

PRICE TABLES

Health Coverage

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
1	Employee Only - Option 1 - Similar to Current	1	Each	\$1,478.00	\$1,478.00
2	Employee Only - Option 2 - Alternate Benefits	1	Each	\$1,342.00	\$1,342.00
3	Employee Only - Option 3 - Alternate Benefits	1	Each	\$1,239.00	\$1,239.00
4	Employee + Spouse - Option 1 - Similar to Current	1	Each	\$2,840.00	\$2,840.00
5	Employee + Spouse - Option 2 - Alternate Benefits	1	Each	\$2,541.00	\$2,541.00
6	Employee + Spouse - Option 3 - Alternate Benefits	1	Each	\$2,347.00	\$2,347.00
7	Employee + Child(ren) - Option 1 - Similar to Current	1	Each	\$2,667.00	\$2,667.00
8	Employee + Child(ren) - Option 2 - Alternate Benefits	1	Each	\$2,388.00	\$2,388.00
9	Employee + Child(ren) - Option 3 - Alternate Benefits	1	Each	\$2,206.00	\$2,206.00
10	Employee + Family - Option 1 - Similar to Current	1	Each	\$2,966.00	\$2,966.00
11	Employee + Family - Option 2 - Alternate Benefits	1	Each	\$2,653.00	\$2,653.00
12	Employee + Family - Option 3 - Alternate Benefits	1	Each	\$2,449.00	\$2,449.00
13	Premium Guarantee	1	Each	\$0.00	\$0.00
14	1 Year	1	Each	\$0.00	\$0.00
15	2 Years	1	Each	\$0.00	\$0.00
16	3 Years	1	Each	\$0.00	\$0.00
Total					\$27,116.00

Dental Coverage

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
1	Employee Only - Option 1 - Similar to Current	1	Each	\$18.86	\$18.86
2	Employee Only - Option 2 - Alternate Benefits	1	Each	\$34.96	\$34.96
3	Employee + Spouse - Option 1 - Similar to Current	1	Each	\$37.68	\$37.68
4	Employee + Spouse - Option 2 - Alternate Benefits	1	Each	\$69.80	\$69.80
5	Employee + Child(ren) - Option 1 - Similar to Current	1	Each	\$41.16	\$41.16
6	Employee + Child(ren) - Option 2 - Alternate Benefits	1	Each	\$79.54	\$79.54
7	Employee + Family - Option 1 - Similar to Current	1	Each	\$64.08	\$64.08
8	Employee + Family - Option 2 - Alternate Benefits	1	Each	\$122.56	\$122.56
9	Premium Guarantee	1	Each	\$0.00	\$0.00
10	1 Year	1	Each	\$10.00	\$10.00
11	2 Years	1	Each	\$0.00	\$0.00
12	3 Years	1	Each	\$0.00	\$0.00
Total					\$478.64

Vision Coverage

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
1	Employee Only - Option 1 - Similar to Current	1	Each	\$6.86	\$6.86
2	Employee Only - Option 2 - Alternate Benefits	1	Each	\$0.00	\$0.00
3	Employee + Spouse - Option 1 - Similar to Current	1	Each	\$13.76	\$13.76

4	Employee + Spouse - Option 2 - Alternate Benefits	1	Each	\$0.00	\$0.00
5	Employee + Child(ren) - Option 1 - Similar to Current	1	Each	\$11.66	\$11.66
6	Employee + Child(ren) - Option 2 - Alternate Benefits	1	Each	\$0.00	\$0.00
7	Employee + Family - Option 1 - Similar to Current	1	Each	\$19.22	\$19.22
8	Employee + Family - Option 2 - Alternate Benefits	1	Each	\$0.00	\$0.00
9	Premium Guarantee	1	Each	\$0.00	\$0.00
10	1 Year	1	Each	\$0.00	\$0.00
11	2 Years	1	Each	\$0.00	\$0.00
12	3 Years	1	Each	\$0.00	\$0.00
Total					\$51.50

Group Life Insurance Coverage

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
1	Employee Only - Option 1 - Similar to Current	1	Each	\$1,005.36	\$1,005.36
2	Employee Only - Option 2 - Alternate Benefits	1	Each	\$0.00	\$0.00
3	Premium Guarantee	1	Each	\$1,005.36	\$1,005.36
4	1 Year	1	Each	\$1,005.36	\$1,005.36
5	2 Years	1	Each	\$1,005.36	\$1,005.36
6	3 Years	1	Each	\$1,005.36	\$1,005.36
Total					\$5,026.80