## **2017 Contribution Rates**

	Part Time Worker (15 to <24 hrs/wk)	Full Time Worker (24 hours or more per week)		
		Worker Only	Worker with 1 dependent	Worker with 2 or more dependents
BASIC LIFE				
1 x		.33% yr	.33% yr	.33% yr
2 x		.66% yr	.66% yr	.66% yr
3 x		.98% yr	.98% yr	.98% yr
4 x		1.31% yr	1.31% yr	1.31% yr
5 x		1.64% yr	1.64% yr	1.64% yr
DEPENDENT LIFE		n/a	.0756%	.0756%
OUT OF COUNTRY		\$4.64/mth	\$9.90/mth	\$9.90/mth
EAP		\$7.00/mth	\$7.00/mth	\$7.00/mth
EXTENDED HEALTH				
Plan Option 1		\$52.89/mth	\$105.72/mth	\$130.58/mth
Plan Option 2		\$71.79/mth	\$143.55/mth	\$177.21/mth
Plan Option 3		\$88.41/mth	\$176.73/mth	\$218.24/mth
DENTAL PLAN				
Plan Option 1		\$32.29/mth	\$64.50/mth	\$86.84/mth
Plan Option 2		\$48.43/mth	\$96.85/mth	\$130.23/mth
Plan Option 3		\$67.15/mth	\$134.31/mth	\$180.59/mth
ADMINISTRATION		\$75.00/mth	\$75.00/mth	\$75.00/mth
PENSION PLAN	16%	16%	16%	16%
POST RETIREMENT	1.9%	1.9%	1.9%	1.9%