

Effective June 1, 2011

GROUP TERM LIFE INSURANCE

Annual Salary	Basic Coverage (Univ. Cost)	Optional Coverage (Employee Cost)		Total Maximum Coverage A + C	Employee Cost Semi-Monthly (\$0.240/\$1,000)	
	A	1 or 2 x salary B	C		B	C
30,000	30,000	30,000	60,000	90,000	3.60	7.20
40,000	40,000	40,000	80,000	120,000	4.80	9.60
50,000	50,000	50,000	100,000	150,000	6.00	12.00
60,000	60,000	60,000	120,000	180,000	7.20	14.40
70,000	70,000	70,000	140,000	210,000	8.40	16.80
80,000	80,000	80,000	160,000	240,000	9.60	19.20
90,000	90,000	90,000	180,000	270,000	10.80	21.60
100,000	100,000	100,000	200,000	300,000	12.00	24.00
110,000	110,000	110,000	220,000	330,000	13.20	26.40
120,000	120,000	120,000	240,000	360,000	14.40	28.80
130,000	130,000	130,000	260,000	390,000	15.60	31.20
140,000	140,000	140,000	280,000	420,000	16.80	33.60
150,000	150,000	150,000	300,000	450,000	18.00	36.00

Maximum Life Insurance coverage including Basic & Optional is \$500,000.

LONG TERM DISABILITY

Annual Salary	Gross Monthly Benefit	Employee Semi-Monthly Cost (\$1.452/\$100)
30,000	1,500	10.89
40,000	2,000	14.52
50,000	2,500	18.15
60,000	3,000	21.78
70,000	3,500	25.41
80,000	4,000	29.04
90,000	4,500	32.67
100,000	5,000	36.30
110,000	5,000	36.30
120,000	5,000	36.30
130,000	5,000	36.30
140,000	5,000	36.30
150,000	5,000	36.30

Maximum Long Term Disability benefit is \$5,000 per month.