

Benefits Enrollment Confirmation

Confirmation statement for William J Bergen

Submitted on 04/29/2019 9:49:49 A.M. EDT by William J Bergen. Confirmation #2561647

Your Elections

Benefit	Option	Effective Date	Employee Pay Period Cost
Pre-Tax Benefits			
MEDICAL	Penn Care PPO – Self + Spouse	07/01/2014	\$128.95
DENTAL	Penn Dental Family Plan – Self + Spouse	07/01/2011	\$20.72
VISION	Davis Vision – Self Only	07/01/2019	\$2.19
DEPENDENT CARE SPENDING ACCOUNT	Waive Coverage	07/01/2019	\$0.00
HEALTH CARE SPENDING ACCOUNT	Health Care Spending Account – \$1800.00 Annual Contribution	07/01/2019	\$69.23
SUPPLEMENTAL AD&D	4x Base Salary – Self + Family – \$500,000	07/01/2015	\$5.08
Total Pre-Tax Cost:			\$226.17

Post-Tax Benefits

SPOUSE LIFE INSURANCE	\$10,000 – \$10,000	05/01/2011	\$1.24
CHILD LIFE INSURANCE	No Coverage	07/01/2015	\$0.00
BASIC EMPLOYEE LIFE INSURANCE	Core 1x Base Salary - Self Only (Employer Paid) – \$125,900 » Because the coverage amount of your Basic Life Insurance is more than \$50,000 you will be subject to Imputed Income. The Imputed Income (GTLI) per pay period is 72.16.	07/01/2015	\$0.00
SUPPLEMENTAL LIFE INSURANCE	3 x Base Salary – \$377,500	07/01/2015	\$127.89
SHORT-TERM DISABILITY	60% of Salary – \$1,000	05/01/2011	\$41.08
Total Post-Tax Cost:			\$170.21

Total Pay Period Cost: \$396.38

Your Dependents

Name	Relationship	Birthdate	Medical	Dental	Vision
Sherri A Bergen	Spouse	XX/XX/1963	✓	✓	✗

Your Beneficiaries

Name	Relationship	Benefit	Beneficiary Type	Allocation %
Sherri A Bergen	Spouse	Basic Employee Life Insurance	Primary	100%
		Supplemental AD&D	Primary	100%
		Supplemental Life Insurance	Primary	100%

