

**EXAMPLE USING SINGLE EMPLOYEE**

**NAME:** - **EFFECTIVE DATE:** -

**SALARY:** \$ 23,400.00 **WAGE:** \$ 11.25

**Fringe Benefits (33% of Salary)** \$ 7,722.00

- 1.) Social Security (7.65% of Salary) \$ 1,790.10
- 2.) Workers Comp. (2.07% on 1st \$23700) \$ 484.38
- 3.) Unemployment Comp. (.20% on 1st \$24,700) \$ 46.80

**Total Taxes** \$ 2,321.28

4.) Life Insurance (25,000 for \$36.00) \$ 3.25 \$ 39.00

**HORACE MANN**

5.) Disability Insurance (.0057 x Salary) \$ 11.12 133.38

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**AMOUNT REMAINING** **YR/MO** \$ 5,228.34 \$ 435.70

6.) Medical Insurance  
**BLUE CROSS/BLUE SHIELD**

|                 |                 |                  |
|-----------------|-----------------|------------------|
| <b>Employee</b> | <b>\$405.20</b> |                  |
| Family          | \$1170.5        |                  |
| Emp/Spouse      | \$892.30        |                  |
| Emp/Child       | \$714.20        | \$ <u>405.20</u> |

7.) Dental Insurance  
**BLUE CROSS**

|               |                 |                 |
|---------------|-----------------|-----------------|
| <b>Single</b> | <b>\$ 30.90</b> |                 |
| Family        | \$79.50         | \$ <u>30.90</u> |

**8.) Avesis Vision Insurance**

|                   |               |                |
|-------------------|---------------|----------------|
| <b>Single</b>     | <b>\$9.57</b> |                |
| Employee + One    | \$16.75       |                |
| Employee + Family | \$24.89       | \$ <u>9.57</u> |

**TOTAL INSURANCE** \$ 445.67

Annual amount remaining for Retirement Annuity. (This amount will be paid by ABLE, Inc. if employee contributes same amount or more) \$ -

ANNUITY CONTRIBUTION BY ABLE, INC. \$ 25.00

Amount to be deducted from my paycheck for my annuity contract \$ -

Beginning:  
Signature:  
Date:

Amount to be deducted from my paycheck for insurance \$ (9.98)

Additional amount deducted from paycheck: