

**LANSING CENTRAL SCHOOL DISTRICT**  
**PAYROLL DEDUCTION LASO FAMILY**

**FAMILY**

NEW: \_\_\_\_\_

CHANGE: \_\_\_\_\_

BDW 150/450 RX 0/10/25      2021-2022

CANCEL: \_\_\_\_\_

NAME: \_\_\_\_\_

SOCIAL SECURITY (ID) #: \_\_\_\_\_

EFFECTIVE PAYROLL DATED: 16-Jul-21

HEALTH INS. DEDUCTION:                      239.66 /PAY                      5,751.82 /TOTAL

DENTAL INS. DEDUCTION:                      - /PAY                      - /TOTAL

**Calculations:**

Health Premium	\$28,759.08
<i>FTE:</i>	<u>1.00</u>
Total Policy Premium	<u>28759.08</u>
Employee Rate:	20%
Annual Premium	<u>5751.82</u>
Mo/Yr:	<u>12</u>
Monthly Premium	<u>479.32</u>
<i>Months Enrolled</i>	<u>12</u>
Premium/Enrollment Period	<u>5,751.82</u>
<i>Paid To Date</i>	<u>0.00</u>
Balance Due	<u>5751.82</u>
<i>Remaining Pays</i>	<u>24</u>
Payroll Deduction:	<u>239.66</u>

Dental Premium	\$1,071.36
<i>FTE:</i>	<u>1.00</u>
Total Policy Premium	<u>1071.36</u>
Employee Rate:	0%
Annual Premium	<u>0.00</u>
Mo/Yr:	<u>12</u>
Monthly Premium	<u>0.00</u>
<i>Months Enrolled</i>	<u>12</u>
Premium/Enrollment Period	<u>0.00</u>
<i>Paid To Date</i>	<u>0.00</u>
Balance Due	<u>0.00</u>
<i>Remaining Pays</i>	<u>24</u>
Payroll Deduction:	<u>0.00</u>

FLXHLT

FHLEF2 - 24