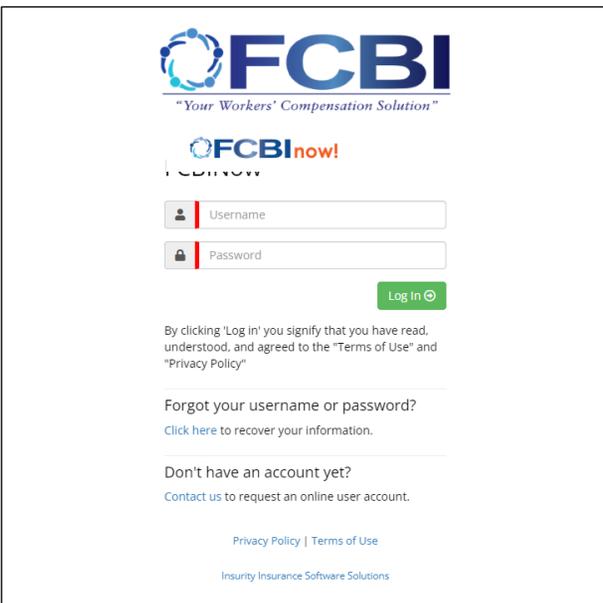




## HOW TO PAY YOUR BILL OR REPORT PAYROLL ONLINE REGISTER FOR ONLINE ACCESS

To pay your bill online or report payroll online, you must be a registered user of the **FCBInow!** online portal. If you do not currently have access, it is easy to register.



→ If you are the main account contact, you will have received an email from [processing@fcbifund.com](mailto:processing@fcbifund.com). The subject is “Welcome to our portals system!”

→ Your username is your email address. There will be a link to set your password. The format is:

- ✓ Between 8 to 15 characters
- ✓ Include at least one uppercase letter.
- ✓ Include at least one lowercase letter.
- ✓ Include at least one numeric digit.
- ✓ Previously used passwords cannot be reused.

→ If you have not received the email with the link, send an email to [FCBInowInsuredPortalHelp@fcbifund.com](mailto:FCBInowInsuredPortalHelp@fcbifund.com) with your contact info including the email address to use, phone, and title or call 866-469-3224 Option 1.

→ You will receive an email from [processing@fcbifund.com](mailto:processing@fcbifund.com) per above.

→ You may now login to your account. Go to: <https://fcbifund.com>. Go to the Policyholder Login Button which will take you to the portal login.

**For help with other questions, see the last page.**

## WHAT IS YOUR BILLING PLAN TYPE

To pay your bill online, you must know what type of billing plan your account was set up with.

→ Is your account set up with an *installment* billing plan?

✓ This policyholder receives a monthly statement and usually pays a down payment.

→ Is your account set up with a *monthly self-reporting payroll* billing plan (also known as a *monthly self-audit plan*)?

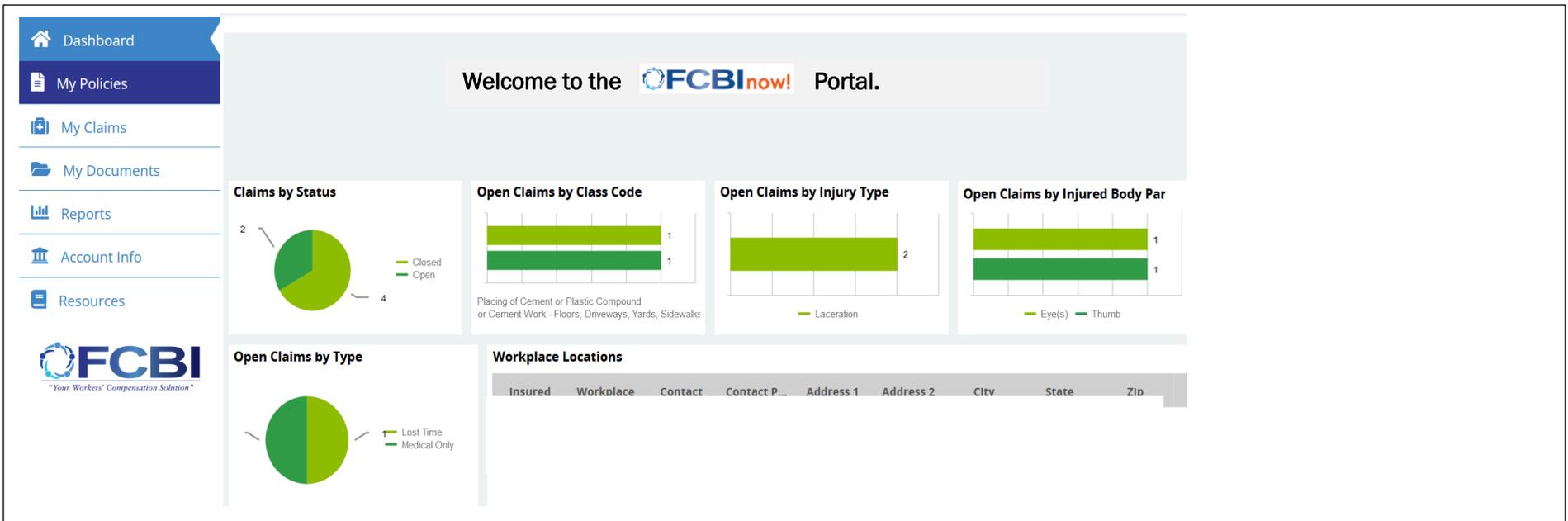
✓ This policyholder reports payrolls online or through a payroll service and the amount to pay for the month is calculated and billed.

If you are not sure, contact your agent or the FCBI Policy Services Department at:

(866) 469-3224 Option 3 or [policy@fcbifund.com](mailto:policy@fcbifund.com)

## INSTALLMENT PLANS - PAY ONLINE

→ Log in to your account portal at <https://fcbifund.com/> to access your Dashboard.



**NOTE:** You can pay online, see below, or call in a payment using our automated payment system at: **844-402-1038**.

lick the "I Want To..." menu in the right corner and the "Make a Payment" option for an installment plan.

Or go to "My Policies" on the left side. Go to View and then "Make a Payment" to pay an installment.

*Note: The current policy will always be in the upper left and have a color highlight. Your expired policies will always have a dark highlight per below. You can see only the current policy by clicking the "In-Force" button.*

Policy Period	Status	Policy Premium	Earned Premium	Incurred Loss	Loss Ratio	Actions
10/29/2024 - 10/29/2025	PRE-CANCELLATION	\$82,405.00	\$6,279.59	\$0.00	0.00%	View Download Report Payroll
10/29/2023 - 10/29/2024	EXPIRED	\$108,719.00	\$232,036.69	\$110,495.55	47.62%	View Download Report Payroll

- Download Current Policy
- Make a Payment
- Report Payroll
- See Billing Information

## MONTHLY SELF REPORTING - REPORT AND PAY ONLINE

→ Click the "I Want To..." menu in the right corner and the "\$Report Payroll" option.

→ Or go to "My Policies" on the left side. Go to View and the "\$Report Payroll" option.

*Note: The current policy will always be in the upper left and have a color highlight. Your expired policies will always have a dark highlight per below. You can see the current policy only by clicking the "In-Force" button.*

- Download Current Policy
- Make a Payment
- Report Payroll
- See Billing Information

Policy Period	Status	Policy Premium	Earned Premium	Incurred Loss	Loss Ratio	Actions
10/29/2024 - 10/29/2025	PRE-CANCELLATION	\$82,405.00	\$6,279.59	\$0.00	0.00%	View Download Report Payroll
10/29/2023 - 10/29/2024	EXPIRED	\$108,719.00	\$232,036.69	\$110,495.55	47.62%	View Download Report Payroll

Exposure	Class Code/Description	Workplace	Estimated	Full-Time Employee Count	Part-Time Employee Count	Payroll Amount	Rate	Manual Premium
Workers Comp	0012 - Paid Furlough Employees		\$0			\$0	0.00	\$0
Workers Comp	5213 - Concrete Construction NOC		\$1,707			\$5,000	6.44	\$322
Workers Comp	5221 - Concrete or Cement Work - Floors, Driveways, Yards, Sidewalks & Drivers		\$27,660			\$30,000	4.25	\$1,275
Workers Comp	8810 - Clerical Office Employees NOC		\$2,367			\$2,000	0.13	\$3
						<b>\$37,000</b>		

Description	Factor	Amount
Total Manual Premium		\$1,600
EZ Premium Adjustment	0.511865	(\$781)
EZ Premium		\$819
Terrorism Insurance Act Charge	0.0001	\$4
Premium & Surcharges Due With This Report		\$823
Outstanding Balance		\$0
Total Including Outstanding Balance		\$823

- Each class code for your policy will show.
- Complete items marked with a **red line**.
- If no payroll, must enter **\$0**.
- The premium will be calculated automatically.
- Choose an option at the bottom.
- If "Submit & Pay," see the payment option instructions above.
- If "Print," include the bill with your check. To avoid cancellation, pay by the due date.

**Payment Options include Credit Card/Debit Card or Bank Account (ACH).  
These can be made one-time or automatically monthly recurring.**

## Payment Options

Payment Information
Review Payment

How would you like to pay?

**Available Payment Methods**

New Credit/Debit Card

How much would you like to pay?

**Pay Full Invoice** \$9,697.00  
 **Pay Other Amount**

[Continue to Payment Information >](#)

**Payment Summary**

Policy #	Amount
BLS287120 - <a href="#">View</a>	\$9,697.00
SUBTOTAL	\$9,697.00
SERVICE FEE *	+ \$266.67
GRAND TOTAL	\$9,963.67

[Cancel Payment](#)

\*A non-refundable service fee of \$266.67 is included in your total.

# CREDIT OR DEBIT CARD PAYMENT

Please enter your card information

Asterisks (\*) indicate required fields.

Cardholder Name \*

OWS, INC.

Card Number \*

Card number

CVV \*

CVV



Expiration Date

Month \*

November

Year \*

2024

Billing Address \*

5728 Major Blvd

Country \*

United States

City \*

Orlando

State \*

Florida

Zip \*

32819

Email

rso@owsinc.com

Continue to Review Payment > | Go back to Payment Options

## Payment Summary

Policy #	Amount
BLS287120 - <a href="#">View</a>	\$9,697.00
SUBTOTAL	
	\$9,697.00
SERVICE FEE *	
	+\$266.67
GRAND TOTAL	
	\$9,963.67

Cancel Payment

\*A non-refundable service fee of \$266.67 is included in your total.

- The Payment Summary is shown.
- Enter the credit or debit card info.
- Enter an email address for a receipt.
- Click the “Continue to Review Payment” option to bring up the “Review Your Information” screen.
- Click the options you want.
- Note if there is a  hover over it for info.
- In the Payment Summary box, click “I Agree.” Then click “Process Payment.”
- You will see the “Thanks you for your payment!” screen if successful.
- You will see the “Enroll in AutoPay with Paperless” for automatic monthly installment payment and “Enroll in Paperless” options again.

Payment Options | Payment Information | **Review Payment**

Review your information

Your Credit/Debit Card [Edit](#)

OWS, INC.  
XXXXXXXXXXXX4444  
2 / 2027

Billing Address

5728 Major Blvd  
Orlando, FL  
32819  
rso@owsinc.com

Save my Credit/Debit Card for later

Enroll me in AutoPay

Enroll me in Paperless

Enroll me in Pay by Text

Thank you for completing AutoPay enrollment with Paperless Billing.

Thank you for selecting paperless billing.

## Payment Summary

Policy #	Amount
BLS287120 - <a href="#">View</a>	\$9,697.00
SUBTOTAL	
	\$9,697.00
SERVICE FEE *	
	+\$266.67
GRAND TOTAL	
	\$9,963.67

\*A non-refundable service fee of \$266.67 is included in your total.

[Fees Disclosure](#)

I agree to the [Invoice Cloud Terms and Conditions](#).

Process Payment \$9,963.67

Cancel Payment

[Need Help?](#)

# Review

Payment Options | Payment Information | **Review Payment**

Review your information

Your Bank [Edit](#)

FCBI SAMPLE ACCOUNT, INC.  
056008849 / XXXXXXXXXXX1234  
Commercial Checking  
[View](#)

Billing Address

1234 MAIN ST  
ORLANDO, FL  
32861  
RICH.OCHIN@FCBIFUND.COM

Save my Bank Account for later

Enroll me in AutoPay

Enroll me in Paperless

Enroll me in Pay by Text

## Payment Summary

Policy #	Amount
BLS286653 - <a href="#">View</a>	\$6,514.00
SUBTOTAL	
	\$6,514.00
SERVICE FEE *	
	+\$0.00
GRAND TOTAL	
	\$6,514.00

[Fees Disclosure](#)

I agree to the [Invoice Cloud Terms and Conditions](#).

Process Payment \$6,514.00

Cancel Payment

By pressing the button above, I agree and understand that this authorization will remain in full force and effect until I notify FCBI Fund TEST in writing to [debbie.arenier@cbifund.com](mailto:debbie.arenier@cbifund.com) or by calling (888) 469-3224 that I wish to revoke this authorization. I understand that FCBI Fund TEST requires at least 2 business days prior notice in order to cancel this authorization.

[Need Help?](#)

# BANK ACCOUNT (EFT ACH) PAYMENT

## Please enter your bank information

Please fill out all fields below and click Continue to Review Payment to save your information. [Need help filling out this information?](#)

Asterisks (\*) indicate required fields.

Bank Account Holder's Name \*

Account Type \*

Routing # \*

Bank Account # \*

Re-enter Bank Account # \*

Check Number (Optional)

Billing Address \*

Country \*

City \*

State \*

Zip \*

Email

[Continue to Review Payment](#) >

[Go back to Payment Options](#)

## Payment Summary

Policy #	Amount
IS#946217 - <a href="#">View</a>	\$7,393.00
<hr/>	
SUBTOTAL	\$7,393.00
SERVICE FEE*	+ \$0.00
<hr/>	
GRAND TOTAL	\$7,393.00

[Cancel Payment](#)

\*A non-refundable service fee of \$0.00 is included in your total.

- The Payment Summary is shown. There is no fee for an ACH payment.
- Enter the bank account info.
- Enter an email address for a receipt.
- Click the “Continue to Review Payment” option to bring up the “Review Your Information” screen.
- Click the options you want.
- Note if there is a  hover over it for info.
- In the Payment Summary box, click “I Agree.” Then click “Process Payment.”
- You will see the “Thanks you for your payment!” screen if successful.
- You will see the “Go Paperless” and “Sign up for Autopay” options again.

## Credit Card Receipt



**Thank you for your payment!**

A receipt for this transaction has been sent via email if it was previously provided.  
[Click here to Print a receipt with additional details.](#)

Total Payment Amount  
**\$9,963.67**

Payment Message  
APPROVED 560705

Payment Method  
  
XXXXXXXXXXXX004444

Reduce clutter and help the environment – by Going Paperless.  
Did you know? Getting rid of half of US invoices (12 billion pieces of paper) means saving almost one million trees and 240,000 tons of paper every year. PayStream Advisors 2010

[Go Paperless](#)

## Bank Account Receipt



**Thank you for your payment!**

A receipt for this transaction has been sent via email if it was previously provided.  
[Click here to Print a receipt with additional details.](#)

Total Payment Amount  
**\$6,514.00**

Payment Message  
PAYMENT PROCESSED 447147

Payment Method  
  
XXXXXXXXXXXX1234

Reduce clutter and help the environment – by Going Paperless.  
Did you know? Invoices are responsible for 10 percent of all trees cut down worldwide and creating paper invoices uses as much electricity each year as the consumption of 20 million households. PayStream Advisors 2010

[Go Paperless](#)

Minimize the time you spend paying bills – by signing up for AutoPay.  
You no longer need to worry about making sure you send a payment early to avoid late fees. You don't even need to go online to schedule a payment. With AutoPay, that is done for you. Your bill will be paid on the due date.

[Sign up for AutoPay](#)

**FOR QUESTIONS OF HELP, CONTACT US AT:**

Login or other technical issues, and for help navigating the portal	Send an email to <a href="mailto:FCBInowInsuredPortalHelp@fcbifund.com">FCBInowInsuredPortalHelp@fcbifund.com</a> or call 866-469-3224 Option 1.
Billing	866-469-3224 Option 1 or email <a href="mailto:policy@fcbifund.com">policy@fcbifund.com</a>
Payroll Audit	866-469-3224 Option 5
Policy Services	866-469-3224 Option 3
Claims	<b>Claims Reporting: 800-444-9098 Option 1 to report a claim.</b> Other Claims Inquiries: 800-444-9098 Option 3.

**PHONE PAYMENTS TO:**

Automated Payment System at 844-402-1038.

**MAIL PAYMENTS TO:**

Florida Citrus, Business & Industries Fund  
PO Box 161177  
Altamonte Springs, FL 32716-1177

**OVERNIGHT PAYMENTS TO:**

Florida Citrus, Business & Industries Fund  
766 N. Hwy 434  
Altamonte Springs, FL 32714