	<u>3769</u>		F	Retiree Rate	s		<u>3900</u>			
Single		560.73			Single			395.39		
+ 1 Dependent		1,288.82	R02		+ 1 Depend			908.80	R02	
+ 2 Dependents		1,569.92			+ 2 Depend	ents		1,107.02		
Medicare: retiree		337.71			Medicare: re	etiree		238.13		
Retiree & spouse both w/		700.65	R01			pouse both v		494.06	R01	
Retiree & spouse 1 w/ &	1 w/o Medi	941.70			Retiree & s	pouse 1 w/ 8	1 w/o Medi	664.03		
*******	*****	*****	*****	*****	*****	******	******	* *****	*****	*****
Indemnity: Plan 1, idemnity,	disability, & life)	378.05		25,000 life 2	25,000 add				
Indemnity: Plan 2, life	•									
Life	.21/1,000;	For 5,000		1.05		Short Term	Disability	(monthly cost)	18.82	9.4
			For 25,000	5.25						
AD&D	.04/1,000;	For 5,000		0.20						
			For 25,000	1.00						
********	*******	*****	*****	*****	******	******	*******	* *****	******	*****
Employee		ONLY with		1 Emplo	yee with		2	2 Employees with		emp only w/ N
			1 Dep	1 Dep	2 Dep	2 Dep	2 Dep	2 Dep	2 Dep	medical cov
	no disab	disability	no disab	& Disab	no disab	& Disab	no disab	& 1 Disab	& 2 Disab's	Indemnity + Li
n 3769	110 disab	disability	110 disab	a Disab	no disab	a Disab	110 disab	a i Disab	a z Disab s	+ AD&D + Disa
Total Premium	504.00	500.00	4 200 07	4 200 00	4 574 47	4 500 00	4 570 40	4 504 04	4 640 06	
Total Premium	561.98	580.80	1,290.07	1,308.89	1,571.17	1,589.99	1,572.42	1,591.24	1,610.06	378.0
less Board Contribution	421.49	421.49	421.49	421.49	421.49	421.49	842.98	842.98	842.98	378.0
equals Employee Premium	4 40 40	450.04	000 50	007.40	4 4 4 9 9 9	4 400 50	700.44	740.00	707.00	
monthly cost		159.31	868.58	887.40	1,149.68	1,168.50	729.44	748.26	767.08	0.0
Employee Deduction from										
each check	70.25	79.66	434.29	443.70	574.84	584.25	364.72	374.13	383.54	0.0
00011 0110 011				l .	l .			1		
<u>n 3900</u>										
Total Premium	396.64	415.46	910.05	928.87	1,108.27	1,127.09	1,109.52	1,128.34	1,147.16	
rotar i romani	000.04	410.40	310.00	320.07	1,100.27	1,127.00	1,100.02	1,120.04	1,177.10	
less Board Contribution	396.64	396.64	421.49	421.49	421.49	421.49	842.98	842.98	842.98	
aguala Employea Dramium										
equals Employee Premium		18.82	488.56	507.38	686.78	705.60	266.54	285.36	304.18	
monthly cost										
Employee Deduction from	0.00	0.44	244.20	252.00	242.00	252.00	122.07	142.00	152.00	
each check	()()()	9.41	244.28	253.69	343.39	352.80	133.27	142.68	152.09	

rates effective October 1, 2017