

<b>Div. No.</b>	<b>OCA</b>	<b>OL1</b>	<b>Subfund</b>	<b>OL3</b>	<b>Type</b>	<b>Amount</b>
46-02	462007	3	208	3362	Medical Adm. fee	4,050,000
	462004	3	208	3363	Medical Claims	119,110,769
					Subtotal	123,160,769
46-02	462029	3	208	3362	COBRA	10,000
46-02	462011	3	208	3362	Tobacco Cessation	20,250
46-02	462013	3	208	3362	Biometric Screenings	104,149
46-02	462015	3	208	3362	Front Street Fitness	55,985
46-02	462009	3	207	3362	Dental Admin Fee	401,544
	462003	3	207	3363	Dental Claims	7,635,526
					Subtotal	8,037,070
46-02	462035	3	209	3362	Drug Admin Fee	146,500
	462005	3	209	3363	Drug Claims	40,277,312
					Subtotal	40,423,812
46-02	462001	3	204	3362	Vision Adm. Fee	79,560
	462052	3	204	3363	Vision Claims	937,965
					Subtotal	1,017,525
46-02	462000	3	203	3362	Life Insurance	1,200,000
46-02	462008	3	211	3362	Disability Adm. Fee	138,600
	462042	3	211	3363	Disability Claims	3,043,686
					Subtotal	3,182,286
<b>TOTAL</b>						<b>\$177,211,846</b>