Group Insurance Register

Consolidated Invoice

| Agency Name | Broker Name | 321 Any Street Windsor ON N3E 4R4 |
| :--- | :--- | :---: |
| CDCS | David Carnes | $519-321-7654$ Fax |

Consolidated Invoice for Division 002 - Salaried Employees


Division Total Invoice Amount Due \$2,579.73

## Product Sample Group

Billing Group \# 7
For August 01, 2002
Salaried Employees


Group Insurance Register
Monthly Statement
Product Sample Group

| Benefit Totals for Division 002 - Salaried Employees |  |  |  |  |  |  |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Internal Benefit Number Description | Coverage Type | $\begin{aligned} & \text { Ins } \\ & \text { Co. } \end{aligned}$ | Policy Num. | EE Count Active / Retro | Volume /or Count | Employee Premium | Employer Premium | Premiums Current | Taxes Current | Sum Current | Retro Premiums | Retro Taxes | Total Due |
| 1 Life Insurance | Standard | CLI | 48467 | 41 | 800,000 | \$0.00 | \$136.00 | \$136.00 | \$10.88 | \$146.88 | \$3.40 | \$0.27 | \$150.55 |
| 3 LTD | Standard | CLI | 48467 | 41 | 107,206 | \$1,554.49 | \$0.00 | \$1,554.49 | \$124.36 | \$1,678.85 | \$33.77 | \$2.70 | \$1,715.32 |
| 4 Acc'lt Death/Dismem | Standard | Um | GSR 192 | 41 | 800,000 | \$0.00 | \$23.20 | \$23.20 | \$1.86 | \$25.06 | \$0.58 | \$0.05 | \$25.68 |
| 6 Out Of Country | Single | CLI | 48467 | 12 | 0 | \$0.00 | \$18.00 | \$18.00 | \$1.44 | \$19.44 | \$0.00 | \$0.00 | \$19.44 |
| 6 | Family |  |  | 29 | 0 | \$0.00 | \$87.00 | \$87.00 | \$6.96 | \$93.96 | \$3.00 | \$0.24 | \$97.20 |
| 6 Out Of Country | TOTAL | CLI | 48467 | 41 | 0 | \$0.00 | \$105.00 | \$105.00 | \$8.40 | \$113.40 | \$3.00 | \$0.24 | \$116.64 |
| 6 Out Of Country | S/F Covered | CLI | 48467 | 41 | 0 | \$0.00 | \$105.00 | \$105.00 | \$8.40 | \$113.40 | \$3.00 | \$0.24 | \$116.64 |
| 7 Medical - Stop Loss | Standard | CLI | 48467 | 41 | 0 | \$0.00 | \$516.60 | \$516.60 | \$41.33 | \$557.93 | \$12.60 | \$1.01 | \$571.54 |
| 9 Drugs - Assure Card | Single | CLI | 48467 | 12 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 9 | Family |  |  | 28 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 9 | Family | BCE |  | 1 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 9 Drugs - Assure Card | S/F Covered | CLI | 48467 | 41 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 8 Drug-Admin | Admin | CLI | 48467 | 41 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 88 HSP Commission | Comm | CLI | 48467 | 418 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 11 ASO Dental | Single | CDC | 48467 | $12 \quad 2$ | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 11 | Family |  |  | $29 \quad 2$ | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 11 ASO Dental | S/F Covered | CDC | 48467 | 41 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 10 Dental Admin | Admin | CDC | 48467 | 41 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 13 ASO Major Medical | Single | CLI | 48467 | 12 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 13 | Family |  |  | 29 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 13 ASO Major Medical | S/F Covered | CLI | 48467 | 41 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 12 Major Medical Admin | Admin | CLI | 48467 | 41 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  |  |  | Total | Premiums Fo | or Division | \$1,554.49 | \$780.80 | \$2,335.29 | \$186.82 | \$2,522.11 | \$53.35 | \$4.27 | \$2,579.73 |

Benefit Totals For Employee Class 1 MANAGERS - OTHER


Group Insurance Register
Monthly Statement
Product Sample Group
Billing Group \# 7
For August 01, 2002
Page 5

|  |  |  |  |  | tals F | mployee | s A | Executives | Taxes Current | Sum Current | Retro Premiums | Retro Taxes | Total Due |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Internal Benefit Number Description | Coverage Type | $\begin{aligned} & \text { Ins } \\ & \text { Co. } \end{aligned}$ | Policy Num. | EE Count Active / Retro | Volume or Count | Employee Premium | Employer Premium | Premiums Current |  |  |  |  |  |
| 1 Life Insurance | OverAge | CLI | 48467 | 1 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  | Standard |  |  | 12 | 386,000 | \$0.00 | \$65.62 | \$65.62 | \$5.25 | \$70.87 | \$0.00 | \$0.00 | \$70.87 |
| 2 Dep'd Group Life | 5000/2500 | CLI | 48467 | 10 | 0 | \$0.00 | \$13.20 | \$13.20 | \$1.06 | \$14.26 | \$0.00 | \$0.00 | \$14.26 |
|  | FIXED |  |  | 1 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| Dep'd Group Life | TOTAL | CLI | 48467 | 11 | 0 | \$0.00 | \$13.20 | \$13.20 | \$1.06 | \$14.26 | \$0.00 | \$0.00 | \$14.26 |
| 3 LTD | Standard | CLI | 48467 | 12 | 31,406 | \$455.39 | \$0.00 | \$455.39 | \$36.43 | \$491.82 | \$0.00 | \$0.00 | \$491.82 |
| 4 Acc'lt Death/Dismem | Overage | Um | GSR 192 | 2 1 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  | Standard |  |  | 11 | 366,000 | \$0.00 | \$10.61 | \$10.61 | \$0.85 | \$11.46 | \$0.00 | \$0.00 | \$11.46 |
| 6 Out Of Country | Family | CLI | 48467 | 13 | 0 | \$0.00 | \$39.00 | \$39.00 | \$3.15 | \$42.15 | \$0.00 | \$0.00 | \$42.15 |
| 7 Medical - Stop Loss | Standard | CLI | 48467 | 13 | 0 | \$0.00 | \$163.80 | \$163.80 | \$13.23 | \$177.03 | \$0.00 | \$0.00 | \$177.03 |
| 9 Drugs - Assure Card | Family | CLI | 48467 | 13 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 8 Drug-Admin | Admin | CLI | 48467 | 13 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 88 HSP Commission | Comm | CLI | 48467 | 131 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 11 ASO Dental | Family | CDC | 48467 | 131 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 10 Dental Admin | Admin | CDC | 48467 | 13 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 13 ASO Major Medical | Family | CLI | 48467 | 13 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 12 Major Medical Admin | Admin | CLI | 48467 | 13 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  |  | Tota | al Premiun | ms For Emplo | yee Class | \$455.39 | \$292.23 | \$747.62 | \$59.97 | \$807.59 | \$0.00 | \$0.00 | \$807.59 |

Group Insurance Register
Monthly Statement
Product Sample Group

Benefit Totals For Employee Class AE Executives


Group Insurance Register
Monthly Statement
Product Sample Group
Billing Group \# 7
For August 01, 2002
Page 7

Benefit Totals For Employee Class B Union Employees

| Internal Benefit Number Description |  | Coverage Type | $\begin{aligned} & \text { Ins } \\ & \text { Co. } \end{aligned}$ | Policy Num. | EE Count Active / Retro | Volume /or Count | Employee Premium | Employer Premium | Premiums Current | Taxes Current | Sum Current | Retro Premiums | Retro Taxes | Total Due |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 1 | Life Insurance | Standard | CLI | 48467 | 252 | 4,991,000 | \$0.00 | \$848.47 | \$848.47 | \$67.88 | \$916.35 | -\$17.00 | -\$1.36 | \$897.99 |
|  |  | \{none\} |  |  | 1 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$3.40 | \$0.27 | \$3.67 |
|  | Life Insurance | TOTAL | CLI | 48467 | 252 | 4,991,000 | \$0.00 | \$848.47 | \$848.47 | \$67.88 | \$916.35 | -\$13.60 | -\$1.09 | \$901.66 |
| 3 | LTD | Standard | CLI | 48467 | 252 | 431,173 | \$6,252.01 | \$0.00 | \$6,252.01 | \$500.16 | \$6,752.17 | \$123.45 | \$9.88 | \$6,885.49 |
|  |  | \{none\} |  |  | 2 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | -\$33.77 | -\$2.70 | -\$36.47 |
|  | LTD | TOTAL | CLI | 48467 | 252 | 431,173 | \$6,252.01 | \$0.00 | \$6,252.01 | \$500.16 | \$6,752.17 | \$89.68 | \$7.17 | \$6,849.02 |
| 4 | Acc'lt Death/Dismem | Standard | Um | GSR 192 | 252 | 4,991,000 | \$0.00 | \$144.74 | \$144.74 | \$11.58 | \$156.32 | \$0.58 | \$0.05 | \$156.94 |
|  |  | \{none\} |  |  | 2 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | -\$0.58 | -\$0.05 | -\$0.63 |
|  | Acc'lt Death/Dismem | TOTAL | Um | GSR 192 | 252 | 4,991,000 | \$0.00 | \$144.74 | \$144.74 | \$11.58 | \$156.32 | \$0.00 | \$0.00 | \$156.32 |
| 6 | Out Of Country | Single | CLI | 48467 | 78 | 0 | \$0.00 | \$117.00 | \$117.00 | \$9.36 | \$126.36 | \$0.00 | \$0.00 | \$126.36 |
|  |  | Family |  |  | 160 | 0 | \$0.00 | \$480.00 | \$480.00 | \$38.40 | \$518.40 | \$6.00 | \$0.48 | \$524.88 |
|  |  | \{none\} |  |  | 2 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | -\$3.00 | -\$0.24 | -\$3.24 |
|  | Out Of Country | TOTAL | CLI | 48467 | 238 | 0 | \$0.00 | \$597.00 | \$597.00 | \$47.76 | \$644.76 | \$3.00 | \$0.24 | \$648.00 |
|  | Out Of Country | S/F Total | CLI | 48467 | 238 | 0 | \$0.00 | \$597.00 | \$597.00 | \$47.76 | \$644.76 | \$6.00 | \$0.48 | \$651.24 |
| 7 | Medical - Stop Loss | Standard | CLI | 48467 | 238 | 0 | \$0.00 | \$2,998.80 | \$2,998.80 | \$239.90 | \$3,238.70 | \$12.60 | \$1.01 | \$3,252.31 |
|  |  | \{none\} |  |  | 2 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | -\$12.60 | -\$1.01 | -\$13.61 |
|  | Medical - Stop Loss | TOTAL | CLI | 48467 | 238 | 0 | \$0.00 | \$2,998.80 | \$2,998.80 | \$239.90 | \$3,238.70 | \$0.00 | \$0.00 | \$3,238.70 |
| 9 | Drugs - Assure Card | Single | BCE | 48467 | 3 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  |  | Single | CLI |  | 75 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  |  | Family |  |  | 155 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  |  | Family | BCE |  | 5 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  | Drugs - Assure Card | S/F Total | BCE | 48467 | 238 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 8 | Drug - Admin | Admin | CLI | 48467 | 238 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 88 | HSP Commission | Comm | CLI | 48467 | 23935 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 11 | ASO Dental | Single | CDC | 48467 | 7819 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  |  | Family |  |  | 16012 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  | ASO Dental | S/F Total | CDC | 48467 | 238 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 10 | Dental Admin | Admin | CDC | 48467 | 238 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 13 | ASO Major Medical | Single | CLI | 48467 | 78 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  |  | Family |  |  | 160 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  | ASO Major Medical | S/F Total | CLI | 48467 | 238 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 12 | Major Medical Admin | Admin | CLI | 48467 | 238 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |


| Total Premiums For Employee Class | $\$ 6,252.01$ | $\$ 4,589.01$ | $\$ 10,841.02$ | $\$ 867.28$ | $\$ 11,708.30$ | $\$ 79.08$ | $\$ 6.33$ | $\$ 11,793.70$ |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- |

Group Insurance Register
Monthly Statement
Product Sample Group

Benefit Totals For Employee Class C Salaried Employees

| Internal Benefit Number Description | Coverage Type | Ins Co. | Policy Num. | EE Count Active / Retro | Volume /or Count | Employee Premium | Employer Premium | Premiums Current | Taxes Current | Sum Current | Retro Premiums | Retro <br> Taxes | Total Due |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 1 Life Insurance | Standard | CLI | 48467 | 39 | 760,000 | \$0.00 | \$129.20 | \$129.20 | \$10.34 | \$139.54 | \$0.00 | \$0.00 | \$139.54 |
| 3 LTD | Standard | CLI | 48467 | 39 | 102,353 | \$1,484.12 | \$0.00 | \$1,484.12 | \$118.73 | \$1,602.85 | \$0.00 | \$0.00 | \$1,602.85 |
| 4 Acc'lt Death/Dismem | Standard | Um | GSR 192 | 239 | 760,000 | \$0.00 | \$22.04 | \$22.04 | \$1.76 | \$23.80 | \$0.00 | \$0.00 | \$23.80 |
| Out Of Country | Single | CLI | 48467 | 12 | 0 | \$0.00 | \$18.00 | \$18.00 | \$1.44 | \$19.44 | \$0.00 | \$0.00 | \$19.44 |
|  | Family |  |  | 27 | 0 | \$0.00 | \$81.00 | \$81.00 | \$6.48 | \$87.48 | \$0.00 | \$0.00 | \$87.48 |
| Out Of Country | TOTAL | CLI | 48467 | 39 | 0 | \$0.00 | \$99.00 | \$99.00 | \$7.92 | \$106.92 | \$0.00 | \$0.00 | \$106.92 |
| Out Of Country | S/F Total | CLI | 48467 | 39 | 0 | \$0.00 | \$99.00 | \$99.00 | \$7.92 | \$106.92 | \$0.00 | \$0.00 | \$106.92 |
| 7 Medical - Stop Loss | Standard | CLI | 48467 | 39 | 0 | \$0.00 | \$491.40 | \$491.40 | \$39.31 | \$530.71 | \$0.00 | \$0.00 | \$530.71 |
| Drugs - Assure Card | Single | CLI | 48467 | 12 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  | Family |  |  | 27 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| Drugs - Assure Card | S/F Total | CLI | 48467 | 39 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 8 Drug - Admin | Admin | CLI | 48467 | 39 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 88 HSP Commission | Comm | CLI | 48467 | 397 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| ASO Dental | Single | CDC 48467 |  | 12 2 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  | Family |  |  | $27 \quad 2$ | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| ASO Dental | S/F Total | CDC | 48467 | 39 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 10 Dental Admin | Admin | CDC | 48467 | 39 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| ASO Major Medical | Single |  | 48467 | 12 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  | Family |  |  | 27 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| ASO Major Medical | S/F Total | CLI | 48467 | 39 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 12 Major Medical Admin | Admin | CLI | 48467 | 39 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  |  | Total Premiums For Employee Class |  |  |  | \$1,484.12 | \$741.64 | \$2,225.76 | \$178.06 | \$2,403.82 | \$0.00 | \$0.00 | \$2,403.82 |

Group Insurance Register
Monthly Statement

Benefit Totals For Employee Class na ALL EMPLOYEES

| Internal Benefit Number Description | Coverage Type |  | Policy Num. | EE Count Active / Retro | Volume /or Count | Employee Premium | Employer Premium | Premiums Current | Taxes Current | Sum Current | Retro Premiums | Retro Taxes | Total Due |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 1 Life Insurance | Standard | CLI | 48467 | 1 | 20,000 | \$0.00 | \$3.40 | \$3.40 | \$0.27 | \$3.67 | \$0.00 | \$0.00 | \$3.67 |
| 3 LTD | Standard | CLI | 48467 | 1 | 2,348 | \$34.05 | \$0.00 | \$34.05 | \$2.72 | \$36.77 | \$0.00 | \$0.00 | \$36.77 |
| 4 Acc'lt Death/Dismem | Standard | Um | GSR 192 | 1 | 20,000 | \$0.00 | \$0.58 | \$0.58 | \$0.05 | \$0.63 | \$0.00 | \$0.00 | \$0.63 |
| Out Of Country | Single |  | 48467 | 1 | 0 | \$0.00 | \$1.50 | \$1.50 | \$0.12 | \$1.62 | \$0.00 | \$0.00 | \$1.62 |
|  | Family |  |  | 1 | 0 | \$0.00 | \$3.00 | \$3.00 | \$0.24 | \$3.24 | \$6.00 | \$0.48 | \$9.72 |
| Out Of Country | TOTAL | CLI | 48467 | 2 | 0 | \$0.00 | \$4.50 | \$4.50 | \$0.36 | \$4.86 | \$6.00 | \$0.48 | \$11.34 |
| Out Of Country | S/F Total | CLI | 48467 | 2 | 0 | \$0.00 | \$4.50 | \$4.50 | \$0.36 | \$4.86 | \$6.00 | \$0.48 | \$11.34 |
| 7 Medical - Stop Loss | Standard | CLI | 48467 | 2 | 0 | \$0.00 | \$25.20 | \$25.20 | \$2.02 | \$27.22 | \$25.20 | \$2.02 | \$54.43 |
| Drugs - Assure Card | Single | BCE 48467 |  | 1 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  | Family |  |  | 1 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| Drugs - Assure Card | S/F Total | BCE | 48467 | 2 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 8 Drug - Admin | Admin | CLI | 48467 | 2 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 88 HSP Commission | Comm | CLI | 48467 | 2 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| ASO Dental | Single | CDC 48467 |  | 1 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  | Family |  |  | 1 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| ASO Dental | S/F Total | CDC | 48467 | 2 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 10 Dental Admin | Admin | CDC | 48467 | 2 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| ASO Major Medical | Single | CLI | 48467 | 1 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  | Family |  |  | 1 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| ASO Major Medical | S/F Total | CLI | 48467 | 2 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 12 Major Medical Admin | Admin | CLI | 48467 | 2 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  |  | Total Premiums For Employee Class |  |  |  | \$34.05 | \$33.68 | \$67.73 | \$5.42 | \$73.14 | \$31.20 | \$2.50 | \$106.84 |

## Consolidated Invoice for Division 000 - Executives

| Transaction | Prov | Tax | nations | Description |  | Current Amount |  | Premium |  | Prov. Sales Tax | GST | TOTAL |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| CURRPREM | ON | Sales Tax |  |  |  | \$804.79 |  | \$0.00 |  | \$64.38 | \$0.00 | \$869.18 |
| RETROPREM | ON | Sales Tax |  |  |  | \$13.47 |  | \$0.00 |  | \$1.08 | \$0.00 | \$14.55 |
|  |  |  |  |  |  | Totals | 818.27 | \$0.00 |  | \$65.46 | \$0.00 | \$883.73 |
|  | evious | Billing: | Payments: | Adjustments | Out Standing | Mthly Premiums | Retro Adjustments |  | Total Current |  | Total Due |  |
|  | \$0.00 |  | \$0.00 | \$0.00 | \$0.00 | \$869.18 |  | 4.55 |  | \$883.73 | \$883.73 |  |
| Division Total Invoice Amount Due \$883.73 |  |  |  |  |  |  |  |  |  |  |  |  |

## Product Sample Group



Group Insurance Register
Monthly Statement
Product Sample Group


Group Insurance Register
Monthly Statement
Product Sample Group
Billing Group \# 7
For August 01, 2002


Group Insurance Register
Monthly Statement
Product Sample Group
For August 01, 2002


## Consolidated Invoice for Division 001 - Union Employees



Group Insurance Register
Monthly Statement
Product Sample Group
Billing Group \# 7
For August 01, 2002
Union Employees $\quad$ Div 001 Unit $000 \quad$ Page 16


Group Insurance Register
Monthly Statement
Product Sample Group
Billing Group \# 7
For August 01, 2002
Union Employees $\quad$ Div 001 Unit $000 \quad$ Page 17


Group Insurance Register
Monthly Statement
Product Sample Group
Billing Group \# 7
For August 01, 2002
Union Employees
Div 001 Unit $000 \quad$ Page 18


Group Insurance Register
Monthly Statement
Product Sample Group
Billing Group \# 7
For August 01, 2002
Union Employees
v 001 Unit $000 \quad$ Page 19


Group Insurance Register
Monthly Statement
Product Sample Group
Billing Group \# 7

| Union Employees |  | Div |  |  |  |
| :---: | :---: | :--- | :--- | :--- | :--- |
|  | Stop Loss |  |  |  |  |

For August 01, 2002 For August 01, 2002


Group Insurance Register
Monthly Statement
Product Sample Group
Billing Group \# 7
For August 01, 2002
Union Employees
Div 001 Unit $000 \quad$ Page 21


Group Insurance Register
Monthly Statement
Product Sample Group
Billing Group \# 7

| Union Employees | Div |  |  |  |  |  |
| :---: | :---: | :--- | :--- | :--- | :--- | :--- |
|  | Stop Loss |  |  |  |  |  |

For August 01, 2002
Unit August 01, 2002


Group Insurance Register
Monthly Statement
Product Sample Group
Billing Group \# 7
For August 01, 2002
Union Employees $\quad$ Div 001 Unit $000 \quad$ Page 23


Group Insurance Register
Monthly Statement
Product Sample Group
Billing Group \# 7
For August 01, 2002
Union Employees
Div 001 Unit $000 \quad$ Page 24


Group Insurance Register
Monthly Statement
Product Sample Group
Billing Group \# 7
Union Employees
For August 01, 2002


| 001 Unit | 000 | Page 25 |  |
| :--- | ---: | ---: | ---: |
|  | Employee | Employer | Total Prem |
|  |  | Taxes + |  |
|  | Premiums | Premiums | Retro + |
|  | /Taxes | /Taxes | Current |



Group Insurance Register
Monthly Statement
Product Sample Group
Billing Group \# 7
For August 01, 2002
Union Employees $\quad$ Div 001 Unit $000 \quad$ Page 26


Group Insurance Register
Monthly Statement
Product Sample Group
Billing Group \# 7
Union Employees
For August 01, 2002


| Unit | 000 | Page 27 |
| ---: | ---: | ---: |
| Employee | Employer | Total Prem |
| /Taxes + |  |  |
| Premiums | Premiums | Retro + |
| /Taxes | /Taxes | Current |



Group Insurance Register
Monthly Statement
Product Sample Group
Billing Group \# 7
Union Employees
For August 01, 2002


| 001 Unit | 000 | Page 28 |
| :---: | :---: | :---: |
| Employee | Employer | Total Prem Tlaxes + |
| Premiums | Premiums | Retro + |
| /Taxes | /Taxes | Current |


| Certificate / EE number | Last Eff Date / Prov | SalaryEmploye <br> Class | Date of Birth | AgeFamily <br> Status | Sex Em | Date of Emplyment Smoker | $\begin{aligned} & \text { Life } \\ & \text { Class } \end{aligned}$ | Medical Evidence | Disability Class | Medical Evidence | Optional Class | Medical Evidence | Health Class | Medical Evidence | $\begin{array}{ll} \text { Dep'd } & \text { D6 } \\ \text { Status } & C l \end{array}$ | Denta Class | Dep'd Status | Drug Class | Dep'd Status |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| MCCOLEMAN, SUSAN | 01/Oct/2001 ON | \$2,071.00?/mo B | 09/Jul/1956 | 45 Single | Female | 01/Jan/1901 |  | B | B |  | B |  | B |  | S | B |  | B |  |
|  | 20,000 | 1,388 | 20,000 | Single | Standard |  |  |  |  |  |  |  |  |  | \$20.13 |  | \$18.08 |  | \$38.21 |
| 790 | \$3.40 | \$20.13 | \$0.58 | \$1.50 | \$12.60 |  |  |  |  |  |  |  |  |  | \$1.61 |  | \$1.45 |  | \$41.26 |
| MCCORMICK, VIOLA | 01/Oct/2001 ON | \$2,071.00?/mo B | 28/Jul/1959 | 42 Single | Female | 01/Jan/1901 |  | B | B |  | B |  | B |  | S | B |  | B |  |
|  | 20,000 | 1,388 | 20,000 | Single | Standard |  |  |  |  |  |  |  |  |  | \$20.13 |  | \$18.08 |  | \$38.21 |
| 798 | \$3.40 | \$20.13 | \$0.58 | \$1.50 | \$12.60 |  |  |  |  |  |  |  |  |  | \$1.61 |  | \$1.45 |  | \$41.26 |
| MCCULLOCH, CHRISTINE | 01/Sep/2001 ON | \$2,550.00?/mo B | 13/Sep/1970 | 31 Single | Female | 01/Jan/1901 |  | B | B |  | B |  | B |  | S | B |  | B |  |
|  | 20,000 | 1,709 | 20,000 | Single | Standard |  |  |  |  |  |  |  |  |  | \$24.78 |  | \$18.08 |  | \$42.86 |
| 816 | \$3.40 | \$24.78 | \$0.58 | \$1.50 | \$12.60 |  |  |  |  |  |  |  |  |  | \$1.98 |  | \$1.45 |  | \$46.29 |
| MEDAGLIA, RAMONA | 01/Sep/2001 ON | \$2,550.00?/mo B | 20/Nov/1968 | 32 Family | Female | 01/Jan/1901 |  | B | B |  | B |  | B |  | F | B |  | B |  |
|  | 20,000 | 1,709 | 20,000 | Family | Standard |  |  |  |  |  |  |  |  |  | \$24.78 |  | \$19.58 |  | \$44.36 |
| 824 | \$3.40 | \$24.78 | \$0.58 | \$3.00 | \$12.60 |  |  |  |  |  |  |  |  |  | \$1.98 |  | \$1.57 |  | \$47.91 |
| METCALF/BANVILLE, SCOTT | 01/Oct/2001 ON | \$2,562.00?/mo B | 11/Aug/1946 | 55 Single | Male | 01/Jan/1901 |  | B | B |  | B |  | B |  | S | B |  | B |  |
|  | 20,000 | 1,717 | 20,000 | Single | Standard |  |  |  |  |  |  |  |  |  | \$24.90 |  | \$18.08 |  | \$42.98 |
| 729 | \$3.40 | \$24.90 | \$0.58 | \$1.50 | \$12.60 |  |  |  |  |  |  |  |  |  | \$1.99 |  | \$1.45 |  | \$46.41 |
| METCALFE, JOHN | 01/Oct/2001 ON | \$2,428.00?/mo B | 16/May/1959 | 42 Single | Male | 01/Jan/1901 |  | B | B |  | B |  | B |  | S | B |  | B |  |
|  | 20,000 | 1,627 | 20,000 | Single | Standard |  |  |  |  |  |  |  |  |  | \$23.59 |  | \$18.08 |  | \$41.67 |
| 730 | \$3.40 | \$23.59 | \$0.58 | \$1.50 | \$12.60 |  |  |  |  |  |  |  |  |  | \$1.89 |  | \$1.45 |  | \$45.01 |
| METSON, MICHAEL | 01/Sep/2001 ON | \$2,690.00?/mo B | 23/Oct/1971 | 30 Family | Male | 01/Jan/1901 |  | B | B |  | B |  | B |  | F | B |  | B |  |
|  | 20,000 | 1,803 | 20,000 | Family | Standard |  |  |  |  |  |  |  |  |  | \$26.14 |  | \$19.58 |  | \$45.72 |
| 608 | \$3.40 | \$26.14 | \$0.58 | \$3.00 | \$12.60 |  |  |  |  |  |  |  |  |  | \$2.09 |  | \$1.57 |  | \$49.38 |
| MICHEL, CONSTANCE | 01/Sep/2001 ON | \$1,629.33?/mo B | 29/May/1971 | 30 Single | Female | 01/Jan/1901 |  | B | B |  | B |  | B |  | S | B |  | B |  |
|  | 20,000 | 1,092 | 20,000 | Single | Standard |  |  |  |  |  |  |  |  |  | \$15.83 |  | \$18.08 |  | \$33.91 |
| 664 | \$3.40 | \$15.83 | \$0.58 | \$1.50 | \$12.60 |  |  |  |  |  |  |  |  |  | \$1.27 |  | \$1.45 |  | \$36.63 |
| MICHON, CLAUDIE | 01/Sep/2001 ON | \$2,550.00?/mo B | 23/Dec/1958 | 42 Family | Female | 01/Jan/1901 |  | B | B |  | B |  | B |  | F | B |  | B |  |
|  | 20,000 | 1,709 | 20,000 | Family | Standard |  |  |  |  |  |  |  |  |  | \$24.78 |  | \$19.58 |  | \$44.36 |
| 684 | \$3.40 | \$24.78 | \$0.58 | \$3.00 | \$12.60 |  |  |  |  |  |  |  |  |  | \$1.98 |  | \$1.57 |  | \$47.91 |
| MISSERE, BARRY | 01/Sep/2001 ON | \$2,428.00?/mo B | 14/Jun/1977 | 24 Family | Male | 01/Jan/1901 |  | B | B |  | B |  | B |  | F | B |  | B |  |
|  | 20,000 | 1,627 | 20,000 | Family | Standard |  |  |  |  |  |  |  |  |  | \$23.59 |  | \$19.58 |  | \$43.17 |
| 813 | \$3.40 | \$23.59 | \$0.58 | \$3.00 | \$12.60 |  |  |  |  |  |  |  |  |  | \$1.89 |  | \$1.57 |  | \$46.63 |
| MISTRY, JEFFREY | 01/Oct/2001 ON | \$2,428.00?/mo B | 28/Feb/1974 | 27 Single | Male | 01/Jan/1901 |  | B | B |  | B |  | B |  | S | B |  | B |  |
|  | 20,000 | 1,627 | 20,000 | Single | Standard |  |  |  |  |  |  |  |  |  | \$23.59 |  | \$18.08 |  | \$41.67 |
| 748 | \$3.40 | \$23.59 | \$0.58 | \$1.50 | \$12.60 |  |  |  |  |  |  |  |  |  | \$1.89 |  | \$1.45 |  | \$45.01 |
| MOSTOLES, ANDREW | 01/Oct/2001 ON | \$2,080.26?/mo B | 24/Oct/1953 | 48 Single | Male | 01/Jan/1901 |  |  |  |  |  |  |  |  | S |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | \$0.00 |  | \$0.00 |  | \$0.00 |
| 754 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | \$0.00 |  | \$0.00 |  | \$0.00 |
| MOSUR, JOHN | 01/Oct/2001 ON | \$3,588.00?/mo B | 20/Jul/1959 | 42 Family | Male | 01/Jan/1901 |  | B | B |  | B |  | B |  | F | B |  | B |  |
|  | 20,000 | 2,404 | 20,000 | Family | Standard |  |  |  |  |  |  |  |  |  | \$34.86 |  | \$19.58 |  | \$54.44 |
| 741 | \$3.40 | \$34.86 | \$0.58 |  | $\$ 12.60$ |  |  |  |  |  |  |  |  |  | \$2.79 |  | \$1.57 |  | \$58.79 |
| MOYANO, FRANCO | 01/Oct/2001 ON | \$2,605.00?/mo B | 09/Dec/1963 | 37 Family | Male | 01/Jan/1901 |  | B | B |  | B |  | B |  | F | B |  | B |  |
|  | 20,000 | 1,746 | 20,000 | Family | Standard |  |  |  |  |  |  |  |  |  | \$25.32 |  | \$19.58 |  | \$44.90 |
| 115 | \$3.40 | \$25.32 | \$0.58 | \$3.00 | \$12.60 |  |  |  |  |  |  |  |  |  | \$2.03 |  | \$1.57 |  | \$48.49 |

Group Insurance Register
Monthly Statement
Product Sample Group
Billing Group \# 7
For August 01, 2002
Union Employees
Div 001 Unit $000 \quad$ Page 29


Group Insurance Register
Monthly Statement
Product Sample Group
Billing Group \# 7
For August 01, 2002
Union Employees $\quad$ Div 001 Unit $000 \quad$ Page 30


Group Insurance Register
Monthly Statement
Product Sample Group
Billing Group \# 7
Union Employees
For August 01, 2002


| Unit | 000 | Page 31 |
| ---: | ---: | ---: |
| Employee | Employer | Total Prem |
| /Taxes + |  |  |
| Premiums | Premiums | Retro + |
| /Taxes | /Taxes | Current |

Certificate / EE number AN, MARION

| Group Life Ins. | $\begin{array}{r} \text { Dep } \\ \text { Group } \\ \text { Life } \\ \text { Ins. } \end{array}$ | LTD | AD\&D |
| :---: | :---: | :---: | :---: |
| Last Eff Date |  | Emplo Cla | Date of Birth |



| S | B |
| :---: | :---: |
| \$20.13 | \$ |
| \$1.61 |  |
| F | B |
| \$26.25 | \$ |
| \$2.10 |  |
| F | B |
| \$26.54 | \$ |
| \$2.12 |  |
| S | B |
| \$20.13 | \$ |
| \$1.61 |  |



Group Insurance Register
Monthly Statement
Product Sample Group
Billing Group \# 7
For August 01, 2002
Union Employees $\quad$ Div 001 Unit $000 \quad$ Page 32


Group Insurance Register
Monthly Statement
Product Sample Group
Billing Group \# 7

Union Employees
For August 01, 2002


| 001 Unit | 000 | Page 33 |  |
| :--- | ---: | ---: | ---: |
|  | Employee | Employer | Total Prem |
|  |  | Taxes + |  |
|  | Premiums | Premiums | Retro + <br> /Taxes |
|  | /Taxes | Current |  |



Group Insurance Register
Monthly Statement
Product Sample Group
Billing Group \# 7

| Union Employees | Div |  |  |  |  |
| :--- | :--- | :--- | :--- | :--- | :--- |
|  | Stop Loss |  |  |  |  |

For August 01, 2002
Un August 01, 2002


Group Insurance Register
Monthly Statement
Product Sample Group
Billing Group \# 7
Union Employees
For August 01, 2002

| Union Employees |  |  |  |  |  |  | Div | 001 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Out of Country | Stop Loss on Major Medical |  |  |  |  |  |  |  |


| Unit | 000 | Page 35 |
| ---: | ---: | ---: |
| Employee | Employer | Total Prem |
| /Taxes + |  |  |
| Premiums | Premiums | Retro + |
| /Taxes | /Taxes | Current |



Group Insurance Register
Monthly Statement
Product Sample Group
Billing Group \# 7
For August 01, 2002


Group Insurance Register

Consolidated Invoice for Division 002 - Salaried Employees


Division Total Invoice Amount Due \$2,579.73

Group Insurance Register
Monthly Statement
Product Sample Group
Billing Group \# 7
For August 01, 2002


Group Insurance Register
Monthly Statement
Product Sample Group
Billing Group \# 7
For August 01, 2002


Group Insurance Register
Monthly Statement
Product Sample Group
Billing Group \# 7
For August 01, 2002


Group Insurance Register
Monthly Statement

## Product Sample Group



Group Insurance Register


Group Insurance Register
Monthly Statement
Product Sample Group

| Benefit Totals for Division 002 - Salaried Employees |  |  |  |  |  |  |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Internal Benefit Number Description | Coverage Type | $\begin{aligned} & \text { Ins } \\ & \text { Co. } \end{aligned}$ | Policy Num. | EE Count Active / Retro | Volume /or Count | Employee Premium | Employer Premium | Premiums Current | Taxes Current | Sum Current | Retro Premiums | Retro Taxes | Total Due |
| 1 Life Insurance | Standard | CLI | 48467 | 41 | 800,000 | \$0.00 | \$136.00 | \$136.00 | \$10.88 | \$146.88 | \$3.40 | \$0.27 | \$150.55 |
| 3 LTD | Standard | CLI | 48467 | 41 | 107,206 | \$1,554.49 | \$0.00 | \$1,554.49 | \$124.36 | \$1,678.85 | \$33.77 | \$2.70 | \$1,715.32 |
| 4 Acc'lt Death/Dismem | Standard | Um | GSR 192 | 41 | 800,000 | \$0.00 | \$23.20 | \$23.20 | \$1.86 | \$25.06 | \$0.58 | \$0.05 | \$25.68 |
| 6 Out Of Country | Single | CLI | 48467 | 12 | 0 | \$0.00 | \$18.00 | \$18.00 | \$1.44 | \$19.44 | \$0.00 | \$0.00 | \$19.44 |
| 6 | Family |  |  | 29 | 0 | \$0.00 | \$87.00 | \$87.00 | \$6.96 | \$93.96 | \$3.00 | \$0.24 | \$97.20 |
| 6 Out Of Country | TOTAL | CLI | 48467 | 41 | 0 | \$0.00 | \$105.00 | \$105.00 | \$8.40 | \$113.40 | \$3.00 | \$0.24 | \$116.64 |
| 6 Out Of Country | S/F Covered | CLI | 48467 | 41 | 0 | \$0.00 | \$105.00 | \$105.00 | \$8.40 | \$113.40 | \$3.00 | \$0.24 | \$116.64 |
| 7 Medical - Stop Loss | Standard | CLI | 48467 | 41 | 0 | \$0.00 | \$516.60 | \$516.60 | \$41.33 | \$557.93 | \$12.60 | \$1.01 | \$571.54 |
| 9 Drugs - Assure Card | Single | CLI | 48467 | 12 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 9 | Family |  |  | 28 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 9 | Family | BCE |  | 1 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 9 Drugs - Assure Card | S/F Covered | CLI | 48467 | 41 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 8 Drug-Admin | Admin | CLI | 48467 | 41 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 88 HSP Commission | Comm | CLI | 48467 | 418 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 11 ASO Dental | Single | CDC | 48467 | $12 \quad 2$ | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 11 | Family |  |  | $29 \quad 2$ | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 11 ASO Dental | S/F Covered | CDC | 48467 | 41 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 10 Dental Admin | Admin | CDC | 48467 | 41 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 13 ASO Major Medical | Single | CLI | 48467 | 12 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 13 | Family |  |  | 29 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 13 ASO Major Medical | S/F Covered | CLI | 48467 | 41 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 12 Major Medical Admin | Admin | CLI | 48467 | 41 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  |  |  | Total | Premiums Fo | or Division | \$1,554.49 | \$780.80 | \$2,335.29 | \$186.82 | \$2,522.11 | \$53.35 | \$4.27 | \$2,579.73 |

## Consolidated Invoice for Division 003 - Division Retired



Group Insurance Register
Monthly Statement
Product Sample Group
Billing Group \# 7
For August 01, 2002


Group Insurance Register
Monthly Statement

| Benefit Totals for Division 003 - Division Retired |  |  |  |  |  |  |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Internal Benefit Number Description | Coverage Type | $\begin{aligned} & \text { Ins } \\ & \text { Co. } \end{aligned}$ | Policy <br> Num. | EE Count Active / Retro | Volume /or Count | Employee Premium | Employer Premium | Premiums Current | Taxes Current | Sum Current | Retro Premiums | Retro Taxes | Total Due |
| 1 Life Insurance | OverAge | CLI | 48467 | 1 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 2 Dep'd Group Life | FIXED | CLI | 48467 | 1 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 3 LTD | Standard | CLI | 48467 | 1 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 4 Acc'lt Death/Dismem | Overage | Um | GSR 192 | 1 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 6 Out Of Country | Family | CLI | 48467 | 1 | 0 | \$0.00 | \$3.00 | \$3.00 | \$0.27 | \$3.27 | \$0.00 | \$0.00 | \$3.27 |
| 7 Medical - Stop Loss | Standard | CLI | 48467 | 1 | 0 | \$0.00 | \$12.60 | \$12.60 | \$1.13 | \$13.73 | \$0.00 | \$0.00 | \$13.73 |
| 9 Drugs - Assure Card | Family | CLI | 48467 | 1 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 8 Drug - Admin | Admin | CLI | 48467 | 1 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 88 HSP Commission | Comm | CLI | 48467 | 12 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 11 ASO Dental | Family | CDC | 48467 | 1 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 10 Dental Admin | Admin | CDC | 48467 | 1 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 13 ASO Major Medical | Family | CLI | 48467 | 1 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 12 Major Medical Admin | Admin | CLI | 48467 | 1 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |


| Total Premiums For Division | $\$ 0.00$ | $\$ 15.60$ | $\$ 15.60$ | $\$ 1.40$ | $\$ 17.00$ | $\$ 0.00$ | $\$ 0.00$ | $\$ 17.00$ |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- |

## Consolidated Invoice for Division 011 - Name lookup error on GDU= 7-011-ALL



Group Insurance Register
Monthly Statement
Product Sample Group
Billing Group \# 7
For August 01, 2002
Name lookup error on GDU=7-011-ALL - Name lookup error on GDU=7-011-000


| Benefit Totals for Division 011 - Name lookup error on GDU= 7-011-ALL |  |  |  |  |  |  |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Internal Benefit Number Description | Coverage Type | $\begin{aligned} & \text { Ins } \\ & \text { Co. } \end{aligned}$ | Policy Num. | EE Count Active / Retro | Volume /or Count | Employee Premium | Employer Premium | Premiums Current | Taxes Current | Sum Current | Retro <br> Premiums | Retro Taxes | Total Due |
| 1 Life Insurance | \{none\} | CLI | 48467 | 1 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$3.40 | \$0.27 | \$3.67 |


| Benefit Totals For Employee Class |  |  |  |  |  |  |  | MANAGERS - OTHER |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Internal Benefit Number Description | Coverage Type |  | Policy Num. | EE Count Active / Retro | Volume /or Count | Employee Premium | Employer Premium | Premiums Current | Taxes Current | Sum Current | Retro Premiums | Retro Taxes | Total Due |
| 1 Life Insurance | Standard |  | 48467 | 1 | 14,000 | \$0.00 | \$2.38 | \$2.38 | \$0.19 | \$2.57 | \$2.38 | \$0.19 | \$5.14 |
| 3 LTD | Standard |  | 48467 | 1 | 737 | \$10.69 | \$0.00 | \$10.69 | \$0.85 | \$11.54 | \$10.69 | \$0.85 | \$23.08 |
| 4 Acc'lt Death/Dismem | Standard | Um | GSR 192 | 21 | 14,000 | \$0.00 | \$0.41 | \$0.41 | \$0.03 | \$0.44 | \$0.41 | \$0.03 | \$0.88 |
| 88 HSP Commission | Comm |  | 48467 | 15 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 11 ASO Dental | Single | CDC | 48467 | 22 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  | Total Premiums For Employee Class |  |  |  |  | \$10.69 | \$2.79 | \$13.47 | \$1.08 | \$14.55 | \$13.47 | \$1.08 | \$29.10 |

Group Insurance Register
Monthly Statement

|  |  |  |  | Benefit Totals For Employee Class A |  |  |  | Executives |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Internal Benefit Number Description | Coverage Type | $\begin{aligned} & \hline \text { Ins } \\ & \text { Co } \end{aligned}$ | Policy Num. | EE Count Active / Retro | Volume /or Count | Employee Premium | Employer Premium | Premiums Current | Taxes Current | Sum Current | Retro <br> Premiums | Retro Taxes | Total Due |
| 1 Life Insurance | OverAge | CLI | 48467 | 1 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  | Standard |  |  | 12 | 386,000 | \$0.00 | \$65.62 | \$65.62 | \$5.25 | \$70.87 | \$0.00 | \$0.00 | \$70.87 |
| 2 Dep'd Group Life | 5000/2500 | CLI | 48467 | 10 | 0 | \$0.00 | \$13.20 | \$13.20 | \$1.06 | \$14.26 | \$0.00 | \$0.00 | \$14.26 |
|  | FIXED |  |  | 1 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| Dep'd Group Life | TOTAL | CLI | 48467 | 11 | 0 | \$0.00 | \$13.20 | \$13.20 | \$1.06 | \$14.26 | \$0.00 | \$0.00 | \$14.26 |
| 3 LTD | Standard | CLI | 48467 | 12 | 31,406 | \$455.39 | \$0.00 | \$455.39 | \$36.43 | \$491.82 | \$0.00 | \$0.00 | \$491.82 |
| 4 Acc'lt Death/Dismem | Overage | Um | GSR 192 | 21 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  | Standard |  |  | 11 | 366,000 | \$0.00 | \$10.61 | \$10.61 | \$0.85 | \$11.46 | \$0.00 | \$0.00 | \$11.46 |
| 6 Out Of Country | Family | CLI | 48467 | 13 | 0 | \$0.00 | \$39.00 | \$39.00 | \$3.15 | \$42.15 | \$0.00 | \$0.00 | \$42.15 |
| 7 Medical - Stop Loss | Standard | CLI | 48467 | 13 | 0 | \$0.00 | \$163.80 | \$163.80 | \$13.23 | \$177.03 | \$0.00 | \$0.00 | \$177.03 |
| 9 Drugs - Assure Card | Family | CLI | 48467 | 13 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 8 Drug - Admin | Admin | CLI | 48467 | 13 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 88 HSP Commission | Comm | CLI | 48467 | 131 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 11 ASO Dental | Family | CDC | 48467 | 131 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 10 Dental Admin | Admin | CDC | 48467 | 13 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 13 ASO Major Medical | Family | CLI | 48467 | 13 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 12 Major Medical Admin | Admin | CLI | 48467 | 13 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  |  | Tota | al Premiun | ms For Emplo | oyee Class | \$455.39 | \$292.23 | \$747.62 | \$59.97 | \$807.59 | \$0.00 | \$0.00 | \$807.59 |

Group Insurance Register
Monthly Statement
Product Sample Group

Benefit Totals For Employee Class AE Executives


Group Insurance Register
Monthly Statement
Product Sample Group
Billing Group \# 7
For August 01, 2002
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Benefit Totals For Employee Class B Union Employees

| Internal Benefit Number Description |  | Coverage Type | $\begin{aligned} & \text { Ins } \\ & \text { Co. } \end{aligned}$ | Policy Num. | EE Count Active / Retro | Volume /or Count | Employee Premium | Employer Premium | Premiums Current | Taxes Current | Sum Current | Retro Premiums | Retro Taxes | Total Due |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 1 | Life Insurance | Standard | CLI | 48467 | 252 | 4,991,000 | \$0.00 | \$848.47 | \$848.47 | \$67.88 | \$916.35 | -\$17.00 | -\$1.36 | \$897.99 |
|  |  | \{none\} |  |  | 1 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$3.40 | \$0.27 | \$3.67 |
|  | Life Insurance | TOTAL | CLI | 48467 | 252 | 4,991,000 | \$0.00 | \$848.47 | \$848.47 | \$67.88 | \$916.35 | -\$13.60 | -\$1.09 | \$901.66 |
| 3 | LTD | Standard | CLI | 48467 | 252 | 431,173 | \$6,252.01 | \$0.00 | \$6,252.01 | \$500.16 | \$6,752.17 | \$123.45 | \$9.88 | \$6,885.49 |
|  |  | \{none\} |  |  | 2 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | -\$33.77 | -\$2.70 | -\$36.47 |
|  | LTD | TOTAL | CLI | 48467 | 252 | 431,173 | \$6,252.01 | \$0.00 | \$6,252.01 | \$500.16 | \$6,752.17 | \$89.68 | \$7.17 | \$6,849.02 |
| 4 | Acc'lt Death/Dismem | Standard | Um | GSR 192 | 252 | 4,991,000 | \$0.00 | \$144.74 | \$144.74 | \$11.58 | \$156.32 | \$0.58 | \$0.05 | \$156.94 |
|  |  | \{none\} |  |  | 2 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | -\$0.58 | -\$0.05 | -\$0.63 |
|  | Acc'lt Death/Dismem | TOTAL | Um | GSR 192 | 252 | 4,991,000 | \$0.00 | \$144.74 | \$144.74 | \$11.58 | \$156.32 | \$0.00 | \$0.00 | \$156.32 |
| 6 | Out Of Country | Single | CLI | 48467 | 78 | 0 | \$0.00 | \$117.00 | \$117.00 | \$9.36 | \$126.36 | \$0.00 | \$0.00 | \$126.36 |
|  |  | Family |  |  | 160 | 0 | \$0.00 | \$480.00 | \$480.00 | \$38.40 | \$518.40 | \$6.00 | \$0.48 | \$524.88 |
|  |  | \{none\} |  |  | 2 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | -\$3.00 | -\$0.24 | -\$3.24 |
|  | Out Of Country | TOTAL | CLI | 48467 | 238 | 0 | \$0.00 | \$597.00 | \$597.00 | \$47.76 | \$644.76 | \$3.00 | \$0.24 | \$648.00 |
|  | Out Of Country | S/F Total | CLI | 48467 | 238 | 0 | \$0.00 | \$597.00 | \$597.00 | \$47.76 | \$644.76 | \$6.00 | \$0.48 | \$651.24 |
| 7 | Medical - Stop Loss | Standard | CLI | 48467 | 238 | 0 | \$0.00 | \$2,998.80 | \$2,998.80 | \$239.90 | \$3,238.70 | \$12.60 | \$1.01 | \$3,252.31 |
|  |  | \{none\} |  |  | 2 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | -\$12.60 | -\$1.01 | -\$13.61 |
|  | Medical - Stop Loss | TOTAL | CLI | 48467 | 238 | 0 | \$0.00 | \$2,998.80 | \$2,998.80 | \$239.90 | \$3,238.70 | \$0.00 | \$0.00 | \$3,238.70 |
| 9 | Drugs - Assure Card | Single | BCE | 48467 | 3 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  |  | Single | CLI |  | 75 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  |  | Family |  |  | 155 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  |  | Family | BCE |  | 5 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  | Drugs - Assure Card | S/F Total | BCE | 48467 | 238 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 8 | Drug - Admin | Admin | CLI | 48467 | 238 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 88 | HSP Commission | Comm | CLI | 48467 | 23935 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 11 | ASO Dental | Single | CDC | 48467 | $78 \quad 19$ | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  |  | Family |  |  | 16012 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  | ASO Dental | S/F Total | CDC | 48467 | 238 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 10 | Dental Admin | Admin | CDC | 48467 | 238 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 13 | ASO Major Medical | Single | CLI | 48467 | 78 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  |  | Family |  |  | 160 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  | ASO Major Medical | S/F Total | CLI | 48467 | 238 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 12 | Major Medical Admin | Admin | CLI | 48467 | 238 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |


| Total Premiums For Employee Class | $\$ 6,252.01$ | $\$ 4,589.01$ | $\$ 10,841.02$ | $\$ 867.28$ | $\$ 11,708.30$ | $\$ 79.08$ | $\$ 6.33$ | $\$ 11,793.70$ |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- |

Group Insurance Register
Monthly Statement
Product Sample Group

Benefit Totals For Employee Class C Salaried Employees


Group Insurance Register
Monthly Statement
Product Sample Group
Billing Group \# 7
For August 01, 2002
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Benefit Totals For Employee Class na ALL EMPLOYEES

| Internal Benefit Number Description | Coverage Type |  | Policy Num. | EE Count Active / Retro | Volume /or Count | Employee Premium | Employer Premium | Premiums Current | Taxes Current | Sum Current | Retro Premiums | Retro Taxes | Total Due |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 1 Life Insurance | Standard | CLI | 48467 | 1 | 20,000 | \$0.00 | \$3.40 | \$3.40 | \$0.27 | \$3.67 | \$0.00 | \$0.00 | \$3.67 |
| 3 LTD | Standard | CLI | 48467 | 1 | 2,348 | \$34.05 | \$0.00 | \$34.05 | \$2.72 | \$36.77 | \$0.00 | \$0.00 | \$36.77 |
| 4 Acc'lt Death/Dismem | Standard | Um | GSR 192 | 1 | 20,000 | \$0.00 | \$0.58 | \$0.58 | \$0.05 | \$0.63 | \$0.00 | \$0.00 | \$0.63 |
| Out Of Country | Single |  | 48467 | 1 | 0 | \$0.00 | \$1.50 | \$1.50 | \$0.12 | \$1.62 | \$0.00 | \$0.00 | \$1.62 |
|  | Family |  |  | 1 | 0 | \$0.00 | \$3.00 | \$3.00 | \$0.24 | \$3.24 | \$6.00 | \$0.48 | \$9.72 |
| Out Of Country | TOTAL | CLI | 48467 | 2 | 0 | \$0.00 | \$4.50 | \$4.50 | \$0.36 | \$4.86 | \$6.00 | \$0.48 | \$11.34 |
| Out Of Country | S/F Total | CLI | 48467 | 2 | 0 | \$0.00 | \$4.50 | \$4.50 | \$0.36 | \$4.86 | \$6.00 | \$0.48 | \$11.34 |
| 7 Medical - Stop Loss | Standard | CLI | 48467 | 2 | 0 | \$0.00 | \$25.20 | \$25.20 | \$2.02 | \$27.22 | \$25.20 | \$2.02 | \$54.43 |
| Drugs - Assure Card | Single | BCE 48467 |  | 1 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  | Family |  |  | 1 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| Drugs - Assure Card | S/F Total | BCE | 48467 | 2 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 8 Drug - Admin | Admin | CLI | 48467 | 2 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 88 HSP Commission | Comm | CLI | 48467 | 2 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| ASO Dental | Single | CDC 48467 |  | 1 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  | Family |  |  | 1 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| ASO Dental | S/F Total | CDC | 48467 | 2 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 10 Dental Admin | Admin | CDC | 48467 | 2 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| ASO Major Medical | Single | CLI | 48467 | 1 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  | Family |  |  | 1 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| ASO Major Medical | S/F Total | CLI | 48467 | 2 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 12 Major Medical Admin | Admin | CLI | 48467 | 2 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  |  | Total Premiums For Employee Class |  |  |  | \$34.05 | \$33.68 | \$67.73 | \$5.42 | \$73.14 | \$31.20 | \$2.50 | \$106.84 |

Group Insurance Register

Group Insurance Register
Monthly Statement
Product Sample Group

| Internal Benefit Number Description | Coverage Type |  EE \# Count <br> Ins Policy Retro or <br> Co. Num. Active / Claims |  |  |  | Benefit Totals For Group |  |  |  |  | Sum Current | Retro Premiums | Retro Taxes | Total Due |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  |  | Volume or Count | Employee Premium | Employer Premium | Premiums Current | Taxes Current |  |  |  |  |
| 1 Life Insurance | OverAge | CLI | 48467 | 1 |  | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  | Standard |  |  | 308 |  | 6,231,000 | \$0.00 | \$1,059.27 | \$1,059.27 | \$84.74 | \$1,144.01 | -\$14.62 | -\$1.17 | \$1,128.22 |
|  | \{none\} |  |  |  | 1 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$3.40 | \$0.27 | \$3.67 |
| Life Insurance | TOTAL | CLI | 48467 | 309 |  | 6,231,000 | \$0.00 | \$1,059.27 | \$1,059.27 | \$84.74 | \$1,144.01 | -\$11.22 | -\$0.90 | \$1,131.89 |
| 2 Dep'd Group Life | 5000/2500 | CLI | 48467 | 13 |  | 0 | \$0.00 | \$17.16 | \$17.16 | \$1.37 | \$18.53 | \$0.00 | \$0.00 | \$18.53 |
|  | FIXED |  |  | 1 |  | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| Dep'd Group Life | TOTAL | CLI | 48467 | 14 |  | 0 | \$0.00 | \$17.16 | \$17.16 | \$1.37 | \$18.53 | \$0.00 | \$0.00 | \$18.53 |
| 3 LTD | Standard | CLI | 48467 | 305 |  | 568,017 | \$8,236.25 | \$0.00 | \$8,236.25 | \$658.90 | \$8,895.14 | \$134.14 | \$10.73 | \$9,040.01 |
|  | \{none\} |  |  |  | 2 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | -\$33.77 | -\$2.70 | -\$36.47 |
| LTD | TOTAL | CLI | 48467 | 305 |  | 568,017 | \$8,236.25 | \$0.00 | \$8,236.25 | \$658.90 | \$8,895.14 | \$100.37 | \$8.03 | \$9,003.54 |
| 4 Acc'lt Death/Dismemb | Overage | Um | GSR 19287 | 71 |  | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  | Standard |  |  | 307 |  | 6,211,000 | \$0.00 | \$180.12 | \$180.12 | \$14.41 | \$194.53 | \$0.99 | \$0.08 | \$195.59 |
|  | \{none\} |  |  |  | 2 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | -\$0.58 | -\$0.05 | -\$0.63 |
| Acc'lt Death/Dismemb | TOTAL | Um | GSR 19287 | 37308 |  | 6,211,000 | \$0.00 | \$180.12 | \$180.12 | \$14.41 | \$194.53 | \$0.41 | \$0.03 | \$194.97 |
| 6 Out Of Country | Single | CLI | 48467 | 91 |  | 0 | \$0.00 | \$136.50 | \$136.50 | \$10.92 | \$147.42 | \$0.00 | \$0.00 | \$147.42 |
|  | Family |  |  | 204 |  | 0 | \$0.00 | \$612.00 | \$612.00 | \$48.99 | \$660.99 | \$12.00 | \$0.96 | \$673.95 |
|  | \{none\} |  |  |  | 2 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | -\$3.00 | -\$0.24 | -\$3.24 |
| Out Of Country | TOTAL | CLI | 48467 | 295 |  | 0 | \$0.00 | \$748.50 | \$748.50 | \$59.91 | \$808.41 | \$9.00 | \$0.72 | \$818.13 |
|  | S/F Total | CLI |  | 295 |  | 0 | \$0.00 | \$748.50 | \$748.50 | \$59.91 | \$808.41 | \$12.00 | \$0.96 | \$821.37 |
| 7 Medical - Stop Loss | Standard | CLI | 48467 | 295 |  | 0 | \$0.00 | \$3,717.00 | \$3,717.00 | \$297.49 | \$4,014.49 | \$37.80 | \$3.02 | \$4,055.31 |
|  | \{none\} |  |  |  | 2 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | -\$12.60 | -\$1.01 | -\$13.61 |
| Medical - Stop Loss | TOTAL | CLI | 48467 | 295 |  | 0 | \$0.00 | \$3,717.00 | \$3,717.00 | \$297.49 | \$4,014.49 | \$25.20 | \$2.02 | \$4,041.70 |
| 9 Drugs - Assure Card | Single | CLI | 48467 | 87 |  | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  | Single | BCE |  | 4 |  | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  | Family |  |  | 6 |  | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  | Family | CLI |  | 198 |  | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  | S/F Total | CLI |  | 295 |  | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 8 Drug-Admin | Admin | CLI | 48467 | 295 |  | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 88 HSP Commission | Comm | CLI | 48467 | 296 | 58 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 11 ASO Dental | Single | CDC | 48467 | 93 | 23 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  | Family |  |  | 204 | 15 | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  | S/F Total | CDC |  | 297 |  | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 10 Dental Admin | Admin | CDC | 48467 | 295 |  | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 13 ASO Major Medical | Single | CLI | 48467 | 91 |  | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  | Family |  |  | 204 |  | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  | S/F Total | CLI |  | 295 |  | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 12 Major Medical Admin | Admin | CLI | 48467 | 295 |  | 0 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
|  | Total Premiums for Group Recorded on Invoice Page |  |  |  |  |  | \$8,236.25 | \$5,722.05 | \$13,958.30 | \$1,116.82 | \$15,075.11 | \$123.75 | \$9.90 | 15,208.76 |

Group Insurance Register

Group Insurance Register

