Officers Liability
Interest : Fifth Excess Layer
Sum Insured : USD 50,000,000 xs USD 200,000,000

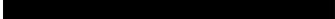
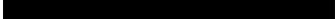
Your account has been debited as follows:

Premium in respect of USA	USD 117,000.00 -----
---------------------------	----------------------------

Fifth Excess Layer

Due from you	USD 117,000.00
--------------	-------------------

Please quote our Policy Number and Transaction Reference on all correspondence.
We would appreciate receiving your remittance in settlement to:

Payee Name : 
Bank Name : 
IBAN : 
Swift Code : 



Dawson House
5 Jewry Street
London EC3N 2PJ
Tel: +44 (0)20 7488 2345
Fax: +44 (0)20 7702 3555
www.miller-insurance.com

National Grid plc
Grand Buildings
1-3 Strand
London
UK
WC2N 5EH

Policy Number : CNAT03214
Transaction Ref: OP 0004
Account Number : 19468 CLT
Date : 18th December 2014
Contact : Gareth Jackson
Direct Dial : +44 (0)20 7031 2796

PREMIUM DEBIT NOTE

Insured : National Grid plc
Period : 01/12/2014 to 30/11/2015
Type : Directors and Officers Liability Insurance
Interest : CODA Primary
Sum Insured : USD 25,000,000 XS USD 250,000,000

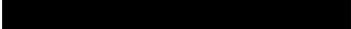
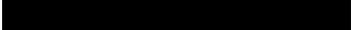
Your account has been debited as follows:

	USD
Premium in full	68,718.00
Due Immediately	-----

CODA Primary - USA Proportion

	USD
Due from you	68,718.00

Please quote our Policy Number and Transaction Reference on all correspondence.
We would appreciate receiving your remittance in settlement to:

Payee Name : 
Bank Name : 
IBAN : 
Swift Code : 



Dawson House
5 Jewry Street
London EC3N 2PJ
Tel: +44 (0)20 7488 2345
Fax: +44 (0)20 7702 3555
www.miller-insurance.com

National Grid plc
Grand Buildings
1-3 Strand
London
UK
WC2N 5EH

Policy Number : CNAT03314
Transaction Ref: OP 0003
Account Number : 19468 CLT
Date : 18th December 2014
Contact : Richard Smith
Direct Dial : +44 (0)20 7031 2308

PREMIUM DEBIT NOTE

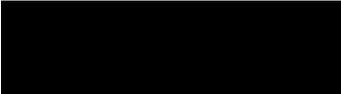
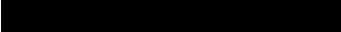
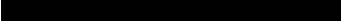
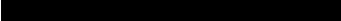
Insured : National Grid plc
Period : 01/12/2014 to 30/11/2015 B.D.I
Type : Directors and Officers Liability Insurance
Interest : Side A/DIC Excess
Sum Insured : USD 25,000,000 xs USD 275,000,000

Your account has been debited as follows:

	USD
Premium in respect of USA	53,907.75

Side A/DIC Excess	
	USD
Due from you	53,907.75

Please quote our Policy Number and Transaction Reference on all correspondence.
We would appreciate receiving your remittance in settlement to:

Payee Name : 
Bank Name : 
IBAN : 
Swift Code : 



Dawson House
5 Jewry Street
London EC3N 2PJ
Tel: +44 (0)20 7488 2345
Fax: +44 (0)20 7702 3555
www.miller-insurance.com

National Grid plc
Grand Buildings
1-3 Strand
London
UK
WC2N 5EH

Policy Number : CNAT03514
Transaction Ref: OP 0004
Account Number : 19468 CLT
Date : 18th December 2014
Contact : Richard Smith
Direct Dial : +44 (0)20 7031 2308

PREMIUM DEBIT NOTE

Insured : National Grid plc
Period : 01/12/2014 to 30/11/2015 B.D.I
Type : Directors and Officers Liability Insurance
Interest : Side A/DIC Second Excess
Sum Insured : USD 50,000,000 xs USD 300,000,000

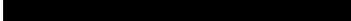
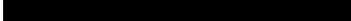
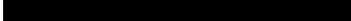
Your account has been debited as follows:

	USD
Premium in full	84,678.75

Side A/DIC Second Excess

	USD
Due from you	84,678.75

Please quote our Policy Number and Transaction Reference on all correspondence.
We would appreciate receiving your remittance in settlement to:

Payee Name : 
Bank Name : 
IBAN : 
Swift Code : 



Dawson House
5 Jewry Street
London EC3N 2PJ
Tel: +44 (0)20 7488 2345
Fax +44 (0)20 7702 3555
www.miller-insurance.com

National Grid plc
Grand Buildings
1-3 Strand
London
UK
WC2N 5EH

Policy Number : CNAT03614
Transaction Ref: OP 0003
Account Number : 19468 CLT
Date : 18th December 2014
Contact : Richard Smith
Direct Dial : +44 (0)20 7031 2308

PREMIUM DEBIT NOTE

Insured : National Grid plc
Period : 01/12/2014 to 30/11/2015 B.D.I.
Type : Directors and Officers Liability Insurance
Interest : Side A / DIC Excess / Main Board
Sum Insured : USD 50,000,000 xs USD 350,000,000

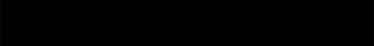
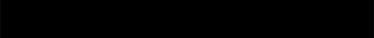
Your account has been debited as follows:

	USD
Premium in respect of USA	58,500.00

Side A / DIC Excess / Main Board

	USD
Due from you	58,500.00

Please quote our Policy Number and Transaction Reference on all correspondence.
We would appreciate receiving your remittance in settlement to:

Payee Name : 
Bank Name : 
IBAN : 
Swift Code : 



Dawson House
5 Jewry Street
London EC3N 2PJ
Tel: +44 (0)20 7488 2345
Fax: +44 (0)20 7702 3555
www.miller-insurance.com

National Grid plc
Grand Buildings
1-3 Strand
London
UK
WC2N 5EH

Policy Number : CNAT00114
Transaction Ref: OP 0001 /1
Account Number : 19468 CLT
Date : 19th November 2014
Contact : Gareth Jackson

PREMIUM ALLOCATION ADVICE NOTE

Insured : National Grid plc
Period : 01/12/14 to 30/11/15 B.D.I.
Type : Directors & Officers Liability
Interest : Primary Layer
Sum Insured : USD 35,000,000 in the Aggregate

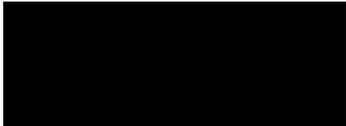
In respect of the National Grid plc - USA you have been allocated a premium of :

	USD
Premium in full	1,288,750.45
Payment is now due	
Terrorism	15,425.00
Less Continuity Credit	728,000.00

	576,175.45
	USD
Due from you	576,175.45

Please quote our Policy Number and Transaction Reference on all correspondence.

We would appreciate receiving your remittance in settlement to:

Payee Name : 
Bank Name : 
IBAN : 
Swift Code : 



Dawson House
5 Jewry Street
London EC3N 2PJ
Tel: +44 (0)20 7488 2345
Fax: +44 (0)20 7702 3555
www.miller-insurance.com

National Grid plc
Grand Buildings
1-3 Strand
London
UK
WC2N 5EH

Policy Number : CNAT00214
Transaction Ref: OP 0001 /1
Account Number : 19468 CLT
Date : 19th November 2014
Contact : Gareth Jackson

PREMIUM ALLOCATION ADVICE NOTE

Insured : National Grid plc
Period : 01/12/14 to 30/11/15 B.D.I.
Type : Directors & Officers Liability
Interest : First Excess Layer
Sum Insured : USD 35,000,000 in excess of USD 35,000,000

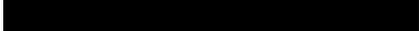
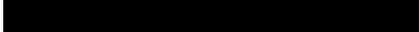
In respect of the National Grid plc - USA you have been allocated a premium of :

	USD
Premium in full	336,674.65
Payment is now due	
Terrorism	7,039.00

	343,713.65
	USD
Due from you	343,713.65

Please quote our Policy Number and Transaction Reference on all correspondence.

We would appreciate receiving your remittance in settlement to:

Payee Name : 
Bank Name : 
IBAN : 
Swift Code : 

nationalgrid		PAYMENT REQUEST			
Date: <u>07/18/14</u>		Due Date: <u>07/24/14</u>			
Check One Method of Payment					
<input type="checkbox"/> CHECK		<input checked="" type="checkbox"/> ACH			
<input type="checkbox"/> WIRE					
Check Stub Message: (max. limit of 50 Characters)		Bank Name:	Bank Name: _____		
		Routing #: _____	Routing #: _____		
(Check One): Yes: <input type="checkbox"/> No: <input type="checkbox"/>		Account #: _____	Account #: _____		
Separate Check <input type="checkbox"/>		<i>Reference Information for Beneficiary</i>			
Mail Check to Payee <input type="checkbox"/>					
OR Mail Check to Internal Location: <input type="checkbox"/>					
Location of Service (Required Information):		<i>AP Use Only:</i>			
City: <u>Brooklyn</u>	State: <u>NY</u> Zip Code: <u>11201</u>	Wired By: _____	Authorized By: _____		
		Value Date: _____	ET #: _____		
Vendor Information					
Payable To: <u>Global Risk Consultants Corp.</u>		Federal Tax No. or SS #: _____			
Address: <u>100 Walnut Avenue, Suite 501, Clark, NJ 07066</u>		Vendor #: <u>4000010759</u>			
Reason for Payment: <u>Invoice #840815 dated 06/02/14, Engineering Services Property Inspections, Installment 1 of 4 (Apr-Jun, 4/1/14-15)</u>		Invoice #: <u>840815</u>			
		Paying Company: <u>5110</u>	Amount: <u>\$10,000.00</u>		
		<u>NGUSA Service Co</u>			
National Grid Accounting					
G/L Account	Profit Center	WBS	Order	Operation	Amount
<u>C6355100</u>		<u>X008918.AGB846</u>	<u>XG020009171</u>		<u>\$10,000.00</u>
Please Print		Employee ID#			
Approver's Name: <u>Timothy Kiernan</u>		<u>tkiernan 71045250</u>			
Please Print		Phone Number			
Preparer's Name: <u>Patricia Needham</u>		<u>(781) 907-2306</u>			
NON-PURCHASE ORDER CATEGORY					
01 Advertising	09 Events	17 Incentive/Marketing Program	25 Outside Services	33 Subscription	
02 Awards/Gifts	10 Filing	18 Inspection/Insurance	Inactive	34 Surrender/DMV/Tolls	
03 Financial Payment	11 Fleet Fuel*	19 Legal Professional Services	27 Payments on Behalf of LIPA	35 Tax Payments/Assessments	
Inactive	12 Fleet Leasing*	20 Legal/Settlement/Claim	28 Police/Sheriffs/Marshals	36 Training/Registration/Semin	
05 Charitable/ Sponsorship	13 Freight/Postage	23 Marketing Bill	29 Real Estate Rents/Liases	37 Util/Buy/Telephone/Water/Ad	
06 Clothing/ Safety Shoes	14 Government/Municipality	Inactive	30 Rebate Program	38 Other-must be approved AP	
Inactive	15 Hotels/ Lodging*	24 Transportation Service	31 Perform/Adjust/Reimburse		
08 Dues/Fees/Permits	16 HR/Meal/Workman Camp	26 Natural Gas/Energy Purch.	32 N&D Initiative		
Please Choose One					
*Sales tax paid for these services/materials			Forward to: Accounts Payable Administrator for Processing		



Global Risk Consultants Corp.
100 Walnut Avenue
Suite 501
Clark, NJ 07066-1247
(732) 827-4400
Fax (732) 827-4467

NATIONAL GRID
ATTN: DAVID SHAMBERGER
ONE METROTECH CENTER
BROOKLYN, NY 11201

06/02/14
INVOICE NUMBER: 840815

PLEASE IDENTIFY CUSTOMER
AND INVOICE NUMBER ON CHECK

CUSTOMER CODE: NATIOGR56

	TOTAL
1ST OF 4 INSTALLMENTS FOR ENGINEERING CONSULTING SERVICES	\$ 10,000.00

CONTRACT PERIOD 4/1/14 - 3/31/15

=====

A M O U N T T O P A Y	U S D	\$	10,000.00
-----------------------	-------	----	-----------

=====



INVOICES PAYABLE UPON RECEIPT

GL 06/02/14

nationalgrid		PAYMENT REQUEST			
Date: <u>07/18/14</u>		Due Date: <u>07/24/14</u>			
Check One Method of Payment					
<input type="checkbox"/> CHECK		<input checked="" type="checkbox"/> ACH			
<input type="checkbox"/> WIRE					
Check Stub Message: (max. limit of 50 Characters)		Bank Name: XXXXXXXXXX	Bank Name: _____		
		Routing #: _____	Routing #: _____		
		Account #: _____	Account #: _____		
(Check One): Yes: <input type="checkbox"/> No: <input type="checkbox"/>		<i>Reference Information for Beneficiary</i>			
Separate Check <input type="checkbox"/>					
Mail Check to Payee <input type="checkbox"/>					
OR Mail Check to Internal Location: <input type="checkbox"/>					
Location of Service (Required Information):		<i>AP Use Only:</i>			
City: <u>Brooklyn</u>	State: <u>NY</u>	Zip Code: <u>11201</u>	Wired By: _____		
		Value Date: _____	Authorized By: _____		
		ET #:			
<i>Vendor Information</i>					
Payable To: <u>Global Risk Consultants Corp.</u>		Federal Tax No. or SS #: _____			
		Vendor #: <u>4000010759</u>			
Address: <u>100 Walnut Avenue, Suite 501, Clark, NJ 07066</u>		Invoice #: <u>840931</u>			
Reason for Payment: <u>Invoice #840931 dated 07/01/14, Engineering Services Property Inspections, Installment 2 of 4 (Jul-Sep, 4/1/14-15)</u>		Paying Company: <u>5110 NGUSA Service Co</u>	Amount: <u>\$10,000.00</u>		
National Grid Accounting					
G/L Account	Profit Center	WBS	Order	Operation	Amount
<u>C6355100</u>		<u>X008918.AGB846</u>	<u>XG020009171</u>		<u>\$10,000.00</u>
Please Print		Employee ID#			
Approver's Name:	<u>Timothy Kiernan</u>	<u>tkiernan 71045250</u>			
Please Print		Phone Number			
Preparer's Name:	<u>Patricia Needham</u>	<u>(781) 907-2306</u>			
NON-PURCHASE ORDER CATEGORY					
01 Advertising	09 Elements	17 Incentive/Marketing Program	25 Outside Services	33 Subscription	
02 Awards/Gifts	10 Flagging	38 Inspection/Insurance	Inactive	34 Surveys/DNV/Tolls	
03 Financial Payment	11 Fleet Fuel*	19 Legal Professional Services	27 Payments on Behalf of LPA	35 Tax Payments/Assessments	
Inactive	12 Fleet Leasing*	20 Legal/Settlement/Claim	28 Police/Sheriff/Marshals	36 Training/Registration/Semin	
05 Charities/ Sponsorship	13 Freight/Postage	21 Meter/Bill	29 Real Estate Rentals/Leases	37 Utility/Telephone/Water/Ad	
06 Clothing/ Safety Shoes	14 Government/Municipality	Inactive	30 Rebate Program	38 Other-must be approved AP	
Inactive	15 Hotels/ Lodging*	22 Transportation Service	31 Refund/Adjust/Reimburse		
08 Dues/Fees/Permits	16 HR/Meal/Workman Comp	24 Natural Gas/Energy Purch	32 RRD Initiative		
				<i>Please Choose One</i>	
*Sales tax paid for these services/materials			Forward to: Accounts Payable Administrator for Processing		



Global Risk Consultants Corp.
100 Walnut Avenue
Suite 501
Clark, NJ 07066-1247
(732) 827-4400
Fax (732) 827-4467

NATIONAL GRID
ATTN: DAVID SHAMBERGER
ONE METROTECH CENTER
BROOKLYN, NY 11201

07/01/14
INVOICE NUMBER: 840931

PLEASE IDENTIFY CUSTOMER
AND INVOICE NUMBER ON CHECK

CUSTOMER CODE: NATIOGR56

	TOTAL
2ND OF 4 INSTALLMENTS FOR ENGINEERING CONSULTING SERVICES	\$ 10,000.00

CONTRACT PERIOD 4/1/14 - 3/31/15

=====

A M O U N T T O P A Y	U S D	\$ 10,000.00
-----------------------	-------	--------------

=====



INVOICES PAYABLE UPON RECEIPT 07/01/14



Global Risk Consultants Corp.
100 Walnut Avenue
Suite 501
Clark, NJ 07066-1247
(732) 827-4400
Fax (732) 827-4467

NATIONAL GRID
ATTN: DAVID SHAMBERGER
ONE METROTECH CENTER
BROOKLYN, NY 11201

10/01/14
INVOICE NUMBER: 841345

PLEASE IDENTIFY CUSTOMER
AND INVOICE NUMBER ON CHECK

CUSTOMER CODE: NATIOGR56

	TOTAL
3RD OF 4 INSTALLMENTS FOR ENGINEERING CONSULTING SERVICES	\$ 10,000.00

CONTRACT PERIOD 4/1/14 - 3/31/15

===== A M O U N T T O P A Y U S D \$ 10,000.00 =====



INVOICES PAYABLE UPON RECEIPT

GL 10/01/14



Global Risk Consultants Corp.
100 Walnut Avenue
Suite 501
Clark, NJ 07066-1247
(732) 827-4400
Fax (732) 827-4467

NATIONAL GRID
ATTN: TIMOTHY KEIRNAN
ONE METROTECH CENTER
BROOKLYN, NY 11201

01/06/15
INVOICE NUMBER: 850140

PLEASE IDENTIFY CUSTOMER
AND INVOICE NUMBER ON CHECK

CUSTOMER CODE: NATIOGR56

	TOTAL
4TH OF 4 INSTALLMENTS FOR ENGINEERING CONSULTING SERVICES	\$ 10,000.00

CONTRACT PERIOD 4/1/14 - 3/31/15

===== A M O U N T T O P A Y U S D \$ 10,000.00 =====



INVOICES PAYABLE UPON RECEIPT

GL 01/06/15

ARISE INCORPORATED

7000 South Edgerton Road
Suite 100
Brecksville, OH 44141-3172
Phone: (440) 746-8880

Tax ID # 34-1756475

Beginning 6/1/13 only send payments to
address at left or electronically to bank
account at bottom of page. Any other
payment information is no longer valid.

INVOICE

BILL TO:

National Grid USA
Mr. David Shamberger
One MetroTech Center
Brooklyn, NY 11201

INVOICE DATE: 7/7/2014

INVOICE NUMBER: 14-0683

FILE NO: 2656

CONTRACT NO: 2656-03

CUSTOMER NO: 214952

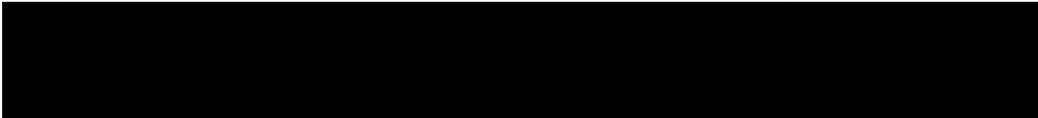
ACCOUNT NAME: NATIONAL GRID USA

FOR: JURISDICTIONAL BOILER/PRESSURE VESSEL INSPECTIONS

EFFECTIVE DATE: 4/1/14 - 4/1/15 (SECOND QUARTER - JULY, AUGUST, SEPTEMBER)

PLEASE PAY THIS AMOUNT: \$11,400.00
U.S. DOLLARS

Thank you for your patronage, and we look forward to serving you in the future.



nationalgrid		PAYMENT REQUEST			
Date: <u>10/30/14</u>		Due Date: <u>11/06/14</u>			
Check One Method of Payment					
<input type="checkbox"/> CHECK		<input checked="" type="checkbox"/> WIRE			
Check Stub Message: (max. limit of 50 Characters)		Bank Name: _____			
Bank Name: _____		Bank Name: _____			
Routing #: _____		Routing #: _____			
Account #: _____		Account #: _____			
(Check One): Yes: No: <input type="checkbox"/> Separate Check <input type="checkbox"/> Mail Check to Payee OR <input type="checkbox"/> Mail Check to Internal Location:		Reference Information for Beneficiary			
Location of Service (Required Information):		AP Use Only:			
City: <u>Brooklyn</u> State: <u>NY</u> Zip Code: <u>11201</u>		Wired By: _____ Authorized By: _____			
		Value Date: _____ ET #: _____			
Vendor Information					
Payable To: <u>ARISE Incorporated</u>		Federal Tax No. or SS #: _____			
Address: <u>7000 South Edgerton Road, Suite 100, Brecksville, OH 44141-3172</u>		Vendor #: <u>1000007721</u>			
Invoice #: <u>14-1016</u>		Paying Company: _____			
Reason for Payment: <u>Invoice #14-1016, Boiler and Pressure Vessel Inspections, Q3 Oct-Nov-Dec (4/1/14-15)</u>		Amount: <u>\$11,400.00</u>			
		5110 NGUSA Service Co			
National Grid Accounting					
G/L Account	Profit Center	WBS	Order	Operation	Amount
<u>C6355100</u>		<u>X008918.AG8846</u>	<u>XG020009171</u>		<u>\$11,400.00</u>
Approver's Name: <u>Timothy Kiernan</u>		Employee ID#: <u>tkiernan 71045250</u>			
Preparer's Name: <u>Patricia Needham</u>		Phone Number: <u>(781) 907-2306</u>			
NON-PURCHASE ORDER CATEGORY					
01 Advertising	09 Easements	17 Incentive/Marketing Program	25 Outside Services	33 Subscription	
02 Awards/Gifts	10 Flagging	18 Inspection/Insurance	Inactive	34 Summons/DMN/Tolls	
03 Financial Payment	11 Fleet Fuel*	19 Legal Professional Services	27 Payments on Behalf of UPA	35 Tax Payments/Assessments	
Inactive	12 Fleet Leasing*	20 Legal/Settlement/Claim	28 Police/Sheriffs/Marshals	36 Training/Registration/Semin	
05 Charitable/ Sponsorship	13 Freight/Postage	21 Marketing Bill	29 Real Estate Rentals/Leases	37 Utility/Telephone/Water/Ad	
06 Clothing/ Safety Shoes	14 Government/Municipality	Inactive	30 Rebate Program	38 Other-must be approved AP	
Inactive	15 Hotels/ Lodging*	23 Transportation Service	31 Refund/Adjust/Reimburse		
08 Dues/Fees/Permits	16 HR/Mod/Workman Comp	24 Natural Gas/Energy Purch	32 R&D Initiative	Please Choose One	
*Sales tax paid for these services/materials		Forward to: Accounts Payable Administrator for Processing			

ARISE INCORPORATED

7000 South Edgerton Road
Suite 100
Brecksville, OH 44141-3172
Phone: (440) 746-8880

Tax ID # 34-1756475

Beginning 6/1/13 only send payments to
address at left or electronically to bank
account at bottom of page. Any other
payment information is no longer valid.

INVOICE

BILL TO:

National Grid USA
Mr. David Shamberger
One MetroTech Center
Brooklyn, NY 11201

INVOICE DATE:

10/7/2014

INVOICE NUMBER:

14-1016

FILE NO:

2656

CONTRACT NO:

2656-03

CUSTOMER NO:

214952

ACCOUNT NAME:

NATIONAL GRID USA

FOR:

JURISDICTIONAL BOILER/PRESSURE VESSEL INSPECTIONS

EFFECTIVE DATE:

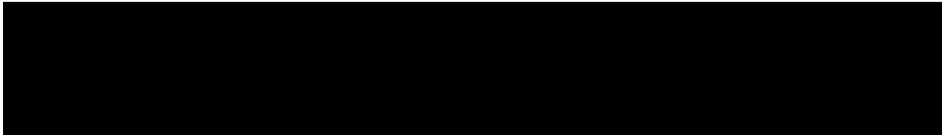
4/1/14 - 4/1/15 (THIRD QUARTER - OCTOBER, NOVEMBER, DECEMBER)

PLEASE PAY THIS AMOUNT:

\$11,400.00

U.S. DOLLARS

Thank you for your patronage, and we look forward to serving you in the future.



ARISE INCORPORATED

7000 South Edgerton Road
Suite 100
Brecksville, OH 44141-3172
Phone: (440) 746-8880

Tax ID # 34-1756475

Beginning 6/1/13 only send payments to
address at left or electronically to bank
account at bottom of page. Any other
payment information is no longer valid.

INVOICE

BILL TO:

National Grid USA
Mr. Timothy Kieman
One MetroTech Center, 15th Floor
Brooklyn, NY 11201

INVOICE DATE:

1/16/2015

INVOICE NUMBER:

15-0030

FILE NO:

2656

CONTRACT NO:

2656-03

CUSTOMER NO:

214952

ACCOUNT NAME:

NATIONAL GRID USA

FOR:

JURISDICTIONAL BOILER/PRESSURE VESSEL INSPECTIONS

EFFECTIVE DATE:

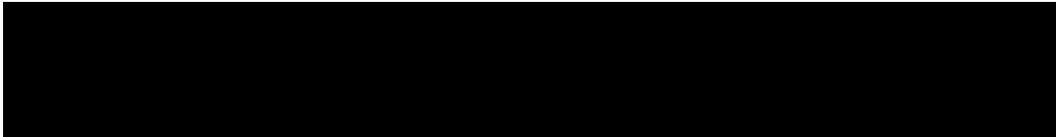
4/1/14 - 4/1/15 (FOURTH QUARTER - JANUARY THROUGH MARCH)

PLEASE PAY THIS AMOUNT:

\$11,400.00

U.S. DOLLARS

Thank you for your patronage, and we look forward to serving you in the future.



nationalgrid		PAYMENT REQUEST			
Date: <u>04/24/15</u>		Due Date: <u>04/29/15</u>			
Check One Method of Payment					
<input type="checkbox"/> CHECK		<input type="checkbox"/> WIRE			
Check Stub Message: (max. limit of 50 Characters)	Bank Name:	Bank Name:			
	Routing #:	Routing #:			
(Check One): Yes: <input type="checkbox"/> No: <input type="checkbox"/>	Account #:	Account #:			
Separate Check <input type="checkbox"/>		<i>Reference Information for Beneficiary</i>			
Mail Check to Payee <input type="checkbox"/>					
OR					
Mail Check to Internal Location: <input type="checkbox"/>					
Location of Service (Required Information):		<i>AP Use Only:</i>			
City: <u>Waltham</u>	State: <u>MA</u>	Zip Code: <u>02451</u>	Wired By: _____		
			Authorized By: _____		
		Value Date: _____	ET #: _____		
Vendor Information					
Payable To: <u>McGriff, Seibels & Williams, Inc.</u>		Federal Tax No. or SS #: _____			
		Vendor #: <u>1000013066</u>			
Address: <u>Drawer #456, P.O. Box 11407, Birmingham, AL 35246-0001</u>		Invoice #: <u>947880</u>			
Reason for Payment: <u>Invoice #947880, NGUSA Brokerage Fee 2/01/15 to 2/01/16</u>		Paying Company: <u>5110 NGUSA Service Co</u>	Amount: <u>\$10,000.00</u>		
National Grid Accounting					
G/L Account	Profit Center	WBS	Order	Operation	Amount
<u>C6355100</u>		<u>X000176.AG0041</u>	<u>XG012004027</u>		<u>\$10,000.00</u>
Approver's Name: <u>Timothy Kiernan</u>		Employee ID# <u>tkiernan 71045250</u>			
Preparer's Name: <u>Patricia Needham</u>		Phone Number <u>(781) 907-2306</u>			
NON-PURCHASE ORDER CATEGORY					
01 Advertising	09 Easements	17 Incentive/Marketing Program	25 Outside Services	33 Subscription	
02 Awards/GRs	10 Flagging	18 Inspection/Insurance	Inactive	34 Summons/DNR/Talk	
03 Financial Payment	11 Fleet Fuel*	19 Legal Professional Services	27 Payments on Behalf of LPA	35 Tax Payments/Assessments	
Inactive	12 Fleet Leasing*	20 Legal/Settlements/Claim	28 Police/Sheriffs/Marshals	36 Training/Registration/Semin	
05 Charitable/ Sponsorship	13 Freight/Postage	21 Marketer Bill	29 Real Estate Rentals/Leases	37 Utility/Telephone/Water/Ad	
06 Clothing/ Safety Shoes	14 Government/Municipality	Inactive	30 Rebate Program	38 Other-must be approved AP	
Inactive	15 Hotels/ Lodging*	23 Transportation Service	31 Refund/Adjust/Reimburse		
08 Dues/Fees/Permits	16 HR/Meal/Workman Comp	24 Natural Gas/Energy Purch	32 R&D Initiative		
				<i>Please Choose One</i>	
*Sales tax paid for these services/materials			Forward to: Accounts Payable Administrator for Processing		



McGRIFF, SEIBELS & WILLIAMS, INC.
INSURANCE BROKERS
2211 7th Avenue South/Birmingham, Alabama 35233
P.O. Box 10266/Birmingham, Alabama 35202-0266
Tel (205) 252-8871 Fax (205) 681-8203

National Grid (US) Holdings
Ltd.
40 Sylvan Road
Wiltham, MA 02451

INVOICE

INVOICE DATE	INVOICE NUMBER
4/13/15	947880
ASSURED NUMBER	AGENT
01 054152-000	Maguire, Patric
EFFECTIVE DATE	AMOUNT ENCLOSED
2/01/15	

**PLEASE NOTE
PREMIUMS ARE DUE AND PAYABLE BY
EFFECTIVE DATE**

DETACH AND RETURN WITH REMITTANCE TO: **McGRIFF, SEIBELS & WILLIAMS INC., DRAWER #458
P.O. BOX 11407, BIRMINGHAM, AL 35246-0001**

ALL OTHER CORRESPONDENCE TO: **McGRIFF, SEIBELS & WILLIAMS INC.
P.O. BOX 10266
BIRMINGHAM, AL 35202-0266**

Policy Number- **BROKERAGE FEE - TYPE 1** Company- **SERVICE FEE ONLY**
Policy Term- **2/01/15 TO 2/01/16** Coverage- **Service Fee**
Renewal Policy

SERVICE FEE 10,000.00

2015-2016 Brokerage Service Fee
Please remit payment upon receipt.

Wire Instructions to:



INVOICE DATE	INVOICE NUMBER
4/13/15	947880

McGRIFF, SEIBELS & WILLIAMS, INC.

DRAWER #458
P.O. BOX 10407
BIRMINGHAM, AL 35246-0001
(205) 252-8871

AMOUNT DUE	\$10,000.00
---------------	--------------------

THANK YOU !



McGRIFF, SEIBELS & WILLIAMS, INC.
INSURANCE BROKERS
2211 7th Avenue South / Birmingham, Alabama 35213
PO Box 10265 / Birmingham, Alabama 35202-0265
Tel (205) 252-9871 Fax (305) 581-9293

National Grid USA
One MetroTech Center
15th Floor
Brooklyn, NY 11201

INVOICE

INVOICE DATE	INVOICE NUMBER
11/13/14	931022
ASSURED NUMBER	AGENT
01 054152-701	Smith, Milton
EFFECTIVE DATE	AMOUNT ENCLOSED
12/01/14	

↑
**PLEASE NOTE
PREMIUMS ARE DUE AND PAYABLE BY
EFFECTIVE DATE**

DETACH AND RETURN WITH REMITTANCE TO: **McGRIFF, SEIBELS & WILLIAMS, INC. DRAWER #456** ALL OTHER CORRESPONDENCE TO: **McGriff, Seibels & Williams, Inc.**
P.O. BOX 11407, BIRMINGHAM, AL 35246-0001 P.O. BOX 10265
BIRMINGHAM, AL 35202-0265

Policy Number- Type 1	Company- SERVICE FEE ONLY
Policy Term- 12/01/14 TO 12/01/15	Coverage- Service Fee
Renewal Policy	
	SERVICE FEE 80,000.00
Bond Service Fee 2014/2015	

INVOICE DATE	INVOICE NUMBER
11/13/14	931022

AMOUNT DUE	\$80,000.00
-------------------	--------------------

McGRIFF, SEIBELS & WILLIAMS, INC.

DRAWER #456
P.O. BOX 11407
BIRMINGHAM, AL 35246-0001
(205) 252-9871

Thank You!

nationalgrid		PAYMENT REQUEST			
Date: <u>05/13/15</u>		Due Date: <u>05/20/15</u>			
Check One Method of Payment					
<input type="checkbox"/> CHECK		<input type="checkbox"/> WIRE			
Check Stub Message: (max. limit of 50 Characters)		Bank Name:			
Bank Name:		Bank Name:			
Routing #:		Routing #:			
Account #:		Account #:			
(Check One): Yes: No: Separate Check <input type="checkbox"/> <input type="checkbox"/> Mail Check to Payee <input type="checkbox"/> <input type="checkbox"/> OR Mail Check to Internal Location: <input type="checkbox"/>		Reference Information for Beneficiary			
Location of Service (Required Information):		AP Use Only:			
City: <u>Waltham</u> State: <u>MA</u> Zip Code: <u>02451</u>		Wired By: _____ Authorized By: _____			
Value Date: _____		ET #:			
Vendor Information					
Payable To: <u>Marsh USA Inc.</u>		Federal Tax No. or SS #:			
Address: <u>P.O. Box 417724, Boston, MA 02241-7724</u>		Vendor #: <u>4000012444</u>			
Reason for Payment: <u>Inv #934411770094, Broker Fee 4/1/15-16 and 11/30/14-15 Insurance Programs</u>		Invoice #: <u>934411770094</u>			
		Paying Company: _____ Amount			
		5110 NGUSA Service Company			
		\$264,573.00			
National Grid Accounting					
G/L Account	Profit Center	WBS	Order	Operation	Amount
C6355100	(for FinPro)	X008919.AGB850	XN139009177		\$40,977.00
C6355100	(for Ex Liab)	X000176.AG0729	XG012004024		\$103,883.00
C6355100	(Aviation/SvcCo-Prop)	X008836.AG0984	XG020008983		\$3,031.71
C6355100	(Aviation/SvcCo-Liab)	X008918.AG0728	XG020009172		\$3,913.36
C6355100	(Aviation/NMPC-Prop)	X008843.AG0984	X521T008988		\$9,214.06
C6355100	(Aviation/NMPC-Liab)	X008921.AG0728	X521T009173		\$3,732.87
C6355100	(Property Generation)	X008962.AGB836	XG324009271		\$99,821.00
				Employee ID#	
Approver's Name:		Timothy Kiernan		tkiernan 71045250	
				Phone Number	
Preparer's Name:		Patricia Needham		(781) 907-2306	
NON-PURCHASE ORDER CATEGORY					
01 Advertising	09 Esports	17 Incentive/Marketing Program	25 Outside Services	38 Subscription	
02 Awards/Gifts	10 Flagging	18 Inspection/Insurance	Inactive	39 Surety/DWV/Tolls	
03 Financial Payment	11 Fleet Fuel*	19 Legal Professional Services	27 Payments on Behalf of LPA	45 Tax Payments/Assessments	
Inactive	12 Fleet Leasing*	20 Legal/Settlement/Claims	28 Police/Merch/Market	46 Training/Registration/Semin.	
05 Charitable/ Sponsorship	13 Freight/Postage	21 Mailer Bill	29 Real Estate Rental/Lease	47 Utility/Telephone/Water/Id	
06 Clothing/ Safety Shoes	14 Government/Municipality	Inactive	30 Rebate Program	48 Other -must be approved AP	
Inactive	15 Hotels/ Lodging*	23 Transportation Service	31 Refund/Adjust/Reimburse		
08 Dues/Fees/Permits	16 HR/Mod/Workman Comp	24 Natural Gas/Energy Purch	32 R&D Initiative		
				Please Choose One	
*Sales tax paid for these services/materials			Forward to: Accounts Payable Administrator for Processing		



Marsh USA Inc.
New York NY
(212) 345-6000

Billed To: Tim Kleman
National Grid Services, Inc.
One Metrotech Plaza
Brooklyn, NY 11228

INVOICE

Page	2 of 2
Invoice Total	264,573.00 USD
Invoice No.	934411770094
Invoice Date	04/27/2015
Effective Date	04/01/2015
Client No.	9344100000
Installment No.	

Original
Policy Holder: National Grid Services, Inc.
Billing Effective Date: 04/01/2015

Insurer	Policy No. / Project No.	Expiration Date	Description/Type of Coverage	Item	Amount
	Marsh Brokerage Consulting Fee	04/01/2016	Marsh Brk Cnsl Fee	FEE	264,573.00
Invoice Comments: Annual Fee for Finpro, Aviation, Excess Liability and Property					
Invoice Total					264,573.00

Marsh earns and retains interest income on premium payments held by Marsh on behalf of Insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable insurer, where permitted by law

If you are interested in financing your premiums please contact the Marsh Premium Finance team at 212-345-3064 or premiumfinance@marsh.com to determine eligibility.



Marsh USA Inc.
New York NY
(212) 345-6000

Billed To: Tim Kiernan
National Grid Services, Inc.
One Metrotech Plaza
Brooklyn, NY 11228

INVOICE

Page	1 of 2
Invoice Total	264,573.00 USD
Invoice No.	934411770094
Invoice Date	04/27/2015
Effective Date	04/01/2015
Client No.	9344100000
Instalment No.	

If you are not currently receiving invoices via e-mail but would like to do so, please notify your Marsh client team.

Remittance Copy

Marsh earns and retains interest income on premium payments held by Marsh on behalf of insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable insurer, where permitted by law.

If you are interested in financing your premiums please contact the Marsh Premium Finance team at 212-345-3064 or premiumfinance@marsh.com to determine eligibility.

Detach and remit this portion with your payment

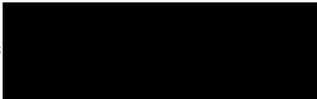
Client No.	Invoice No.	Payment Due	Invoice Total	Amount Paid
9344100000	934411770094	Immediate	264,573.00 USD	

Thank you for your prompt payment.

Please indicate Invoice Number 934411770094 on your remittance.

Additionally, for ACH or wire payments, e-mail remittance detail to: FiduciaryserviceRequest.US@marsh.com

By ACH:



By Wire:

Bank Name: Bank of America
Wire Routing Number: 026009593
Account Title: Marsh USA Inc.
Account Number: 8188190339

By Mail:

Marsh USA Inc.
P.O. Box 417724
Boston, MA 02241-7724 USA

934411770094 002645730057

nationalgrid		PAYMENT REQUEST			
Date: <u>07/10/14</u>		Due Date: <u>07/15/14</u>			
Check One Method of Payment					
<input type="checkbox"/> CHECK		<input checked="" type="checkbox"/> ACH			
<input type="checkbox"/> WIRE					
Check Stub Message: (max. limit of 50 Characters)		Bank Name: XXXXXXXXXX	Bank Name: _____		
		Routing #: XXXXXXXXXX	Routing #: _____		
		Account #: XXXXXXXXXX	Account #: _____		
(Check One): Yes: No: Separate Check <input type="checkbox"/> <input type="checkbox"/> Mail Check to Payee <input type="checkbox"/> <input type="checkbox"/> OR Mail Check to Internal Location:		<i>Reference Information for Beneficiary</i>			
Location of Service (Required Information):		<i>AP Use Only:</i>			
City: <u>Wallham</u>	State: <u>MA</u>	Zip Code: <u>02451</u>	Value Date: _____		
		Wired By: _____	Authorized By: _____		
		ET # _____			
Vendor Information					
Payable To: <u>Marsh USA Inc.</u>		Federal Tax No. or SS #: _____			
		Vendor #: <u>4000012444</u>			
Address: <u>P.O. Box 417724, Boston, MA 02241-7724</u>		Invoice #: <u>934419240927</u>			
Reason for Payment: <u>Inv #934419240927, Broker Fees - Ins Programs: 4/1/14-15 and 11/30/13-14 At-Risk; 7/1/14-15 Deposit</u>		Paying Company: <u>5110</u>	Amount: <u>\$255,796.00</u>		
		NGUSA Service Company			
National Grid Accounting					
G/L Account	Profit Center	WBS	Order	Operation	Amount
C6355100	(for FinPro)	X008919.AGB850	XN139009177		\$13,261.00
C6355100	(for Ex Liab)	X000176.AG0729	XG012004024		\$67,898.00
C6355100	(Aviation/SvcCo-Liab)	X008918.AG0728	XG020009172		\$2,029.33
C6355100	(Aviation/SvcCo-Prop)	X008838.AG0984	XG020008983		\$1,572.13
C6355100	(Aviation/NMPC-Liab)	X008921.AG0728	X521T009173		\$967.87
C6355100	(Aviation/NMPC-Prop)	X008843.AG0984	X521T008988		\$2,061.67
C6355100	(Property Generation)	X008962.AGB836	XG324009271		\$65,564.00
C6355100	(for Ex WC)	X008919.AGB851	XN139009178		\$102,442.00
			Employee ID# _____		
Approver's Name: <u>Timothy Kiernan</u>		tkiernan 71045250			
			Phone Number		
Preparer's Name: <u>Patricia Needham</u>		(781) 907-2306			
NON-PURCHASE ORDER CATEGORY					
01 Advertising	09 Easements	17 Incentive/Marketing Program	25 Outside Services	33 Subscription	
02 Awards/Grants	10 Flagging	18 Inspection/Insurance	Inactive	34 Summons/DIV/Edits	
03 Financial Payment	11 Fleet Fuel*	19 Legal Professional Services	37 Payments on Behalf of LPA	35 Tax Payments/Assessments	
Inactive	12 Fleet Leasing*	20 Legal/Settlement/Claims	38 Police/Sheriff/Marshals	36 Training/Registration/Permits	
05 Charitable/ Sponsorship	13 Freight/Postage	21 Mail-order Bill	39 Real Estate Rentals/Leases	37 Utility/Telephone/Water/ Ad	
06 Clothing/ Safety Shoes	14 Government/Municipality	Inactive	40 Rebate Program	38 Other- must be approved AP	
Inactive	15 Hauling/ Loading*	22 Transportation Service	41 Refund/Adjust/Reimburse		
08 Dues/Fees/Permits	16 HR/Meal/Workman Comp	24 Natural Gas/Energy Purch	42 ASD Initiative		
				Please Choose One	
*Sales tax paid for these services/materials			Forward to: Accounts Payable Administrator for Processing		



Marsh USA Inc.
New York NY
(212) 345-6000

Billed To
Tim Klerman
National Grid Services, Inc.
One Metrotech Plaza
Brooklyn, NY 11228

INVOICE

Page	2 of 2
Invoice Total	255,796.00 USD
Invoice No.	934419240927
Invoice Date	06/30/2014
Effective Date	04/01/2014
Client No.	9344100000
Installment No.	

Original
Policy Holder: National Grid Services, Inc.
Billing Effective Date: 04/01/2014

Insurer	Policy No./ Project No.	Expiration Date	Description/Type of Coverage	Item	Amount
Marsh Brokerage Consulting		04/01/2015	Marsh Bk Cnslt Fee	FEE	255 796 00
Invoice Total					255,796.00

Marsh earns and retains interest income on premium payments held by Marsh on behalf of insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable insurer, where permitted by law.



INVOICE

Marsh USA Inc.
New York NY
(212) 345-6000

Page	1 of 2
Invoice Total	255,796.00 USD
Invoice No.	934419240927
Invoice Date	06/30/2014
Effective Date	04/01/2014
Client No.	9344100000
Instalment No.	

Billed To: Tim Kiernan
National Grid Services, Inc.
One Metrotech Plaza
Brooklyn, NY 11228

Remittance Copy

Marsh earns and retains interest income on premium payments held by Marsh on behalf of Insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable insurer, where permitted by law

Detach and remit this portion with your payment

Client No.	Invoice No.	Payment Due	Invoice Total	Amount Paid
9344100000	934419240927	Immediate	255,796.00 USD	

Thank you for your prompt payment.

Please indicate Invoice 934419240927 on your remittance to:

By Wire



By Mail

Marsh USA Inc.
P.O. Box 417724
Boston, MA 02241-7724 USA

9344192409274 002557960056

Needham, Patricia M.

From: Kiernan, Timothy P.
Sent: Monday, June 30, 2014 9:43 AM
To: Needham, Patricia M.
Subject: FW: June Fee Billing and KPIs

Pat

Proposed billing of broker fees from Marsh. Do you need the invoicing broken out any differently than proposed by Marsh (below in yellow)?

Tim

From: Looes, Christine A [<mailto:Christine.Looes@marsh.com>]
Sent: Friday, June 27, 2014 11:20 AM
To: Kiernan, Timothy P.
Cc: Condon, Roberta
Subject: RE: June Fee Billing and KPIs

Hi Tim, just wondering if you have had a chance to take a look at and if you can give me the go ahead to bill...thoughts?

Thanks.

Chris

From: Looes, Christine A
Sent: Tuesday, June 24, 2014 3:42 PM
To: 'Kiernan, Timothy P.'
Cc: Condon, Roberta
Subject: June Fee Billing and KPIs

Hi Tim-Below represents the fee billing for the month of June and attached is the spreadsheet noting our performance. If you could provide your confirmation that you are agreeable to us billing the fee, I would appreciate it.

I am writing to confirm that the annual fee payable by National Grid USA to Marsh for services performed by Marsh for the period April 1, 2014 to April 1, 2015 relating to coverages per the below will be a total of \$301,116. The allocation by line of coverage and coverage period are as follows:

Fiduciary/Employment Practices Liability /Crime : 11/30/13-11/30/14	\$13,261
Aviation Liability: 4/1/14-4/1/15	\$6,631
Primary Casualty (Liberty Program):	\$45,320

4/1/14-4/1/15

Excess Liability: \$67,898
4/1/14-4/1/15

Property: \$65,564
4/1/14-4/1/15

Excess Workers Compensation \$102,442
7/1/2014-7/1/2015

Total: \$301,116

We will also issue you two separate fee invoice bills, one for the Primary Casualty (\$45,320) and one for all other (\$255,796).

Marsh's services will be described in a client service agreement between us.

Please confirm that the above reflects our understanding by replying with history to this email.

Thank you.

Chris

<< File: KPIs2014.xls >>

* Go green – Think before you Print! *

.....
This e-mail transmission and any attachments that accompany it may contain information that is privileged, confidential or otherwise exempt from disclosure under applicable law and is intended solely for the use of the individual(s) to whom it was intended to be addressed. If you have received this e-mail by mistake, or you are not the intended recipient, any disclosure, dissemination, distribution, copying or other use or retention of this communication or its substance is prohibited. If you have received this communication in error, please immediately reply to the author via e-mail that you received this message by mistake and also permanently delete the original and all copies of this e-mail and any attachments from your computer. Thank you.
.....



Marsh USA Inc.
New York NY
(212) 345-8000

Billed To: Tim Kiernan
National Grid Services, Inc.
One Metrotech Plaza
Brooklyn, NY 11228

INVOICE

Page	2 of 2
Invoice Total	34,148.00 USD
Invoice No.	934417208749
Invoice Date	09/30/2014
Effective Date	04/01/2014
Client No.	9344100000
Instalment No.	

Original
Policy Holder: National Grid Services, Inc.
Billing Effective Date: 07/01/2014

Insurer	Policy No./ Project No	Expiration Date	Description/Type of Coverage	Item	Amount
	Energy Consulting	04/01/2015	Energy Consulting	FEE	34,148.00
Invoice Comments: Fee for Energy Excess WC Balance for KPI eff 7/1/14					
Invoice Total					34,148.00

Marsh earns and retains interest income on premium payments held by Marsh on behalf of insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable insurer, where permitted by law.

If you are interested in financing your premiums please contact the Marsh Premium Finance team at 212-345-3054 or premiumfinance@marsh.com to determine eligibility.



Marsh USA Inc.
New York NY
(212) 345-6000

Billed To
Tim Kiernan
National Grid Services, Inc.
One Metrotech Plaza
Brooklyn, NY 11228

INVOICE

Page	1 of 2
Invoice Total	34,148.00 USD
Invoice No.	934417208749
Invoice Date	09/30/2014
Effective Date	04/01/2014
Client No.	9344100000
Installment No.	

Remittance Copy

Marsh earns and retains interest income on premium payments held by Marsh on behalf of Insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable insurer, where permitted by law.

If you are interested in financing your premiums please contact the Marsh Premium Finance team at 212-345-3064 or premiumfinance@marsh.com to determine eligibility.

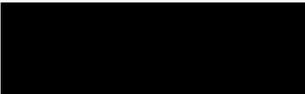
Detach and remit this portion with your payment

Client No.	Invoice No.	Payment Due	Invoice Total	Amount Paid
9344100000	934417208749	Immediate	34,148.00 USD	

Thank you for your prompt payment.

Please indicate Invoice 934417208749 on your remittance to:

By Wire:



By Mail:

Marsh USA Inc.
P.O. Box 417724
Boston, MA 02241-7724 USA

934417208749 000341480091

Invoice Summary for NECO Rate Case 2017
2015-2016 invoices

Copies of Invoices for CY2016
Policy Period: 2015-2016

Insured	Line of Coverage	Policy Period	Policy Number	Carrier	Total Premium		# of Pages
					Paid	Invoiced By	
National Grid USA	Excess Workers' Comp	07/01/15-07/01/16	WCU C47871086	ACE American Insurance	1,470,592	Marsh USA Inc.	3
National Grid USA	Fiduciary Liability	11/30/15-11/30/16	273269-15FL	EIM	217,853	EIM	3
National Grid USA	Fiduciary Liability	11/30/15-11/30/16	FX5040715P	AEGIS	261,000	AEGIS	2
National Grid USA	Fidelity Bond-Crime	11/30/15-11/30/16	02-582-92-71	National Union Fire Insurance	85,359	Marsh USA Inc.	
National Grid USA	Fidelity Bond-Crime	11/30/15-11/30/16	XSC-554-40-90-1300	Great American Insurance Co.	29,790	Marsh USA Inc.	
National Grid USA	Employment Practices	11/30/15-11/30/16	02-582-90-57	National Union Fire Insurance	240,077	Marsh USA Inc.	3
National Grid USA	Fiduciary Liability	11/30/15-11/30/16	02-582-92-02	National Union Fire Insurance	135,695	Marsh USA Inc.	
National Grid USA	Fiduciary Liability	11/30/15-11/30/16	6800-2140	Chubb (Federal Insurance co)	70,596	Marsh USA Inc.	
				Total Invoice from Marsh USA Inc.	561,517		
				Total Fidelity Bond-Crime, Employment Practices, Fiduciary	1,040,370		
National Grid plc, incl. NGUSA	Directors & Officers	12/01/15-12/01/16	Various	Various	891,500	Willis Limited	10
National Grid plc, incl. NGUSA	Directors & Officers	12/01/15-12/01/16	DP5428203P	AEGIS	286,185	AEGIS	2
National Grid plc, incl. NGUSA	Directors & Officers	12/01/15-12/01/16	293270-15DO	EIM	327,346	EIM	3
				Total Directors & Officers	1,505,031		
Niagara Mohawk Power Corp. and National Grid (US) Holdings Ltd.	Aviation	04/01/15-04/01/16	10045246	Global Aerospace, Inc.	239,160	Marsh USA Inc.	4
				National Union Fire Insurance Company of Pittsburgh (AIG)	67,099	Marsh USA Inc.	3
National Grid USA	Business Travel Accident	01/01/15-01/01/16	GTP9132752-A				
National Grid USA	Cargo Marine Transit	02/28/15-02/28/16	N05698625	Indemnity Insurance North America	12,617	Marsh USA Inc.	3
National Grid USA	Excess Liability	04/01/15-04/01/16	XL5088704P	AEGIS	7,357,649	AEGIS	2
National Grid USA	Excess Liability	04/01/15-04/01/16	253052-15GL	EIM	738,937	EIM	2
				Total Excess Liability	8,096,586		
National Grid (US) Holdings Ltd., National Grid (US) Holdings Ltd., National Grid (US) Holdings Ltd., National Grid (US) Holdings Ltd.,	Property Property Terrorism Business Interruption Public (Excess) Liability	04/01/15-04/01/16 04/01/15-04/01/16 04/01/15-04/01/16 04/01/15-04/01/16	NGUS/PD/15/031 NGUS/TE/14/029&30 NGUS/PD/15/031 Various	National Grid Insurance USA Ltd. National Grid Insurance USA Ltd. National Grid Insurance USA Ltd. National Grid Insurance USA Ltd.	18,673,215 344,534 1,031,213 5,119,391	National Grid Insurance USA Ltd. National Grid Insurance USA Ltd. National Grid Insurance USA Ltd. National Grid Insurance USA Ltd.	2
				Total Property, Public Liability, Terrorism, BI	25,168,353	National Grid Insurance USA Ltd.	
National Grid USA	Property Inspection*	various	N/A	Global Risk Consultants Corp.	10,000	Global Risk Consultants Corp.	2
National Grid USA	Property Inspection*	various	N/A	Global Risk Consultants Corp.	10,000	Global Risk Consultants Corp.	3
National Grid USA	Property Inspection*	various	N/A	Global Risk Consultants Corp.	10,000	Global Risk Consultants Corp.	2
National Grid USA	Property Inspection*	various	N/A	Global Risk Consultants Corp.	10,000	Global Risk Consultants Corp.	2
National Grid USA	Property Inspection*	various	N/A	Global Risk Consultants Corp.	10,000	Global Risk Consultants Corp.	2
National Grid USA	Property Inspection*	various	N/A	Arise Incorporated	12,475	Arise Incorporated	2
National Grid USA	Property Inspection*	various	N/A	Arise Incorporated	12,475	Arise Incorporated	2
National Grid USA	Property Inspection*	various	N/A	Arise Incorporated	12,475	Arise Incorporated	2
				Total Property Inspection	87,425		
National Grid USA	Broker Fee*	various	N/A	Marsh USA Inc.	264,573	Marsh USA Inc.	3
National Grid USA	Broker Fee*	various	N/A	Marsh USA Inc.	67,980	Marsh USA Inc.	4
National Grid USA	Broker Fee*	various	N/A	Marsh USA Inc.	34,148	Marsh USA Inc.	4
				Total Broker Fee	366,701		
National Grid USA	Surety Bonds	various	N/A	Travelers	248,577		

*Note:
1. Property Inspection - invoices from Arise Incorporated and Global Risk Consultants show the entire invoice amount billed to National Grid USA. Invoices are not broken out by entity. The fees are allocated based on allocation code G-020.

1. Broker Fee - invoices from Marsh USA Inc. show the entire invoice amount billed to National Grid USA. Invoices are not broken out by entity. The fees are allocated based on allocation codes G-020, G-012 and N-139.



Marsh USA Inc.
New York NY
(212) 345-6000

Tim Kiernan
National Grid Services, Inc.
One Metrotech Plaza
Brooklyn, NY 11228

Billed To:

INVOICE

Page	2 of 2
Invoice Total	1,470,592.00 USD
Invoice No.	934418212530
Invoice Date	07/06/2015
Effective Date	07/01/2015
Client No.	9344100000
Installment No.	

Original
Policy Holder: National Grid Services, Inc.
Billing Effective Date: 07/01/2015

Insurer	Policy No./ Project No.	Expiration Date	Description/Type of Coverage	Item	Amount
ACE AMER INS	WCUC47871086	07/01/2016	Work Comp Coverage	PREMIUM	1,470,592.00
Invoice Comments:					
Excess WC Renewal Premium eff 7/1/15					
Invoice Total					1,470,592.00

Marsh earns and retains interest income on premium payments held by Marsh on behalf of insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable insurer, where permitted by law.

If you are interested in financing your premiums please contact the Marsh Premium Finance team at premiumfinance@marsh.com to determine eligibility.

Accounts Payable 07-09-15: 11:06:16 Received



Marsh USA Inc.
New York NY
(212) 345-6000

Billed To: Tim Kiernan
National Grid Services, Inc.
One Metrotech Plaza
Brooklyn, NY 11228

INVOICE

Page	1 of 2
Invoice Total	1,470,592.00 USD
Invoice No.	934418212530
Invoice Date	07/06/2015
Effective Date	07/01/2015
Client No.	9344100000
Installment No.	

If you are not currently receiving invoices via e-mail but would like to do so, please notify your Marsh client team.

Remittance Copy

Marsh earns and retains interest income on premium payments held by Marsh on behalf of insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable insurer, where permitted by law.

If you are interested in financing your premiums please contact the Marsh Premium Finance team at premiumfinance@marsh.com to determine eligibility.

Detach and remit this portion with your payment

Client No.	Invoice No.	Payment Due	Invoice Total	Amount Paid
9344100000	934418212530	Immediate	1,470,592.00 USD	

Thank you for your prompt payment.

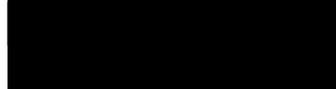
Please indicate Invoice Number 934418212530 on your remittance.

Additionally, for ACH or wire payments, e-mail remittance detail to: FiduciaryserviceRequest.US@marsh.com

By ACH:



By Wire:



By Mail:

Marsh USA Inc.
P.O. Box 417724
Boston, MA 02241-7724 USA

9344182125304 014705920075

Accounts Payable 07-09-15: 11:06:16 Received

 <p>3000 Bayport Drive Suite 550 Tampa, Florida 33607-8418 (813) 287-2117 - Fax: (813) 874-2523</p>	INVOICE		
	MEMBER Insured National Grid USA 40 Sylvan Road Waltham, MA 02451		
INVOICE NUMBER	ISSUE DATE	DUE DATE	
0000031886	11/24/15	12/10/15	

EFFECTIVE DATE	EXPIRATION DATE	POLICY NUMBER	DESCRIPTION	AMOUNT
11/30/15	11/30/16	273269-15FL	Renewal Premium	\$ 217,853.00
				\$ 217,853.00
				TOTAL DUE

JSA 112415



3000 Bayport Drive
Suite 550
Tampa, Florida 33607-8418
Phone: (813) 287-2117
Fax: (813) 874-2523

November 24, 2015

Timothy P. Kiernan
National Grid USA
One MetroTech Center, 15th Floor
Brooklyn, NY 11201

RE: National Grid USA
Fiduciary Policy Number: 273269-15FL

Dear Tim,

Enclosed, please find EIM's binding confirmation for the above member. You will also find EIM's invoice that reflects the total amount due of \$217,853.00

Payment may be made via ACH or wire transfer. Please use the following wiring instructions to transfer funds to EIM:

ABA #:
Bank:
Account #:
Ref:



Payment should be made on or before December 10, 2015

If you have any questions, please contact me.

Sincerely,


Jeanne Allen
Assistant Underwriter

Mail To:
ASSOCIATED ELECTRIC & GAS
INSURANCE SERVICES
16872 Collection Center Drive
Chicago, IL 60693-0168



Overnight Delivery:
Bank of America Lockbox Services
Associated Electric & Gas Insurance Services
16872 Collection Center Drive
Chicago, IL 60693-0168

Wire Transfer:



Broker: Marsh Inc.
1166 Avenue Of The Americas
New York, NY 10036-2708

Insured: National Grid USA
40 Sylvan Rd
E2-544
Waltham, MA 02451-1120

Invoice Number: 76634
Date of Invoice: 11/23/2015
Policy Number: FX5040715P

THIS PREMIUM MAY BE SUBJECT TO STATE AND/OR LOCAL PREMIUM TAXES OR FEES.
IT IS THE INSURED'S RESPONSIBILITY TO PAY ANY APPLICABLE TAXES AND/OR FEES AND TO MAKE THOSE PAYMENTS DIRECTLY TO THE
APPROPRIATE STATE OR LOCAL AGENCY.

EFFECTIVE DATES		DESCRIPTION	PREMIUM CHARGE	PREMIUM CREDIT
FROM	TO			
11/30/2015	11/30/2016	Fiduciary Liab / Employee Ben Insurance Policy Premium	\$ 258,416	
		Terrorism Premium	\$ 2,584	
AMOUNT DUE AEGIS			\$ 261,000	

PAYMENT DUE THE LATER OF 20 DAYS FROM EFFECTIVE DATE OR 15 DAYS FROM INVOICE DATE.
AN ADDITIONAL CHARGE BASED ON A RATE OF 2% PER MONTH WILL BE MADE ON PAST DUE AMOUNTS.

PLEASE MAKE CHECKS PAYABLE TO ASSOCIATED ELECTRIC AND GAS INSURANCE SERVICES, LIMITED
AND RETURN ONE COPY OF THIS INVOICE WITH PAYMENT.

00107700

[PLEASE RETURN WITH PAYMENT]

nationalgrid		PAYMENT REQUEST			
Date: <u>12/10/15</u>		Due Date: <u>12/17/15</u>			
Check One Method of Payment					
<input type="checkbox"/> CHECK		<input checked="" type="checkbox"/> ACH			
Check Stub Message: (max. limit of 50 Characters)		Bank Name: XXXXXXXXXX	Bank Name: _____		
		Routing #: _____	Routing #: _____		
(Check One) Yes: <input type="checkbox"/> No: <input type="checkbox"/>		Account #: _____	Account #: _____		
Separate Check <input type="checkbox"/>		INSURANCE NOTES: Fiduciary \$135,695 - AIG-NU, #02-582-92-02 Fiduciary \$ 70,596 - Chubb (Fed Ins), #6800-2140 \$206,291 - Total Fiduciary EPLI \$240,077 - AIG-NU, #02-582-90-57 Crime \$ 85,359 - AIG-NU, #02-582-92-71 Crime \$ 29,790 - Great Amer., #XSC554409013 \$115,149 - Total Fidelity Bond-Crime \$561,517 - Total Payment			
Mail Check to Payee <input type="checkbox"/>					
OR					
Mail Check to Internal Location: <input type="checkbox"/>					
Location of Service (Required Information):		<i>AP Use Only:</i>			
City: <u>Waltham</u>	State: <u>MA</u> Zip Code: <u>02451</u>	Wired By: _____	Authorized By: _____		
		Value Date: _____	ET #: _____		
Vendor Information					
Payable To: <u>Marsh USA Inc.</u>		Federal Tax No. or SS #: _____			
		Vendor #: <u>4000012444</u>			
Address: <u>P.O. Box 417724, Boston, MA 02241-7724</u>		Invoice #: <u>670358260144</u>			
Reason for Payment: <u>Inv #670358260144, 11/30/15-16 Insurance Renewals - Fiduciary Liability, EPLI and Fidelity Bond-Crime</u>		Paying Company: <u>5110</u>	Amount: <u>\$561,517.00</u>		
		NGUSA Service Company			
National Grid Accounting					
G/L Account	Profit Center	WBS	Order	Operation	Amount
C1651099	SVC8000	(for Fiduciary)			\$206,291.00
C1651099	SVC8000	(for EPLI)			\$240,077.00
C1651099	SVC8000	(for Fidelity Bond-Crime)			\$115,149.00
Approver's Name: <u>Timothy Kiernan</u>		Employee ID#: <u>tkiernan 71045250</u>			
Preparer's Name: <u>Patricia Needham</u>		Phone Number: <u>(781) 907-2306</u>			
NON-PURCHASE ORDER CATEGORY					
01 Advertising	09 Easements	17 Incentive/Marketing Program	25 Outside Services	33 Subscription	
02 Awards/Gifts	10 Flagging	18 Inspection/Insurance	Inactive	34 Summons/DMV/Tolls	
03 Financial Payment	11 Fleet Fuel*	19 Legal Professional Services	27 Payments on Behalf of LPA	35 Tax Payments/Assessments	
Inactive	12 Fleet Leasing*	20 Legal/Settlement/Claim	28 Police/Sheriff/Marshals	36 Training/Registration/Semin.	
05 Charitable/ Sponsorship	13 Freight/Postage	21 Marketer Bill	29 Real Estate Rentals/Leases	37 Utility/Telephone/Water/Ad	
06 Clothing/ Safety Shoes	14 Government/Municipality	Inactive	30 Rebate Program	38 Other-must be approved AP	
Inactive	15 Hotels/ Lodging*	23 Transportation Service	31 Refund/Adjust/Reimburse		
08 Dues/Fees/Permits	16 HR/Med/Workman Comp	24 Natural Gas/Energy Purch.	32 R&D Initiative		
				<i>Please Choose One</i>	
*Sales tax paid for these services/materials			Forward to: Accounts Payable Administrator for Processing		



Marsh USA Inc.
New York NY
(212) 345-6000

INVOICE

Page	2 of 2
Invoice Total	561,517.00 USD
Invoice No.	670358260144
Invoice Date	12/08/2015
Effective Date	11/30/2015
Client No.	6703500000
Installment No.	

Billed To: **Barbara Schnettler**
National Grid Services, Inc.
300 Erie Blvd. West
A-4
Syracuse, NY 13202

Original
Policy Holder: National Grid Services, Inc.
Billing Effective Date: 11/30/2015

Insurer	Policy No./ Project No.	Expiration Date	Description/Type of Coverage	Item	Amount
NATIONAL UN-PA	025829057	11/30/2016	Other Employ Practice Liab	PREMIUM	240,077.00
NATIONAL UN-PA	025829057 025829202	11/30/2016	Fiduciary Liability	PREMIUM	135,695.00
FEDERAL INS	68002140	11/30/2016	Fiduciary Liability	PREMIUM	70,596.00
NATIONAL UN-PA	025829271	11/30/2016	Commercial Crime	PREMIUM	85,359.00
GREAT AMERICAN	XSC55440901300	11/30/2016	Commercial Crime	PREMIUM	29,790.00
Invoice Comments:					
Remittance address located at the bottom of page 1. Attach this invoice or the invoice No. above with your payment to ensure payment is applied to the policy invoiced. *Note that premium payment terms are determined by the specific insurer and detailed on the respective binder of insurance. In order to avoid possible policy cancellation for non-payment of premium, please issue payment in full upon receipt of this invoice, thank you.					
Invoice Total					561,517.00

Marsh earns and retains interest income on premium payments held by Marsh on behalf of insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable insurer, where permitted by law.

If you are interested in financing your premiums please contact the Marsh Premium Finance team at premiumfinance@marsh.com to determine eligibility.



Marsh USA Inc.
New York NY
(212) 345-6000

Billed To: **Barbara Schnettler**
National Grid Services, Inc.
300 Erie Blvd. West
A-4
Syracuse, NY 13202

INVOICE

Page	1 of 2
Invoice Total	561,517.00 USD
Invoice No.	670358260144
Invoice Date	12/08/2015
Effective Date	11/30/2015
Client No.	6703500000
Installment No.	

If you are not currently receiving invoices via e-mail but would like to do so, please notify your Marsh client team.

Remittance Copy

Marsh earns and retains interest income on premium payments held by Marsh on behalf of insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable insurer, where permitted by law.

If you are interested in financing your premiums please contact the Marsh Premium Finance team at premiumfinance@marsh.com to determine eligibility.

Detach and remit this portion with your payment

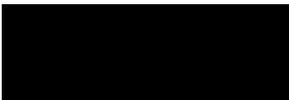
Client No.	Invoice No.	Payment Due	Invoice Total	Amount Paid
6703500000	670358260144	Immediate	561,517.00 USD	

Thank you for your prompt payment.

Please indicate Invoice Number 670358260144 on your remittance.

Additionally, for ACH or wire payments, e-mail remittance detail to: FiduciaryserviceRequest.US@marsh.com

By ACH:



By Wire:



By Mail: Marsh USA Inc.
P.O. Box 417724
Boston, MA 02241-7724 USA

6703582601443 005615170098

nationalgrid		PAYMENT REQUEST			
Date: <u>01/28/16</u>		Due Date: <u>01/29/16</u>			
Check One Method of Payment					
<input type="checkbox"/> CHECK		<input type="checkbox"/> ACH			
<input checked="" type="checkbox"/> WIRE					
Check Stub Message: (max. limit of 50 Characters)		Bank Name:	Bank Name:		
		Routing #:	Routing #:		
		Account #:	Account #:		
(Check One): Yes: <input type="checkbox"/> No: <input type="checkbox"/>		Insurance Notes:			
Separate Check <input type="checkbox"/>		\$166,725.00 2nd Excess-Chartis			
Mail Check to Payee <input type="checkbox"/>		\$234,000.00 3rd Excess-MARP			
OR		\$146,250.00 4th Excess-ACE European			
Mail Check to Internal Location: <input type="checkbox"/>		\$105,300.00 5th Excess-HCC Int'l			
		\$ 61,846.20 CODA Prim-ACE Bermuda Intl			
		\$ 48,516.00 Side A 1st Ex-Endurance			
		\$ 76,212.50 Side A 2nd Ex-Navigators-Lloyds			
		\$ 52,650.00 Side A 3rd Ex-Newline-Lloyds			
Location of Service (Required Information):		<i>AP Use Only:</i>			
City: <u>Brooklyn</u> State: <u>NY</u> Zip Code: <u>11201</u>		Wired By: _____ Authorized By: _____			
		Value Date: _____ ET #: _____			
Vendor Information					
Payable To: Willis Limited		Federal Tax No. or SS #: _____			
		Vendor #: 1000036998			
Address: 51 Lime Street, London EC3M 7DQ		Invoice #: Willis-D&O 12.1.15-16			
Reason for Payment: NGUSA D&O, (eight) Policy Nos. 36006P15-35475P15		Paying Company: _____ Amount			
Account No. 1382064103		5110 \$891,499.70			
1-Dec-2015 - 30-Nov-2016 BDI		NGUSA Service Company			
National Grid Accounting					
G/L Account	Profit Center	WBS	Order	Operation	Amount
C1651099	SVC8000				\$891,499.70
Approver's Name: Timothy Kiernan		Employee ID# tkiernan 71045250			
Preparer's Name: Patricia Needham		Phone Number (781) 907-2306			
NON-PURCHASE ORDER CATEGORY					
01 Advertising	09 Easements	17 Incentive/Marketing Program	25 Outside Services	33 Subscription	
02 Awards/Gifts	10 Flagging	18 Inspection/Insurance	Inactive	34 Summons/DMV/Tolls	
03 Financial Payment	11 Fleet Fuel*	19 Legal Professional Services	27 Payments on Behalf of LIPA	35 Tax Payments/Assessments	
Inactive	12 Fleet Leasing*	20 Legal/Settlement/Claim	28 Police/Sheriffs/Marshals	36 Training/Registration/Semin	
05 Charitables/ Sponsorship	13 Freight/Postage	21 Marketer Bill	29 Real Estate Rentals/Leases	37 Utility/Telephone/Water/Ad	
06 Clothing/ Safety Shoes	14 Government/Municipality	Inactive	30 Rebate Program	38 Other-must be approved AP	
Inactive	15 Hotels/ Lodging*	23 Transportation Service	31 Refund/Adjust/Reimburse		
08 Dues/Fees/Permits	16 HR/Med/Workman Comp	24 Natural Gas/Energy Purch.	32 R&D Initiative	Please Choose One	
*Sales tax paid for these services/materials		Forward to: Accounts Payable Administrator for Processing			

Willis Limited

51 Lime Street London EC 3M 7DU United Kingdom
Telephone: +44 (0)2031246000 Fax: +44 (0)2031246223 Website: www.willis.com



Please quote our reference in any enquiry to Accounts Department

National Grid Plc
1-3 Strand
London
WC2N 5EH
United Kingdom

Account Number 1382064103
Your Reference
Our Reference 36006P15 / 000002PRM
Advice Date 26 January 2016

Debit Note

VAT Category: VAT Exemption

Insured: National Grid Plc
Period: 01 December 2015 to 30 November 2016
Type: Insurance of:
Excess Directors and Officers Liability and Company Reimbursement
Insurance

Details:
Premium due in respect of Second Excess Directors and Officers Liability Insurance - US

Premium	USD	166,725.00
Order Hereon 100.0000000%	USD	166,725.00
Net Amount Due From You	USD	166,725.00

Premium payable to Willis Limited on or before 16 February 2016.

Willis Limited will not be responsible for any consequences, including cancellation of cover, that may arise from any delay or failure by you to pay the amount payable by the stated date.

Please quote our reference 36006P15 / 000002PRM when making settlement.

In the event of query please contact Clare Filtness who is dealing with this item.
Contact details: 02031247217, Clare.Filtness@WillisTowersWatson.com

Willis Limited

51 Lime Street London EC 3M 7DG United Kingdom
Telephone: +44 (0)2031246000 Fax: +44 (0)2031248223 Website: www.willis.com



Please quote our reference in any enquiry to Accounts Department

National Grid Plc
1-3 Strand
London
WC2N 5EH
United Kingdom

Account Number 1382064103
Your Reference
Our Reference 36009P15 / 000002PRM
Advice Date 26 January 2016

Debit Note

VAT Category: VAT Exemption

Insured: National Grid Plc
Period: 01 December 2015 to 30 November 2016
Type: Insurance of:
Excess Directors and Officers Liability and Company Reimbursement
Insurance

Details:
Premium due in respect of Third Excess Directors and Officers Liability - US

Premium	USD	234,000.00
Order Hereon 100.0000000%	USD	234,000.00
Net Amount Due From You	USD	234,000.00

Premium payable to Willis Limited on or before 16 February 2016.

Willis Limited will not be responsible for any consequences, including cancellation of cover, that may arise from any delay or failure by you to pay the amount payable by the stated date.

Please quote our reference 36009P15 / 000002PRM when making settlement.

In the event of query please contact Clare Filtness who is dealing with this item.
Contact details: 02031247217, Clare.Filtness@WillisTowersWatson.com

Willis Limited

51 Lime Street London EC3M 7DU United Kingdom
Telephone: +44 (0)2031246000 Fax: +44 (0)2031246223 Website: www.willis.com



Please quote our reference in any enquiry to Accounts Department

National Grid Plc
1-3 Strand
London
WC2N 5EH
United Kingdom

Account Number 1382064103
Your Reference
Our Reference 36010P15 / 000004PRM
Advice Date 26 January 2016

Debit Note

VAT Category: VAT Exemption

Insured: National Grid Plc
Period: 01 December 2015 to 30 November 2016
Type: Insurance of:
Excess Directors and Officers Liability and Company Reimbursement
Insurance

Details:

Premium due in respect of Fourth Excess Directors and Officers Liability Insurance - US.

Premium	USD	146,250.00
Order Hereon 100.00000000%	USD	146,250.00

Net Amount Due From You	USD	146,250.00
--------------------------------	------------	-------------------

Premium payable to Willis Limited on or before 16 February 2016.

Willis Limited will not be responsible for any consequences, including cancellation of cover, that may arise from any delay or failure by you to pay the amount payable by the stated date.

Please quote our reference 36010P15 / 000004PRM when making settlement.

In the event of query please contact Clare Filtness who is dealing with this item.
Contact details: 02031247217, Clare.Filtness@WillisTowersWatson.com

Willis Limited

51 Lime Street London EC 3M 7DQ United Kingdom
Telephone: +44 (0)2031246000 Fax: +44 (0)2031248223 Website: www.willis.com



Please quote our reference in any enquiry to Accounts Department

National Grid Plc
1-3 Strand
London
WC2N 5EH
United Kingdom

Account Number 1382064103
Your Reference
Our Reference 36011P15 / 000004PRM
Advice Date 26 January 2016

Debit Note

VAT Category: VAT Exemption

Insured: National Grid Plc
Period: 01 December 2015 to 30 November 2016
Type: Insurance of:
Excess Directors and Officers Liability and Company Reimbursement
Insurance

Details:

Premium due in respect of Fifth Excess Directors and Officers Liability Insurance - US

Premium	USD	105,300.00
Order Hereon 100.00000000%	USD	105,300.00
Net Amount Due From You	USD	105,300.00

Premium payable to Willis Limited on or before 16 February 2016.

Willis Limited will not be responsible for any consequences, including cancellation of cover, that may arise from any delay or failure by you to pay the amount payable by the stated date.

Please quote our reference 36011P15 / 000004PRM when making settlement.

In the event of query please contact Clare Filtness who is dealing with this item.
Contact details: 02031247217, Clare.Filtness@WillisTowersWatson.com

Willis Limited

51 Lime Street London EC 3M 7DU United Kingdom
Telephone: +44 (0)2031246000 Fax: +44 (0)2031248223 Website: www.willis.com



Please quote our reference in any enquiry to Accounts Department

National Grid Plc
1-3 Strand
London
WC2N 5EH
United Kingdom

Account Number 1382064103
Your Reference
Our Reference 35407P15 / 000004PRM
Advice Date 26 January 2016

Debit Note

VAT Category: VAT Exemption

Insured: National Grid Plc
Period: 01 December 2015 to 30 November 2016
Type: Insurance of:
D&O Insurance

Details:

Premium due in respect of CODA Directors and Officers Liability Insurance - US

Premium	USD	61,846.20
Order Hereon 100.0000000%	USD	61,846.20

Net Amount Due From You	USD	61,846.20
--------------------------------	------------	------------------

Premium payable to Willis Limited on or before 16 February 2016.

Willis Limited will not be responsible for any consequences, including cancellation of cover, that may arise from any delay or failure by you to pay the amount payable by the stated date.

Please quote our reference 35407P15 / 000004PRM when making settlement.

In the event of query please contact Clare Filtness who is dealing with this item.
Contact details: 02031247217, Clare.Filtness@WillisTowersWatson.com

Willis Limited

51 Lime Street London EC 3M 7DQ United Kingdom
Telephone: +44 (0)2031 746000 Fax: +44 (0)2031248223 Website: www.willis.com



Please quote our reference in any enquiry to Accounts Department

National Grid Plc
1-3 Strand
London
WC2N 5EH
United Kingdom

Account Number 1382064103
Your Reference
Our Reference 35452P15 / 000002PRM
Advice Date 26 January 2016

Debit Note

VAT Category: VAT Exemption

Insured: National Grid Plc
Period: 01 December 2015 to 30 November 2016
Type: Insurance of:
D&O Insurance

Details:

Premium due in respect of Directors and Officers Liability Insurance Side A/DIC Second Excess
- US

Premium	USD	76,212.50
Order Hereon 100.0000000%	USD	76,212.50
Net Amount Due From You	USD	76,212.50

Premium payable to Willis Limited on or before 16 February 2016.

Willis Limited will not be responsible for any consequences, including cancellation of cover, that may arise from any delay or failure by you to pay the amount payable by the stated date.

Please quote our reference 35452P15 / 000002PRM when making settlement.

In the event of query please contact Clare Filtness who is dealing with this item.
Contact details: 02031247217, Clare.Filtness@WillisTowersWatson.com

Willis Limited

51 Lime Street London EC 3M 7DD United Kingdom
Telephone: +44 (0)2031 746000 Fax: +44 (0)2031248223 Website: www.willis.com



Please quote our reference in any enquiry to Accounts Department

National Grid Plc
1-3 Strand
London
WC2N 5EH
United Kingdom

Account Number 1382064103
Your Reference
Our Reference 35475P15 / 000004PRM
Advice Date 26 January 2016

Debit Note

VAT Category: VAT Exemption

Insured: National Grid Plc
Period: 01 December 2015 to 30 November 2016
Type: Insurance of:
Directors & Officers Insurance

Details:

Premium due in respect of Directors and Officers Liability Insurance Side A/DIC Excess/Main Board - US

Premium	USD	52,650.00
Order Hereon 100.0000000%	USD	52,650.00
Net Amount Due From You	USD	52,650.00

Premium payable to Willis Limited on or before 16 February 2016.

Willis Limited will not be responsible for any consequences, including cancellation of cover, that may arise from any delay or failure by you to pay the amount payable by the stated date.

Please quote our reference 35475P15 / 000004PRM when making settlement.

In the event of query please contact Clare Filtness who is dealing with this item.
Contact details: 02031247217, Clare.Filtness@WillisTowersWatson.com

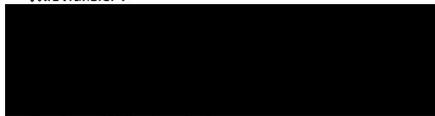
nationalgrid		PAYMENT REQUEST			
Date: <u>12/10/15</u>		Due Date: <u>12/17/15</u>			
Check One Method of Payment					
<input type="checkbox"/> CHECK		<input type="checkbox"/> ACH			
<input checked="" type="checkbox"/> WIRE					
Check Stub Message: (max. limit of 50 Characters)		Bank Name:	Bank Name:		
		Routing #:	Routing #:		
(Check One): Yes: No:		Account #:	Account #:		
Separate Check		<i>Reference information for Beneficiary</i> Invoice #76621B, National Grid USA D&O Liability Policy #DP5428203P			
Mail Check to Payee					
OR					
Mail Check to Internal Location:					
Location of Service (Required Information):		<i>AP Use Only:</i>			
City: <u>Waltham</u>	State: <u>MA</u>	Zip Code: <u>02451</u>	Wired By: _____ Authorized By: _____		
		Value Date: _____	ET #: _____		
Vendor Information					
Payable To: Associated Electric & Gas Insurance Services Ltd		Federal Tax No. or SS #:			
Address: 1 Meadowlands Plaza, East Rutherford, NJ 07073		Vendor #: 1000019525			
Reason for Payment: NGUSA D&O Renewal 12/1/15-16, Policy #DP5428203P (AEGIS-Primary Layer)		Invoice #: 76621B			
		Paying Company: 5110	Amount: \$286,185.00		
		NGUSA Service Company			
National Grid Accounting					
G/L Account	Profit Center	WBS	Order	Operation	Amount
C1651099	SVC8000				\$286,185.00
<i>Please Print</i>			Employee ID#		
Approver's Name:		Timothy Kiernan		tkiernan 71045250	
<i>Please Print</i>			Phone Number		
Preparer's Name:		Patricia Needham		(781) 907-2306	
NON-PURCHASE ORDER CATEGORY					
01 Advertising	09 Easements	17 Incentive/Marketing Program	25 Outside Services	33 Subscription	
02 Awards/Gifts	10 Flagging	18 Inspection/Insurance	Inactive	34 Summons/DMV/Tolls	
03 Financial Payment	11 Fleet Fuel*	19 Legal Professional Services	27 Payments on Behalf of LIPA	35 Tax Payments/Assessments	
Inactive	12 Fleet Leasing*	20 Legal/Settlement/Claim	28 Police/Sheriffs/Marshals	36 Training/Registration/Semin.	
05 Charitables/ Sponsorship	13 Freight/Postage	21 Marketer Bill	29 Real Estate Rentals/Leases	37 Utility/Telephone/Water/Ad	
06 Clothing/ Safety Shoes	14 Government/Municipality	Inactive	30 Rebate Program	38 Other-must be approved AP	
Inactive	15 Hotels/Lodging*	23 Transportation Service	31 Refund/Adjust/Reimburse		
08 Dues/Fees/Permits	16 HR/Med/Workman Comp	24 Natural Gas/Energy Purch.	32 R&D Initiative		
*Sales tax paid for these services/materials			Forward to: Accounts Payable Administrator for Processing		

Mail To:
ASSOCIATED ELECTRIC & GAS
INSURANCE SERVICES
16872 Collection Center Drive
Chicago, IL 60693-0168



Overnight Delivery:
Bank of America Lockbox Services
Associated Electric & Gas Insurance Services
16872 Collection Center Drive
Chicago, IL 60693-0168

WireTransfer*:



Broker: Willis Limited
Willis Building, 51 Lime Stree
London, EN EC3M 7DQ

Insured: National Grid plc.
1-3 Strand
London, EN WC2N5EH

Invoice Number: 76621B
Date of Invoice: 11/20/2015
Policy Number: DP5428203P

THIS PREMIUM MAY BE SUBJECT TO STATE AND/OR LOCAL PREMIUM TAXES OR FEES.
IT IS THE INSURED'S RESPONSIBILITY TO PAY ANY APPLICABLE TAXES AND/OR FEES AND TO MAKE THOSE PAYMENTS DIRECTLY TO THE
APPROPRIATE STATE OR LOCAL AGENCY.

EFFECTIVE DATES		DESCRIPTION	PREMIUM CHARGE	PREMIUM CREDIT
FROM	TO			
12/01/2015	12/01/2016	Directors and Officers Insurance Policy Premium (U.S.)	\$ 1,013,918	
		Terrorism Premium	\$ 15,126	
		Less Continuity Credit		\$ 742,859
AMOUNT DUE AEGIS			\$ 286,185	

PAYMENT DUE THE LATER OF 20 DAYS FROM EFFECTIVE DATE OR 15 DAYS FROM INVOICE DATE.
AN ADDITIONAL CHARGE BASED ON A RATE OF 2% PER MONTH WILL BE MADE ON PAST DUE AMOUNTS.
PLEASE MAKE CHECKS PAYABLE TO ASSOCIATED ELECTRIC AND GAS INSURANCE SERVICES, LIMITED
AND RETURN ONE COPY OF THIS INVOICE WITH PAYMENT.

00732200

[PLEASE RETURN WITH PAYMENT]

nationalgrid		PAYMENT REQUEST			
Date: <u>12/10/15</u>		Due Date: <u>12/17/15</u>			
Check One Method of Payment					
<input type="checkbox"/> CHECK		<input checked="" type="checkbox"/> ACH			
<input type="checkbox"/> WIRE					
Check Stub Message: (max. limit of 50 Characters)		Bank Name: [REDACTED]	Bank Name: [REDACTED]		
		Routing #: [REDACTED]	Routing #: [REDACTED]		
		Account #: [REDACTED]	Account #: [REDACTED]		
(Check One): Yes: <input type="checkbox"/> No: <input type="checkbox"/>		Reference Information for Beneficiary Invoice #31887US, National Grid USA D&O Liability Policy #293270-15DO			
Separate Check <input type="checkbox"/>					
Mail Check to Payee <input type="checkbox"/>					
OR					
Mail Check to Internal Location: <input type="checkbox"/>					
Location of Service (Required Information): City: <u>Waltham</u> State: <u>MA</u> Zip Code: <u>02451</u>		AP Use Only:			
		Wired By: _____	Authorized By: _____		
		Value Date: _____	ET #: _____		
Vendor Information					
Payable To: <u>Energy Insurance Mutual</u>		Federal Tax No. or SS #:			
Address: <u>3000 Bayport Drive, Suite 550, Tampa, FL 33607-8418</u>		Vendor #: <u>1000004597</u>			
Reason for Payment: <u>NGUSA D&O Renewal 12/1/15-16, Policy #293270-15DO (EIM-1st Excess Layer)</u>		Invoice #: <u>31887US</u>			
		Paying Company: <u>5110</u>	Amount: <u>\$327,346.00</u>		
		NGUSA Service Company			
National Grid Accounting					
G/L Account	Profit Center	WBS	Order	Operation	Amount
C1651099	SVC8000				\$327,346.00
				Employee ID#	
Approver's Name: <u>Timothy Kiernan</u>		tkiernan 71045250			
				Phone Number	
Preparer's Name: <u>Patricia Needham</u>		(781) 907-2306			
NON-PURCHASE ORDER CATEGORY					
01 Advertising	09 Easements	17 Incentive/Marketing Program	25 Outside Services	33 Subscription	
02 Awards/Gifts	10 Flagging	18 Inspection/Insurance	Inactive	34 Summons/DMV/Tolls	
03 Financial Payment	11 Fleet Fuel*	19 Legal Professional Services	27 Payments on Behalf of LIPA	35 Tax Payments/Assessments	
Inactive	12 Fleet Leasing*	20 Legal/Settlement/Claim	28 Police/Sheriffs/Marshals	36 Training/Registration/Semin	
05 Charitable/Sponsorship	13 Freight/Postage	21 Marketer Bill	29 Real Estate Rentals/Leases	37 Utility/Telephone/Water/Ad	
06 Clothing/ Safety Shoes	14 Government/Municipality	Inactive	30 Rebate Program	38 Other-must be approved AP	
Inactive	15 Hotels/ Lodging*	23 Transportation Service	31 Refund/Adjust/Reimburse		
08 Dues/Fees/Permits	16 HR/Med/Workman Comp	24 Natural Gas/Energy Purch.	32 R&D Initiative		
				Please Choose One	
*Sales tax paid for these services/materials			Forward to: Accounts Payable Administrator for Processing		



EIM
Energy Insurance Mutual

INVOICE

MEMBER Insured National Grid plc 1-3 Strand London, UK WC2N 5EH GBR
--

INVOICE NUMBER	ISSUE DATE	DUE DATE
0000031887	11/24/15	12/30/15

3000 Bayport Drive
Suite 550
Tampa, Florida 33607-8418
(813) 287-2117 - Fax: (813) 874-2523

EFFECTIVE DATE	EXPIRATION DATE	POLICY NUMBER	DESCRIPTION	AMOUNT
11/30/15	11/30/16	293270-15DO	Renewal Premium- USA portion	\$ 327,346.00
				\$ 327,346.00 TOTAL DUE

JSA 112415



3000 Bayport Drive
Suite 550
Tampa, Florida 33607-8418
Phone: (813) 287-2117
Fax: (813) 874-2523

November 24, 2015

Richard Watts
Miller Insurance Services Limited
5 Jewry Street, Dawson House
London, UK EC3N 2PJ

RE: National Grid plc
Directors & Officers Policy Number: 293270-15DO

Dear Richard,

Enclosed, please find EIM's binding confirmation for the above member. You will also find EIM's invoice that reflects the total amount due of \$327,346.00.

Payment may be made via ACH or wire transfer. Please use the following wiring instructions to transfer funds to EIM:

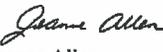
ABA #:
Bank:
Account #:
Ref:



Payment should be made on or before December 30, 2015.

If you have any questions, please contact me.

Sincerely,


Jeanne Allen
Assistant Underwriter



Marsh USA Inc.
New York NY
(212) 345-6000

INVOICE

Page	2 of 2
Invoice Total	239,160.00 USD
Invoice No.	670353742959
Invoice Date	04/07/2015
Effective Date	04/01/2015
Client No.	6703500000
Installment No.	

Billed To: Barbara Schnettler
National Grid Services, Inc.
300 Erie Blvd. West
A-4
Syracuse, NY 13202

Original
Policy Holder: National Grid Services, Inc.
Billing Effective Date: 04/01/2015

Insurer	Policy No./ Project No.	Expiration Date	Description/Type of Coverage	Item	Amount
AMERICAN ALTER	10045246	04/01/2016	Aircraft Hull Liability	PREMIUM	107,526.00
MITSUBI SUMITOM	10045246	04/01/2016	Aircraft Hull Liability	PREMIUM	22,194.00
Tokio Marine Am	10045246	04/01/2016	Aircraft Hull Liability	PREMIUM	29,584.00
AMERICAN COMM	10045246	04/01/2016	Aircraft Hull Liability	PREMIUM	23,916.00
CSI CO OF OMAH	10045246	04/01/2016	Aircraft Hull Liability	PREMIUM	55,940.00
Invoice Comments:					
Premium due for renewal effective 4-1-15 to 4-1-16					
Invoice Total					239,160.00

Marsh earns and retains interest income on premium payments held by Marsh on behalf of insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable insurer, where permitted by law.

If you are interested in financing your premiums please contact the Marsh Premium Finance team at 212-345-3884 or premiumfinance@marsh.com to determine eligibility.



Marsh USA Inc.
New York NY
(212) 345-6000

Billed To: Barbara Schmettler
National Grid Services, Inc.
300 Erie Blvd. West
A-4
Syracuse, NY 13202

INVOICE

Page	1 of 2
Invoice Total	239,160.00 USD
Invoice No.	670353742959
Invoice Date	04/07/2015
Effective Date	04/01/2015
Client No.	6703500000
Installment No.	

If you are not currently receiving invoices via e-mail but would like to do so, please notify your Marsh client team.

Remittance Copy

Marsh earns and retains interest income on premium payments held by Marsh on behalf of Insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable Insurer, where permitted by law.

If you are interested in financing your premiums please contact the Marsh Premium Finance team at 212-345-3084 or premiumfinance@marsh.com to determine eligibility.

Detach and remit this portion with your payment

Client No.	Invoice No.	Payment Due	Invoice Total	Amount Paid
6703500000	670353742959	Immediate	239,160.00 USD	

Thank you for your prompt payment.

Please indicate Invoice Number 670353742959 on your remittance.

Additionally, for ACH or wire payments, e-mail remittance detail to: FiduciaryserviceRequest.US@marsh.com

By ACH:



By Wire:



By Mail:

Marsh USA Inc.
P.O. Box 417724
Boston, MA 02241-7724 USA

6703537429596 002391600057



Marsh USA Inc.
New York NY
(212) 345-6000

Billed To: National Grid USA
One Malro Tech Center
Brooklyn, NY 11201

INVOICE

Page	2 of 2
Invoice Total	67,098.50 USD
Invoice No.	980718424205
Invoice Date	11/11/2014
Effective Date	01/01/2015
Client No.	9807187443
Installment No.	

Installment
Policy Holder: National Grid USA
Billing Effective Date: 01/01/2015

Insurer	Policy No./ Project No.	Expiration Date	Description/Type of Coverage	Item	Amount
NATIONAL UN-PA	GTP 8132762-A	01/01/2018	Business Travel Accd	PREMIUM	67,098.50
Invoice Comments: 2ND ANNUAL INSTALLMENT PREMIUM SLATTERY/BROWN					
Invoice Total					67,098.50

Marsh earns and retains interest income on premium payments held by Marsh on behalf of insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable insurer, where permitted by law.
If you are interested in financing your premiums please contact the Marsh Premium Finance team at 212-345-3064 or premiumfinance@marsh.com to determine eligibility.



Marsh USA Inc.
New York NY
(212) 345-6000

Billed To: National Grid USA
One Metro Tech Center
Brooklyn, NY 11201

INVOICE

Page	1 of 2
Invoice Total	67,098.50 USD
Invoice No.	980716424205
Invoice Date	11/11/2014
Effective Date	01/01/2015
Client No.	9807187443
Instalment No.	

If you are not currently receiving invoices via e-mail but would like to do so, please notify your Marsh client team.

Remittance Copy

Marsh earns and retains interest income on premium payments held by Marsh on behalf of insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable insurer, where permitted by law.

If you are interested in financing your premiums please contact the Marsh Premium Finance team at 212-345-3054 or premiumfinance@marsh.com to determine eligibility.

Detach and remit this portion with your payment

Client No.	Invoice No.	Payment Due	Invoice Total	Amount Paid
9807187443	980716424205	Immediate	67,098.50 USD	

Thank you for your prompt payment.

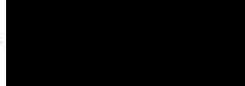
Please indicate Invoice Number 980716424205 on your remittance.

Additionally, for ACH or wire payments, e-mail remittance detail to: FiduciaryserviceRequest.US@marsh.com

By ACH:



By Wire



By Mail:

Marsh USA Inc.
P.O. Box 417724
Boston, MA 02241-7724 USA

9807164242053 000670985009



Marsh USA Inc.
New York NY
(212) 345-6000

Billed To: National Grid USA
One Metro Tech Center
Brooklyn, NY 11201

INVOICE

Page	1 of 2
Invoice Total	12,617.00 USD
Invoice No.	980713360190
Invoice Date	02/26/2015
Effective Date	02/28/2015
Client No.	9807187443
Installment No.	



If you are not currently receiving invoices via e-mail but would like to do so, please notify your Marsh client team.

Remittance Copy

Marsh earns and retains interest income on premium payments held by Marsh on behalf of insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable insurer, where permitted by law.

If you are interested in financing your premiums please contact the Marsh Premium Finance team at 212-345-3054 or premiumfinance@marsh.com to determine eligibility.

Detach and remit this portion with your payment

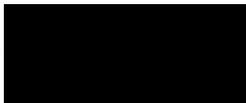
Client No.	Invoice No.	Payment Due	Invoice Total	Amount Paid
9807187443	980713360190	Immediate	12,617.00 USD	

Thank you for your prompt payment.

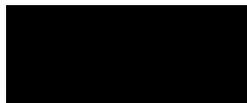
Please indicate Invoice Number 980713360190 on your remittance.

Additionally, for ACH or wire payments, e-mail remittance detail to: FiduciaryserviceRequest.US@marsh.com

By ACH:



By Wire:



93

By Mail:

Marsh USA Inc.
P.O. Box 417724
Boston, MA 02241-7724 USA

9807133601903 000126170024



Marsh USA Inc.
New York NY
(212) 345-6000

Billed To: National Grid USA
One Metro Tech Center
Brooklyn, NY 11201

INVOICE

Page	2 of 2
Invoice Total	12,617.00 USD
Invoice No.	980713360190
Invoice Date	02/26/2015
Effective Date	02/28/2015
Client No.	9807187443
Installment No.	

Original
Policy Holder: National Grid USA
Billing Effective Date: 02/28/2015



Insurer	Policy No./ Project No.	Expiration Date	Description/Type of Coverage	Item	Amount
INDEMNITY	N05898825	02/28/2016	Cargo Global Transit	PREMIUM	12,617.00
Invoice Comments: Invoice for Marine Policy #N05898825					
Invoice Total					12,617.00

Marsh earns and retains interest income on premium payments held by Marsh on behalf of insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable insurer, where permitted by law.

Please see attached to this invoice your premium class under the Marsh Premium Finance term of 115-145,002 or premiumfinance@marsh.com to determine applicability.

Mail To:
ASSOCIATED ELECTRIC & GAS
INSURANCE SERVICES
16872 Collection Center Drive
Chicago, IL 60693-0168



Overnight Delivery
Bank of America Lockbox Services
Associated Electric & Gas Insurance Services
16872 Collection Center Drive
Chicago, IL 60693-0168

Wire Transfer:



Insured: National Grid (US) Holdings LTD
1-3 Strand
London, EN WC2N 5EH

Invoice Number: 75427
Date of Invoice: 02/20/2015
Policy Number: XL5088704P

THIS PREMIUM MAY BE SUBJECT TO STATE AND/OR LOCAL PREMIUM TAXES OR FEES
IT IS THE INSURED'S RESPONSIBILITY TO PAY ANY APPLICABLE TAXES AND/OR FEES AND TO MAKE THOSE PAYMENTS DIRECTLY TO THE
APPROPRIATE STATE OR LOCAL AGENCY

EFFECTIVE DATES		DESCRIPTION	PREMIUM CHARGE	PREMIUM CREDIT
FROM	TO			
04/01/2015	04/01/2016	Excess Liability Insurance Policy Premium	\$ 6,972,649	
		Terrorism Premium	\$ 385,000	
AMOUNT DUE AEGIS			\$ 7,357,649	

PAYMENT DUE THE LATER OF 20 DAYS FROM EFFECTIVE DATE OR 15 DAYS FROM INVOICE DATE
AN ADDITIONAL CHARGE BASED ON A RATE OF 2% PER MONTH WILL BE MADE ON PAST DUE AMOUNTS
PLEASE MAKE CHECKS PAYABLE TO ASSOCIATED ELECTRIC AND GAS INSURANCE SERVICES, LIMITED
AND RETURN ONE COPY OF THIS INVOICE WITH PAYMENT.

05686100

[PLEASE RETURN WITH PAYMENT]

		INVOICE								
		INSURED NAME: National Grid (US) Holdings Ltd One MetroTech Center Brooklyn, New York 11201								
3000 Bayport Drive Suite 550 Tampa, Florida 33607-8418 (813) 287-2117 - Fax (813) 874-2523		<table border="1"> <tr> <th>INVOICE NUMBER</th> <th>ISSUE DATE</th> <th>DUE DATE</th> </tr> <tr> <td>0000031200</td> <td>03/12/15</td> <td>04/30/15</td> </tr> </table>			INVOICE NUMBER	ISSUE DATE	DUE DATE	0000031200	03/12/15	04/30/15
INVOICE NUMBER	ISSUE DATE	DUE DATE								
0000031200	03/12/15	04/30/15								
EFFECTIVE DATE	EXPIRATION DATE	POLICY NUMBER	DESCRIPTION	AMOUNT						
04/01/15	04/01/16	253052-15GL	Annual Premium due by April 30, 2015	\$ 738,937.00						
				\$ 738,937.00						
				TOTAL DUE						

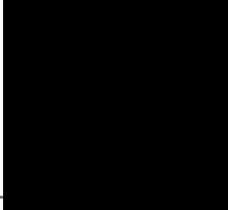
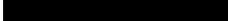
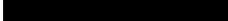
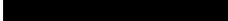
3/11/15

nationalgrid		PAYMENT REQUEST	
Date: 04/08/15		Due Date: 04/15/15	
Check One Method of Payment			
<input type="checkbox"/> CHECK		<input checked="" type="checkbox"/> ACH	
Check Stub Message: (max. limit of 50 Characters)		Bank Name:	Bank Name:
		Routing #:	Routing #:
(Check One): Yes: No: Account #:		Account #:	
Separate Check			
Mail Check to Payee			
OR			
Mail Check to Internal Location:			
		INSURANCE NOTES: Business Interruption \$1,031,213.00 Property \$18,673,215.00 Public Liability \$5,119,391.00 Property Terrorism \$344,534.00 \$25,168,353.00	
Location of Service (Required Information):		AP Use Only:	
City: Wallham	State: MA	Zip Code: 02451	Wired By: _____ Authorized By: _____
Value Date:		ET #:	
Vendor Information			
Payable To: National Grid Insurance USA Ltd		Federal Tax No. or SS #:	
Address: c/o AON Insurance Managers (USA) Inc., 199 Water Street, New York, NY 10038		Vendor #: 1000033008	
Reason for Payment: Invoice No. 2015/16/001, 4/1/15-16 NGUSA Insurance Renewals for Business Interruption, Property, Public Liability, Property Terrorism		Invoice #: 2015/16/001	
		Paying Company: 5110	Amount: \$25,168,353.00
		NGUSA Service Company	
National Grid Accounting			
G/L Account	Profit Center	WBS	Order
C1651099	SVC8000	[for Business Interruption]	Operation
C1651099	SVC8000	[for Property]	Amount
C1651099	SVC8000	[for Public Liability]	\$1,031,213.00
C1651099	SVC8000	[for Property Terrorism]	\$18,668,965.00
			\$5,119,391.00
			\$343,784.00
C1740030	SVC8000	[for NMProperties-Property]	\$4,250.00
C1740030	SVC8000	[for NMProperties-Terrorism]	\$750.00
Please Print		Employee ID#	
Approver's Name:	Timothy Kiernan	tkiernan 71045250	
Please Print		Phone Number	
Preparer's Name:	Patricia Needham	(781) 907-2306	
NON-PURCHASE ORDER CATEGORY			
01 Advertising	09 Elements	17 License/Marketing Program	25 Outside Services
02 Awards/Gifts	10 Flagging	18 Inspection/Insurance	InActive
03 Financial Payment	11 Fleet Fuel*	19 Legal Professional Services	27 Payments on Behalf of LPA
InActive	12 Fleet Leasing*	20 Legal/Settlement/Claim	28 Police/Sheriff/Notarialis
05 Charitable/ Sponsorship	13 Freight/Postage	21 Marketer Bid	29 Real Estate Rents/Leases
06 Clothing/ Safety Shoes	14 Government/Municipality	InActive	30 Rebate Program
InActive	15 Hotels/ Lodging*	23 Transportation Service	31 Refund/Adjust/Reimburse
08 Dues/Fees/Permits	16 HH/Mod/Workshop Comp	24 Natural Gas/Energy Purch.	32 R&D InActive
			33 Subscription
			34 Summons/DAM/Tolls
			35 Tax Payments/Assessments
			36 Training/Registration/Sevics
			37 Utility/Telephone/Water/Ad
			38 Other-must be approved AP
Please Choose One			
*Sales tax paid for these services/materials		Forward to: Accounts Payable Administrator for Processing	



National Grid Insurance USA Ltd

National Grd USA
One MetroTech Center
Brooklyn, NY 11201
For the Attention of Timothy Kiernan

Date	Please quote our reference number: 2015/16/001	Amount
February 18, 2015	Renewal premium for the operational insurances for National Grid USA, (excluding Power Generation assets for BI, Property and Terrorism) Effective from Apr-01-2015 to Mar-31-2016 both dates inclusive.	
	A. Business Interruption	USD 1,031,213
	B. Property	USD 18,673,215
	A. Public Liability	USD 5,119,391
	C. Terrorism	USD 344,534
	Net Total :	USD 25,168,353
	Payment must be made to National Grid Insurance USA Ltd within 60 days. Gross Amount Due :	USD 25,168,353
	Please quote our reference number above on all correspondence. Note: All payments are to be made by telegraphic transfer.	
	Banking details : 	
	Account Name : 	
	Account Number : 	
	ABA # : 	

Notes regarding NM Properties, Inc:
A. Coverage does not apply
B. Share of Property insurance premium - \$4,250.00
C. Share of Terrorism insurance premium - \$ 750.00

National Grid Insurance USA Ltd

c/o Aon Insurance Managers (USA) Inc., 199 Water Street, New York, NY, 10038
Telephone + 1.802.652.1554
Fax + 1.602.860.0440

nationalgrid		PAYMENT REQUEST			
Date: <u>06/10/15</u>		Due Date: <u>06/17/15</u>			
Check One Method of Payment					
<input type="checkbox"/> CHECK		<input checked="" type="checkbox"/> ACH			
Check Stub Message: (max. limit of 50 Characters)		Bank Name: XXXXXXXXXX	Bank Name: _____		
		Routing #: _____	Routing #: _____		
(Check One): Yes: <input type="checkbox"/> No: <input type="checkbox"/>		Account #: _____	Account #: _____		
Separate Check <input type="checkbox"/>		<i>Reference Information for Beneficiary</i>			
Mail Check to Payee <input type="checkbox"/>					
OR Mail Check to Internal Location: <input type="checkbox"/>					
Location of Service (Required Information):		<i>AP Use Only:</i>			
City: <u>Brooklyn</u> State: <u>NY</u> Zip Code: <u>11201</u>		Wired By: _____	Authorized By: _____		
		Value Date: _____	ET #: _____		
Vendor Information					
Payable To: <u>Global Risk Consultants Corp.</u>		Federal Tax No. or SS #:			
		Vendor #: <u>4000010759</u>			
Address: <u>100 Walnut Avenue, Suite 501, Clark, NJ 07066</u>		Invoice #: <u>850841</u>			
Reason for Payment: Invoice #850841 dated 06/04/15, Engineering Services Property Inspections, Installment 1 of 4 (Apr-Jun), Contract Period 4/1/15-16		Paying Company:	Amount		
		<u>5110</u> NGUSA Service Co	<u>\$10,000.00</u>		
National Grid Accounting					
G/L Account	Profit Center	WBS	Order	Operation	Amount
<u>C6355100</u>		<u>X008918.AGB846</u>	<u>XG020009171</u>		<u>\$10,000.00</u>
				Employee ID#	
Approver's Name:		Timothy Kiernan		tkiernan 71045250	
				Phone Number	
Preparer's Name:		Patricia Needham		(781) 907-2306	
NON-PURCHASE ORDER CATEGORY					
01 Advertising	09 Essements	17 Incentive/Marketing Program	25 Outside Services	33 Subscription	
02 Awards/Gifts	10 Flagging	18 Inspection/Insurance	Inactive	34 Summons/DMV/Tolls	
03 Financial Payment	11 Fleet Fuel*	19 Legal Professional Services	27 Payments on Behalf of LIPA	35 Tax Payments/Assessments	
Inactive	12 Fleet Leasing*	20 Legal/Settlement/Claim	28 Police/Sherrifs/Marshals	36 Training/Registration/Semin	
05 Charitables/ Sponsorship	13 Freight/Postage	21 Marketer Bill	29 Real Estate Rentals/Leases	37 Utility/Telephone/Water/Ad	
06 Clothing/ Safety Shoes	14 Government/Municipality	Inactive	30 Rebate Program	38 Other-must be approved AP	
Inactive	15 Hotels/ Lodging*	23 Transportation Service	31 Refund/Adjust/Reimburse		
08 Dues/Fees/Permits	16 HR/Med/Workman Comp	24 Natural Gas/Energy Purch.	32 R&D Initiative		<i>Please Choose One</i>
*Sales tax paid for these services/materials			Forward to: Accounts Payable Administrator for Processing		

Accounts Payable 06-10-15: 10:56:30 Received



Global Risk Consultants Corp.
100 Walnut Ave.
Suite 501
Clark, NJ 07066
(732) 827-4400
Fax (732) 827-4467

NATIONAL GRID
ATTN: TIMOTHY KEIRNAN
ONE METROTECH CENTER
BROOKLYN, NY 11201

06/04/15
INVOICE NUMBER: 850841

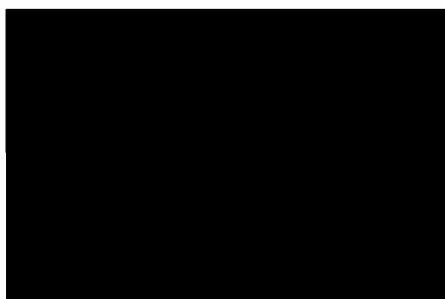
PLEASE IDENTIFY CUSTOMER
AND INVOICE NUMBER ON CHECK

CUSTOMER CODE: NATIOGR56

	TOTAL
1ST OF 4 INSTALLMENTS FOR ENGINEERING CONSULTING SERVICES	\$ 10,000.00

CONTRACT PERIOD 4/1/15 - 3/31/16

===== A M O U N T T O P A Y U S D \$ 10,000.00 =====



Peabody, MA 01960

INVOICES PAYABLE UPON RECEIPT

GL 06/04/15

INVOICE

Accounts Payable 06-10-15: 10:56:30 Received

nationalgrid		PAYMENT REQUEST			
Date: <u>10/07/15</u>		Due Date: <u>10/09/15</u>			
Check One Method of Payment					
<input type="checkbox"/> CHECK		<input checked="" type="checkbox"/> ACH			
Check Stub Message: (max. limit of 50 Characters)		Bank Name:	Bank Name:		
		Routing #:	Routing #:		
		Account #:	Account #:		
(Check One): Yes: No: <input type="checkbox"/> Separate Check <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Mail Check to Payee <input type="checkbox"/> <input type="checkbox"/> OR <input type="checkbox"/> Mail Check to Internal Location:		<i>Reference Information for Beneficiary</i>			
Location of Service (Required Information):		<i>AP Use Only:</i>			
City: <u>Brooklyn</u>	State: <u>NY</u>	Zip Code: <u>11201</u>	Wired By: _____ Authorized By: _____		
		Value Date: _____	ET #: _____		
<i>Vendor Information</i>					
Payable To: <u>Global Risk Consultants Corp.</u>		Federal Tax No. or SS #:			
Address: <u>100 Walnut Avenue, Suite 501, Clark, NJ 07066</u>		Vendor #: <u>4000010759</u>			
Reason for Payment: <u>Invoice #851419 dated 10/02/15, Engineering Services Property Inspections, Installment 3 of 4 (Oct-Dec), Contract Period 4/1/15-16</u>		Invoice #: <u>851419</u>			
		Paying Company: <u>5110</u>	Amount: <u>\$10,000.00</u>		
		NGUSA Service Co			
National Grid Accounting					
G/L Account	Profit Center	WBS	Order	Operation	Amount
<u>C6355100</u>		<u>X008918.AGB846</u>	<u>XG020009171</u>		<u>\$10,000.00</u>
				Employee ID#	
Approver's Name: <u>Timothy Kiernan</u>		tkiernan 71045250			
				Phone Number	
Preparer's Name: <u>Patricia Needham</u>		<u>(781) 907-2306</u>			
NON-PURCHASE ORDER CATEGORY					
01 Advertising	09 Easements	17 Incentive/Marketing Program	25 Outside Services	33 Subscription	
02 Awards/Gifts	10 Flagging	18 Inspection/Insurance	inactive	34 Summons/DMW/Tolls	
03 Financial Payment	11 Fleet Fuel*	19 Legal Professional Services	27 Payments on Behalf of LIPA	35 Tax Payments/Assessments	
inactive	12 Fleet Leasing*	20 Legal/Settlement/Claim	28 Police/Sheriffs/Marshals	36 Training/Registration/Semin.	
05 Charitables/ Sponsorship	13 Freight/Postage	21 Marketer Bill	29 Real Estate Rentals/Leases	37 Utility/Telephone/Water/Ad	
06 Clothing/ Safety Shoes	14 Government/Municipality	inactive	30 Rebate Program	38 Other-must be approved AP	
inactive	15 Hotels/ Lodging*	23 Transportation Service	31 Refund/Adjust/Reimburse		
08 Dues/Fees/Permits	16 HR/Med/Workman Comp	24 Natural Gas/Energy Purch.	32 R&D Initiative		
				Please Choose One	
*Sales tax paid for these services/materials			Forward to: Accounts Payable Administrator for Processing		

Accounts Payable 10-07-15: 11:37:47 Received

 **Global Risk Consultants**

Global Risk Consultants Corp.
100 Walnut Ave.
Suite 501
Clark, NJ 07066
(732) 827-4400
Fax (732) 827-4467

NATIONAL GRID
ATTN: TIMOTHY KEIRNAN
ONE METROTECH CENTER
BROOKLYN, NY 11201

10/02/15
INVOICE NUMBER: 000851419

PLEASE IDENTIFY CUSTOMER
AND INVOICE NUMBER ON CHECK

CUSTOMER CODE: NATIOGR56

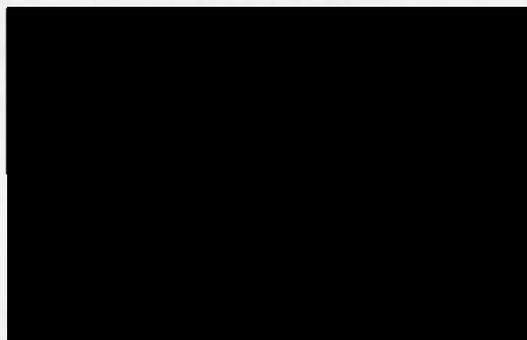
	TOTAL
3RD OF 4 INSTALLMENTS FOR ENGINEERING CONSULTING SERVICES	\$ 10,000.00

CONTRACT PERIOD 4/1/15 - 3/31/16

=====

A M O U N T T O P A Y	U S D	\$	10,000.00
-----------------------	-------	----	-----------

=====



INVOICES PAYABLE UPON RECEIPT

GL 10/02/15

INVOICE

Accounts Payable 10-07-15: 11:37:47 Received



Global Risk Consultants Corp.
100 Walnut Ave.
Suite 501
Clark, NJ 07066
(732) 827-4400
Fax (732) 827-4467

NATIONAL GRID
ATTN: TIMOTHY KEIRNAN
ONE METROTECH CENTER
BROOKLYN, NY 11201

07/07/15
INVOICE NUMBER: 000850959

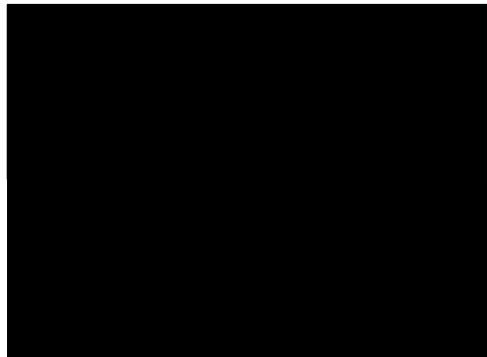
PLEASE IDENTIFY CUSTOMER
AND INVOICE NUMBER ON CHECK

CUSTOMER CODE: NATIOGR56

	TOTAL
2ND OF 4 INSTALLMENTS FOR ENGINEERING CONSULTING SERVICES	\$ 10,000.00

CONTRACT PERIOD 4/1/15 - 3/31/16

===== A M O U N T T O P A Y USD \$ 10,000.00 =====



INVOICES PAYABLE UPON RECEIPT

GL 07/07/15

INVOICE

Accounts Payable 07-09-15: 11:06:44 Received

nationalgrid		PAYMENT REQUEST			
Date: <u>01/07/16</u>		Due Date: <u>01/14/16</u>			
Check One Method of Payment					
<input type="checkbox"/> CHECK		<input checked="" type="checkbox"/> ACH			
<input type="checkbox"/> WIRE					
Check Stub Message: (max. limit of 50 Characters)		Bank Name: XXXXXXXXXX	Bank Name: _____		
		Routing #: _____	Routing #: _____		
		Account #: _____	Account #: _____		
(Check One): Yes: No: Separate Check <input type="checkbox"/> <input type="checkbox"/> Mail Check to Payee <input type="checkbox"/> <input type="checkbox"/> OR Mail Check to Internal Location:		<i>Reference Information for Beneficiary</i>			
Location of Service (Required Information):		<i>AP Use Only:</i>			
City: <u>Brooklyn</u>	State: <u>NY</u>	Zip Code: <u>11201</u>	Wired By: _____ Authorized By: _____		
		Value Date: _____	ET #: _____		
Vendor Information					
Payable To: <u>Global Risk Consultants Corp.</u>		Federal Tax No. or SS #:			
		Vendor #: <u>4000010759</u>			
Address: <u>100 Walnut Avenue, Suite 501, Clark, NJ 07066</u>		Invoice #: <u>860071</u>			
Reason for Payment: <u>Invoice #860071 dated 01/05/16, Engineering Services Property Inspections, Installment 4 of 4 (Jan-Mar), Contract Period 4/1/15-16</u>		Paying Company:	Amount		
		5110 NGUSA Service Co	\$10,000.00		
National Grid Accounting					
G/L Account	Profit Center	WBS	Order	Operation	Amount
C6355100		X008918.AGB846	XG020009171		\$10,000.00
				Employee ID#	
Approver's Name:		<u>Timothy Kiernan</u>		<u>tkiernan 71045250</u>	
				Phone Number	
Preparer's Name:		<u>Patricia Needham</u>		<u>(781) 907-2306</u>	
NON-PURCHASE ORDER CATEGORY					
01 Advertising	09 Easements	17 Incentive/Marketing Program	25 Outside Services	33 Subscription	
02 Awards/Gifts	10 Flagging	18 Inspection/Insurance	Inactive	34 Summons/DMV/Tolls	
03 Financial Payment	11 Fleet Fuel*	19 Legal Professional Services	27 Payments on Behalf of UPA	35 Tax Payments/Assessments	
Inactive	12 Fleet Leasing*	20 Legal/Settlement/Claim	28 Police/Sheriffs/Marshals	36 Training/Registration/Semin.	
05 Charitables/ Sponsorship	13 Freight/Postage	21 Marketer Bill	29 Real Estate Rentals/Leases	37 Utility/Telephone/Water/Ad	
06 Clothing/ Safety Shoes	14 Government/Municipality	Inactive	30 Rebate Program	38 Other-must be approved AP	
Inactive	15 Hotels/ Lodging*	23 Transportation Service	31 Refund/Adjust/Reimburse	Please Choose One	
08 Dues/Fees/Permits	16 HR/Med/Workman Comp	24 Natural Gas/Energy Purch.	32 R&D Initiative		

*Sales tax paid for these services/materials

Forward to: Accounts Payable Administrator for Processing

Accounts Payable 01-07-16: 13:10:09 Received



Global Risk Consultants Corp.
100 Walnut Ave.
Suite 501
Clark, NJ 07066
(732) 827-4400
Fax (732) 827-4467

NATIONAL GRID
ATTN: TIMOTHY KEIRNAN
ONE METROTECH CENTER
BROOKLYN, NY 11201

01/05/16
INVOICE NUMBER: 000860071

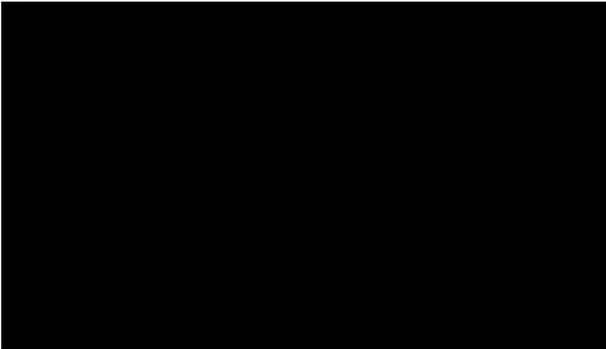
PLEASE IDENTIFY CUSTOMER
AND INVOICE NUMBER ON CHECK

CUSTOMER CODE: NATIOGR56

	TOTAL
4TH OF 4 INSTALLMENTS FOR ENGINEERING CONSULTING SERVICES	\$ 10,000.00

CONTRACT PERIOD 4/1/15 - 3/31/16

===== A M O U N T T O P A Y U S D \$ 10,000.00 =====



INVOICES PAYABLE UPON RECEIPT

GL 01/05/16

INVOICE

nationalgrid		PAYMENT REQUEST			
Date: <u>07/09/15</u>		Due Date: <u>07/23/15</u>			
Check One Method of Payment					
<input type="checkbox"/> CHECK		<input checked="" type="checkbox"/> ACH			
Check Stub Message: (max. limit of 50 Characters)		Bank Name:	Bank Name: _____		
		Routing #: _____	Routing #: _____		
		Account #: _____	Account #: _____		
(Check One): Yes: <input type="checkbox"/> No: <input type="checkbox"/>		<i>Reference Information for Beneficiary</i>			
Separate Check <input type="checkbox"/>					
Mail Check to Payee <input type="checkbox"/>					
OR Mail Check to Internal Location: <input type="checkbox"/>					
Location of Service (Required Information):		<i>AP Use Only:</i>			
City: <u>Brooklyn</u>	State: <u>NY</u>	Zip Code: <u>11201</u>	Wired By: _____ Authorized By: _____		
		Value Date: _____	ET #: _____		
Vendor Information					
Payable To: <u>Global Risk Consultants Corp.</u>		Federal Tax No. or SS #: _____	Vendor #: <u>4000010759</u>		
Address: <u>100 Walnut Avenue, Suite 501, Clark, NJ 07066</u>		Invoice #: <u>850959</u>			
Reason for Payment: <u>Invoice #850959 dated 07/07/15, Engineering Services Property Inspections, Installment 2 of 4 (Jul-Sep), Contract Period 4/1/15-16</u>		Paying Company: <u>5110</u> NGUSA Service Co	Amount: <u>\$10,000.00</u>		
National Grid Accounting					
G/L Account	Profit Center	WBS	Order	Operation	Amount
<u>C6355100</u>		<u>X008918.AGB846</u>	<u>XG020009171</u>		<u>\$10,000.00</u>
Approver's Name: <u>Timothy Kiernan</u>		Employee ID#: <u>tkiernan 71045250</u>			
Preparer's Name: <u>Patricia Needham</u>		Phone Number: <u>(781) 907-2306</u>			
NON-PURCHASE ORDER CATEGORY					
01 Advertising	09 Easements	17 Incentive/Marketing Program	25 Outside Services	33 Subscription	
02 Awards/Gifts	10 Flagging	18 Inspection/Insurance	Inactive	34 Summons/DWV/Tolls	
03 Financial Payment	11 Fleet Fuel*	19 Legal Professional Services	27 Payments on Behalf of LIPA	35 Tax Payments/Assessments	
Inactive	12 Fleet Leasing*	20 Legal/Settlement/Claim	28 Police/Sheriffs/Marshals	36 Training/Registration/Semin	
05 Charitables/ Sponsorship	13 Freight/Postage	21 Marketer Bill	29 Real Estate Rentals/Leases	37 Utility/Telephone/Water/Ad	
06 Clothing/ Safety Shoes	14 Government/Municipality	Inactive	30 Rebate Program	38 Other-must be approved AP	
Inactive	15 Hotels/ Lodging*	23 Transportation Service	31 Refund/Adjust/Reimburse	Please Choose One	
08 Dues/Fees/Permits	16 HR/Med/Workman Comp	24 Natural Gas/Energy Purch.	32 R&D Initiative		

*Sales tax paid for these services/materials

Forward to: Accounts Payable Administrator for Processing

Accounts Payable 07-09-15: 11:06:44 Received



Global Risk Consultants Corp.
100 Walnut Ave.
Suite 501
Clark, NJ 07066
(732) 827-4400
Fax (732) 827-4467

NATIONAL GRID
ATTN: TIMOTHY KEIRNAN
ONE METROTECH CENTER
BROOKLYN, NY 11201

07/07/15
INVOICE NUMBER: 000850959

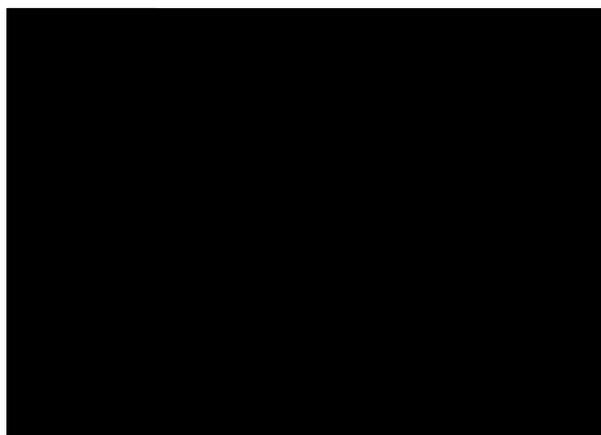
PLEASE IDENTIFY CUSTOMER
AND INVOICE NUMBER ON CHECK

CUSTOMER CODE: NATIOGR56

	TOTAL
2ND OF 4 INSTALLMENTS FOR ENGINEERING CONSULTING SERVICES	\$ 10,000.00

CONTRACT PERIOD 4/1/15 - 3/31/16

===== A M O U N T T O P A Y USD \$ 10,000.00 =====



INVOICES PAYABLE UPON RECEIPT

GL 07/07/15

INVOICE

Accounts Payable 07-09-15: 11:06:44 Received

nationalgrid		PAYMENT REQUEST			
Date: <u>06/10/15</u>		Due Date: <u>06/17/15</u>			
Check One Method of Payment					
<input type="checkbox"/> CHECK		<input checked="" type="checkbox"/> ACH			
Check Stub Message: (max. limit of 50 Characters)		Bank Name:	Bank Name: _____		
		Routing #: _____	Routing #: _____		
		Account #: _____	Account #: _____		
(Check One): Yes: No: <input type="checkbox"/> Separate Check <input type="checkbox"/> Mail Check to Payee OR <input type="checkbox"/> Mail Check to Internal Location:		<i>Reference Information for Beneficiary</i>			
Location of Service (Required Information):		<i>AP Use Only:</i>			
City: <u>Brooklyn</u>	State: <u>NY</u>	Zip Code: <u>11201</u>	Wired By: _____ Authorized By: _____		
		Value Date: _____	ET #: _____		
Vendor Information					
Payable To: <u>Global Risk Consultants Corp.</u>		Federal Tax No. or SS #:			
		Vendor #: <u>4000010759</u>			
Address: <u>100 Walnut Avenue, Suite 501, Clark, NJ 07066</u>		Invoice #: <u>850841</u>			
Reason for Payment: <u>Invoice #850841 dated 06/04/15, Engineering Services Property Inspections, Installment 1 of 4 (Apr-Jun), Contract Period 4/1/15-16</u>		Paying Company:	Amount		
		<u>5110</u> NGUSA Service Co	<u>\$10,000.00</u>		
National Grid Accounting					
G/L Account	Profit Center	WBS	Order	Operation	Amount
<u>C6355100</u>		<u>X008918.AGB846</u>	<u>XG020009171</u>		<u>\$10,000.00</u>
				Employee ID#	
Approver's Name:		Timothy Kiernan		tkiernan 71045250	
				Phone Number	
Preparer's Name:		Patricia Needham		(781) 907-2306	
NON-PURCHASE ORDER CATEGORY					
01 Advertising	09 Essements	17 Incentive/Marketing Program	25 Outside Services	33 Subscription	
02 Awards/Gifts	10 Flagging	18 Inspection/Insurance	Inactive	34 Summons/DMV/Tolls	
03 Financial Payment	11 Fleet Fuel*	19 Legal Professional Services	27 Payments on Behalf of LIPA	35 Tax Payments/Assessments	
Inactive	12 Fleet Leasing*	20 Legal/Settlement/Claim	28 Police/Sherrifs/Marshals	36 Training/Registration/Semin	
05 Charitables/ Sponsorship	13 Freight/Postage	21 Marketer Bill	29 Real Estate Rentals/Leases	37 Utility/Telephone/Water/Ad	
06 Clothing/ Safety Shoes	14 Government/Municipality	Inactive	30 Rebate Program	38 Other-must be approved AP	
Inactive	15 Hotels/ Lodging*	23 Transportation Service	31 Refund/Adjust/Reimburse		
08 Dues/Fees/Permits	16 HR/Med/Workman Comp	24 Natural Gas/Energy Purch.	32 R&D Initiative		<i>Please Choose One</i>

*Sales tax paid for these services/materials

Forward to: Accounts Payable Administrator for Processing

Accounts Payable 06-10-15: 10:56:30 Received



Global Risk Consultants Corp.
100 Walnut Ave.
Suite 501
Clark, NJ 07066
(732) 827-4400
Fax (732) 827-4467

NATIONAL GRID
ATTN: TIMOTHY KEIRNAN
ONE METROTECH CENTER
BROOKLYN, NY 11201

06/04/15
INVOICE NUMBER: 850841

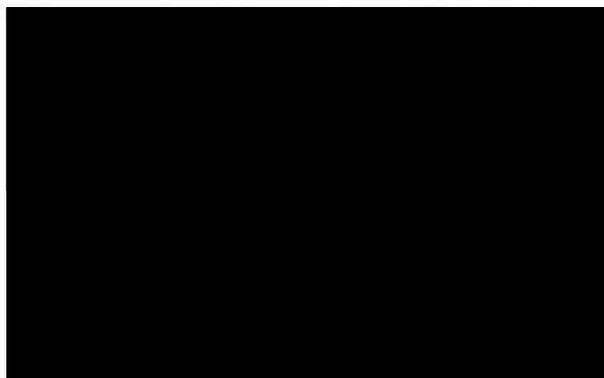
PLEASE IDENTIFY CUSTOMER
AND INVOICE NUMBER ON CHECK

CUSTOMER CODE: NATIOGR56

	TOTAL
1ST OF 4 INSTALLMENTS FOR ENGINEERING CONSULTING SERVICES	\$ 10,000.00

CONTRACT PERIOD 4/1/15 - 3/31/16

===== A M O U N T T O P A Y U S D \$ 10,000.00 =====



INVOICES PAYABLE UPON RECEIPT

GL 06/04/15

INVOICE

Accounts Payable 06-10-15: 10:56:30 Received

ARISE INCORPORATED

7000 South Edgerton Road
Suite 100
Brecksville, OH 44141-3172
Phone: (440) 746-8880

Tax ID # 34-1756475

Beginning 6/1/13 only send payments to
address at left or electronically to bank
account at bottom of page. Any other
payment information is no longer valid.

INVOICE

BILL TO:

National Grid USA
Mr. Timothy Kiernan
One MetroTech Center, 15th Floor
Brooklyn, NY 11201

INVOICE DATE: 6/10/2015

INVOICE NUMBER: CI15-0551

FILE NO: 2656

CONTRACT NO: 2656-03

CUSTOMER NO: 214952

ACCOUNT NAME: NATIONAL GRID USA

FOR: JURISDICTIONAL BOILER/PRESSURE VESSEL INSPECTIONS

EFFECTIVE DATE: 6/1/15-4/1/16 (FIRST QUARTER)

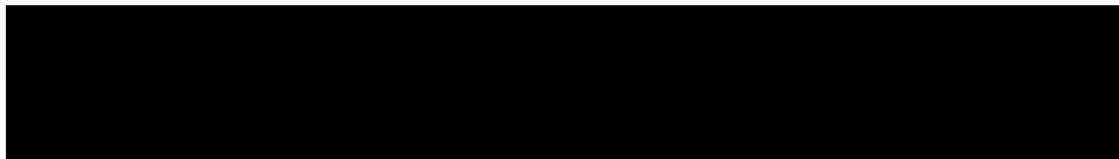
PLEASE PAY THIS AMOUNT:

\$12,475.00

U.S. DOLLARS

ARISE Jurisdictional	\$8,390.02
ABIIC Policy Premium	\$4,000.00
ABIIC Premium Tax	\$84.98

Thank you for your patronage, and we look forward to serving you in the future.



ARISE INCORPORATED

7000 South Edgerton Road
Suite 100
Brecksville, OH 44141-3172
Phone: (440) 746-8880

Tax ID # 34-1756475

Beginning 6/1/13 only send payments to
address at left or electronically to bank
account at bottom of page. Any other
payment information is no longer valid.

INVOICE

BILL TO:

National Grid USA
Mr. Timothy Kiernan
One MetroTech Center, 15th Floor
Brooklyn, NY 11201

INVOICE DATE:

7/9/2015

INVOICE NUMBER:

CI15-0650

FILE NO:

2656

CONTRACT NO:

2656-03

CUSTOMER NO:

214952

ACCOUNT NAME:

NATIONAL GRID USA

FOR:

JURISDICTIONAL BOILER/PRESSURE VESSEL INSPECTIONS

EFFECTIVE DATE:

4/1/15 - 4/1/16 (SECOND QUARTER - JULY, AUGUST, SEPTEMBER 2015)

PLEASE PAY THIS AMOUNT:

\$12,475.00

U.S. DOLLARS

Thank you for your patronage, and we look forward to serving you in the future.



nationalgrid		PAYMENT REQUEST			
Date: <u>10/19/15</u>		Due Date: <u>10/26/15</u>			
Check One Method of Payment					
<input type="checkbox"/> CHECK		<input checked="" type="checkbox"/> WIRE			
Check Stub Message: (max. limit of 50 Characters)		Bank Name: _____			
Bank Name: _____		Bank Name: _____			
Routing #: _____		Routing #: _____			
Account #: _____		Account #: _____			
(Check One): Yes: No: <input type="checkbox"/> Separate Check <input type="checkbox"/> Mail Check to Payee OR <input type="checkbox"/> Mail Check to Internal Location:		<i>Reference Information for Beneficiary</i>			
Location of Service (Required Information):		<i>AP Use Only:</i>			
City: <u>Brooklyn</u> State: <u>NY</u> Zip Code: <u>11201</u>		Wired By: _____ Authorized By: _____			
		Value Date: _____ ET #: _____			
Vendor Information					
Payable To: <u>ARISE Incorporated</u>		Federal Tax No. or SS #: _____			
Address: <u>7000 South Edgerton Road, Suite 100, Brecksville, OH 44141-3172</u>		Vendor #: <u>1000007721</u>			
Reason for Payment: <u>Invoice #15-0960, Boiler and Pressure Vessel Inspections, Q3 Oct-Nov-Dec (4/1/15-16 Contract)</u>		Invoice #: <u>15-0960</u>			
		Paying Company: <u>5110</u> Amount: <u>\$12,475.00</u>			
		NGUSA Service Co			
National Grid Accounting					
G/L Account	Profit Center	WBS	Order	Operation	Amount
<u>C6355100</u>		<u>X008918.AGB846</u>	<u>XG020009171</u>		<u>\$12,475.00</u>
				<i>Please Print</i>	
Approver's Name:		<u>Timothy Kiernan</u>		Employee ID# <u>tkiernan 71045250</u>	
				<i>Please Print</i>	
Preparer's Name:		<u>Patricia Needham</u>		Phone Number <u>(781) 907-2306</u>	
NON-PURCHASE ORDER CATEGORY					
01 Advertising	09 Easements	17 Incentive/Marketing Program	25 Outside Services	33 Subscription	
02 Awards/Gifts	10 Flagging	18 Inspection/Insurance	Inactive	34 Summons/DMV/Tolls	
03 Financial Payment	11 Fleet Fuel*	19 Legal Professional Services	27 Payments on Behalf of LIPA	35 Tax Payments/Assessments	
Inactive	12 Fleet Leasing*	20 Legal/Settlement/Claim	28 Police/Sherrifs/Marshals	36 Training/Registration/Semin	
05 Charitables/ Sponsorship	13 Freight/Postage	21 Marketer Bill	29 Real Estate Rentals/Leases	37 Utility/Telephone/Water/Ad	
06 Clothing/ Safety Shoes	14 Government/Municipality	Inactive	30 Rebate Program	38 Other-must be approved AP	
Inactive	15 Hotels/ Lodging*	23 Transportation Service	31 Refund/Adjust/Reimburse		
08 Dues/Fees/Permits	16 HR/Med/Workman Comp	24 Natural Gas/Energy Purch.	32 R&D Initiative		
				<i>Please Choose One</i>	

*Sales tax paid for these services/materials

Forward to: Accounts Payable Administrator for Processing

Accounts Payable 10-20-15: 09:52:53 Received

ARISE INCORPORATED

7000 South Edgerton Road
Suite 100
Brecksville, OH 44141-3172
Phone: (440) 746-8880

Tax ID # 34-1756475

Beginning 6/1/13 only send payments to
address at left or electronically to bank
account at bottom of page. Any other
payment information is no longer valid.

INVOICE

BILL TO:

National Grid USA
Mr. Timothy Kiernan
One MetroTech Center, 15th Floor
Brooklyn, NY 11201

INVOICE DATE:	10/16/2015
INVOICE NUMBER:	CI15-0960
FILE NO:	2656
CONTRACT NO:	2656-03
CUSTOMER NO:	214952

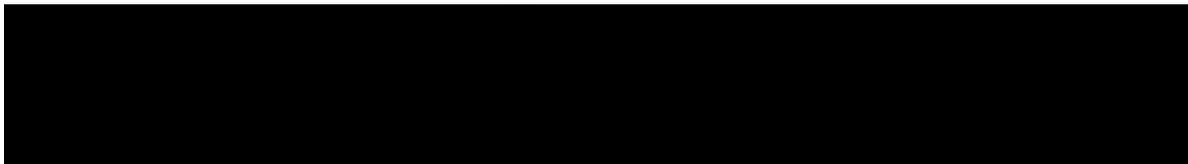
ACCOUNT NAME: NATIONAL GRID USA

FOR: JURISDICTIONAL BOILER/PRESSURE VESSEL INSPECTIONS

EFFECTIVE DATE: 4/1/15 - 4/1/16 (THIRD QUARTER - OCTOBER, NOVEMBER, DECEMBER)

PLEASE PAY THIS AMOUNT: \$12,475.00
U.S. DOLLARS

Thank you for your patronage, and we look forward to serving you in the future.



nationalgrid		PAYMENT REQUEST			
Date: <u>05/13/15</u>		Due Date: <u>05/20/15</u>			
Check One Method of Payment					
<input type="checkbox"/> CHECK		<input type="checkbox"/> WIRE			
Check Stub Message: (max. limit of 50 Characters)	Bank Name:	Bank Name: _____			
	Routing #: _____	Routing #: _____			
(Check One): Yes: No:	Account #: _____	Account #: _____			
Separate Check <input type="checkbox"/>		<i>Reference Information for Beneficiary</i>			
Mail Check to Payee <input type="checkbox"/>					
OR					
Mail Check to Internal Location: <input type="checkbox"/>					
Location of Service (Required Information):		<i>AP Use Only:</i>			
City: <u>Waltham</u>	State: <u>MA</u> Zip Code: <u>02451</u>	Wired By: _____	Authorized By: _____		
		Value Date: _____	ET #: _____		
Vendor Information					
Payable To: <u>Marsh USA Inc.</u>		Federal Tax No. or SS #: _____			
		Vendor #: <u>4000012444</u>			
Address: <u>P.O. Box 417724, Boston, MA 02241-7724</u>		Invoice #: <u>934411770094</u>			
Reason for Payment: <u>Inv #934411770094, Broker Fee 4/1/15-16 and 11/30/14-15 Insurance Programs</u>		Paying Company: _____	Amount		
		<u>5110</u>	<u>\$264,573.00</u>		
		NGUSA Service Company			
National Grid Accounting					
G/L Account	Profit Center	WBS	Order	Operation	Amount
C6355100	(for FinPro)	X008919.AGB850	XN139009177		\$40,977.00
C6355100	(for Ex Liab)	X000176.AG0729	XG012004024		\$103,883.00
C6355100	(Aviation/SvcCo-Prop)	X008838.AG0984	XG020008983		\$3,031.71
C6355100	(Aviation/SvcCo-Liab)	X008918.AG0728	XG020009172		\$3,913.36
C6355100	(Aviation/NMPC-Prop)	X008843.AG0984	X521T008988		\$9,214.06
C6355100	(Aviation/NMPC-Liab)	X008921.AG0728	X521T009173		\$3,732.87
C6355100	(Property Generation)	X008962.AGB836	XG324009271		\$99,821.00
Approver's Name: _____			Employee ID#		
Timothy Kiernan			tkiernan 71045250		
Preparer's Name: _____			Phone Number		
Patricia Needham			(781) 907-2306		
NON-PURCHASE ORDER CATEGORY					
01 Advertising	09 Easements	17 Incentive/Marketing Program	25 Outside Services	33 Subscription	
02 Awards/Gifts	10 Flagging	18 Inspection/Insurance	Inactive	34 Summons/DMV/Tolls	
03 Financial Payment	11 Fleet Fuel*	19 Legal Professional Services	27 Payments on Behalf of LIPA	35 Tax Payments/Assessments	
Inactive	12 Fleet Leasing*	20 Legal/Settlement/Claim	28 Police/Sheriffs/Marshals	36 Training/Registration/Semin.	
05 Charitable/ Sponsorship	13 Freight/Postage	21 Marketer Bill	29 Real Estate Rental/Leases	37 Utility/Telephone/Water/Ad	
06 Clothing/ Safety Shoes	14 Government/Municipality	Inactive	30 Rebate Program	38 Other -must be approved AP	
Inactive	15 Hotels/ Lodging*	23 Transportation Service	31 Refund/Adjust/Reimburse		
08 Dues/Fees/Permits	16 HR/Med/Workman Comp	24 Natural Gas/Energy Purch.	32 R&D Initiative		<i>Please Choose One</i>
*Sales tax paid for these services/materials			Forward to: Accounts Payable Administrator for Processing		

Accounts Payable 05-14-15: 06:57:10 Received



INVOICE

Marsh USA Inc.
New York NY
(212) 345-6000

Page	2 of 2
Invoice Total	264,573.00 USD
Invoice No.	934411770094
Invoice Date	04/27/2015
Effective Date	04/01/2015
Client No.	9344100000
Installment No.	

Billed To: **Tim Kiernan**
National Grid Services, Inc.
One Metrotech Plaza
Brooklyn, NY 11228

Original
Policy Holder: **National Grid Services, Inc.**
Billing Effective Date: **04/01/2015**

Insurer	Policy No. / Project No.	Expiration Date	Description/Type of Coverage	Item	Amount
	Marsh Brokerage Consulting Fee	04/01/2016	Marsh Brk Cnslt Fee	FEE	264,573.00
Invoice Comments:					
Annual Fee for Finpro, Aviation, Excess Liability and Property					
Invoice Total					264,573.00

Marsh earns and retains interest income on premium payments held by Marsh on behalf of insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable insurer, where permitted by law.

If you are interested in financing your premiums please contact the Marsh Premium Finance team at 212-345-3064 or premiumfinance@marsh.com to determine eligibility.

Accounts Payable 05-14-15: 06:57:10Received



Marsh USA Inc.
New York NY
(212) 345-6000

Billed To: Tim Klernan
National Grid Services, Inc.
One Metrotech Plaza
Brooklyn, NY 11228

INVOICE

Page	1 of 2
Invoice Total	264,573.00 USD
Invoice No.	934411770094
Invoice Date	04/27/2015
Effective Date	04/01/2015
Client No.	9344100000
Installment No.	

If you are not currently receiving invoices via e-mail but would like to do so, please notify your Marsh client team.

Remittance Copy

Marsh earns and retains interest income on premium payments held by Marsh on behalf of insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable Insurer, where permitted by law.

If you are interested in financing your premiums please contact the Marsh Premium Finance team at 212-345-3064 or premiumfinance@marsh.com to determine eligibility.

Detach and remit this portion with your payment

Client No.	Invoice No.	Payment Due	Invoice Total	Amount Paid
9344100000	934411770094	Immediate	264,573.00 USD	

Thank you for your prompt payment.

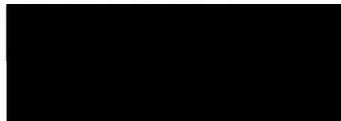
Please indicate Invoice Number 934411770094 on your remittance.

Additionally, for ACH or wire payments, e-mail remittance detail to: FiduciaryserviceRequest.US@marsh.com

By ACH:



By Wire:



By Mail:

Marsh USA Inc.
P.O. Box 417724
Boston, MA 02241-7724 USA

9344117700947 002645730057

Accounts Payable 05-14-15: 06:57:10Received

nationalgrid		PAYMENT REQUEST			
Date: <u>05/13/15</u>		Due Date: <u>05/20/15</u>			
Check One Method of Payment					
<input type="checkbox"/> CHECK		<input checked="" type="checkbox"/> ACH			
<input type="checkbox"/> WIRE					
Check Stub Message: (max. limit of 50 Characters)		Bank Name:	Bank Name: _____		
		Routing #: _____	Routing #: _____		
		Account #: _____	Account #: _____		
(Check One): Yes: No: <input type="checkbox"/> Separate Check <input type="checkbox"/> Mail Check to Payee OR <input type="checkbox"/> Mail Check to Internal Location:		<i>Reference Information for Beneficiary</i>			
Location of Service (Required Information):		<i>AP Use Only:</i>			
City: <u>Waltham</u>	State: <u>MA</u>	Zip Code: <u>02451</u>	Wired By: _____ Authorized By: _____		
		Value Date: _____	ET #: _____		
Vendor Information					
Payable To: <u>Marsh USA Inc.</u>		Federal Tax No. or SS #: _____			
		Vendor #: <u>4000012444</u>			
Address: <u>P.O. Box 417724, Boston, MA 02241-7724</u>		Invoice #: <u>934412246122</u>			
Reason for Payment: <u>Inv #934412246122, Broker Fee 4/1/15-16 Primary Casualty Program (Unregulated Program)</u>		Paying Company: <u>5110</u> NGUSA Service Company	Amount: <u>\$67,980.00</u>		
National Grid Accounting					
G/L Account	Profit Center	WBS	Order	Operation	Amount
C6355100		X000176.AG0731	XG012004025		\$134.65
C6355100		X003628.AG0733	X5804002401		\$300.10
C1651099	SVC8000	<i>(for 5825-TransGas)</i>			\$17,658.68
C1651099	SVC8000	<i>(for 5860-NGEM)</i>			\$40,699.38
C1651099	SVC8000	<i>(for 5855-KS HomeEngySvcs)</i>			\$9,187.19
<i>Please Print</i>			Employee ID#		
Approver's Name:		Timothy Kiernan		tkiernan 71045250	
<i>Please Print</i>			Phone Number		
Preparer's Name:		Patricia Needham		(781) 907-2306	
NON-PURCHASE ORDER CATEGORY					
01 Advertising	09 Easements	17 Incentive/Marketing Program	25 Outside Services	33 Subscription	
02 Awards/Gifts	10 Flagging	18 Inspection/Insurance	Inactive	34 Summons/DMV/Tolls	
03 Financial Payment	11 Fleet Fuel*	19 Legal/Professional Services	27 Payments on Behalf of LIPA	35 Tax Payments/Assessments	
Inactive	12 Fleet Leasing*	20 Legal/Settlement/Claim	28 Police/Sheriffs/Marshals	36 Training/Registration/Semin.	
05 Charitable/ Sponsorship	13 Freight/Postage	21 Marketer Bill	29 Real Estate Rentals/Leases	37 Utility/Telephone/Water/Ad	
06 Clothing/ Safety Shoes	14 Government/Municipality	Inactive	30 Rebate Program	38 Other-must be approved AP	
Inactive	15 Hotels/ Lodging*	23 Transportation Service	31 Refund/Adjust/Reimburse	Please Choose One	
08 Dues/Fees/Permits	16 HR/Med/Workman Comp	24 Natural Gas/Energy Purch.	32 R&D Initiative		
*Sales tax paid for these services/materials			Forward to: Accounts Payable Administrator for Processing		

Accounts Payable 05-14-15: 06:57:24Received

NATIONAL GRID USA - RISK AND INSURANCE
Allocation of Premiums to Companies

Marsh USA Broker Fee: Services performed for the Policy Period
Coverage: Unreinsured Primary Program (Primary Casualty Program)
Policy Period: 4/1/15 - 4/1/16

Marsh Invoice No: 934417246122
Invoice Date: 4/27/2015
Amount Due: \$67,980.00
Payment Date: 5/20/2015

Insured Subsidiaries	Accounting for Payment Form				Accounting to Reclaim Premium to Insured Subsidiaries				Comments
	Co. Code	GL Account	Profit Center	Order	Co. Code	GL Account	Profit Center	Order	
NGUSA Service Company, Inc.	510	C635100	n/a	X000176 AG0731	XG012004025				Expense settles to Insurance CC1680 Src Co has the WC coverage only.
Wayfinder Group, Inc.	510	C635100	n/a	X000328 AG0733	X5804002401				Expense settles to Insurance CC1680.
Transgas, Inc.	510	C1651099	SVC6000	n/a	n/a	5825	C1650230	NRB9610	Expense settles to Unreg company, cost center unknown. Contact: Alan Rodman & Menard Bossa, send them a copy of the payment and the table.
National Grid Energy Management LLC	510	C1651099	SVC6000	n/a	n/a	5660	C1650000	NRB9610	Expense settles to Unreg company, cost center unknown. Contact: Alan Rodman & Menard Bossa, send them a copy of the payment and the table.
Sold Subsidiaries [Co 8855-KS Home Energy Svcs, LLC]	510	C1651099	SVC6000	n/a	n/a	5955	C2324380	NRB9610	Expense settles to Unreg company, cost center unknown. Contact: Alan Rodman & Menard Bossa, send them a copy of the payment and the table.
				TOTAL					

(*) Allocations are based on rates from the underwriters - see Allocation % tab.

DESCRIPTION:
Company Code 5110 - NGUSA Service Company, Inc.
Company Code 5804 - Wayfinder Group, Inc.
GL Account C635100 - Consultants
GL Account C1651099 - Prepaid Corp Ins
Activity AG0731 - US Liability-Other
Activity AG0733 - US Liability/JANREG
Order XG012004025 - 5110S-All Ks&HCo US Liability-
Order X5804002401 - 5110S-Wayfinder Group, US Liability/Unreg



Marsh USA Inc.
New York NY
(212) 345-6000

Billed To: Tim Kiernan
National Grid Services, Inc.
One Metrotech Plaza
Brooklyn, NY 11228

INVOICE

Page	2 of 2
Invoice Total	67,980.00 USD
Invoice No.	934412246122
Invoice Date	04/27/2015
Effective Date	04/01/2015
Client No.	9344100000
Installment No.	

Original
Policy Holder: National Grid Services, Inc.
Billing Effective Date: 04/01/2015

Insurer	Policy No./ Project No.	Expiration Date	Description/Type of Coverage	Item	Amount
	Energy Consulting	04/01/2016	Energy Consulting	FEE	67,980.00
Invoice Comments:					
Annual Fee for the Primary Casualty eff 4/1/15-16					
Invoice Total					67,980.00

Marsh earns and retains interest income on premium payments held by Marsh on behalf of Insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable insurer, where permitted by law.

If you are interested in financing your premiums please contact the Marsh Premium Finance team at 212-345-3064 or premiumfinance@marsh.com to determine eligibility.

Accounts Payable 05-14-15: 06:57:24Received



Marsh USA Inc.
New York NY
(212) 345-6000

Billed To: Tim Kiernan
National Grid Services, Inc.
One Matrotech Plaza
Brooklyn, NY 11228

INVOICE

Page	1 of 2
Invoice Total	67,980.00 USD
Invoice No.	934412246122
Invoice Date	04/27/2015
Effective Date	04/01/2015
Client No.	9344100000
Installment No.	

If you are not currently receiving invoices via e-mail but would like to do so, please notify your Marsh client team.

Remittance Copy

Marsh earns and retains interest income on premium payments held by Marsh on behalf of insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable insurer, where permitted by law.

If you are interested in financing your premiums please contact the Marsh Premium Finance team at 212-345-3064 or premiumfinance@marsh.com to determine eligibility.

Detach and remit this portion with your payment

Client No.	Invoice No.	Payment Due	Invoice Total	Amount Paid
9344100000	934412246122	Immediate	67,980.00 USD	

Thank you for your prompt payment.

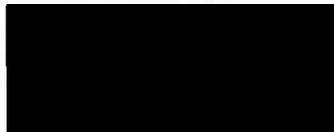
Please indicate Invoice Number 934412246122 on your remittance.

Additionally, for ACH or wire payments, e-mail remittance detail to: FiduciaryserviceRequest.US@marsh.com

By ACH:



By Wire:



By Mail:

Marsh USA Inc.
P.O. Box 417724
Boston, MA 02241-7724 USA

9344122461221 000679800095

Accounts Payable 05-14-15: 06:57:24Received



Marsh USA Inc.
New York NY
(212) 345-6000

INVOICE

Page	2 of 2
Invoice Total	34,148.00 USD
Invoice No.	934415718339
Invoice Date	09/24/2015
Effective Date	04/01/2015
Client No.	9344100000
Installment No.	

Billed To:
Tim Kiernan
National Grid Services, Inc.
One Metrotech Plaza
Brooklyn, NY 11228

Original
Policy Holder: National Grid Services, Inc.
Billing Effective Date: 07/01/2014

Insurer	Policy No. / Project No.	Expiration Date	Description/Type of Coverage	Item	Amount
	Energy Consulting	04/01/2018	Energy Consulting	FEE	34,148.00
Invoice Comments:					
KPI Balance due for the Excess WC renewal eff 7/1/15					
Invoice Total					34,148.00

Marsh earns and retains interest income on premium payments held by Marsh on behalf of insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable insurer, where permitted by law.

If you are interested in financing your premiums please contact the Marsh Premium Finance team at premiumfinance@marsh.com to determine eligibility.

Accounts Payable 10-07-15: 11:37:21 Received



Marsh USA Inc.
New York NY
(212) 345-6000

Billed To: **Tim Kiernan**
National Grid Services, Inc.
One Metrotech Plaza
Brooklyn, NY 11228

INVOICE

Page	1 of 2
Invoice Total	34,148.00 USD
Invoice No.	934415718339
Invoice Date	09/24/2015
Effective Date	04/01/2015
Client No.	9344100000
Installment No.	

If you are not currently receiving invoices via e-mail but would like to do so, please notify your Marsh client team.

Remittance Copy

Marsh earns and retains interest income on premium payments held by Marsh on behalf of insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable insurer, where permitted by law.

If you are interested in financing your premiums please contact the Marsh Premium Finance team at premiumfinance@marsh.com to determine eligibility.

Detach and remit this portion with your payment

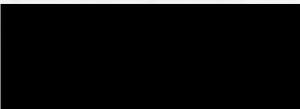
Client No.	Invoice No.	Payment Due	Invoice Total	Amount Paid
9344100000	934415718339	Immediate	34,148.00 USD	

Thank you for your prompt payment.

Please indicate Invoice Number 934415718339 on your remittance.

Additionally, for ACH or wire payments, e-mail remittance detail to: FiduciaryserviceRequest.US@marsh.com

By ACH:



By Wire:



By Mail: Marsh USA Inc.
P.O. Box 417724
Boston, MA 02241-7724 USA

9344157183390 000341480094

Accounts Payable 10-07-15: 11:37:21 Received

The Narragansett Electric Company
d/b/a National Grid
RIPUC Docket No. 4770
Attachment PUC 1-47-5
Page 1 of 66

Invoice Summary for NECO Rate Case 2017
2016-2017 invoices

Copies of Invoices for CY2016
Policy Period: 2016-2017

Insured	Line of Coverage	Policy Period	Policy Number	Carrier	Total Premium Paid	Invoiced By
National Grid USA	Excess Liability	04/01/16-04/01/17	XL5088705P	AEGIS	7,357,649	AEGIS
National Grid USA	Excess Liability	04/01/16-04/01/17	253357-16GL	EIM	738,937	EIM
Total Excess Liability					8,096,586	
National Grid (US) Holdings Ltd.,	Property	04/01/16-04/01/17	NGUS/PD/16/031	National Grid Insurance USA Ltd.	17,583,535	National Grid Insurance USA Ltd.
National Grid (US) Holdings Ltd.,	Property Terrorism	04/01/16-04/01/17	NGUS/TE/16/029&30	National Grid Insurance USA Ltd.	322,139	National Grid Insurance USA Ltd.
National Grid (US) Holdings Ltd.,	Business Interruption	04/01/16-04/01/17	NGUS/PD/16/031	National Grid Insurance USA Ltd.	984,808	National Grid Insurance USA Ltd.
National Grid (US) Holdings Ltd.,	Public (Excess) Liability	04/01/16-04/01/17	Various	National Grid Insurance USA Ltd.	4,981,250	National Grid Insurance USA Ltd.
Total Property, Public Liability, Terrorism, BI					23,871,732	
National Grid USA	Excess Workers' Comp	07/01/16-07/01/17	EW1-62N-004536-576 (MA)	Liberty Mutual Insurance Company	1,208,778	Marsh USA Inc.
National Grid USA	Cargo Marine Transit	02/28/16-02/28/17	N05698625	Indemnity Insurance North America (an Ace USA Co.)	9,400	Marsh USA Inc.
National Grid USA	Business Travel Accident	01/01/16-01/01/17	GTP9132752-A	National Union Fire Insurance Company of Pittsburgh (AIG)	67,099	Marsh USA Inc.
Niagara Mohawk Power Corp. and National Grid (US) Holdings Ltd.	Aviation	04/01/16-04/01/17	10045246	Global Aerospace, Inc.	221,414	Marsh USA Inc.
National Grid USA	Fidelity Bond-Crime	11/30/16-11/30/17	28405318	National Union Fire Insurance Company of Pittsburgh (AIG)	68,237	Marsh USA Inc.
National Grid USA	Fidelity Bond-Crime	11/30/16-11/30/17	BCCR4500245520	Berkley	17,969	Marsh USA Inc.
National Grid USA	Employment Practices	11/30/16-11/30/17	02-817-52-42	National Union Fire Insurance Company of Pittsburgh (AIG)	196,000	Marsh USA Inc.
National Grid USA	Fiduciary Liability	11/30/16-11/30/17	02-817-52-44	National Union Fire Insurance Company of Pittsburgh (AIG)	74,261	Marsh USA Inc.
National Grid USA	Fiduciary Liability	11/30/16-11/30/17	6800-2140	Chubb (Federal Insurance co)	46,000	Marsh USA Inc.
National Grid USA	Fiduciary Liability	11/30/16-11/30/17	FX5040715P	AEGIS	176,426	Marsh USA Inc.
National Grid USA	Fiduciary Liability	11/30/16-11/30/17	27359216FL	EIM	147,368	Marsh USA Inc.
Total Fidelity Bond-Crime, Employment Practices, Fiduciary Liability					726,261	Marsh USA Inc.
National Grid plc, incl. NGUSA	Directors & Officers	12/01/16-12/01/17	Various	Various	802,349	Willis Limited
National Grid plc, incl. NGUSA	Directors & Officers	12/01/16-12/01/17	DP5428204P	AEGIS	211,698	AEGIS
National Grid plc, incl. NGUSA	Directors & Officers	12/01/16-12/01/17	293595-16DO	EIM	310,979	EIM
Total Directors & Officers					1,325,026	
National Grid USA	Property Inspection*	various	N/A	Global Risk Consultants Corp.	10,000	Global Risk Consultants Corp.
National Grid USA	Property Inspection*	various	N/A	Arise Incorporated	11,375	Arise Incorporated
National Grid USA	Property Inspection*	various	N/A	Arise Incorporated	1,530	Arise Incorporated
National Grid USA	Property Inspection*	various	N/A	Arise Incorporated	11,375	Arise Incorporated
National Grid USA	Property Inspection*	various	N/A	Global Risk Consultants Corp.	10,000	Global Risk Consultants Corp.
National Grid USA	Property Inspection*	various	N/A	Arise Incorporated	12,475	Arise Incorporated
Total Property Inspection					56,755	
National Grid USA	Broker Fee*	various	N/A	Marsh USA Inc.	34,148	Marsh USA Inc.
National Grid USA	Broker Fee*	various	N/A	Marsh USA Inc.	268,196	Marsh USA Inc.
National Grid USA	Broker Fee*	various	N/A	Marsh USA Inc.	260,114	Marsh USA Inc.
Total Broker Fee					562,458	
National Grid USA	Surety Bonds	various	N/A	Travelers	276,978	
National Grid USA	Letter of Credit Fee	01/01/16-12/31/16	N/A	JPMorgan Chase	1,272	

*Note:
1. Property Inspection - invoices from Arise Incorporated and Global Risk Consultants show the entire invoice amount billed to National Grid USA. Invoices are not broken out by entity. The fees are allocated based on allocation code G-020.
1. Broker Fee - invoices from Marsh USA Inc. show the entire invoice amount billed to National Grid USA. Invoices are not broken out by entity. The fees are allocated based on allocation codes G-020, G-012 and N-139.

nationalgrid		PAYMENT REQUEST			
Date: <u>04/07/16</u>		Due Date: <u>04/18/16</u>			
Check One Method of Payment					
<input type="checkbox"/> CHECK		<input type="checkbox"/> ACH			
<input checked="" type="checkbox"/> WIRE					
Check Stub Message: (max. limit of 50 Characters)		Bank Name: _____	Bank Name: _____		
		Routing #: _____	Routing #: _____		
(Check One): Yes: <input type="checkbox"/> No: <input type="checkbox"/>		Account #: _____	Account #: _____		
Separate Check <input type="checkbox"/>		Reference Information for Beneficiary Invoice #77035, National Grid USA Excess Liability Policy No. XL5088705P			
Mail Check to Payee <input type="checkbox"/>					
OR					
Mail Check to Internal Location: <input type="checkbox"/>					
Location of Service (Required Information):		<i>AP Use Only:</i>			
City: <u>Waltham</u>	State: <u>MA</u> Zip Code: <u>02451</u>	Wired By: _____	Authorized By: _____		
		Value Date: _____	ET #: _____		
Vendor Information					
Payable To: <u>Associated Electric & Gas Insurance Services Ltd</u>		Federal Tax No. or SS #:			
		Vendor #: <u>1000019525</u>			
Address: <u>1 Meadowlands Plaza, East Rutherford, NJ 07073</u>		Invoice #: <u>77035</u>			
Reason for Payment: <u>NGUSA Excess Liability Insurance Premium, Policy Period 4/1/16-17 [AEGIS-Primary Layer]</u>		Paying Company: <u>5110</u>	Amount: <u>\$7,357,649.00</u>		
		Service Company			
National Grid Accounting					
G/L Account	Profit Center	WBS	Order	Operation	Amount
C1651099	SVC8000				\$7,357,649.00
Approver's Name:		Please Print <u>Timothy Kiernan</u>		Employee ID# <u>tkiernan 71045250</u>	
Preparer's Name:		Please Print <u>Patricia Needham</u>		Phone Number <u>(781) 907-2306</u>	
NON-PURCHASE ORDER CATEGORY					
01 Advertising	09 Easements	17 Incentive/Marketing Program	25 Outside Services	33 Subscription	
02 Awards/Gifts	10 Flagging	18 Inspection/Insurance	Inactive	34 Summons/DMV/Tolls	
03 Financial Payment	11 Fleet Fuel*	19 Legal Professionals/Services		35 Tax Payments/Assessments	
Inactive	12 Fleet Leasing*	20 Legal/Settlement/Claim		36 Training/Registration/Semin	
05 Charitable/Sponsorship	13 Freight/Postage	21 Marketer Bill		37 Utility/Telephone/Water/Ad	
06 Clothing/ Safety Shoes	14 Government/Municipality	Inactive		38 Other-must be approved AP	
Inactive	15 Hotels/ Lodging*	23 Transportation Service			
08 Dues/Fees/Permits	16 HR/Med/Workman Comp	24 Natural Gas/Energy Purch			
					Please Choose One
*Sales tax paid for these services/materials			Forward to: Accounts Payable Administrator for Processing		

Mail To:
ASSOCIATED ELECTRIC & GAS
INSURANCE SERVICES
16872 Collection Center Drive
Chicago, IL 60693-0168



Overnight Delivery:
Bank of America Lockbox Services
Associated Electric & Gas Insurance Services
16872 Collection Center Drive
Chicago, IL 60693-0168

Wire Transfer:



Broker: Marsh Inc.
1166 Avenue of The Americas
New York, NY 10036-2708

Insured: National Grid (US) Holdings LTD
1-3 Strand
London, EN WC2N 5EH

Invoice Number: 77035
Date of Invoice: 03/30/2016
Policy Number: XL5088705P

THIS PREMIUM MAY BE SUBJECT TO STATE AND/OR LOCAL PREMIUM TAXES OR FEES.
IT IS THE INSURED'S RESPONSIBILITY TO PAY ANY APPLICABLE TAXES AND/OR FEES AND TO MAKE THOSE PAYMENTS DIRECTLY TO THE
APPROPRIATE STATE OR LOCAL AGENCY.

EFFECTIVE DATES		DESCRIPTION	PREMIUM CHARGE	PREMIUM CREDIT
FROM	TO			
04/01/2016	04/01/2017	Excess Liability Insurance Policy Premium	\$ 7,007,649	
		Terrorism Premium	\$ 350,000	
AMOUNT DUE AEGIS			\$ 7,357,649	

PAYMENT DUE THE LATER OF 20 DAYS FROM EFFECTIVE DATE OR 15 DAYS FROM INVOICE DATE
AN ADDITIONAL CHARGE BASED ON A RATE OF 2% PER MONTH WILL BE MADE ON PAST DUE AMOUNTS

PLEASE MAKE CHECKS PAYABLE TO ASSOCIATED ELECTRIC AND GAS INSURANCE SERVICES, LIMITED
AND RETURN ONE COPY OF THIS INVOICE WITH PAYMENT

05686100

[PLEASE RETURN WITH PAYMENT]

nationalgrid		PAYMENT REQUEST			
Date: <u>04/14/16</u>		Due Date: <u>04/27/16</u>			
Check One Method of Payment					
<input type="checkbox"/> CHECK		<input type="checkbox"/> ACH			
<input checked="" type="checkbox"/> WIRE					
Check Stub Message: (max. limit of 50 Characters)		Bank Name: _____	Bank Name:		
		Routing #: _____	Routing #:		
		Account #: _____	Account #:		
(Check One): Yes: <input type="checkbox"/> No: <input type="checkbox"/>		<i>Reference Information for Beneficiary</i> Policy # 253357-16GL			
Separate Check <input type="checkbox"/>					
Mail Check to Payee <input type="checkbox"/>					
OR					
Mail Check to Internal Location: <input type="checkbox"/>					
Location of Service (Required Information):		<i>AP Use Only:</i>			
City: <u>Waltham</u>	State: <u>MA</u>	Zip Code: <u>02451</u>	Wired By: _____ Authorized By: _____		
		Value Date: _____	ET #: _____		
Vendor Information					
Payable To: <u>Energy Insurance Mutual</u>		Federal Tax No. or SS #:			
		Vendor #: <u>1000004597</u>			
Address: <u>3000 Bayport Drive, Suite 550, Tampa, FL 33607-8418</u>		Invoice #: <u>32098</u>			
Reason for Payment: <u>NGUSA Excess Liability Insurance Premium, Policy Period 4/1/16-17 [EIM-1st Excess Layer]</u>		Paying Company: <u>5110</u>	Amount: <u>\$738,937.00</u>		
		NGUSA Service Company			
National Grid Accounting					
G/L Account	Profit Center	WBS	Order	Operation	Amount
C1651099	SVC8000				\$738,937.00
Approver's Name:		<u>Timothy Kiernan</u>		Employee ID#	
				<u>tkiernan 71045250</u>	
Preparer's Name:		<u>Patricia Needham</u>		Phone Number	
				<u>(781) 907-2306</u>	
NON-PURCHASE ORDER CATEGORY					
01 Advertising	09 Easements	17 Incentive/Marketing Program	25 Outside Services	33 Subscription	
02 Awards/Gifts	10 Flagging	18 Inspection/Insurance	Inactive	34 Summons/DWV/Tolls	
03 Financial Payment	11 Fleet Fuel*	19 Legal Professional Services	27 Payments on Behalf of LPA	35 Tax Payments/Assessments	
Inactive	12 Fleet Leasing*	20 Legal/Settlement/Claim	28 Police/Sheriffs/Marshals	36 Training/Registration/Semin.	
05 Charitable/ Sponsorship	13 Freight/Postage	21 Marketer Bill	29 Real Estate Rentals/Leases	37 Utility/Telephone/Water/Ad	
06 Clothing/ Safety Shoes	14 Government/Municipality	Inactive	30 Rebate Program	38 Other-must be approved AP	
Inactive	15 Hotels/ Lodging*	23 Transportation Service	31 Refund/Adjust/Reimburse		
08 Dues/Fees/Permits	16 HR/Med/Workman Comp	24 Natural Gas/Energy Purch.	32 R&D Initiative		
				Please Choose One	
*Sales tax paid for these services/materials			Forward to: Accounts Payable Administrator for Processing		

 <p>3000 Bayport Drive Suite 550 Tampa, Florida 33607-8418 (813) 287-2117 - Fax: (813) 874-2523</p>	INVOICE		
	INSURED NAME: National Grid (US) Holdings Ltd One MetroTech Center, 15 th Floor Brooklyn, New York 11201		
	INVOICE NUMBER	ISSUE DATE	DUE DATE
	0000032098	03/14/16	05/01/16

EFFECTIVE DATE	EXPIRATION DATE	POLICY NUMBER	DESCRIPTION	AMOUNT
04/01/16	04/01/17	253357-16GL	Annual Premium due by May 1, 2016	\$ 738,937.00
				\$ 738,937.00
				TOTAL DUE

JST 03/14/16

nationalgrid		PAYMENT REQUEST			
Date: <u>04/07/16</u>		Due Date: <u>04/29/16</u>			
Check One Method of Payment					
<input type="checkbox"/> CHECK		<input checked="" type="checkbox"/> ACH			
<input type="checkbox"/> WIRE					
Check Stub Message: (max. limit of 50 Characters)		Bank Name:	Bank Name:		
		Routing #:	Routing #:		
		Account #:	Account #:		
(Check One): Yes: No: Separate Check <input type="checkbox"/> <input type="checkbox"/> Mail Check to Payee <input type="checkbox"/> <input type="checkbox"/> OR Mail Check to Internal Location:		INSURANCE NOTES:			
		Public Liability \$4,981,250.00			
		Business Interruption \$984,808.00			
		Property \$17,583,535.00			
		Property Terrorism \$322,139.00			
		\$23,871,732.00			
Location of Service (Required Information):		AP Use Only:			
City: <u>Waltham</u>	State: <u>MA</u>	Zip Code: <u>02451</u>	Value Date: _____ ET #: _____		
Wired By: _____		Authorized By: _____			
Vendor Information					
Payable To: National Grid Insurance USA Ltd		Federal Tax No. or SS #: _____			
Address: c/o AON Insurance Managers (USA) Inc., 199 Water Street, New York, NY 10038		Vendor #: 1000033008			
Reason for Payment: Invoice No. 2016/17/001, 4/1/16-17 NGUSA Insurance Renewals for Public Liability, Business Interruption, Property, Property Terrorism		Invoice #: 2016/17/001			
		Paying Company: 5110	Amount: \$23,871,732.00		
		NGUSA Service Company			
National Grid Accounting					
G/L Account	Profit Center	WBS	Order	Operation	Amount
C1651099	SVC8000	[for Public Liability]			\$4,981,250.00
C1651099	SVC8000	[for Business Interruption]			\$984,808.00
C1651099	SVC8000	[for Property]			\$17,579,285.00
C1651099	SVC8000	[for Property Terrorism]			\$321,389.00
C1740030	SVC8000	[for NMProperties-Property]			\$4,250.00
C1740030	SVC8000	[for NMProperties-Terrorism]			\$750.00
Approver's Name:			Employee ID#		
Timothy Kiernan			tkiernan 71045250		
Preparer's Name:			Phone Number		
Patricia Needham			(781) 907-2306		
NON-PURCHASE ORDER CATEGORY					
01 Advertising	09 Easements	17 Incentive/Marketing Program	25 Outside Services	33 Subscription	
02 Awards/Gifts	10 Flagging	18 Inspection/Insurance	Inactive	34 Summons/DMV/Tolls	
03 Financial Payment	11 Fleet Fuel*	19 Legal Professional Services	27 Payments on Behalf of LIPA	35 Tax Payments/Assessments	
Inactive	12 Fleet Leasing*	20 Legal/Settlement/Claim	28 Police/Sheriffs/Marshals	36 Training/Registration/Semin.	
05 Charitables/ Sponsorship	13 Freight/Postage	21 Marketer Bill	29 Real Estate Rentals/Leases	37 Utility/Telephone/Water/Ad	
06 Clothing/ Safety Shoes	14 Government/Municipality	Inactive	30 Rebate Program	38 Other-must be approved AP	
Inactive	15 Hotels/Lodging*	23 Transportation Service	31 Refund/Adjust/Reimburse		
08 Dues/Fees/Permits	16 HR/Med/Workman Comp	24 Natural Gas/Energy Purch.	32 R&D Initiative		
					Please Choose One
*Sales tax paid for these services/materials			Forward to: Accounts Payable Administrator for Processing		



National Grid Insurance USA Ltd

National Grid USA
One MetroTech Center
Brooklyn, NY 11201
For the Attention of Timothy Kiernan

Date	Please quote our reference number: <u>2016/17/001</u>	Amount
March 31, 2016	Renewal premium for the operational insurances for: National Grid USA, (excluding Power Generation assets for BI, Property and Terrorism) Effective from Apr-01-2016 to Mar-31-2017 both dates inclusive.	
	A. Business Interruption	USD 984,808
	B. Property	USD 17,583,535
	A. Public Liability	USD 4,981,250
	C. Terrorism	USD 322,139
	Net Total :	USD 23,871,732
	Payment must be made to National Grid Insurance USA Ltd within 60 days.	
	Gross Amount Due :	USD 23,871,732
	Please quote our reference number above on all correspondence. Note: All payments are to be made by telegraphic transfer.	
	Banking details :	
	Account Name :	
	Account Number :	
	ABA # :	

Notes regarding NM Properties, Inc:		
A. Coverage does not apply		
B. Share of Property insurance premium - \$4,250.00		
C. Share of Terrorism insurance premium - \$ 750.00		

National Grid Insurance USA Ltd

c/o Aon Insurance Managers (USA) Inc., 199 Water Street, New York, NY, 10038
Telephone: + 1.802.652.1554
Fax: + 1.802.860.0440



INVOICE

Marsh USA Inc.
New York NY
(212) 345-6000

Page	2 of 2
Invoice Total	1,208,778.00 USD
Invoice No.	934415905966
Invoice Date	07/15/2016
Effective Date	07/01/2016
Client No.	9344100000
Installment No.	

Billed To: Tim Kiernan
National Grid Services, Inc.
One Metrotech Plaza
Brooklyn, NY 11228

Original
Policy Holder: National Grid Services, Inc.
Billing Effective Date: 07/01/2016

Insurer	Policy No./ Project No.	Expiration Date	Description/Type of Coverage	Item	Amount
LIBERTY MUTUAL	EW162N004536556	07/01/2017	Work Comp Coverage	PREMIUM	713,179.00
LIBERTY MUTUAL	EW562N004536566	07/01/2017	Work Comp Coverage	PREMIUM	72,527.00
LIBERTY MUTUAL	EW762N004536576	07/01/2017	Work Comp Coverage	PREMIUM	423,072.00
Invoice Comments:					
Excess WC Renewal Invoice eff 7/1/16					
Invoice Total					1,208,778.00

Marsh earns and retains interest income on premium payments held by Marsh on behalf of insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable insurer, where permitted by law.

If you are interested in financing your premiums please contact the Marsh Premium Finance team at premiumfinance@marsh.com to determine eligibility.



Marsh USA Inc.
New York NY
(212) 345-6000

Billed To: Tim Kiernan
National Grid Services, Inc.
One Metrotech Plaza
Brooklyn, NY 11228

INVOICE

Page	1 of 2
Invoice Total	1,208,778.00 USD
Invoice No.	934415905966
Invoice Date	07/15/2016
Effective Date	07/01/2016
Client No.	9344100000
Installment No.	

If you are not currently receiving invoices via e-mail but would like to do so, please notify your Marsh client team.

Remittance Copy

Marsh earns and retains interest income on premium payments held by Marsh on behalf of insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable insurer, where permitted by law.

If you are interested in financing your premiums please contact the Marsh Premium Finance team at premiumfinance@marsh.com to determine eligibility.

Detach and remit this portion with your payment

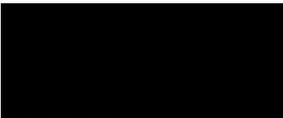
Client No.	Invoice No.	Payment Due	Invoice Total	Amount Paid
9344100000	934415905966	Immediate	1,208,778.00 USD	

Thank you for your prompt payment.

Please indicate Invoice Number 934415905966 on your remittance.

Additionally, for ACH or wire payments, e-mail remittance detail to: FiduciaryserviceRequest.US@marsh.com

By ACH:



By Wire:



By Mail:

Marsh USA Inc.
P.O. Box 417724
Boston, MA 02241-7724 USA

934415905966 012087780007



Marsh USA Inc.
New York NY
(212) 345-6000

INVOICE

Page	2 of 2
Invoice Total	8,055.00 USD
Invoice No.	980716015828
Invoice Date	03/22/2016
Effective Date	02/28/2016
Client No.	9807187443
Installment No.	

Billed To
Timothy Kiernan
National Grid USA
One Metro Tech Center
Brooklyn, NY 11201

Original
Policy Holder: National Grid USA
Billing Effective Date: 02/28/2016



Insurer	Policy No./ Project No.	Expiration Date	Description/Type of Coverage	Item	Amount
INDEMNITY	N05698625	02/28/2017	Cargo Global Transit	PREMIUM	8,055.00
Invoice Comments: Invoice for Marine OC 2016 Policy# N05698625					
Invoice Total					8,055.00

Marsh earns and retains interest income on premium payments held by Marsh on behalf of insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable insurer, where permitted by law.

If you are interested in financing your premiums please contact the Marsh Premium Finance team at premiumfinance@marsh.com to determine eligibility.



Marsh USA Inc.
New York NY
(212) 345-6000

Billed To
Timothy Kiernan
National Grid USA
One Metro Tech Center
Brooklyn, NY 11201

INVOICE

Page	1 of 2
Invoice Total	8,055.00 USD
Invoice No.	980716015828
Invoice Date	03/22/2016
Effective Date	02/28/2016
Client No.	9807187443
Installment No.	



If you are not currently receiving invoices via e-mail but would like to do so, please notify your Marsh client team.

Remittance Copy

Marsh earns and retains interest income on premium payments held by Marsh on behalf of insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable insurer, where permitted by law.

If you are interested in financing your premiums please contact the Marsh Premium Finance team at premlumfinance@marsh.com to determine eligibility.

Detach and remit this portion with your payment

Client No.	Invoice No.	Payment Due	Invoice Total	Amount Paid
9807187443	980716015828	Immediate	8,055.00 USD	

Thank you for your prompt payment.

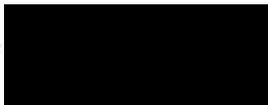
Please indicate Invoice Number 980716015828 on your remittance.

Additionally, for ACH or wire payments, e-mail remittance detail to: FiduciaryserviceRequest.US@marsh.com

By ACH



By Wire



By Mail

Marsh USA Inc.
P.O. Box 417724
Boston, MA 02241-7724 USA

9807160158285 000080550020



Marsh USA Inc.
New York NY
(212) 345-6000

INVOICE

Page	1 of 2
Invoice Total	1,345.00 USD
Invoice No.	980711927736
Invoice Date	04/17/2017
Effective Date	02/28/2016
Client No.	9807187443
Installment No.	

Billed To:
Timothy Kiernan
National Grid USA
One Metro Tech Center
Brooklyn, NY 11201

If you are not currently receiving invoices via e-mail but would like to do so, please notify your Marsh client team.

Remittance Copy

Marsh earns and retains interest income on premium payments held by Marsh on behalf of insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable insurer, where permitted by law.

If you are interested in financing your premiums please contact the Marsh Premium Finance team at premiumfinance@marsh.com to determine eligibility.

Detach and remit this portion with your payment

Client No.	Invoice No.	Payment Due	Invoice Total	Amount Paid
9807187443	980711927736	Immediate	1,345.00 USD	

Thank you for your prompt payment.

Please indicate Invoice Number 980711927736 on your remittance.

Additionally, for ACH or wire payments, e-mail remittance detail to: FiduciaryserviceRequest.US@marsh.com

By ACH:



By Wire:



By Mail:

Marsh USA Inc.
P.O. Box 417724
Boston, MA 02241-7724 USA



Marsh USA Inc.
New York NY
(212) 345-6000

Billed To:
Timothy Kiernan
National Grid USA
One Metro Tech Center
Brooklyn, NY 11201

INVOICE

Page	2 of 2
Invoice Total	1,345.00 USD
Invoice No.	980711927736
Invoice Date	04/17/2017
Effective Date	02/28/2016
Client No.	9807187443
Installment No.	

Extension

Policy Holder: **National Grid USA**
Billing Effective Date: **02/28/2017**

Insurer	Policy No./ Project No.	Expiration Date	Description/Type of Coverage	Item	Amount
INDEMNITY	N05698625	04/30/2017	Cargo Global Transit	PREMIUM	1,345.00
Invoice Comments:					
Marine Cargo Policy# N05698625 Invoice for policy extension until 4/30/2017, with additional premium of \$1,345					
Invoice Total					1,345.00

Marsh earns and retains interest income on premium payments held by Marsh on behalf of insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable insurer, where permitted by law.

If you are interested in financing your premiums please contact the Marsh Premium Finance team at premiumfinance@marsh.com to determine eligibility.



Marsh USA Inc.
New York NY
(212) 345-6000

Billed To: Timothy Kiernan
National Grid USA
One Metro Tech Center
Brooklyn, NY 11201

INVOICE

Page	2 of 2
Invoice Total	67,098.50 USD
Invoice No.	980711027170
Invoice Date	10/30/2015
Effective Date	01/01/2016
Client No.	9807187443
Installment No.	

Installment
Policy Holder: National Grid USA
Billing Effective Date: 01/01/2016

Insurer	Policy No./ Project No.	Expiration Date	Description/Type of Coverage	Item	Amount
NATIONAL UN-PA	GTP 9132752-A	01/01/2017	Business Travel Accid	PREMIUM	67,098.50
Invoice Comments: THIRD ANNUAL INSTALLMENT PREMIUM KING/BROWN					
Invoice Total					67,098.50

Marsh earns and retains interest income on premium payments held by Marsh on behalf of insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable insurer, where permitted by law.

If you are interested in financing your premiums please contact the Marsh Premium Finance team at premiumfinance@marsh.com to determine eligibility.



Marsh USA Inc.
New York NY
(212) 345-6000

Billed To: Timothy Kiernan
National Grid USA
One Metro Tech Center
Brooklyn, NY 11201

INVOICE

Page	1 of 2
Invoice Total	67,098.50 USD
Invoice No.	980711027170
Invoice Date	10/30/2015
Effective Date	01/01/2016
Client No.	9807187443
Installment No.	

If you are not currently receiving invoices via e-mail but would like to do so, please notify your Marsh client team.

Remittance Copy

Marsh earns and retains interest income on premium payments held by Marsh on behalf of Insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable Insurer, where permitted by law.

If you are interested in financing your premiums please contact the Marsh Premium Finance team at premiumpfinance@marsh.com to determine eligibility.

Detach and remit this portion with your payment

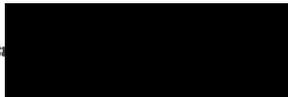
Client No.	Invoice No.	Payment Due	Invoice Total	Amount Paid
9807187443	980711027170	Immediate	67,098.50 USD	

Thank you for your prompt payment.

Please indicate Invoice Number 980711027170 on your remittance.

Additionally, for ACH or wire payments, e-mail remittance detail to: FiduciaryserviceRequest.US@marsh.com

By ACH:



By Wire:



By Mail: Marsh USA Inc.
P.O. Box 417724
Boston, MA 02241-7724 USA

9807110271705 000670985006

NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA.

Executive Offices: 175 Water Street, 15th Floor, New York, NY 10038

(212) 458-5000

(a capital stock company, herein referred to as the Company)

Policyholder: National Grid USA, including all affiliates and subsidiary companies as now exists or are hereinafter constituted or acquired

Policy Number: GTP 0009132752-A

BLANKET ACCIDENT INSURANCE

Policy Amendment No. 2

This Policy Amendment is attached to and made part of the Policy effective January 1, 2016 at 12:01 AM, Standard Time at the address of the Policyholder. Any changes in coverage apply only with respect to accidents and emergency sicknesses that occur on or after that date. Any changes in premium apply as of the first premium due date on or after the effective date of this Policy Amendment.

It is hereby Understood and Agreed that the Third Annual Installment for the period commencing January 1, 2016 and ending January 1, 2017 is now due to the Company.

Third Annual Installment Premium Due: \$67,098.50

This Policy Amendment expires concurrently with the Policy and is subject to all of the provisions, limitations and conditions of the Policy except as they are specifically modified by this Policy Amendment.

The President and Secretary of National Union Fire Insurance Company of Pittsburgh, Pa. witness this Policy Amendment:



President



Secretary

(Signed for the Policyholder)
(Signature required if amendment reduces or eliminates coverage)

(Title)

(Date)

C11863DBG-NY

GTP

nationalgrid		PAYMENT REQUEST			
Date: <u>04/07/16</u>		Due Date: <u>04/22/16</u>			
Check One Method of Payment					
<input type="checkbox"/> CHECK		<input checked="" type="checkbox"/> ACH			
Check Stub Message: (max. limit of 50 Characters)		Bank Name: XXXXXXXXXX	Bank Name: _____		
		Routing #: _____	Routing #: _____		
(Check One): Yes: <input type="checkbox"/> No: <input type="checkbox"/>		Account #: _____	Account #: _____		
Separate Check <input type="checkbox"/>		<i>Reference Information for Beneficiary</i>			
Mail Check to Payee <input type="checkbox"/>					
OR Mail Check to Internal Location: <input type="checkbox"/>					
Location of Service (Required Information):		<i>AP Use Only:</i>			
City: <u>Waltham</u>	State: <u>MA</u> Zip Code: <u>02451</u>	Wired By: _____	Authorized By: _____		
		Value Date: _____	ET #: _____		
Vendor Information					
Payable To: <u>Marsh USA Inc.</u>		Federal Tax No. or SS #: _____			
		Vendor #: <u>4000012444</u>			
Address: <u>P.O. Box 417724, Boston, MA 02241-7724</u>		Invoice #: <u>670358996387</u>			
Reason for Payment: <u>Inv #670358996387, 4/1/16-17 Aviation Hull & Liability, Global Aerospace Policy # 10045246</u>		Paying Company: <u>5110</u>	Amount: <u>\$221,414.00</u>		
		NGUSA Service Company			
National Grid Accounting					
G/L Account	Profit Center	WBS	Order	Operation	Amount
C6604500	(for SvcCo-Prop)	X008838.AG0984	XG020008983		\$33,750.00
C6604500	(for SvcCo-Liab)	X008918.AG0728	XG020009172		\$43,522.00
C6604500	(for NMPC-Prop)	X008843.AG0984	X521T008988		\$102,628.00
C6604500	(for NMPC-Liab)	X008921.AG0728	X521T009173		\$41,514.00
Approver's Name: <u>Timothy Kiernan</u>		Employee ID# <u>tkiernan 71045250</u>			
Preparer's Name: <u>Patricia Needham</u>		Phone Number <u>(781) 907-2306</u>			
NON-PURCHASE ORDER CATEGORY					
01 Advertising	09 Easements	17 Incentive/Marketing Program	25 Outside Services	33 Subscription	
02 Awards/Gifts	10 Flagging	18 Inspection/Insurance	Inactive	34 Summons/DWV/Tolls	
03 Financial Payment	11 Fleet Fuel*	19 Legal/Professional Services	27 Payments on Behalf of LIPA	35 Tax Payments/Assessments	
Inactive	12 Fleet Leasing*	20 Legal/Settlement/Claim	28 Police/Sheriffs/Marshals	36 Training/Registration/Semin	
05 Charitable/ Sponsorship	13 Freight/Postage	21 Marketer Bill	29 Real Estate Rentals/Leases	37 Utility/Telephone/Water/Ad	
06 Clothing/ Safety Shoes	14 Government/Municipality	Inactive	30 Rebate Program	38 Other-must be approved AP	
Inactive	15 Hotels/ Lodging*	21 Transportation Service	31 Refund/Adjust/Reimburse	Please Choose One	
08 Dues/Fees/Permits	16 HR/Med/Workman Comp	24 Natural Gas/Energy Purch	32 R&D Initiative		
*Sales tax paid for these services/materials			Forward to: Accounts Payable Administrator for Processing		



Marsh USA Inc.
New York NY
(212) 345-6000

Billed To
Barbara Schnettler
National Grid Services, Inc.
300 Erie Blvd. West
A-4
Syracuse, NY 13202

INVOICE

Page	1 of 2
Invoice Total	221,414.00 USD
Invoice No.	670358996387
Invoice Date	03/25/2016
Effective Date	04/01/2016
Client No.	6703500000
Installation No.	



If you are not currently receiving invoices via e-mail but would like to do so, please notify your Marsh client team.

Remittance Copy

Marsh earns and retains interest income on premium payments held by Marsh on behalf of insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable insurer, where permitted by law.

If you are interested in financing your premiums please contact the Marsh Premium Finance team at premlumfinance@marsh.com to determine eligibility.

Detach and remit this portion with your payment

Client No.	Invoice No.	Payment Due	Invoice Total	Amount Paid
6703500000	670358996387	Immediate	221,414.00 USD	

Thank you for your prompt payment.

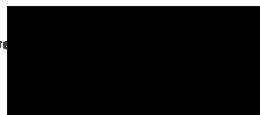
Please indicate Invoice Number 670358996387 on your remittance.

Additionally, for ACH or wire payments, e-mail remittance detail to: FiduciaryserviceRequest.US@marsh.com

By ACH



By Wire



593

By Mail

Marsh USA Inc.
P.O. Box 417724
Boston, MA 02241-7724 USA

670358996387 002214140005



Marsh USA Inc.
New York NY
(212) 345-6000

INVOICE

Page	1 of 2
Invoice Total	726,260.60 USD
Invoice No.	670358342998
Invoice Date	12/05/2016
Effective Date	11/30/2016
Client No.	6703500000
Installment No.	

Billed To: Tim Kiernan, Director of Insurance
National Grid USA
One Metrotech Center
Brooklyn, NY 11201

If you are not currently receiving invoices via e-mail but would like to do so, please notify your Marsh client team.

Remittance Copy

Marsh earns and retains interest income on premium payments held by Marsh on behalf of insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable insurer, where permitted by law.

If you are interested in financing your premiums please contact the Marsh Premium Finance team at premiumfinance@marsh.com to determine eligibility.

Detach and remit this portion with your payment

Client No.	Invoice No.	Payment Due	Invoice Total	Amount Paid
6703500000	670358342998	Immediate	726,260.60 USD	

Thank you for your prompt payment.

Please indicate Invoice Number 670358342998 on your remittance.

Additionally, for ACH or wire payments, e-mail remittance detail to: FiduciaryserviceRequest.US@marsh.com

By ACH:

Marsh USA Inc.
P.O. Box 417724
Boston, MA 02241-7724 USA

By Wire:



6703583429981 007262606017



Marsh USA Inc.
New York NY
(212) 345-6000

INVOICE

Page	2 of 2
Invoice Total	726,260.60 USD
Invoice No.	670358342998
Invoice Date	12/05/2016
Effective Date	11/30/2016
Client No.	6703500000
Installment No.	

Billed To: Tim Kiernan, Director of Insurance
National Grid USA
One Metrotech Center
Brooklyn, NY 11201

Original
Policy Holder: National Grid Services, Inc.
Billing Effective Date: 11/30/2016

Insurer	Policy No./ Project No.	Expiration Date	Description/Type of Coverage	Item	Amount
NATIONAL UN-PA	028175242	11/30/2017	Other Employ Practice Liab	PREMIUM	196,000.00
AEGIS	FX5040715P	11/30/2017	Fiduciary Liability	PREMIUM	170,000.00
AEGIS	FX5040715P	11/30/2017	Fiduciary Liability	SURPLUS LN TAX	6,120.00
AEGIS	FX5040715P	11/30/2017	Fiduciary Liability	STAMPING FEE	306.00
NATIONAL UN-PA	028175244	11/30/2017	Fiduciary Liability	PREMIUM	74,261.00
ENERGY	27359216FL	11/30/2017	Fiduciary Liability	PREMIUM	142,000.00
ENERGY	27359216FL	11/30/2017	Fiduciary Liability	SURPLUS LN TAX	5,112.00
ENERGY	27359216FL	11/30/2017	Fiduciary Liability	STAMPING FEE	255.60
FEDERAL INS	68002140	11/30/2017	Fiduciary Liability	PREMIUM	46,000.00
NATIONAL UN-PA	028405318	11/30/2017	Commercial Crime	PREMIUM	68,237.00
BERKLEY	BCCR4500245520	11/30/2017	Commercial Crime	PREMIUM	17,969.00
Invoice Comments:					
Please note that premium payment terms are determined by the specific insurer and detailed on the respective binder of insurance. In order to avoid possible policy cancellation for non-payment of premium, please issue payment in full upon receipt of this invoice.					
Invoice Total					726,260.60

Marsh earns and retains interest income on premium payments held by Marsh on behalf of insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable insurer, where permitted by law.

If you are interested in financing your premiums please contact the Marsh Premium Finance team at premiumfinance@marsh.com to determine eligibility.

nationalgrid		PAYMENT REQUEST			
Date: <u>01/31/17</u>		Due Date: <u>01/31/17</u>			
1/31/2017					
[] CHECK		[] ACH			
[X] WIRE					
Check Stub Message: (max. limit of 50 Characters) D&O Renewal 2016-2017 Acct#1382064103		Bank Name: _____ Routing #: _____ Account #: _____			
(Check One): Yes: No: <input type="checkbox"/> Separate Check <input type="checkbox"/> Mail Check to Payee OR <input type="checkbox"/> Mail Check to Internal Location:		Insurance Notes: \$43,664.40 1st Excess Side A D&O \$150,052.50 2nd Excess D &O \$68,591.25 2nd Excess Side A D&O \$210,600.00 3rd Excess D&O \$131,625.00 4th Excess D&O \$94,770.00 5th Excess D&O \$47,385.00 Main Board Side A D&O \$55,661.45 CODA D&O			
		Bank Name: _____ Routing #: _____ IBAN: _____ Account #: _____			
		Reference Information for Beneficiary 35444P16,36006P16,35452P16,36009P16, 36010P16,36011P16,35475P16,35407P16 /000004PRM Account No. 1382064103			
Location of Service (Required Information): City: <u>Brooklyn</u> State: <u>NY</u> Zip Code: <u>11201</u>		AP Use Only: Wired By: _____ Authorized By: _____ Value Date: _____ ET #: _____			
Vendor Information					
Payable To: Willis Limited		Federal Tax No. or SS #: _____ Vendor #: 1000036998			
Address: 51 Lime Street, London EC3M 7DQ		Invoice #: Willis-D&O Jan 6 2017			
Reason for Payment: NGUSA D&O. Policy period 12/01/16-11/30/17. Account No. 1382064103		Paying Company: _____ Amount: _____ 5110 \$802,349.60 NGUSA Service Company			
National Grid Accounting					
G/L Account	Profit Center	WBS	Order	Operation	Amount
C1651099	SVC8000				\$802,349.60
Please Print Approver's Name: Timothy Kiernan		Employee ID# 71045250			
Please Print Preparer's Name: Haejae Lee		Phone Number (929) 324-4716			
NON-PURCHASE ORDER CATEGORY					
01 Advertising	09 Easements	17 Incentive/Marketing Program	25 Outside Services	33 Subscription	
02 Awards/Gifts	10 Flagging	18 Inspection/Insurance	Inactive	34 Summons/DMN/Tolls	
03 Financial Payment	11 Fleet Fuel*	19 Legal Professional Services	27 Payments on Behalf of LPA	35 Tax Payments/Assessments	
Inactive	12 Fleet Leasing*	20 Legal/Settlement/Claim	28 Police/Sheriffs/Marshals	36 Training/Registration/Semin.	
05 Charitables/ Sponsorship	13 Freight/Postage	21 Marketer Bill	29 Real Estate Rentals/Leases	37 Utility/Telephone/Water/Ad	
06 Clothing/ Safety Shoes	14 Government/Municipality	Inactive	30 Rebate Program	38 Other-must be approved AP	
Inactive	15 Hotels/ Lodging*	23 Transportation Service	31 Refund/Adjust/Reimburse		
08 Dues/Fees/Permits	16 HR/Med/Workman Comp	24 Natural Gas/Energy Purch	32 R&D Initiative		
					Please Choose One

Willis Limited

51 Lime Street London EC3M 7DQ United Kingdom
Telephone: +44 (0)2031246000 Fax: +44 (0)2031248223 Website: www.willis.com



Please quote our reference in any enquiry to Accounts Department

National Grid Plc
1-3 Strand
London
WC2N 5EH
United Kingdom

Account Number 1382064103
Your Reference
Our Reference 35444P16 / 000004PRM
Advice Date 06 January 2017

Debit Note

VAT Category: VAT Exemption

Insured: National Grid Plc
Period: 01 December 2016 to 30 November 2017
Type: Insurance of:
D&O Insurance

Details:

Premium due in respect of First Excess Side A Directors and Officers Liability Insurance

Premium	USD	43,664.40
Order Hereon 100.0000000%	USD	43,664.40
Net Amount Due From You	USD	43,664.40

Premium payable to Willis Limited on or before 17 January 2017.

Willis Limited will not be responsible for any consequences, including cancellation of cover, that may arise from any delay or failure by you to pay the amount payable by the stated date.

Please quote our reference 35444P16 / 000004PRM when making settlement.

In the event of query please contact Clare Filtness who is dealing with this item.
Contact details: 02031247217, Clare.Filtness@WillisTowersWatson.com

Willis Limited

51 Lime Street London EC3M 7DQ United Kingdom
Telephone: +44 (0)2031246000 Fax: +44 (0)2031248223 Website: www.willis.com



National Grid Plc
1-3 Strand
London
WC2N 5EH
United Kingdom

Please quote our reference in any enquiry to Accounts Department

Account Number 1382064103
Your Reference
Our Reference 36006P16 / 000004PRM
Advice Date 06 January 2017

Debit Note

VAT Category: VAT Exemption

Insured: National Grid Plc
Period: 01 December 2016 to 30 November 2017
Type: Insurance of:
Excess Directors and Officers Liability and Company Reimbursement Insurance

Details:

Premium due in respect of Second Excess Directors and Officers Liability Insurance

Premium	USD	150,052.50
Order Hereon 100.00000000%	USD	150,052.50
Net Amount Due From You	USD	150,052.50

Premium payable to Willis Limited on or before 17 January 2017.

Willis Limited will not be responsible for any consequences, including cancellation of cover, that may arise from any delay or failure by you to pay the amount payable by the stated date.

Please quote our reference 36006P16 / 000004PRM when making settlement.

In the event of query please contact Clare Filtness who is dealing with this item.
Contact details: 02031247217, Clare.Filtness@WillisTowersWatson.com

Willis Limited

51 Finsbury Street London EC2M 7DQ United Kingdom
Telephone: +44 (0)2031246000 Fax: +44 (0)2031248223 Website: www.willis.com



Please quote our reference in any enquiry to Accounts Department

National Grid Plc
1-3 Strand
London
WC2N 5EH
United Kingdom

Account Number 1382064103
Your Reference
Our Reference 35452P16 / 000004PRM
Advice Date 06 January 2017

Debit Note

VAT Category: VAT Exemption

Insured: National Grid Plc
Period: 01 December 2016 to 30 November 2017
Type: Insurance of:
D&O Insurance

Details:

Premium due in respect of Second Excess Side A Directors and Officers Liability Insurance

Premium	USD	68,591.25
Order Hereon 100.00000000%	USD	68,591.25
Net Amount Due From You	USD	68,591.25

Premium payable to Willis Limited on or before 17 January 2017.

Willis Limited will not be responsible for any consequences, including cancellation of cover, that may arise from any delay or failure by you to pay the amount payable by the stated date.

Please quote our reference 35452P16 / 000004PRM when making settlement.

In the event of query please contact Clare Filtness who is dealing with this item.
Contact details: 02031247217, Clare.Filtness@WillisTowersWatson.com

Willis Limited

51 Lime Street London EC3M 7DQ United Kingdom
Telephone: +44 (0)2031246000 Fax: +44 (0)2031248223 Website: www.willis.com



Please quote our reference in any enquiry to Accounts Department

National Grid Plc
1-3 Strand
London
WC2N 5EH
United Kingdom

Account Number 1382064103
Your Reference
Our Reference 36009P16 / 000004PRM
Advice Date 06 January 2017

Debit Note

VAT Category: VAT Exemption

Insured: National Grid Plc
Period: 01 December 2016 to 30 November 2017
Type: Insurance of:
Excess Directors and Officers Liability and Company Reimbursement
Insurance

Details:

Premium due in respect of Third Excess Directors and Officers Liability Insurance

Premium	USD	210,600.00
Order Hereon 100.00000000%	USD	210,600.00
Net Amount Due From You	USD	210,600.00

Premium payable to Willis Limited on or before 17 January 2017.

Willis Limited will not be responsible for any consequences, including cancellation of cover, that may arise from any delay or failure by you to pay the amount payable by the stated date.

Please quote our reference 36009P16 / 000004PRM when making settlement.

In the event of query please contact Clare Filtness who is dealing with this item.
Contact details: 02031247217, Clare.Filtness@WillisTowersWatson.com

Willis Limited

51 Lime Street London EC3M 7DQ United Kingdom
Telephone: +44 (0)2031246000 Fax: +44 (0)2031248223 Website: www.willis.com



National Grid Plc
1-3 Strand
London
WC2N 5EH
United Kingdom

Please quote our reference in any enquiry to Accounts Department

Account Number 1382064103
Your Reference
Our Reference 36010P16 / 000004PRM
Advice Date 06 January 2017

Debit Note

VAT Category: VAT Exemption

Insured: National Grid Plc
Period: 01 December 2016 to 30 November 2017
Type: Insurance of:
Excess Directors and Officers Liability and Company Reimbursement Insurance

Details:

Premium due in respect of Fourth Excess Directors and Officers Liability Insurance

Premium	USD	131,625.00
Order Hereon 100.00000000%	USD	131,625.00
Net Amount Due From You	USD	<u>131,625.00</u>

Premium payable to Willis Limited on or before 17 January 2017.

Willis Limited will not be responsible for any consequences, including cancellation of cover, that may arise from any delay or failure by you to pay the amount payable by the stated date.

Please quote our reference 36010P16 / 000004PRM when making settlement.

In the event of query please contact Clare Filtness who is dealing with this item.
Contact details: 02031247217, Clare.Filtness@WillisTowersWatson.com

Willis Limited

51 Lime Street London EC 3M 7DQ United Kingdom
Telephone: +44 (0)2031246000 Fax: +44 (0)2031248223 Website: www.willis.com



Please quote our reference in any enquiry to Accounts Department

National Grid Plc
1-3 Strand
London
WC2N 5EH
United Kingdom

Account Number 1382064103
Your Reference
Our Reference 36011P16 / 000004PRM
Advice Date 06 January 2017

Debit Note

VAT Category: VAT Exemption

Insured: National Grid Plc
Period: 01 December 2016 to 30 November 2017
Type: Insurance of:
Excess Directors and Officers Liability and Company Reimbursement
Insurance

Details:

Premium due in respect of Fifth Excess Directors and Officers Liability Insurance

Premium	USD	94,770.00
Order Hereon 100.00000000%	USD	94,770.00
Net Amount Due From You	USD	94,770.00

Premium payable to Willis Limited on or before 17 January 2017.

Willis Limited will not be responsible for any consequences, including cancellation of cover, that may arise from any delay or failure by you to pay the amount payable by the stated date.

Please quote our reference 36011P16 / 000004PRM when making settlement.

In the event of query please contact Clare Filtness who is dealing with this item.
Contact details: 02031247217, Clare.Filtness@WillisTowersWatson.com

Willis Limited

51 Lime Street London EC3M 7DQ United Kingdom
Telephone: +44 (0)2031246000 Fax: +44 (0)2031248223 Website: www.willis.com



Please quote our reference in any enquiry to Accounts Department

National Grid Plc
1-3 Strand
London
WC2N 5EH
United Kingdom

Account Number 1382064103
Your Reference
Our Reference 35475P16 / 000004PRM
Advice Date 06 January 2017

Debit Note

VAT Category: VAT Exemption

Insured: National Grid Plc
Period: 01 December 2016 to 30 November 2017
Type: Insurance of:
Directors & Officers Insurance

Details:

Premium due in respect of Main Board Side A Directors and Officers Liability Insurance

Premium	USD	47,385.00
Order Hereon 100.00000000%	USD	47,385.00
Net Amount Due From You	USD	47,385.00

Premium payable to Willis Limited on or before 17 January 2017.

Willis Limited will not be responsible for any consequences, including cancellation of cover, that may arise from any delay or failure by you to pay the amount payable by the stated date.

Please quote our reference 35475P16 / 000004PRM when making settlement.

In the event of query please contact Clare Filtness who is dealing with this item.
Contact details: 02031247217, Clare.Filtness@WillisTowersWatson.com

Willis Limited

51 Lime Street London EC3M 7DQ United Kingdom
Telephone: +44 (0)2031240000 Fax: +44 (0)2031248223 Website: www.willis.com



Please quote our reference in any enquiry to Accounts Department

National Grid Plc
1-3 Strand
London
WC2N 5EH
United Kingdom

Account Number 1382064103
Your Reference
Our Reference 35407P16 / 000004PRM
Advice Date 06 January 2017

Debit Note

VAT Category: VAT Exemption

Insured: National Grid Plc
Period: 01 December 2016 to 30 November 2017
Type: Insurance of:
D&O Insurance

Details:

Premium due in respect of CODA Directors and Officers Liability Insurance

Premium	USD	55,661.45
Order Hereon 100.00000000%	USD	55,661.45
Net Amount Due From You	USD	55,661.45

Premium payable to Willis Limited on or before 17 January 2017.

Willis Limited will not be responsible for any consequences, including cancellation of cover, that may arise from any delay or failure by you to pay the amount payable by the stated date.

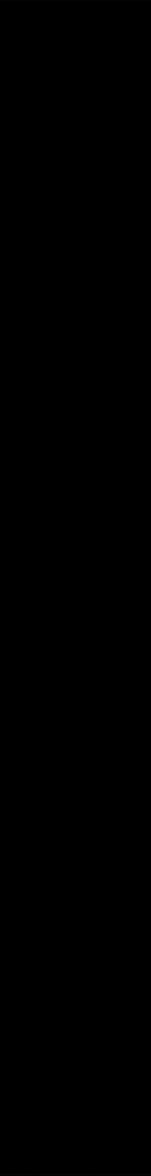
Please quote our reference 35407P16 / 000004PRM when making settlement.

In the event of query please contact Clare Filtness who is dealing with this item.
Contact details: 02031247217, Clare.Filtness@WillisTowersWatson.com

Willis

Willis Limited
51 Lime Street, London EC 3M 7DQ, United Kingdom
Telephone: +44 (0)2031246600 Fax: +44 (0)2031249222 Website: www.willis.com

CURRENCY
USD



Willis Limited, 1 Poplar Place, A Welsh Company, Willis Limited is authorised and regulated by the Financial Conduct Authority. Registered office: 51 Lime Street, London EC3M 7DQ. Registered number: 181116 England, and Wales. Registration Number: 61833422973.

Saved: 06/01/2017 13:39:41

Mail To:
ASSOCIATED ELECTRIC & GAS
INSURANCE SERVICES
16872 Collection Center Drive
Chicago, IL 60693-0168



Overnight Delivery
Bank of America Lockbox Services
Associated Electric & Gas Insurance Services
16872 Collection Center Drive
Chicago, IL 60693-0168

Wire Transfer:



Broker: Willis Limited
Willis Building, 51 Lime Stree
London, EN EC3M 7DQ

Insured: National Grid plc.
1-3 Strand
London, EN WC2N5EH

Invoice Number: 78204B
Date of Invoice: 11/22/2016
Policy Number: DP5428204P

THIS PREMIUM MAY BE SUBJECT TO STATE AND/OR LOCAL PREMIUM TAXES OR FEES. IT IS THE INSURED'S OR THEIR BROKER'S RESPONSIBILITY TO PAY ANY APPLICABLE TAXES AND/OR FEES AND TO MAKE THOSE PAYMENTS DIRECTLY TO THE APPROPRIATE STATE, PROVINCE OR LOCAL AGENCY.

EFFECTIVE DATES		DESCRIPTION	PREMIUM CHARGE	PREMIUM CREDIT
FROM	TO			
12/01/2016	12/01/2017	Directors and Officers Insurance Policy Premium (U.S)	\$ 965,168	
		Terrorism Premium	\$ 15,126	
		Less Continuity Credit		\$ 768,596
AMOUNT DUE AEGIS			\$ 211,698	

PAYMENT DUE THE LATER OF 20 DAYS FROM EFFECTIVE DATE OR 15 DAYS FROM INVOICE DATE.
NON-PAYMENT MAY RESULT IN POLICY CANCELLATION.
PLEASE MAKE PAYMENT TO ASSOCIATED ELECTRIC & GAS INSURANCE SERVICES LIMITED

00732200



3000 Bayport Drive
Suite 550
Tampa, Florida 33607-8418
Phone: (813) 287-2117
Fax: (813) 874-2523

November 22, 2016

Richard Watts
Miller Insurance Services Limited
5 Jewry Street, Dawson House
London, UK EC3N 2PJ

RE: National Grid plc
Directors & Officers Policy Number: 293595-16DO

Dear Richard,

Enclosed, please find EIM's binding confirmation for the above member. You will also find EIM's invoice that reflects the total amount due of \$310,979.00

Payment may be made via ACH or wire transfer. Please use the following wiring instructions to transfer funds to EIM:

ABA #:
Bank:
Account #:
Ref:



Payment should be made on or before December 30, 2016.

If you have any questions, please contact me.

Sincerely,


Jeanne Allen
Assistant Underwriter



3000 Bayport Drive
Suite 550
Tampa, Florida 33607-8418
(813) 287-2117 - Fax: (813) 874-2523

INVOICE

MEMBER Insured
National Grid plc 1-3 Strand London, UK WC2N 5EH GBR

INVOICE NUMBER	ISSUE DATE	DUE DATE
0000032946	11/22/16	12/30/16

EFFECTIVE DATE	EXPIRATION DATE	POLICY NUMBER	DESCRIPTION	AMOUNT
12/01/16	11/30/17	293595-16DO	Renewal Premium – US Portion	\$ 304,610.00
			TRIA Election	\$ 6,369.00
				\$ 310,979.00
				TOTAL DUE

nationalgrid		PAYMENT REQUEST			
Date: <u>07/07/16</u>		Due Date: <u>07/14/16</u>			
Check One Method of Payment					
<input type="checkbox"/> CHECK		<input checked="" type="checkbox"/> ACH			
<input type="checkbox"/> WIRE					
Check Stub Message: (max. limit of 50 Characters)		Bank Name: XXXXXXXXXX	Bank Name: _____		
		Routing #: _____	Routing #: _____		
		Account #: _____	Account #: _____		
(Check One): Yes: No: Separate Check <input type="checkbox"/> <input type="checkbox"/> Mail Check to Payee <input type="checkbox"/> <input type="checkbox"/> OR Mail Check to Internal Location:		<i>Reference Information for Beneficiary</i>			
Location of Service (Required Information):		<i>AP Use Only:</i>			
City: <u>Brooklyn</u>	State: <u>NY</u>	Zip Code: <u>11201</u>	Wired By: _____ Authorized By: _____		
		Value Date: _____	ET #: _____		
Vendor Information					
Payable To: <u>Global Risk Consultants Corp.</u>		Federal Tax No. or SS #:	Vendor #: <u>4000010759</u>		
Address: <u>100 Walnut Avenue, Suite 501, Clark, NJ 07066</u>		Invoice #: <u>860770</u>			
Reason for Payment: <u>Invoice #860770 dated 07/05/16, Engineering Services Property Inspections, Installment 2 of 4 (Jul-Sep), Contract Period 4/1/16-17</u>		Paying Company: <u>5110</u> NGUSA Service Co	Amount: <u>\$10,000.00</u>		
National Grid Accounting					
G/L Account	Profit Center	WBS	Order	Operation	Amount
<u>C6355100</u>		<u>X008918.AGB846</u>	<u>XG020009171</u>		<u>\$10,000.00</u>
Approver's Name: <u>Timothy Kiernan</u>		Employee ID# <u>tkiernan 71045250</u>			
Preparer's Name: <u>Patricia Needham</u>		Phone Number <u>(781) 907-2306</u>			
NON-PURCHASE ORDER CATEGORY					
01 Advertising	09 Easements	17 Incentive/Marketing Program	25 Outside Services	33 Subscription	
02 Awards/Gifts	10 Flagging	18 Inspection/Insurance	Inactive	34 Summons/DMV/Tolls	
03 Financial Payment	11 Fleet Fuel*	19 Legal Professional Services	27 Payments on Behalf of LIPA	35 Tax Payments/Assessments	
Inactive	12 Fleet Leasing*	20 Legal/Settlement/Claim	28 Police/Sheriffs/Marshals	36 Training/Registration/Semin	
05 Charitable/ Sponsorship	13 Freight/Postage	21 Marketer Bill	29 Real Estate Rentals/Leases	37 Utility/Telephone/Water/Ad	
06 Clothing/ Safety Shoes	14 Government/Municipality	Inactive	30 Rebate Program	38 Other-must be approved AP	
Inactive	15 Hotels/ Lodging*	23 Transportation Service	31 Refund/Adjust/Reimburse		
08 Dues/Fees/Permits	16 HR/Med/Workman Comp	24 Natural Gas/Energy Purch.	32 R&D Initiative		
				Please Choose One	
*Sales tax paid for these services/materials			Forward to: Accounts Payable Administrator for Processing		



Global Risk Consultants Corp.
100 Walnut Ave.
Suite 501
Clark, NJ 07066
(732) 827-4400
Fax (732) 827-4467

NATIONAL GRID
ATTN: TIMOTHY KEIRNAN
ONE METROTECH CENTER
BROOKLYN, NY 11201

07/05/16
INVOICE NUMBER: 000860770

PLEASE IDENTIFY CUSTOMER
AND INVOICE NUMBER ON CHECK

CUSTOMER CODE: NATIOGR56

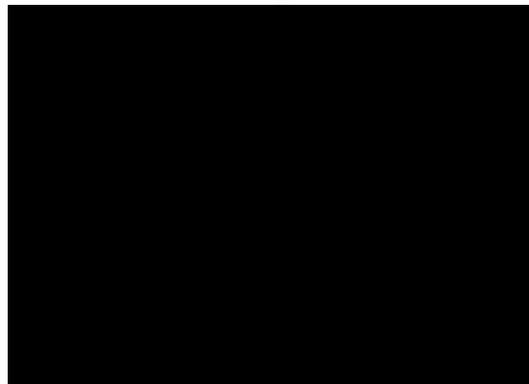
	TOTAL
2ND OF 4 INSTALLMENTS FOR ENGINEERING CONSULTING SERVICES	\$ 10,000.00

CONTRACT PERIOD 4/1/16 - 3/31/17

=====

A M O U N T T O P A Y U S D	\$ 10,000.00
-----------------------------	--------------

=====



INVOICES PAYABLE UPON RECEIPT

GL 07/05/16

INVOICE

ARISE INCORPORATED

7000 South Edgerton Road
Suite 100
Brecksville, OH 44141-3172
Phone: (440) 746-8880

Tax ID # 34-1756475

**Beginning 6/1/13 only send payments to
address at left or electronically to bank
account at bottom of page. Any other
payment information is no longer valid.**

INVOICE

BILL TO:

National Grid USA
Mr. Timothy Kiernan
One MetroTech Center, 15th Floor
Brooklyn, NY 11201

INVOICE DATE:

7/11/2016

INVOICE NUMBER:

C116-0596

FILE NO:

2656

CONTRACT NO:

2656-03

CUSTOMER NO:

214952

ACCOUNT NAME:

NATIONAL GRID USA

FOR:

JURISDICTIONAL BOILER/PRESSURE VESSEL INSPECTIONS

EFFECTIVE DATE:

4/1/16 - 4/1/17 (SECOND QUARTER - JULY, AUGUST, SEPTEMBER)

PLEASE PAY THIS AMOUNT:

\$11,375.00

U.S. DOLLARS

Thank you for your patronage, and we look forward to serving you in the future.



ARISE INCORPORATED

7000 South Edgerton Road
Suite 100
Brecksville, OH 44141-3172
Phone: (440) 746-8880

Tax ID # 34-1756475

INVOICE

BILL TO:

National Grid USA
Mr. Timothy Kiernan
One MetroTech Center, 15th Floor
Brooklyn, NY 11201

INVOICE DATE:

9/15/2016

INVOICE NUMBER:

CI16-0783

FILE NO:

2656

CONTRACT NO:

2656-03

CUSTOMER NO:

214952

ACCOUNT NAME:

NATIONAL GRID USA

FOR:

JURISDICTIONAL BOILER/PRESSURE VESSEL INSPECTIONS

EFFECTIVE DATE:

7/1/16 - 4/1/17

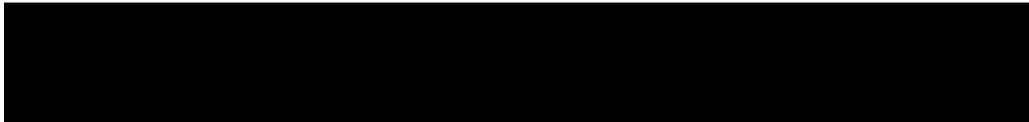
PLEASE PAY THIS AMOUNT:

\$1,530.00

U.S. DOLLARS

Add Lincoln, RI \$500.00
Additional Visit Worcester, MA \$500.00
Additional Boiler Brooklyn, NY \$530.00

Thank you for your patronage, and we look forward to serving you in the future.



ARISE BOILER INSPECTION AND INSURANCE COMPANY RISK RETENTION GROUP
P.O. Box 23790, 1700 Eastpoint Parkway, Louisville, KY 40223-0790

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ CAREFULLY.

GENERAL CHANGE ENDORSEMENT

Attached to and forming part of Policy No. 156043

Named Insured: National Grid USA

Mailing Address: One Metrotech Center
Brooklyn, NY 11201

Policy Period: From 04/01/2016 to 04/01/2017 at 12:01 AM at the mailing address shown above.

Effective Date of Endorsement: 07/01/2016

Endorsement No. 1

Description of Change(s)

- | | |
|--|------------------------------------|
| <input type="checkbox"/> Insured's Name | Original Annual Premium \$4,000.00 |
| <input type="checkbox"/> Policy Number | New Annualized Premium \$4,000.00 |
| <input type="checkbox"/> Policy Effective Date | No Premium Change \$0 |
| <input type="checkbox"/> Policy Expiration Date | |
| <input type="checkbox"/> Insured's Mailing Address | |
| <input checked="" type="checkbox"/> Change in Schedule of Location(s) of Insured | |
| <input type="checkbox"/> Limits of Liability | |

is (are) changed to read:

(Location Added)

642 George Washington Hwy.
Lincoln, RI 02865

09/07/2016

Date



Authorized Representative

All other terms and conditions of this policy remain unchanged.

Edition 2009-3-6

Page 1 of 1

ARISE INCORPORATED

7000 South Edgerton Road
Suite 100
Brecksville, OH 44141-3172
Phone: (440) 746-8880

Tax ID # 34-1756475

INVOICE

BILL TO:

National Grid USA
Mr. Timothy Kiernan
One MetroTech Center, 15th Floor
Brooklyn, NY 11201

INVOICE DATE:

10/6/2016

INVOICE NUMBER:

CI16-0884

FILE NO:

2656

CONTRACT NO:

2656-03

CUSTOMER NO:

214952

ACCOUNT NAME:

NATIONAL GRID USA

FOR:

JURISDICTIONAL BOILER/PRESSURE VESSEL INSPECTIONS

EFFECTIVE DATE:

4/1/16 - 4/1/17 (THIRD QUARTER - OCTOBER, NOVEMBER, DECEMBER)

PLEASE PAY THIS AMOUNT:

\$11,375.00

U.S. DOLLARS

Thank you for your patronage, and we look forward to serving you in the future.



 **Global Risk Consultants**

Global Risk Consultants Corp.
100 Walnut Ave.
Suite 501
Clark, NJ 07066
(732) 827-4400
Fax (732) 827-4467

NATIONAL GRID
ATTN: TIMOTHY KEIRNAN
ONE METROTECH CENTER
BROOKLYN, NY 11201

04/04/16
INVOICE NUMBER: 000860424

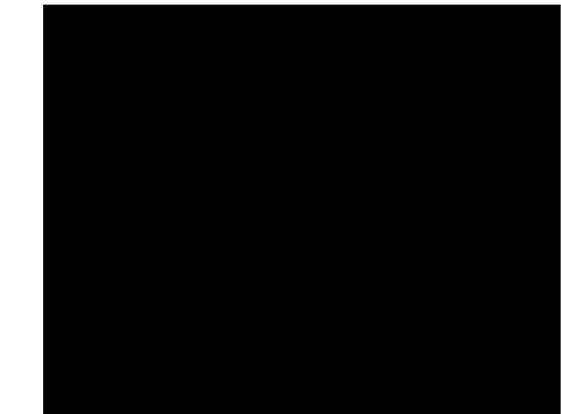
PLEASE IDENTIFY CUSTOMER
AND INVOICE NUMBER ON CHECK

CUSTOMER CODE: NATIOGR56

	TOTAL
1ST OF 4 INSTALLMENTS FOR ENGINEERING CONSULTING SERVICES	\$ 10,000.00

CONTRACT PERIOD 4/1/16 - 3/31/17

A M O U N T T O P A Y USD \$ 10,000.00



INVOICES PAYABLE UPON RECEIPT GL 04/04/16

INVOICE

Accounts Payable 04-11-16: 13:40:19 Received

ARISE INCORPORATED

7000 South Edgerton Road
Suite 100
Brecksville, OH 44141-3172
Phone: (440) 746-8880

Tax ID # 34-1756475

Beginning 6/1/13 only send payments to
address at left or electronically to bank
account at bottom of page. Any other
payment information is no longer valid.

INVOICE

BILL TO:

National Grid USA
Mr. Timothy Kiernan
One MetroTech Center, 15th Floor
Brooklyn, NY 11201

INVOICE DATE:

1/8/2016

INVOICE NUMBER:

CI16-0010

FILE NO:

2656

CONTRACT NO:

2656-03

CUSTOMER NO:

214952

ACCOUNT NAME:

NATIONAL GRID USA

FOR:

JURISDICTIONAL BOILER/PRESSURE VESSEL INSPECTIONS

EFFECTIVE DATE:

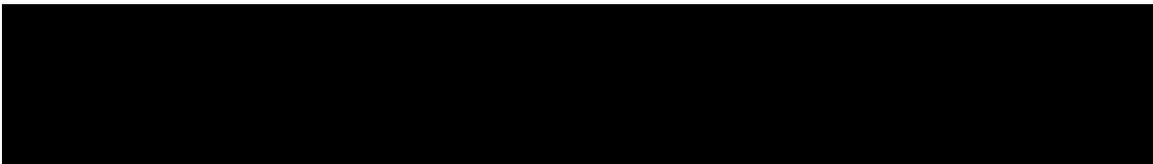
6/1/15 - 4/1/16 (FOURTH QUARTER - JANUARY, FEBRUARY, MARCH)

PLEASE PAY THIS AMOUNT:

\$12,475.00

U.S. DOLLARS

Thank you for your patronage, and we look forward to serving you in the future.





Marsh USA Inc.
New York NY
(212) 345-6000

INVOICE

Page	2 of 2
Invoice Total	34,148.00 USD
Invoice No.	934415251377
Invoice Date	09/20/2016
Effective Date	04/01/2016
Client No.	9344100000
Installment No.	

Billed To: Tim Kiernan
National Grid Services, Inc.
One Metrotech Plaza
Brooklyn, NY 11228

Original
Policy Holder: National Grid Services, Inc.
Billing Effective Date: 07/01/2016

Insurer	Policy No./ Project No.	Expiration Date	Description/Type of Coverage	Item	Amount
	Energy Consulting Fee	04/01/2017	Energy Consulting	FEE	34,148.00
Invoice Comments: This invoice represents KPI Fee for Excess WC					
Invoice Total					34,148.00

Marsh earns and retains interest income on premium payments held by Marsh on behalf of insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable insurer, where permitted by law.
If you are interested in financing your premiums please contact the Marsh Premium Finance team at premiumfinance@marsh.com to determine eligibility.



Marsh USA Inc.
New York NY
(212) 345-6000

Billed To: Tim Kiernan
National Grid Services, Inc.
One Metrotech Plaza
Brooklyn, NY 11228

INVOICE

Page	1 of 2
Invoice Total	34,148.00 USD
Invoice No.	934415251377
Invoice Date	09/20/2016
Effective Date	04/01/2016
Client No.	9344100000
Installment No.	

If you are not currently receiving invoices via e-mail but would like to do so, please notify your Marsh client team.

Remittance Copy

Marsh earns and retains interest income on premium payments held by Marsh on behalf of insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable insurer, where permitted by law.

If you are interested in financing your premiums please contact the Marsh Premium Finance team at premiumfinance@marsh.com to determine eligibility.

Detach and remit this portion with your payment

Client No.	Invoice No.	Payment Due	Invoice Total	Amount Paid
9344100000	934415251377	Immediate	34,148.00 USD	

Thank you for your prompt payment.

Please indicate Invoice Number 934415251377 on your remittance.

Additionally, for ACH or wire payments, e-mail remittance detail to: FiduciaryserviceRequest.US@marsh.com

By ACH:



By Wire:



By Mail:

Marsh USA Inc.
P.O. Box 417724
Boston, MA 02241-7724 USA

9344152513772 000341480091

nationalgrid		PAYMENT REQUEST			
Date: 05/19/16		Due Date: 05/25/16			
Check One Method of Payment					
<input type="checkbox"/> CHECK		<input checked="" type="checkbox"/> ACH			
Check Stub Message: (max. limit of 50 Characters)		Bank Name: 	Bank Name: _____		
		Routing #: _____	Routing #: _____		
(Check One): Yes: <input type="checkbox"/> No: <input type="checkbox"/>		Account #: _____	Account #: _____		
Separate Check <input type="checkbox"/>		<i>Reference Information for Beneficiary</i>			
Mail Check to Payee <input type="checkbox"/>					
OR Mail Check to Internal Location: <input type="checkbox"/>					
Location of Service (Required Information):		<i>AP Use Only:</i>			
City: Wallham	State: MA	Zip Code: 02451	Wired By: _____		
		Value Date: _____	Authorized By: _____		
		ET #: _____			
Vendor Information					
Payable To: Marsh USA Inc.		Federal Tax No. or SS #: _____	Vendor #: 4000012444		
Address: P.O. Box 417724, Boston, MA 02241-7724		Invoice #: 934410107865			
Reason for Payment: Inv #934410107865, Broker Fee 4/1/16-17 and 11/30/15-16 Insurance Programs		Paying Company: 5110 NGUSA Service Company	Amount: \$268,196.00		
National Grid Accounting					
G/L Account	Profit Center	WBS	Order	Operation	Amount
C6355100	(for FinPro)	X008919.AGB850	XN139009177		\$42,000.00
C6355100	(for Ex Liab)	X000176.AG0729	XG012004024		\$105,000.00
C6355100	(Aviation/SvcCo-Prop)	X008838.AG0984	XG020008983		\$3,258.19
C6355100	(Aviation/SvcCo-Liab)	X008918.AG0728	XG020009172		\$4,201.55
C6355100	(Aviation/NMPC-Prop)	X008843.AG0984	X521T008988		\$9,907.56
C6355100	(Aviation/NMPC-Liab)	X008921.AG0728	X521T009173		\$4,007.70
C6355100	(Property Generation)	X008962.AGB836	XG324009271		\$99,821.00
Approver's Name: Timothy Kiernan			Employee ID#: tkiernan 71045250		
Preparer's Name: Patricia Needham			Phone Number: (781) 907-2306		
NON-PURCHASE ORDER CATEGORY					
01 Advertising	09 Easements	17 Incentive/Marketing Program	25 Outside Services	33 Subscription	
02 Awards/Gifts	10 Flagging	18 Inspection/Insurance	Inactive	34 Surmons/DMV/Tolls	
03 Financial Payment	11 Fleet Fuel*	19 Legal Professional Services	27 Payments on Behalf of LIPA	35 Tax Payments/Assessments	
Inactive	12 Fleet Leasing*	20 Legal/Settlement/Claim	28 Police/Sherrifs/Marshals	36 Training/Registration/Semin.	
05 Charitable/ Sponsorship	13 Freight/Postage	21 Marketer Bill	29 Real Estate Rentals/Leases	37 Utility/Telephone/Water/Ad	
06 Clothing/ Safety Shoes	14 Government/Municipality	Inactive	30 Rebate Program	38 Other-must be approved AP	
Inactive	15 Hotels/ Lodging*	23 Transportation Service	31 Refund/Adjust/Reimburse		
08 Dues/Fees/Permits	16 HR/Med/Workman Comp	24 Natural Gas/Energy Purch.	32 R&D Initiative		
				<i>Please Choose One</i>	
*Sales tax paid for these services/materials			Forward to: Accounts Payable Administrator for Processing		

NATIONAL GRID USA – RISK AND INSURANCE
Allocation of Premiums to Companies

Marsh USA Broker Fee: Services performed for the Policy Period
Coverage: Aviation Hull & Liability
Policy Period: 4/1/16 - 4/1/17

Marsh Invoice No: 934410107865
Invoice Date: 4/28/2016
Total Invoice Amount: \$268,196.00 (Total fee includes other lines of insurance)
Payment Date: 5/25/2016

Aviation Broker Fee: \$21,375.00

Information for Payment Form:

Paying Company	Amount
5110	\$21,375.00

Allocation of Premium	Alloc. %	Information for Payment Form:					Amount
		G/L Account	Profit Center	WBS	Order	Operation	
Co 5110-Property	15.243%	C6604500	(for SvcCo-Prop)	X008838.AG0984	XG020008983		\$3,258.18
Co 5110-Liability	19.656%	C6604500	(for SvcCo-Liab)	X008918.AG0728	XG020009172		\$4,201.55
Co 521T-Property	46.351%	C6604500	(for NMPC-Prop)	X008843.AG0984	X521T008988		\$9,907.56
Co 521T-Liability	18.749%	C6604500	(for NMPC-Liab)	X008921.AG0728	X521T009173		\$4,007.70
	100.000%					TOTAL:	\$21,375.00

(*) The allocation percentages used for the renewal premium are used for the broker fee.

Descriptions:

Co 5110-National Grid USA Service Co
Co 521T-Niagara Mohawk Power Corp-TRAN
GL Account C6355100 - Consultants
Order XG020008983 - 5110S-Al Ks&NgCo-US Property-Aviation
Order XG020009172 - 5110S-USInsurance-USLiab-Aviation G020
Order X521T008988 - 5110S-US Property Aviation-5210TRAN
Order X521T009173 - 5110S-USInsurance-USLiab-Aviation 521T



Marsh USA Inc.
New York NY
(212) 345-6000

Billed To: **Tim Kiernan**
National Grid Services, Inc.
One Metrotech Plaza
Brooklyn, NY 11228

INVOICE

Page	2 of 2
Invoice Total	268,196.00 USD
Invoice No.	934410107865
Invoice Date	04/28/2016
Effective Date	04/01/2016
Client No.	9344100000
Installment No.	

Original
Policy Holder: National Grid Services, Inc.
Billing Effective Date: 11/30/2015

Insurer	Policy No. / Project No.	Expiration Date	Description/Type of Coverage	Item	Amount
	Marsh Brokerage Consulting Fees	04/01/2017	Marsh Brk Cnslt Fee	FEE	268,196.00
Invoice Comments: Excess Casualty, Property, Finpro and Aviation Fees 2016					
Invoice Total					268,196.00

Marsh earns and retains interest income on premium payments held by Marsh on behalf of insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable insurer, where permitted by law.

If you are interested in financing your premiums please contact the Marsh Premium Finance team at premiumfinance@marsh.com to determine eligibility.



Marsh USA Inc.
New York NY
(212) 345-6000

INVOICE

Page	1 of 2
Invoice Total	268,196.00 USD
Invoice No.	934410107865
Invoice Date	04/28/2016
Effective Date	04/01/2016
Client No.	9344100000
Installment No.	

Billed To: Tim Kiernan
National Grid Services, Inc.
One Metrotech Plaza
Brooklyn, NY 11228

If you are not currently receiving invoices via e-mail but would like to do so, please notify your Marsh client team.

Remittance Copy

Marsh earns and retains interest income on premium payments held by Marsh on behalf of insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable insurer, where permitted by law.

If you are interested in financing your premiums please contact the Marsh Premium Finance team at premiumfinance@marsh.com to determine eligibility.

Detach and remit this portion with your payment

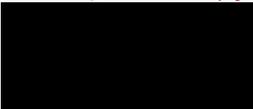
Client No.	Invoice No.	Payment Due	Invoice Total	Amount Paid
9344100000	934410107865	Immediate	268,196.00 USD	

Thank you for your prompt payment.

Please indicate Invoice Number 934410107865 on your remittance.

Additionally, for ACH or wire payments, e-mail remittance detail to: FiduciaryserviceRequest.US@marsh.com

By ACH:



By Wire:



By Mail: Marsh USA Inc.
P.O. Box 417724
Boston, MA 02241-7724 USA

9344101078657 002681960036

nationalgrid		PAYMENT REQUEST			
Date: <u>07/07/16</u>		Due Date: <u>07/21/16</u>			
Check One Method of Payment					
<input type="checkbox"/> CHECK		<input checked="" type="checkbox"/> ACH			
<input type="checkbox"/> WIRE					
Check Stub Message: (max. limit of 50 Characters)		Bank Name:	Bank Name: _____		
		Routing #: _____	Routing #: _____		
(Check One): Separate Check: Yes: <input type="checkbox"/> No: <input type="checkbox"/>		Account #: _____	Account #: _____		
Mail Check to Payee <input type="checkbox"/>		<i>Reference Information for Beneficiary</i>			
OR					
Mail Check to Internal Location: <input type="checkbox"/>					
Location of Service (Required Information):		<i>AP Use Only:</i>			
City: <u>Waltham</u>	State: <u>MA</u>	Zip Code: <u>02451</u>	Wired By: _____		
		Value Date: _____	Authorized By: _____		
Vendor Information					
Payable To: <u>Marsh USA Inc.</u>		Federal Tax No. or SS #: _____			
Address: <u>P.O. Box 417724, Boston, MA 02241-7724</u>		Vendor #: <u>4000012444</u>			
Reason for Payment: <u>Inv #934417546357, Broker Fees - Ins Programs: 4/1/16-17 and 11/30/15-16 At-Risk; 7/1/16-17 Deposit</u>		Invoice #: <u>934417546357</u>			
		Paying Company: <u>5110</u>	Amount: <u>\$260,114.00</u>		
		NGUSA Service Company			
National Grid Accounting					
G/L Account	Profit Center	WBS	Order	Operation	Amount
C6355100	(for FinPro)	X008919.AGB850	XN139009177		\$14,000.00
C6355100	(for Ex Liab)	X000176.AG0729	XG012004024		\$70,000.00
C6355100	(Aviation/SvcCo-Prop)	X008838.AG0984	XG020008983		\$1,086.06
C6355100	(Aviation/SvcCo-Liab)	X008918.AG0728	XG020009172		\$1,400.52
C6355100	(Aviation/NMPC-Prop)	X008843.AG0984	X521T008988		\$3,302.52
C6355100	(Aviation/NMPC-Liab)	X008921.AG0728	X521T009173		\$1,335.90
C6355100	(Property Generation)	X008962.AGB836	XG324009271		\$66,547.00
C6355100	(Ex Workers' Comp)	X008919.AGB851	XN139009178		\$102,442.00
Approver's Name: <u>Timothy Kiernan</u>		Employee ID# <u>tkiernan 71045250</u>			
Preparer's Name: <u>Patricia Needham</u>		Phone Number <u>(781) 907-2306</u>			
NON-PURCHASE ORDER CATEGORY					
01 Advertising	09 Easements	17 Incentive/Marketing Program	25 Outside Services	33 Subscription	
02 Awards/Gifts	10 Flaggng	18 Inspection/Insurance	Inactive	34 Summons/DNV/Toils	
03 Financial Payment	11 Fleet Fuel*	19 Legal Professional Services	27 Payments on Behalf of LIPA	35 Tax Payments/Assessments	
Inactive	12 Fleet Leasing*	20 Legal/Settlement/Claim	28 Police/Sheriffs/Marshals	36 Training/Registration/Semin.	
05 Charitable/ Sponsorship	13 Freight/Postage	21 Marketer Bill	29 Real Estate Rentals/Leases	37 Utility/Telephone/Water/Ad	
06 Clothing/ Safety Shoes	14 Government/Municipality	Inactive	30 Rebate Program	38 Other-must be approved AP	
Inactive	15 Hotels/ Lodging*	23 Transportation Service	31 Refund/Adjust/Reimburse		
08 Dues/Fees/Permits	16 HR/Med/Workman Comp	24 Natural Gas/Energy Purch.	32 R&D Initiative		
Please Choose One					
*Sales tax paid for these services/materials			Forward to: Accounts Payable Administrator for Processing		

NATIONAL GRID USA -- RISK AND INSURANCE
Allocation of Premiums to Companies

Marsh USA Broker Fee: Services performed for the Policy Period
Coverage: Aviation Hull & Liability
Policy Period: 4/1/16 - 4/1/17

Marsh Invoice No: 934417546357
Invoice Date: 6/29/2016
Total Invoice Amount: \$260,114.00 (Total fee includes other lines of insurance)
Payment Date: 7/21/2016

Aviation Broker Fee: \$7,125.00

Information for Payment Form:

Paying Company	Amount
5110	\$7,125.00

Allocation of Premium	Alloc. %	Information for Payment Form:					Amount
		G/L Account	Profit Center	WBS	Order	Operation	
Co 5110-Property	15.243%	C6604500	(for SvcCo-Prop)	X008838 AG0984	XG020008983		\$1,086.06
Co 5110-Liability	19.656%	C6604500	(for SvcCo-Liab)	X008918 AG0728	XG020009172		\$1,400.52
Co 521T-Property	46.351%	C6604500	(for NMPC-Prop)	X008843 AG0984	X521T008988		\$3,302.52
Co 521T-Liability	18.749%	C6604500	(for NMPC-Liab)	X008921 AG0728	X521T009173		\$1,335.90
	100.000%					TOTAL:	\$7,125.00

(*) The allocation percentages used for the renewal premium are used for the broker fee.

Descriptions:

Co 5110-National Grid USA Service Co
Co 521T-Niagara Mohawk Power Corp-TRAN
GL Account C6355100 - Consultants
Order XG020008983 - 5110S-All Ks&NgCo-US Property-Aviation
Order XG020009172 - 5110S-USInsurance-USLiab-Aviation G020
Order X521T008988 - 5110S-US Property Aviation-5210TRAN
Order X521T009173 - 5110S-USInsurance-USLiab-Aviation 521T



Marsh USA Inc.
New York NY
(212) 345-6000

INVOICE

Page	2 of 2
Invoice Total	260,114.00 USD
Invoice No.	934417546357
Invoice Date	06/29/2016
Effective Date	04/01/2016
Client No.	9344100000
Installment No.	

Billed To:
Tim Kiernan
National Grid Services, Inc.
One Metrotech Plaza
Brooklyn, NY 11228

Original
Policy Holder: **National Grid Services, Inc.**
Billing Effective Date: **04/01/2016**

Insurer	Policy No./ Project No.	Expiration Date	Description/Type of Coverage	Item	Amount
	Energy Consulting Fee	04/01/2017	Energy Consulting	FEE	260,114.00
Invoice Comments:					
2016 Fees and KPIS for Finpro, Aviation, Excess Casualty, Excess WC and Property programs					
Invoice Total					260,114.00

Marsh earns and retains interest income on premium payments held by Marsh on behalf of insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable insurer, where permitted by law.

If you are interested in financing your premiums please contact the Marsh Premium Finance team at premiumfinance@marsh.com to determine eligibility.



Marsh USA Inc.
New York NY
(212) 345-6000

Billed To: **Tim Kiernan**
National Grid Services, Inc.
One Metrotech Plaza
Brooklyn, NY 11228

INVOICE

Page	1 of 2
Invoice Total	260,114.00 USD
Invoice No.	934417546357
Invoice Date	06/29/2016
Effective Date	04/01/2016
Client No.	9344100000
Instalment No.	

If you are not currently receiving invoices via e-mail but would like to do so, please notify your Marsh client team.

Remittance Copy

Marsh earns and retains interest income on premium payments held by Marsh on behalf of insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable insurer, where permitted by law.

If you are interested in financing your premiums please contact the Marsh Premium Finance team at premiumfinance@marsh.com to determine eligibility.

Detach and remit this portion with your payment

Client No.	Invoice No.	Payment Due	Invoice Total	Amount Paid
9344100000	934417546357	Immediate	260,114.00 USD	

Thank you for your prompt payment.

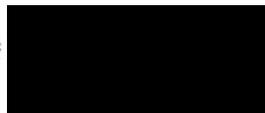
Please indicate Invoice Number 934417546357 on your remittance.

Additionally, for ACH or wire payments, e-mail remittance detail to: FiduciaryserviceRequest.US@marsh.com

By ACH:



By Wire:



By Mail:

Marsh USA Inc.
P.O. Box 417724
Boston, MA 02241-7724 USA

9344175463572 002601140051