



EXAMPLE

First Name	Last Name	Location	Employee Date of Birth	Spouse First Name	Spouse Date of Birth	Last 4 Digits SSN	Employee Deduction Frequency
Scott	Adams	ABC City	9/26/1966			8143	12
Jane	Carter	ABC City	2/27/1989			7572	12
Steve	First	ABC City	7/9/1953	Amy	10/1/1957	4986	12
Tim	Hughes	ABC City	9/3/1968			8526	12
Samantha	Jones	ABC City	5/9/1955			3214	12
Mike	Parker	ABC City	1/29/1969	Sarah	2/4/1970	6366	12
Mary	Richards	ABC City	6/4/1964			5063	12
Heather	Smith	ABC City	9/2/1973			8847	12
Nick	Walker	ABC City	7/13/1942			7218	12
Paul	Wolf	ABC City	3/6/1961			5387	12

Dental Elections	Employee Dental Monthly Cost	Child Dental Monthly Cost	Spouse Dental Monthly Cost	Family Dental Monthly Cost	Total Dental Monthly Cost	Dental Per Deduction
EE	\$ 27.16				\$ 27.16	\$ 27.16
EE	\$ 27.16				\$ 27.16	\$ 27.16
EE+SP	\$ 27.16		\$ 27.26		\$ 54.42	\$ 54.42
EE+CH	\$ 27.16	\$ 43.93			\$ 71.09	\$ 71.09
EE	\$ 27.16				\$ 27.16	\$ 27.16
EE+FF	\$ 27.16			\$ 70.72	\$ 97.88	\$ 97.88
EE	\$ 27.16				\$ 27.16	\$ 27.16
EE	\$ 27.16				\$ 27.16	\$ 27.16
EE+CH	\$ 27.16	\$ 43.93			\$ 71.09	\$ 71.09
EE+CH	\$ 27.16	\$ 43.93			\$ 71.09	\$ 71.09

Insured Vision Elections	Employee Insured Vision Monthly Cost	Spouse Insured Vision Monthly Cost	Family Insured Vision Monthly Cost	Total Insured Vision Monthly Cost	Insured Vision Per Deduction
EE	\$ 8.47			\$ 8.47	\$ 8.47
EE	\$ 8.47			\$ 8.47	\$ 8.47
EE+SP	\$ 8.47	\$ 8.47		\$ 16.94	\$ 16.94
EE	\$ 8.47			\$ 8.47	\$ 8.47
EE	\$ 8.47			\$ 8.47	\$ 8.47
EE+FF	\$ 8.47		\$ 18.64	\$ 27.11	\$ 27.11
EE	\$ 8.47			\$ 8.47	\$ 8.47
EE	\$ 8.47			\$ 8.47	\$ 8.47
EE	\$ 8.47			\$ 8.47	\$ 8.47
EE	\$ 8.47			\$ 8.47	\$ 8.47