



**Bureau of Workers'  
Compensation**

30 W. Spring St.  
Columbus, OH 43215

## **Certificate of Ohio Workers' Compensation**

This certifies that the employer listed below participates in the Ohio State Insurance Fund as required by law. Therefore, the employer is entitled to the rights and benefits of the fund for the period specified. This certificate is only valid if premiums and assessments, including installments, are paid by the applicable due date. To verify coverage, visit [www.bwc.ohio.gov](http://www.bwc.ohio.gov), or call 1-800-644-6292.

This certificate must be displayed at your workplace or posted online where your employees can access it.

Policy number and employer  
38600006

Period Specified Below  
01/01/2026 to 01/01/2027

WILLIAMS COUNTY PWRE  
1 COURTHOUSE SQ  
BRYAN OH 43506-1751



[www.bwc.ohio.gov](http://www.bwc.ohio.gov)  
Issued by: BWC

*Stephanie McCloud*

Administrator/CEO

**FILED**  
NOV 07 2025

You can reproduce this certificate as needed.

ROBIN KEMP, ASST. CLERK  
WILLIAMS COUNTY COMMISSIONERS

## **Ohio Bureau of Workers' Compensation**

### **Required Posting**

Section 4123.54 of the Ohio Revised Code requires notice of rebuttable presumption. Rebuttable presumption means an employee may dispute or prove untrue the presumption (or belief) that alcohol, marihuana or a controlled substance not prescribed by the employee's physician is the proximate cause (main reason) of the work-related injury.

The burden of proof is on the employee to prove the presence of alcohol, marihuana or a controlled substance was not the proximate cause of the work-related injury. An employee who tests positive or refuses to submit to chemical testing may be disqualified for compensation and benefits under the Workers' Compensation Act.



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You must post this language with the Certificate of Ohio Workers' Compensation.