

Class _____
name of the eligible participating class

Select the specific options below, to define the benefits for a Class, such as “Executives” or “Employees”.

Eligibility [] Starting the first day of employment, or
[] Starting after ___ months of employment.

note: after no more than 24 months of employment, including credit for months in another eligible class.

Participants [] Full-time Eligible Class participants,
[] and Part-time Eligible Class participants.

Dependents Spouse or Common-Law Spouse of the Employee, and Children of the Employee, Spouse or Common-Law Spouse.

Other Dependents Grandchildren of Employee, Spouse/Common-Law Spouse. Parents, Grandparents, Brothers, Sisters, Uncles, Aunts, and Nieces or Nephews, residing in Canada and related by blood, marriage or adoption, to the Employee or Spouse.

Claims **First Plan Year**
Claims Reimbursement _____ % to maximum of
Single (no Dependents) \$ _____ per calendar year.
Family (with Dependents) \$ _____ per calendar year.

Subsequent Plan Years
Claims Reimbursement _____ % to maximum of
Single (no Dependents) \$ _____ per calendar year.
Family (with Dependents) \$ _____ per calendar year.

note: benefit of \$1,000 Single and \$2,500 Family, at 100% or 80%.
note: no less than the above, even if prorated for First Plan Year.

[] Claims are eligible for the prior 12 months.
[] Claims are eligible starting at the enrollment date.

first year, and subsequent years, maximums are available to all eligible participants, regardless of effective or termination date.

Benefits Subject to the Calendar Year Maximums, all benefits allowed in CRA Income Tax Folio S1F1C1 the “Medical Expense Tax Credit” and also in searchable form here: <http://www.cra-arc.gc.ca/medical> including, but not limited to, those shown in the benefit booklets.