

DENTAL SERVICES ORGANIZATION, LLC

COUNTY OF MONMOUTH EMPLOYEE-FUNDED (VOLUNTARY) DENTAL COVERAGE

MONTHLY PREMIUMS:

	<u>SINGLE</u>	<u>TWO PARTY</u>	<u>FAMILY</u>
PLAN A	\$25.70	\$49.25	\$73.43

CURRENT ENROLLMENT:

	<u>SINGLE</u>	<u>TWO PARTY</u>	<u>FAMILY</u>
	68	44	75

DEPENDENT COVERAGE:

Dependent Children Covered			to age 26
Full-time students Covered			to age 26

The proposed rates outlined above are subject to approval by New Jersey Department of Banking and Insurance and will expire six months from date of issue. Upon acceptance the rates will be guaranteed for a period of two (2) years from the effective date of the program. All rates are net of commissions.

Date of Issue: October 9, 2025