

**BENEFITS****EMPLOYEE PER CHECK****VEBA/HSA Contribution**

	<u># of</u>	<u>HIGH DED</u>	<u>HIGH DED</u>	<u>HIGH DED</u>	<u>DENTAL</u>	<u>HIGH DED</u>	<u>HIGH DED</u>	<u>HIGH DED</u>
	<u>Deductions</u>	<u>1,200/2,400</u>	<u>2,600/5,200</u>	<u>5,000/10,000</u>		<u>1,200/2,400</u>	<u>2,600/5,200</u>	<u>5,000/10,000</u>
<b>Secretary</b>	26							
Employee		162.15	92.96	27.81	0.00	1,000.00	1,300.00	1,500.00
Employee +1		446.12	307.58	167.27		2,000.00	2,300.00	2,600.00
Family		808.85	608.19	400.38		2,000.00	2,300.00	2,600.00
<b>Secretary</b>	18							
Employee		234.22	134.28	40.17	0.00	1,000.00	1,300.00	1,500.00
Employee +1		644.39	444.28	241.61		2,000.00	2,300.00	2,600.00
Family		1168.33	878.50	578.33		2,000.00	2,300.00	2,600.00