

JFT Health & Welfare Fund

Dependent Premiums Dental and Vision

Effective
January 1, 2005

Vision and Fee-For Service Dental

	20 Pays	24 Pays
Spouse Only	21.88	18.23
Child(ren)	33.82	28.18
Spouse and Child(ren)	55.70	46.62

Vision and Managed-Care Dental

	20 Pays	24 Pays
Spouse Only	18.93	15.33
Child(ren)	29.35	24.46
Spouse and Child(ren)	47.74	39.78
