

## Your Elections

| Benefit                                | Option - Coverage Level                         | Effective Start Date | Pay Period Costs | Employer Costs |
|--|---|----------------------|------------------|----------------|
| <b>Employee Paid Pre-tax Benefits</b>  |   |                      | <b>Pre-tax</b>   |                |
| Medical                                | Penn Care PPO - Self + Spouse                   | 07/01/2014           | \$128.95         | \$0.00         |
| Dental                                 | Penn Dental Plan - Self + Spouse                | 07/01/2011           | \$20.72          | \$0.00         |
| Vision                                 | Davis Premium - Self + Spouse                   | 07/01/2014           | \$4.68           | \$0.00         |
| Dependent Care Spending Account        | \$0.00 Annual Contribution                      | 07/01/2017           | \$0.00           | \$0.00         |
| Health Care Spending Account           | \$0.00 Annual Contribution                      | 07/01/2017           | \$0.00           | \$0.00         |
| Supplemental AD&D                      | 4x Base Salary - Self + Family                  | 07/01/2015           | \$4.84           | \$0.00         |
| Total Pre-tax cost:                    |   |                      | \$159.19         | \$0.00         |
| <b>Employee Paid Post-tax Benefits</b> |   |                      | <b>Post-tax</b>  |                |
| Spouse Life Insurance                  | \$10,000  | 05/01/2011           | \$1.24           | \$0.00         |
| Child Life Insurance                   | No Coverage                                     | 07/01/2015           | \$0.00           | \$0.00         |
| Basic Employee Life Insurance          | Core 1x Base Salary - Self Only (Employer Paid) | 07/01/2015           | \$0.00           | \$6.00         |
| Supplemental Life Insurance            | 3 x Base Salary                                 | 07/01/2015           | \$127.55         | \$0.00         |
| Short-Term Disability                  | 60% of Salary                                   | 05/01/2011           | \$41.08          | \$0.00         |
| Total Post-tax cost:                   |   |                      | \$169.87         | \$6.00         |
| Total Pay Period cost:                 |   |                      | \$329.06         | \$6.00         |

## Your dependents on file

| Name          | Relationship | Birthdate  | Dependent Coverage |        |        |
|---------------|--------------|------------|--------------------|--------|--------|
|               |              |            | Medical            | Dental | Vision |
| Sherri Bergen | Spouse       | XXXXXX1963 | ✓                  | ✓      | ✓      |

## Your beneficiary allocations on file

| Benefit                       | Name            | Relationship | Allocations      |              |
|-------------------------------|-----------------|--------------|------------------|--------------|
|                               |                 |              | Beneficiary Type | Allocation % |
| Basic Employee Life Insurance | Sherri A Bergen | Spouse       | Primary          | 100 %        |