

Dental Insurance Enrollment/Change/Waiver Form



PLEASE NOTE THAT COMPLETING THIS FORM DOES NOT GUARANTEE COVERAGE. THIS FORM MAY NOT BE USED FOR DELTA DENTAL'S TRISELECT VOLUNTARY OR DELTACARE PRODUCTS.

EFFECTIVE DATE

EMPLOYER USE ONLY	DANE COUNTY Group No. 704				
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COMPLETE THIS SECTION IF YOU ARE ACCEPTING, CHANGING OR TERMINATING COVERAGE

EMPLOYEE'S LAST NAME	FIRST NAME	M.I.	SOCIAL SECURITY NUMBER - -	DATE OF BIRTH:	MO	DAY	YR	
HOME ADDRESS (STREET & NUMBER)				SEX:	<input type="checkbox"/> MALE	<input type="checkbox"/> FEMALE		
CITY			STATE	ZIP CODE	DATE OF HIRE:	MO	DAY	YR

LIST ALL ELIGIBLE FAMILY MEMBERS TO BE COVERED				RELATIONSHIP <small>(i.e., son, stepson, etc.)</small>	DATE OF BIRTH		
CHECK ONE:	LAST NAME (IF DIFFERENT)	FIRST NAME	M.I.		MONTH	DAY	YEAR
<input type="checkbox"/> SPOUSE <input type="checkbox"/> DOMESTIC PARTNER							

REASON FOR SUBMITTING THIS FORM:
 New Enrollee Open Enrollment Change

IF THIS IS FOR CHANGE, WHAT IS THE REASON?

<input type="checkbox"/> Birth/Adoption (Name: _____)	DATE OCCURRED: _____
<input type="checkbox"/> Marriage <input type="checkbox"/> Divorce	_____
<input type="checkbox"/> Add <input type="checkbox"/> Drop Dependent (Name: _____)	_____
<input type="checkbox"/> Termination of Benefits (Reason: _____)	_____
<input type="checkbox"/> Loss of Dental Benefits	_____
<input type="checkbox"/> Name Change (Former Name: _____)	_____
<input type="checkbox"/> Address Change	_____
<input type="checkbox"/> COBRA Application	_____

WHAT TYPE OF COVERAGE ARE YOU APPLYING FOR:
 EMPLOYEE ONLY FAMILY

MARITAL STATUS:
 SINGLE MARRIED DOMESTIC PARTNER

IF YOU ARE NOT ACCEPTING COVERAGE FOR YOUR SPOUSE OR YOUR DEPENDENTS, ARE THEY COVERED BY ANOTHER DENTAL PLAN?
 YES NO

ACCEPTANCE OF INSURANCE

SIGNATURE IS REQUIRED	DATE
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COMPLETE THIS SECTION <u>ONLY</u> IF YOU ARE <u>WAIVING</u> COVERAGE	PLEASE CHECK ONE:			
EMPLOYEE'S LAST NAME	FIRST NAME	M.I.	SOCIAL SECURITY NUMBER - -	<input type="checkbox"/> I have coverage through my spouse. <input type="checkbox"/> I have other dental coverage. <input type="checkbox"/> I do not have other dental coverage
DEPARTMENT NAME				
<input type="checkbox"/> WAIVE COVERAGE			SIGNATURE IS REQUIRED	DATE

WAIVER OF COVERAGE: I understand that if I decide not to apply for coverage, or if I apply only for single coverage even though I am eligible for family coverage, any subsequent application will be subject to the applicable terms and conditions of the Master Agreement to Provide Dental Benefits, which may require additional limitations and waiting periods. I also understand that Delta Dental of Wisconsin, Inc. reserves the right to reject such an application.

TERMS & CONDITIONS

1. To the best of my knowledge, all statements and answers in this application are complete and true.
2. My remitting agent is Dane County.
3. I agree to pay in advance the current premium for this insurance and I authorize the remitting agent to deduct from my wages or salary an amount sufficient to provide for regular premium payments that are not otherwise contributed. The remitting agent shall send the premium on my behalf to the insurance carrier I have selected.
4. I agree that any physician, hospital, or other institution, who attends or has attended me, my spouse, or any of my children is authorized to furnish the insurance carrier with any and all information including the history obtained, findings and diagnosis.

**DELTA DENTAL PPO
SUMMARY OF BENEFITS
FOR COVERED EMPLOYEES OF:**

County of Dane

(See Dental Benefit Handbook for definitions of capitalized terms.)

GROUP NUMBER: 00704 - 00000

EFFECTIVE DATE OF PROGRAM: January 1, 2004

OPEN ENROLLMENT

Changes in enrollment status will be considered during an Open Enrollment Period 30 days prior to the Contract renewal date, with changes becoming effective on the renewal date.

WAITING PERIOD

Employees and their Dependents who apply for coverage after their initial eligibility period or without a qualifying event (loss of spousal benefits, marriage, divorce, birth or adoption, or the loss of employee coverage through another insurer) will:

Not be eligible for the Plan.

TERMS OF ELIGIBILITY

Eligibility begins:

For eligible new employees, eligibility begins the first day of the month following the waiting period.

For eligible new employees, the waiting period is 30 days.

For employees enrolling their Dependents:

Dependent children are eligible through the end of the month in which they attain age 26, regardless of student status, or if age 26 and beyond, to the date they lose eligibility due to the Dependent's inability to meet all of the requirements in the Handbook.

DEDUCTIBLE LIMITATIONS

Delta Dental shall not be obligated to pay any Deductible specified below.

The Deductible for Dental Procedures provided by Delta Dental PPO Providers is \$25 per Subscriber and per Covered Dependent, per Benefit Accumulation Period; however, no family will pay more than \$75 per Benefit Accumulation Period in Deductibles regardless of the number of family members covered.

The Deductible for Dental Procedures provided by Delta Dental Premier Providers is \$25 per Subscriber and per Covered Dependent, per Benefit Accumulation Period; however, no family will pay more than \$75 per Benefit Accumulation Period in Deductibles regardless of the number of family members covered.

The Deductible for Dental Procedures provided by Noncontracted Providers is \$25 per Subscriber and per Covered Dependent, per Benefit Accumulation Period; however, no family will pay more than \$75 per Benefit Accumulation Period in Deductibles regardless of the number of family members covered.

MAXIMUM BENEFIT

The maximum total Benefit payable in any Benefit Accumulation Period is limited to the amount specified below.

The maximum total Benefit per Subscriber and per Covered Dependent, per Benefit Accumulation Period for Dental Procedures provided by Delta Dental PPO Providers is \$2,000, or \$2,000 for Dental Procedures provided by Delta Dental Premier Providers, or \$2,000 for Dental Procedures provided by Noncontracted Providers. In no case will the maximum total Benefit exceed \$2,000 regardless of the network chosen.

ORTHODONTIC MAXIMUM BENEFIT

Delta Dental's obligation for orthodontic Benefits is limited to the lifetime maximum specified below.

The maximum lifetime orthodontic Benefit is \$2,000 for each Subscriber and each Covered Dependent. Dependent children are covered to age 26.

SCHEDULE OF BENEFITS, LIMITATIONS AND COVERAGE PERCENTAGE:

This Contract provides the following Benefits subject to the Coverage percentage listed for each Benefit and subject to any applicable Deductible. The Coverage and Coinsurance percentages may vary based upon the network membership of the treating Provider at the time the Dental Procedure is completed. The application of the Deductible, if any, also may vary based upon the network membership of the treating Provider at the time the Dental Procedure is completed.

For example, if the Coverage percentage shown is "80," that Benefit is 80% of the Maximum Plan Allowance, after satisfaction of any applicable Deductible. In the same example, the Coinsurance (the amount the patient must pay) would be the remaining 20%.

If the Coverage percentage shown is "0", that Benefit is not provided in the Group Contract.

The Benefit Accumulation Period begins on January 1, 2018, ends on December 31, 2018 and thereafter shall be the 12 month period beginning on January 1st.

PPO = Delta Dental PPO Provider Premier = Delta Dental Premier Provider NC = Noncontracted Provider

Does Deductible Apply? Yes/No			Coverage Percentage			Benefit
PPO	Premier	NC	PPO	Premier	NC	
N	N	N	100	100	100	Evaluations at six month intervals.
N	N	N	100	100	100	Full mouth series x-rays at thirty six month intervals; either individual images, or panoramic image, including bitewings.
N	N	N	100	100	100	Bitewing x-rays at six month intervals (limited to a set of four images).
N	N	N	100	100	100	Prophylaxis (teeth cleaning) or periodontal maintenance procedure at six month intervals.
Y	Y	Y	80	80	80	Prophylaxis. Periodontal maintenance procedure.
N	N	N	100	100	100	Topical fluoride applications at six month intervals for Covered Dependent children up to age 19.
N	N	N	100	100	100	Space maintainers for retaining space when a posterior primary tooth is prematurely lost.
Y	Y	Y	80	80	80	Emergency treatment to relieve pain.
Y	Y	Y	80	80	80	Topical application of sealants for Covered Dependents up to age 16. Application is limited to the occlusal surface of permanent molars which are free of decay and restorations. Benefits for sealants are limited to one application per tooth per lifetime.
Y	Y	Y	80	80	80	Amalgam (silver) restorations.
Y	Y	Y	80	80	80	Composite (tooth colored) restorations for all teeth.
Y	Y	Y	80	80	80	Prefabricated crowns – one per tooth at three year intervals.
Y	Y	Y	80	80	80	Endodontics including root canal treatment.
Y	Y	Y	80	80	80	Surgical endodontic treatment.
Y	Y	Y	80	80	80	Non-surgical periodontics, including procedures necessary for the treatment of diseases of the gums and bone supporting the teeth. Benefit is limited to once per quadrant at 24 month intervals.
Y	Y	Y	80	80	80	Surgical periodontic treatment; benefit is limited to once per quadrant at 36 month intervals.
Y	Y	Y	80	80	80	Non-surgical extractions.

Does Deductible Apply? Yes/No			Coverage Percentage			Benefit
PPO	Premier	NC	PPO	Premier	NC	
Y	Y	Y	80	80	80	Oral surgery (cutting procedures) and surgical extractions including pre-operative and post-operative care.
Y	Y	Y	80	80	80	<p>Crowns, inlays, or onlays are provided when teeth are broken down by dental decay or accidental injury and may no longer be restored adequately with a filling material. Coverage for the purpose of replacing a defective existing crown, inlay or onlay will be provided only after a five year period from the date on which the defective item was last supplied, whether or not Delta Dental paid for the original Dental Procedure as a Benefit under this Contract.</p> <p>Porcelain veneers on crowns are Benefits on the six front teeth, bicuspid, and upper first molars.</p>
Y	Y	Y	80	80	80	<p>Prosthetics, including fixed bridgework, implants, partial dentures, and complete dentures to replace missing permanent teeth. Coverage for the purpose of replacing a defective existing prosthetic will be provided only after a five year period from the date on which the defective item was last supplied, whether or not Delta Dental paid for the original Dental Procedure as a Benefit under this Contract.</p> <p>Porcelain veneers on crowns or pontics are Benefits on the six front teeth, bicuspid, and upper first molars.</p> <p>Fixed bridges, implants, partial/complete dentures are provided where chewing function is impaired due to missing teeth. A fixed bridge or implant and implant related procedures may be a Benefit if no more than two teeth are missing in the dental arch in which the bridge or implant is proposed. Delta Dental will provide for replacement of missing teeth with the least elaborate procedure when three or more teeth are missing in the dental arch.</p> <p>Coverage for initial replacement of teeth is not limited to those lost while a Subscriber or Covered Dependent.</p>
Y	Y	Y	80	80	80	Repairs and adjustments to prosthetic appliances. Denture reline or rebase is a Benefit at three year intervals.

Does Deductible Apply? Yes/No			Coverage Percentage			Benefit
PPO	Premier	NC	PPO	Premier	NC	
Y	Y	Y	50	50	50	<p>Orthodontic appliances, treatment and related services for orthodontic purposes including evaluation, x-rays, extractions, photographs, and study models, subject to the orthodontic maximum benefit.</p> <p>Repair or replacement of orthodontic appliances are not covered.</p> <p>Delta Dental calculates all orthodontic treatment schedules according to the following formula:</p> <ul style="list-style-type: none"> - 25% of the total Maximum Plan Allowance (subject to the Coverage Percentage stated herein and any applicable Deductible) is considered the initial payment to be paid by Delta Dental, subject to the Coverage Percentage, any applicable Deductible and the orthodontic maximum Benefit stated herein. - The remainder of the Maximum Plan Allowance is divided by the months of treatment and the resulting amount is paid monthly by Delta Dental, subject to the Coverage Percentage, any applicable Deductible and the orthodontic maximum Benefit stated herein. <p>If orthodontic treatment is stopped for any reason before it is complete, Delta Dental will suspend all monthly payments.</p> <p>Coverage includes orthodontic treatment in progress. Treatment is in progress if an appliance or banding has been placed and the patient is receiving treatment by the attending orthodontist according to a current treatment plan. Liability for orthodontic treatment in progress shall extend only to the unearned portion of the treatment in progress (that portion occurring after enrollment) and Delta Dental shall be the sole determinant of this unearned amount eligible for coverage. However, there are no Benefits available for Dental Procedures, including orthodontic treatment in progress, after coverage terminates.</p>

OPTIONAL PROCEDURES

Delta Dental will pay the applicable Maximum Plan Allowance for the least expensive Dental Procedure that is adequate to restore the tooth or dental arch to contour and function, but only if the more expensive Dental Procedure is a Benefit of this Contract. The Subscriber or Covered Dependent will be responsible for either the remainder of the Provider's fee if a more expensive covered Dental Procedure is selected or the entire fee if the more expensive Dental Procedure is not a Benefit. The Coinsurance and Deductible will apply regardless of which Dental Procedure is selected.

SPECIAL CONDITIONS

Oral Surgery may be covered by your health plan. Please refer to your health plan booklet for covered oral surgical services.

V7PSMBQAJVM03272018

**AMENDMENT
TO
SUMMARY OF BENEFITS
FOR**

**County of Dane
00704 00000**

This Amendment modifies the group dental Benefits afforded by the Policy with Delta Dental of Wisconsin, Inc., and must be read in conjunction with the Handbook and Summary of Benefits. All terms and conditions of the Policy remain in effect, except as modified by this Amendment. Please read this Amendment carefully.

Please be advised that on April 1, 2018, the following Evidence-Based Integrated Care Plan (“EBICP”) Benefits are provided under your Policy. To participate in EBICP, eligible dental Policy enrollees or their Providers are required to set the appropriate health condition indicator online at deltadentalwi.com or a Delta Dental of Wisconsin representative will assist in setting the EBICP indicator by telephone. The EBICP Periodontal Disease health condition indicator will be automatically updated when non-surgical or surgical periodontal procedures are processed by Delta Dental of Wisconsin. This Amendment supersedes any previous amendment provided to you regarding EBICP.

The EBICP Benefits are as follows:

Periodontal Disease

1. With an indicator of surgical or non-surgical treatment of **Periodontal Disease**, a participant is eligible for up to two additional dental visits in a Benefit year for periodontal maintenance or adult prophylaxis.
2. With an indicator of surgical or non-surgical treatment of **Periodontal Disease**, a participant is eligible for topical fluoride application beyond the age limitation of the Master Group Contract.

Diabetes

1. With an indicator of a **Diabetes** diagnosis, a participant is eligible for up to two additional dental visits in a Benefit year for periodontal maintenance or adult prophylaxis.

Pregnancy

1. With an indicator of **Pregnancy**, a participant is eligible for one additional dental visit for adult prophylaxis or periodontal maintenance during the pregnancy.

High Risk Cardiac Conditions

1. With an indicator for **High Risk Cardiac Conditions**, a participant is eligible for up to two additional dental visits in a Benefit year for periodontal maintenance or adult prophylaxis. High risk cardiac condition indicators are:
 - History of infective endocarditis
 - Certain congenital heart defects (such as having one ventricle instead of the normal two)
 - Individuals with artificial heart valves
 - Heart valve defects caused by acquired conditions like rheumatic heart disease
 - Hyper tropic cardiomyopathy which causes abnormal thickening of the heart muscle
 - Individuals with pulmonary shunts or conduits
 - Mitral valve prolapse with regurgitation (blood leakage)

Suppressed Immune System Conditions

1. With an indicator for **Suppressed Immune System Conditions**, a participant is eligible for up to two additional dental visits in a Benefit year for periodontal maintenance or adult prophylaxis.
2. With an indicator of **Suppressed Immune System Conditions**, a participant is eligible for topical fluoride application beyond the age limitation of the Master Group Contract.

Kidney Failure or Dialysis Conditions

1. With an indicator for **Kidney Failure or Dialysis Conditions**, a participant is eligible for up to two additional dental visits in a Benefit year for periodontal maintenance or adult prophylaxis.

Cancer Related Chemotherapy and/or Radiation

1. With an indicator for **Cancer Related Chemotherapy and/or Radiation**, a participant is eligible for up to two additional dental visits in a Benefit year for periodontal maintenance or adult prophylaxis.
2. With an indicator of **Cancer Related Chemotherapy and/or Radiation**, a participant is eligible for topical fluoride application beyond the age limitation of the Master Group Contract.

**THIS AMENDMENT IS PART OF THE SUMMARY OF BENEFITS AND HANDBOOK REFERENCED
HEREIN AND SHOULD BE KEPT WITH THOSE DOCUMENTS.**

**DELTA DENTAL PPO
SUMMARY OF BENEFITS
FOR COVERED EMPLOYEES OF:**

County of Dane

(See Dental Benefit Handbook for definitions of capitalized terms.)

GROUP NUMBER: 07805 - 00000

EFFECTIVE DATE OF PROGRAM: January 1, 2006

OPEN ENROLLMENT

An Open Enrollment Period is available only to eligible Dependents who meet the requirements contained in the Eligibility, Covered Dependent, numbers 1 through 4, section of your Handbook. An Open Enrollment Period does not apply to any other Dependents listed under that section.

WAITING PERIOD

Employees and their Dependents who apply for coverage after their initial eligibility period or without a qualifying event (loss of spousal benefits, marriage, divorce, birth or adoption, or the loss of employee coverage through another insurer) will:

Not be eligible for the Plan.

TERMS OF ELIGIBILITY

Eligibility begins:

For eligible new employees, eligibility begins the first day of the month following the waiting period.

For eligible new employees, the waiting period is 30 days.

For employees enrolling their Dependents:

Dependent children are eligible through the end of the month in which they attain age 26, regardless of student status, or if age 26 and beyond, to the date they lose eligibility due to the Dependent's inability to meet all of the requirements in the Handbook.

DEDUCTIBLE LIMITATIONS

Delta Dental shall not be obligated to pay any Deductible specified below.

The Deductible for Dental Procedures provided by Delta Dental PPO Providers is \$25 per Subscriber and per Covered Dependent, per Benefit Accumulation Period; however, no family will pay more than \$75 per Benefit Accumulation Period in Deductibles regardless of the number of family members covered.

The Deductible for Dental Procedures provided by Delta Dental Premier Providers is \$25 per Subscriber and per Covered Dependent, per Benefit Accumulation Period; however, no family will pay more than \$75 per Benefit Accumulation Period in Deductibles regardless of the number of family members covered.

The Deductible for Dental Procedures provided by Noncontracted Providers is \$25 per Subscriber and per Covered Dependent, per Benefit Accumulation Period; however, no family will pay more than \$75 per Benefit Accumulation Period in Deductibles regardless of the number of family members covered.

MAXIMUM BENEFIT

The maximum total Benefit payable in any Benefit Accumulation Period is limited to the amount specified below.

The maximum total Benefit per Subscriber and per Covered Dependent, per Benefit Accumulation Period for Dental Procedures provided by Delta Dental PPO Providers is \$2,000, or \$2,000 for Dental Procedures provided by Delta Dental Premier Providers, or \$2,000 for Dental Procedures provided by Noncontracted Providers. In no case will the maximum total Benefit exceed \$2,000 regardless of the network chosen.

ORTHODONTIC MAXIMUM BENEFIT

Delta Dental's obligation for orthodontic Benefits is limited to the lifetime maximum specified below.

The maximum lifetime orthodontic Benefit is \$2,000 for each Subscriber and each Covered Dependent. Dependent children are covered to age 26.

SCHEDULE OF BENEFITS, LIMITATIONS AND COVERAGE PERCENTAGE:

This Contract provides the following Benefits subject to the Coverage percentage listed for each Benefit and subject to any applicable Deductible. The Coverage and Coinsurance percentages may vary based upon the network membership of the treating Provider at the time the Dental Procedure is completed. The application of the Deductible, if any, also may vary based upon the network membership of the treating Provider at the time the Dental Procedure is completed.

For example, if the Coverage percentage shown is "80," that Benefit is 80% of the Maximum Plan Allowance, after satisfaction of any applicable Deductible. In the same example, the Coinsurance (the amount the patient must pay) would be the remaining 20%.

If the Coverage percentage shown is "0", that Benefit is not provided in the Group Contract.

The Benefit Accumulation Period begins on January 1, 2018, ends on December 31, 2018 and thereafter shall be the 12 month period beginning on January 1st.

PPO = Delta Dental PPO Provider Premier = Delta Dental Premier Provider NC = Noncontracted Provider

Does Deductible Apply? Yes/No			Coverage Percentage			Benefit
PPO	Premier	NC	PPO	Premier	NC	
N	N	N	100	100	100	Evaluations at six month intervals.
N	N	N	100	100	100	Full mouth series x-rays at thirty six month intervals; either individual images, or panoramic image, including bitewings.
N	N	N	100	100	100	Bitewing x-rays at six month intervals (limited to a set of four images).
N	N	N	100	100	100	Prophylaxis (teeth cleaning) or periodontal maintenance procedure at six month intervals.
Y	Y	Y	80	80	80	Prophylaxis. Periodontal maintenance procedure.
N	N	N	100	100	100	Topical fluoride applications at six month intervals for Covered Dependent children up to age 19.
N	N	N	100	100	100	Space maintainers for retaining space when a posterior primary tooth is prematurely lost.
Y	Y	Y	80	80	80	Emergency treatment to relieve pain.
Y	Y	Y	80	80	80	Topical application of sealants for Covered Dependents up to age 16. Application is limited to the occlusal surface of permanent molars which are free of decay and restorations. Benefits for sealants are limited to one application per tooth per lifetime.
Y	Y	Y	80	80	80	Amalgam (silver) restorations.
Y	Y	Y	80	80	80	Composite (tooth colored) restorations for all teeth.
Y	Y	Y	80	80	80	Prefabricated crowns – one per tooth at three year intervals.
Y	Y	Y	80	80	80	Endodontics including root canal treatment.
Y	Y	Y	80	80	80	Surgical endodontic treatment.
Y	Y	Y	80	80	80	Non-surgical periodontics, including procedures necessary for the treatment of diseases of the gums and bone supporting the teeth. Benefit is limited to once per quadrant at 24 month intervals.
Y	Y	Y	80	80	80	Surgical periodontic treatment; benefit is limited to once per quadrant at 36 month intervals.
Y	Y	Y	80	80	80	Non-surgical extractions.

Does Deductible Apply? Yes/No			Coverage Percentage			Benefit
PPO	Premier	NC	PPO	Premier	NC	
Y	Y	Y	80	80	0	Oral surgery (cutting procedures) and surgical extractions including pre-operative and post-operative care.
Y	Y	Y	80	80	80	<p>Crowns, inlays, or onlays are provided when teeth are broken down by dental decay or accidental injury and may no longer be restored adequately with a filling material. Coverage for the purpose of replacing a defective existing crown, inlay or onlay will be provided only after a five year period from the date on which the defective item was last supplied, whether or not Delta Dental paid for the original Dental Procedure as a Benefit under this Contract.</p> <p>Porcelain veneers on crowns are Benefits on the six front teeth, bicuspid, and upper first molars.</p>
Y	Y	Y	80	80	80	<p>Prosthetics, including fixed bridgework, implants, partial dentures, and complete dentures to replace missing permanent teeth. Coverage for the purpose of replacing a defective existing prosthetic will be provided only after a five year period from the date on which the defective item was last supplied, whether or not Delta Dental paid for the original Dental Procedure as a Benefit under this Contract.</p> <p>Porcelain veneers on crowns or pontics are Benefits on the six front teeth, bicuspid, and upper first molars.</p> <p>Fixed bridges, implants, partial/complete dentures are provided where chewing function is impaired due to missing teeth. A fixed bridge or implant and implant related procedures may be a Benefit if no more than two teeth are missing in the dental arch in which the bridge or implant is proposed. Delta Dental will provide for replacement of missing teeth with the least elaborate procedure when three or more teeth are missing in the dental arch.</p> <p>Coverage for initial replacement of teeth is not limited to those lost while a Subscriber or Covered Dependent.</p>
Y	Y	Y	80	80	80	Repairs and adjustments to prosthetic appliances. Denture reline or rebase is a Benefit at three year intervals.

Does Deductible Apply? Yes/No			Coverage Percentage			Benefit
PPO	Premier	NC	PPO	Premier	NC	
Y	Y	Y	50	50	50	<p>Orthodontic appliances, treatment and related services for orthodontic purposes including evaluation, x-rays, extractions, photographs, and study models, subject to the orthodontic maximum benefit.</p> <p>Repair or replacement of orthodontic appliances are not covered.</p> <p>Delta Dental calculates all orthodontic treatment schedules according to the following formula:</p> <ul style="list-style-type: none"> - 25% of the total Maximum Plan Allowance (subject to the Coverage Percentage stated herein and any applicable Deductible) is considered the initial payment to be paid by Delta Dental, subject to the Coverage Percentage, any applicable Deductible and the orthodontic maximum Benefit stated herein. - The remainder of the Maximum Plan Allowance is divided by the months of treatment and the resulting amount is paid monthly by Delta Dental, subject to the Coverage Percentage, any applicable Deductible and the orthodontic maximum Benefit stated herein. <p>If orthodontic treatment is stopped for any reason before it is complete, Delta Dental will suspend all monthly payments.</p> <p>Coverage includes orthodontic treatment in progress. Treatment is in progress if an appliance or banding has been placed and the patient is receiving treatment by the attending orthodontist according to a current treatment plan. Liability for orthodontic treatment in progress shall extend only to the unearned portion of the treatment in progress (that portion occurring after enrollment) and Delta Dental shall be the sole determinant of this unearned amount eligible for coverage. However, there are no Benefits available for Dental Procedures, including orthodontic treatment in progress, after coverage terminates.</p>

OPTIONAL PROCEDURES

Delta Dental will pay the applicable Maximum Plan Allowance for the least expensive Dental Procedure that is adequate to restore the tooth or dental arch to contour and function, but only if the more expensive Dental Procedure is a Benefit of this Contract. The Subscriber or Covered Dependent will be responsible for either the remainder of the Provider's fee if a more expensive covered Dental Procedure is selected or the entire fee if the more expensive Dental Procedure is not a Benefit. The Coinsurance and Deductible will apply regardless of which Dental Procedure is selected.

SPECIAL CONDITIONS

Oral Surgery may be covered by your health plan. Please refer to your health plan booklet for covered oral surgical services.

V7PSMBQAJVM03272018

**AMENDMENT
TO
SUMMARY OF BENEFITS
FOR**

**County of Dane
07805 00000**

This Amendment modifies the group dental Benefits afforded by the Policy with Delta Dental of Wisconsin, Inc., and must be read in conjunction with the Handbook and Summary of Benefits. All terms and conditions of the Policy remain in effect, except as modified by this Amendment. Please read this Amendment carefully.

Please be advised that on April 1, 2018, the following Evidence-Based Integrated Care Plan (“EBICP”) Benefits are provided under your Policy. To participate in EBICP, eligible dental Policy enrollees or their Providers are required to set the appropriate health condition indicator online at deltadentalwi.com or a Delta Dental of Wisconsin representative will assist in setting the EBICP indicator by telephone. The EBICP Periodontal Disease health condition indicator will be automatically updated when non-surgical or surgical periodontal procedures are processed by Delta Dental of Wisconsin. This Amendment supersedes any previous amendment provided to you regarding EBICP.

The EBICP Benefits are as follows:

Periodontal Disease

1. With an indicator of surgical or non-surgical treatment of **Periodontal Disease**, a participant is eligible for up to two additional dental visits in a Benefit year for periodontal maintenance or adult prophylaxis.
2. With an indicator of surgical or non-surgical treatment of **Periodontal Disease**, a participant is eligible for topical fluoride application beyond the age limitation of the Master Group Contract.

Diabetes

1. With an indicator of a **Diabetes** diagnosis, a participant is eligible for up to two additional dental visits in a Benefit year for periodontal maintenance or adult prophylaxis.

Pregnancy

1. With an indicator of **Pregnancy**, a participant is eligible for one additional dental visit for adult prophylaxis or periodontal maintenance during the pregnancy.

High Risk Cardiac Conditions

1. With an indicator for **High Risk Cardiac Conditions**, a participant is eligible for up to two additional dental visits in a Benefit year for periodontal maintenance or adult prophylaxis. High risk cardiac condition indicators are:
 - History of infective endocarditis
 - Certain congenital heart defects (such as having one ventricle instead of the normal two)
 - Individuals with artificial heart valves
 - Heart valve defects caused by acquired conditions like rheumatic heart disease
 - Hyper trophic cardiomyopathy which causes abnormal thickening of the heart muscle
 - Individuals with pulmonary shunts or conduits
 - Mitral valve prolapse with regurgitation (blood leakage)

Suppressed Immune System Conditions

1. With an indicator for **Suppressed Immune System Conditions**, a participant is eligible for up to two additional dental visits in a Benefit year for periodontal maintenance or adult prophylaxis.
2. With an indicator of **Suppressed Immune System Conditions**, a participant is eligible for topical fluoride application beyond the age limitation of the Master Group Contract.

Kidney Failure or Dialysis Conditions

1. With an indicator for **Kidney Failure or Dialysis Conditions**, a participant is eligible for up to two additional dental visits in a Benefit year for periodontal maintenance or adult prophylaxis.

Cancer Related Chemotherapy and/or Radiation

1. With an indicator for **Cancer Related Chemotherapy and/or Radiation**, a participant is eligible for up to two additional dental visits in a Benefit year for periodontal maintenance or adult prophylaxis.
2. With an indicator of **Cancer Related Chemotherapy and/or Radiation**, a participant is eligible for topical fluoride application beyond the age limitation of the Master Group Contract.

**THIS AMENDMENT IS PART OF THE SUMMARY OF BENEFITS AND HANDBOOK REFERENCED
HEREIN AND SHOULD BE KEPT WITH THOSE DOCUMENTS.**

**DELTA DENTAL PPO
SUMMARY OF BENEFITS
FOR COVERED EMPLOYEES OF:**

County of Dane

(See Dental Benefit Handbook for definitions of capitalized terms.)

GROUP NUMBER: 05012 - 00000

EFFECTIVE DATE OF PROGRAM: June 1, 2012

OPEN ENROLLMENT

Changes in enrollment status will be considered during an Open Enrollment Period 30 days prior to the Contract renewal date, with changes becoming effective on the renewal date.

WAITING PERIOD

Employees and their Dependents who apply for coverage after their initial eligibility period or without a qualifying event (loss of spousal benefits, marriage, divorce, birth or adoption, or the loss of employee coverage through another insurer) will:

Not be eligible for the Plan.

TERMS OF ELIGIBILITY

Eligibility begins:

For eligible new employees, eligibility begins the first day of the month following the waiting period.

For eligible new employees, the waiting period is 30 days.

For employees enrolling their Dependents:

Dependent children are eligible through the end of the month in which they attain age 26, regardless of student status, or if age 26 and beyond, to the date they lose eligibility due to the Dependent's inability to meet all of the requirements in the Handbook.

DEDUCTIBLE LIMITATIONS

Delta Dental shall not be obligated to pay any Deductible specified below.

The Deductible for Dental Procedures provided by Delta Dental PPO Providers is \$25 per Subscriber and per Covered Dependent, per Benefit Accumulation Period; however, no family will pay more than \$75 per Benefit Accumulation Period in Deductibles regardless of the number of family members covered.

The Deductible for Dental Procedures provided by Delta Dental Premier Providers is \$25 per Subscriber and per Covered Dependent, per Benefit Accumulation Period; however, no family will pay more than \$75 per Benefit Accumulation Period in Deductibles regardless of the number of family members covered.

The Deductible for Dental Procedures provided by Noncontracted Providers is \$25 per Subscriber and per Covered Dependent, per Benefit Accumulation Period; however, no family will pay more than \$75 per Benefit Accumulation Period in Deductibles regardless of the number of family members covered.

MAXIMUM BENEFIT

The maximum total Benefit payable in any Benefit Accumulation Period is limited to the amount specified below.

The maximum total Benefit per Subscriber and per Covered Dependent, per Benefit Accumulation Period for Dental Procedures provided by Delta Dental PPO Providers is \$2,000, or \$2,000 for Dental Procedures provided by Delta Dental Premier Providers, or \$2,000 for Dental Procedures provided by Noncontracted Providers. In no case will the maximum total Benefit exceed \$2,000 regardless of the network chosen.

ORTHODONTIC MAXIMUM BENEFIT

Delta Dental's obligation for orthodontic Benefits is limited to the lifetime maximum specified below.

The maximum lifetime orthodontic Benefit is \$2,000 for each Subscriber and each Covered Dependent. Dependent children are covered to age 26.

SCHEDULE OF BENEFITS, LIMITATIONS AND COVERAGE PERCENTAGE:

This Contract provides the following Benefits subject to the Coverage percentage listed for each Benefit and subject to any applicable Deductible. The Coverage and Coinsurance percentages may vary based upon the network membership of the treating Provider at the time the Dental Procedure is completed. The application of the Deductible, if any, also may vary based upon the network membership of the treating Provider at the time the Dental Procedure is completed.

For example, if the Coverage percentage shown is "80," that Benefit is 80% of the Maximum Plan Allowance, after satisfaction of any applicable Deductible. In the same example, the Coinsurance (the amount the patient must pay) would be the remaining 20%.

If the Coverage percentage shown is "0", that Benefit is not provided in the Group Contract.

The Benefit Accumulation Period begins on January 1, 2018, ends on December 31, 2018 and thereafter shall be the 12 month period beginning on January 1st.

PPO = Delta Dental PPO Provider Premier = Delta Dental Premier Provider NC = Noncontracted Provider

Does Deductible Apply? Yes/No			Coverage Percentage			Benefit
PPO	Premier	NC	PPO	Premier	NC	
N	N	N	100	100	100	Evaluations at six month intervals.
N	N	N	100	100	100	Full mouth series x-rays at thirty six month intervals; either individual images, or panoramic image, including bitewings.
N	N	N	100	100	100	Bitewing x-rays at six month intervals (limited to a set of four images).
N	N	N	100	100	100	Prophylaxis (teeth cleaning) or periodontal maintenance procedure at six month intervals.
Y	Y	Y	80	80	80	Prophylaxis. Periodontal maintenance procedure.
N	N	N	100	100	100	Topical fluoride applications at six month intervals for Covered Dependent children up to age 19.
N	N	N	100	100	100	Space maintainers for retaining space when a posterior primary tooth is prematurely lost.
Y	Y	Y	80	80	80	Emergency treatment to relieve pain.
Y	Y	Y	80	80	80	Topical application of sealants for Covered Dependents up to age 16. Application is limited to the occlusal surface of permanent molars which are free of decay and restorations. Benefits for sealants are limited to one application per tooth per lifetime.
Y	Y	Y	80	80	80	Amalgam (silver) restorations.
Y	Y	Y	80	80	80	Composite (tooth colored) restorations for all teeth.
Y	Y	Y	80	80	80	Prefabricated crowns – one per tooth at three year intervals.
Y	Y	Y	80	80	80	Endodontics including root canal treatment.
Y	Y	Y	80	80	80	Surgical endodontic treatment.
Y	Y	Y	80	80	80	Non-surgical periodontics, including procedures necessary for the treatment of diseases of the gums and bone supporting the teeth. Benefit is limited to once per quadrant at 24 month intervals.
Y	Y	Y	80	80	80	Surgical periodontic treatment; benefit is limited to once per quadrant at 36 month intervals.
Y	Y	Y	80	80	80	Non-surgical extractions.

Does Deductible Apply? Yes/No			Coverage Percentage			Benefit
PPO	Premier	NC	PPO	Premier	NC	
Y	Y	Y	80	80	80	Oral surgery (cutting procedures) and surgical extractions including pre-operative and post-operative care.
Y	Y	Y	80	80	80	Crowns, inlays, or onlays are provided when teeth are broken down by dental decay or accidental injury and may no longer be restored adequately with a filling material. Coverage for the purpose of replacing a defective existing crown, inlay or onlay will be provided only after a five year period from the date on which the defective item was last supplied, whether or not Delta Dental paid for the original Dental Procedure as a Benefit under this Contract. Porcelain veneers on crowns are Benefits on the six front teeth, bicuspid, and upper first molars.
Y	Y	Y	80	80	80	Prosthetics, including fixed bridgework, implants, partial dentures, and complete dentures to replace missing permanent teeth. Coverage for the purpose of replacing a defective existing prosthetic will be provided only after a five year period from the date on which the defective item was last supplied, whether or not Delta Dental paid for the original Dental Procedure as a Benefit under this Contract. Porcelain veneers on crowns or pontics are Benefits on the six front teeth, bicuspid, and upper first molars. Fixed bridges, implants, partial/complete dentures are provided where chewing function is impaired due to missing teeth. A fixed bridge or implant and implant related procedures may be a Benefit if no more than two teeth are missing in the dental arch in which the bridge or implant is proposed. Delta Dental will provide for replacement of missing teeth with the least elaborate procedure when three or more teeth are missing in the dental arch. Coverage for initial replacement of teeth is not limited to those lost while a Subscriber or Covered Dependent.
Y	Y	Y	80	80	80	Repairs and adjustments to prosthetic appliances. Denture reline or rebase is a Benefit at three year intervals.

Does Deductible Apply? Yes/No			Coverage Percentage			Benefit
PPO	Premier	NC	PPO	Premier	NC	
Y	Y	Y	50	50	50	<p>Orthodontic appliances, treatment and related services for orthodontic purposes including evaluation, x-rays, extractions, photographs, and study models, subject to the orthodontic maximum benefit.</p> <p>Repair or replacement of orthodontic appliances are not covered.</p> <p>Delta Dental calculates all orthodontic treatment schedules according to the following formula:</p> <ul style="list-style-type: none"> - 25% of the total Maximum Plan Allowance (subject to the Coverage Percentage stated herein and any applicable Deductible) is considered the initial payment to be paid by Delta Dental, subject to the Coverage Percentage, any applicable Deductible and the orthodontic maximum Benefit stated herein. - The remainder of the Maximum Plan Allowance is divided by the months of treatment and the resulting amount is paid monthly by Delta Dental, subject to the Coverage Percentage, any applicable Deductible and the orthodontic maximum Benefit stated herein. <p>If orthodontic treatment is stopped for any reason before it is complete, Delta Dental will suspend all monthly payments.</p> <p>Coverage includes orthodontic treatment in progress. Treatment is in progress if an appliance or banding has been placed and the patient is receiving treatment by the attending orthodontist according to a current treatment plan. Liability for orthodontic treatment in progress shall extend only to the unearned portion of the treatment in progress (that portion occurring after enrollment) and Delta Dental shall be the sole determinant of this unearned amount eligible for coverage. However, there are no Benefits available for Dental Procedures, including orthodontic treatment in progress, after coverage terminates.</p>

OPTIONAL PROCEDURES

Delta Dental will pay the applicable Maximum Plan Allowance for the least expensive Dental Procedure that is adequate to restore the tooth or dental arch to contour and function, but only if the more expensive Dental Procedure is a Benefit of this Contract. The Subscriber or Covered Dependent will be responsible for either the remainder of the Provider's fee if a more expensive covered Dental Procedure is selected or the entire fee if the more expensive Dental Procedure is not a Benefit. The Coinsurance and Deductible will apply regardless of which Dental Procedure is selected.

SPECIAL CONDITIONS

Oral Surgery may be covered by your health plan. Please refer to your health plan booklet for covered oral surgical services.

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**AMENDMENT
TO
SUMMARY OF BENEFITS
FOR**

**County of Dane
05012 00000**

This Amendment modifies the group dental Benefits afforded by the Policy with Delta Dental of Wisconsin, Inc., and must be read in conjunction with the Handbook and Summary of Benefits. All terms and conditions of the Policy remain in effect, except as modified by this Amendment. Please read this Amendment carefully.

Please be advised that on April 1, 2018, the following Evidence-Based Integrated Care Plan (“EBICP”) Benefits are provided under your Policy. To participate in EBICP, eligible dental Policy enrollees or their Providers are required to set the appropriate health condition indicator online at deltadentalwi.com or a Delta Dental of Wisconsin representative will assist in setting the EBICP indicator by telephone. The EBICP Periodontal Disease health condition indicator will be automatically updated when non-surgical or surgical periodontal procedures are processed by Delta Dental of Wisconsin. This Amendment supersedes any previous amendment provided to you regarding EBICP.

The EBICP Benefits are as follows:

Periodontal Disease

1. With an indicator of surgical or non-surgical treatment of **Periodontal Disease**, a participant is eligible for up to two additional dental visits in a Benefit year for periodontal maintenance or adult prophylaxis.
2. With an indicator of surgical or non-surgical treatment of **Periodontal Disease**, a participant is eligible for topical fluoride application beyond the age limitation of the Master Group Contract.

Diabetes

1. With an indicator of a **Diabetes** diagnosis, a participant is eligible for up to two additional dental visits in a Benefit year for periodontal maintenance or adult prophylaxis.

Pregnancy

1. With an indicator of **Pregnancy**, a participant is eligible for one additional dental visit for adult prophylaxis or periodontal maintenance during the pregnancy.

High Risk Cardiac Conditions

1. With an indicator for **High Risk Cardiac Conditions**, a participant is eligible for up to two additional dental visits in a Benefit year for periodontal maintenance or adult prophylaxis. High risk cardiac condition indicators are:
 - History of infective endocarditis
 - Certain congenital heart defects (such as having one ventricle instead of the normal two)
 - Individuals with artificial heart valves
 - Heart valve defects caused by acquired conditions like rheumatic heart disease
 - Hyper trophic cardiomyopathy which causes abnormal thickening of the heart muscle
 - Individuals with pulmonary shunts or conduits
 - Mitral valve prolapse with regurgitation (blood leakage)

Suppressed Immune System Conditions

1. With an indicator for **Suppressed Immune System Conditions**, a participant is eligible for up to two additional dental visits in a Benefit year for periodontal maintenance or adult prophylaxis.
2. With an indicator of **Suppressed Immune System Conditions**, a participant is eligible for topical fluoride application beyond the age limitation of the Master Group Contract.

Kidney Failure or Dialysis Conditions

1. With an indicator for **Kidney Failure or Dialysis Conditions**, a participant is eligible for up to two additional dental visits in a Benefit year for periodontal maintenance or adult prophylaxis.

Cancer Related Chemotherapy and/or Radiation

1. With an indicator for **Cancer Related Chemotherapy and/or Radiation**, a participant is eligible for up to two additional dental visits in a Benefit year for periodontal maintenance or adult prophylaxis.
2. With an indicator of **Cancer Related Chemotherapy and/or Radiation**, a participant is eligible for topical fluoride application beyond the age limitation of the Master Group Contract.

**THIS AMENDMENT IS PART OF THE SUMMARY OF BENEFITS AND HANDBOOK REFERENCED
HEREIN AND SHOULD BE KEPT WITH THOSE DOCUMENTS.**

MASTER GROUP PPO CONTRACT

Issued by

DELTA DENTAL OF WISCONSIN, INC.

All claims are settled based on a specific methodology. The eligible amount of a claim may be less than the provider's billed charge.

Dental Benefits under this Contract are provided by Delta Dental of Wisconsin, Inc. ("Delta Dental").

ARTICLE I DEFINITIONS

- 1.1** "Benefit Accumulation Period" means the time period that Deductibles and maximum Benefits accumulate. The Benefit Accumulation Period is the time period specified in the Declarations.
- 1.2** "Benefit" means those Dental Procedures that are covered by Delta Dental under the terms of this Contract as specified in the Schedule of Benefits.
- 1.3** "Certificate" means the Dental Benefit Handbook and Summary of Benefits issued to a Subscriber insured through the Group. The Certificate outlines the Benefits provided by the Master Group Contract.
- 1.4** "Coinsurance" means the percentage of the MPA, after any applicable Deductible is applied, paid by the Subscriber or Covered Dependent for a specific Benefit each time such Benefit is provided under this Contract.
- 1.5** "Contract Term" means the period commencing and terminating on the dates shown in the Declarations, and each annual period thereafter during which this Contract remains in effect.
- 1.6** "Coverage Percentage" means the percentage of the MPA, after any applicable Deductible is applied, paid by Delta Dental for a specific Benefit, as specified in the Declarations.
- 1.7** "Covered Dependent" means a Dependent who:
 - (a) is listed in the documents necessary for coverage under this Contract,
 - (b) has been accepted by Delta Dental for coverage, and
 - (c) for whom the appropriate premium has been paid.

- 1.8** “Declarations” means the document(s) labeled “Declarations” and which lists the Group name, the Contract term, coverage limits, coverage option(s), and other information particular to the Group.
- 1.9** “Deductible” means the specified dollar amount that a Subscriber or Covered Dependent is required to pay each Benefit Accumulation Period before Delta Dental will pay for Benefits as specified in the Declarations.
- 1.10** “Delta Dental” means Delta Dental of Wisconsin, Inc.
- 1.11** “Delta Dental PPO Provider” means:
- (a) Any Provider who has entered into a Delta Dental of Wisconsin PPO Provider agreement or a PPO Provider agreement with another member of the Delta Dental Plans Association to provide or arrange for the provision of Dental Procedures to Subscribers and Covered Dependents, and who abides by such uniform rules and regulations as prescribed by Delta Dental.
 - (b) Any Provider who is a member or shareholder of a professional dental corporation or other entity that has entered into a corporate Delta Dental of Wisconsin PPO Provider agreement on behalf of its member, shareholder or employee Providers or that has entered into a corporate PPO Provider agreement with another member of the Delta Dental Plans Association on behalf of its member, shareholder or employee Providers.
- 1.12** “Delta Dental Premier Provider” means:
- (a) Any Provider who has entered into a Delta Dental of Wisconsin Premier Provider agreement or a Premier Provider agreement with another member of the Delta Dental Plans Association to provide or arrange for the provision of Dental Procedures to Subscribers and Covered Dependents, and who abides by such uniform rules and regulations as prescribed by Delta Dental.
 - (b) Any Provider who is a member or shareholder of a professional dental corporation or other entity that has entered into a corporate Delta Dental of Wisconsin Premier Provider agreement on behalf of its member, shareholder or employee Providers or that has entered into a corporate Premier Provider agreement with another member of the Delta Dental Plans Association on behalf of its member, shareholder or employee Providers.
- 1.13** “Dental Procedure” means dental treatment provided to a Subscriber or Covered Dependent by a Provider and reported to Delta Dental using the Code on Dental Procedures and Nomenclature (CDT).

- 1.14** “Dependent” means a person who has satisfied the criteria for eligibility listed in Paragraph 3.1(b).
- 1.15** “Eligible Employee” means an employee or member of the Group who has satisfied the criteria for eligibility listed in Paragraph 3.1(a).
- 1.16** “Grievance” means any dissatisfaction with the administration, claims practices, or provision of services by Delta Dental that is expressed in writing by or on behalf of a Subscriber or Covered Dependent.
- 1.17** “Group” means the employer, association, union or other organization contracting with Delta Dental to provide Benefits to its Eligible Employees or members and their Dependents, if applicable.
- 1.18** “Master Group Contract” or “Contract” means the group dental insurance policy issued by Delta Dental to the Group in which Delta Dental agrees to provide dental Benefits to Subscribers and Covered Dependents. The Contract includes the group application, the Declarations (including the Schedule of Benefits), the Master Group Contract, and any attached addenda, appendixes, endorsements, schedules or riders.
- 1.19** “Maximum Plan Allowance” or “MPA” means the total dollar amount allowed for a specific Benefit.
- 1.20** “Noncontracted Provider” means a Provider who is not a Delta Dental PPO Provider or Delta Dental Premier Provider.
- 1.21** “Noncovered Benefits” means those Dental Procedures that are not covered by Delta Dental under the terms of the Contract.
- 1.22** “PPO” means a preferred provider organization.
- 1.23** “Open Enrollment Period” means an enrollment period during which time any Eligible Employee and/or Dependent may apply to become a Subscriber and/or Covered Dependent, and existing Subscribers may apply to change to another provider network or coverage option, if available, or elect to terminate coverage.
- 1.24** “Premium” means the total monthly fee due for this Contract. The Premium will be based on the Rate and the number of Subscribers.
- 1.25** “Provider” means a person duly licensed under Chapter 447 of the Wisconsin Statutes who acts within the lawful scope of his/her license under Chapter 447 or a person duly licensed in the state or country in which the Dental Procedures are rendered who acts within the lawful scope of his/her license.
- 1.26** “Rate” means the monthly fee required for each Subscriber in accordance with the terms of the Contract.

- 1.27** “Schedule of Benefits” is a listing of the specific Benefits and Benefit limitations for Dental Procedures provided under the terms of the Contract. The Schedule of Benefits is included in the Declarations.
- 1.28** “Subscriber” means an Eligible Employee or member of the Group who:
- (a) has completed and signed the documents necessary for coverage under the Contract,
 - (b) has been accepted by Delta Dental as a Subscriber, and
 - (c) for whom the appropriate Premium has been paid.
- 1.29** “Urgent Care Grievance” means any dissatisfaction with the administration or claims practices of or provision of services by Delta Dental that requires immediate dental attention. Such grievance must be delivered in writing to Delta Dental. See the Grievance Procedures section of the Contract.

**ARTICLE II
RESPONSIBILITIES OF THE PARTIES**

2.1 Responsibilities of Group.

- (a) Initial Enrollment. Subject to any Open Enrollment Period and the effective date of this Contract, the Group shall offer to all of its Eligible Employees the opportunity to subscribe for themselves and their Dependents to the Benefit option(s) chosen by the Group in lieu of any other benefit plan(s) offered by the Group. New employees who become Eligible Employees will be given the opportunity to enroll themselves and any Dependents.
- (b) Open Enrollment. During the Open Enrollment Period, if applicable, and only during such period unless otherwise specified in this Contract, the Group shall allow Eligible Employees to elect coverage or change coverage. Each Eligible Employee must complete the appropriate enrollment form and return it to the Group during the Open Enrollment Period. The Group will report these changes to Delta Dental. If Delta Dental approves coverage, the effective date of coverage will be the Contract renewal date. It is the Group’s responsibility to verify that the employee is eligible. Upon request the Group agrees to provide to Delta Dental proof of employee eligibility. Delta Dental may periodically audit Group’s records regarding eligibility in accordance with Paragraph 4.1(d).
- (c) The Group agrees to collect and remit to Delta Dental the monthly Premium for all Subscribers and Covered Dependents. The Premium will be due and payable by the first day of the month for which coverage is provided.

- (d) The Group agrees to provide to Delta Dental, in a form approved by Delta Dental, the enrollment information requested by Delta Dental for each person who becomes a Subscriber or Covered Dependent within 31 days of the date the Subscriber or Covered Dependent enrolls. In addition, the Group agrees to provide Delta Dental with any subsequent change in a Subscriber's or Covered Dependent's enrollment. This includes, but is not limited to:
 - (i) eligibility for Medicare;
 - (ii) loss of eligibility for coverage under this Contract due to termination of employment, divorce or death of the Subscriber;
 - (iii) the addition of newly acquired Dependents, or
 - (iv) the deletion of Covered Dependents.
- (e) The Group agrees to submit subscriber enrollment data to Delta Dental on no less than a monthly basis, reporting all changes in Subscribers and Covered Dependents entitled to receive Benefits. The effective, termination, or change date for a Subscriber must not be more than 90 days prior to the date on which the change was requested or the last renewal date of the Contract, or the last day of the month in which a Benefit payment was made on behalf of the Subscriber or Covered Dependent, whichever is later. The Group will be liable for claims incurred after the termination or change date and prior to the date of receipt and acceptance of the notice by Delta Dental.
- (f) The Group is responsible for:
 - (i) timely delivery of Delta Dental's standard identification card(s) (if applicable), and Certificate(s) to each Subscriber;
 - (ii) advising the Subscriber of Benefit changes in a timely manner; and
 - (iii) notifying the Subscriber of cancellation of this Contract.
- (g) The Group agrees to notify Delta Dental within ten days of a change in its legal status, expansion of business, dissolution of business, merger, acquisition, or any other significant business operational change.

2.2 Responsibilities of Delta Dental

- (a) Benefits Generally. In consideration of the Premium paid by the Group, Delta Dental agrees to provide to Subscribers and Covered Dependents the Benefits described in the Contract for the Benefit option(s) chosen by the Group.
- (b) The Rates for coverage are stated in the Declarations of this Contract. Each month's Premium will be calculated based upon the number of current

Subscribers, and according to their enrollment status. Delta Dental will notify the Group of any future change in the Rate at least 30 days (60 days if the increase is more than 25%) prior to the date of Contract renewal.

- (c) Upon initial enrollment, Delta Dental will provide the Group with identification card(s) (if requested), Certificates, Declarations and Schedules of Benefits in sufficient quantity for the Group to distribute to each Subscriber. Delta Dental may provide, at the Group's request, camera-ready language which the Group may print and distribute to Subscribers. Group agrees that it will not modify the camera-ready language provided by Delta Dental.
- (d) Delta Dental has the sole authority to make Benefit determinations.
- (e) Delta Dental reserves the right to make payment for Benefits directly to Subscribers. This provision will control even if the Subscriber has assigned the Subscriber's rights to the payment of Benefits.
- (f) Delta Dental will pay up to the MPA for Benefits minus the Subscriber's and Covered Dependent's applicable Deductible and Coinsurance as set forth in the Delta Dental PPO Declarations and in the Schedule of Benefits.
 - (i) For Dental Procedures provided by a Delta Dental PPO Provider, the Subscriber or Covered Dependent will be responsible for his/her applicable Deductible and Coinsurance percentage set forth in the Delta Dental PPO Declarations and in the Schedule of Benefits.
 - (ii) For Dental Procedures provided by a Delta Dental Premier Provider, the Subscriber or Covered Dependent will be responsible for his/her applicable Deductible and Coinsurance percentage set forth in the Delta Dental PPO Declarations and in the Schedule of Benefits.
 - (iii) For Dental Procedures provided by a Noncontracted Provider, the Subscriber or Covered Dependent will be responsible for his/her applicable Deductible and Coinsurance percentage set forth in the Delta Dental PPO Declarations and in the Schedule of Benefits, as well as any balance remaining up to the Noncontracted Provider's submitted fee.
 - (iv) The Subscriber or Covered Dependent also will be responsible for payment for any Dental Procedures that are not Benefits under the Contract, regardless of whether they were provided by a Delta Dental PPO Provider, a Delta Dental Premier Provider, or a Noncontracted Provider.

**ARTICLE III
ELIGIBILITY; ENROLLMENT; EFFECTIVE DATE OF COVERAGE;
TERMINATION OF ENROLLMENT**

3.1 Eligibility

- (a) Employees:
 - (i) Any employee who averages the number of hours of employment stated in the Declarations and who has completed the waiting period as established under Item 3 of the Declarations.
 - (ii) An employee no longer meeting such conditions who has elected to continue coverage under Paragraph 3.6.
- (b) Dependents:
 - (i) The Eligible Employee's lawful spouse.
 - (ii) The Eligible Employee's children, including step-children, adopted children and children placed for adoption with the Eligible Employee, who are less than 26 years of age.
 - (iii) An Eligible Employee's children's children until the Eligible Employee's child reaches age 18.
 - (iv) Notwithstanding (i), (ii) and (iii) above, the Eligible Employee's adult Dependent children, including step and adopted children and children placed for adoption with the Eligible Employee may be covered under this Contract if the adult child satisfies all of the following:
 - (A) The child is a full-time student, regardless of age; and
 - (B) The child was under 26 years of age when he or she was called to federal active duty in the National Guard or in a reserve component of the U.S. armed forces while the child was attending, on a full-time basis, an institution of higher learning; and
 - (C) The child re-enrolled as a full-time student within 12 months of returning from active duty.
 - (v) A Dependent child over age 26 who is financially dependent on the Eligible Employee because of physical or mental incapacity that commenced while covered under this policy and prior to the Dependent child reaching age 26, provided a physician's certificate of disability is submitted within six months following the Dependent child's 26th birthday. Delta Dental reserves the right to request proof of continued disability from time to time, but not more

often than annually after the two-year period immediately following the Dependent child's attainment of age 26.

- (c) If an Eligible Employee or Covered Dependent is activated while in the Reserve or National Guard, coverage terminates at the time of departure for active duty. Covered Dependents of activated Reserve and National Guard personnel may elect continuation of coverage as described under Paragraph 3.6. Upon return to civilian status, the Eligible Employee or Covered Dependent will be reinstated on the date he/she returns to work.

3.2 Effective Date of Eligible Employee's Coverage

The effective date of coverage for a Subscriber is specified in the Declarations.

An Eligible Employee who waived coverage because he/she was covered under other insurance may elect coverage to be effective on the first day of the month following the loss of such other coverage. The Eligible Employee must apply for such change in coverage within 30 days of the event causing the loss of the other coverage.

3.3 Effective Date of Eligible Dependent's Coverage

Except as otherwise stated in this Paragraph 3.3, if the Eligible Employee chooses family coverage, if available, the effective date of a Covered Dependent's coverage is the effective date of the Eligible Employee's coverage. Any change in coverage selection (single or family) because of marriage, divorce, or death causing a change in enrollment status will be effective as specified in the Declarations.

Coverage of a newborn child of a Subscriber is effective on the child's date of birth. The Subscriber must notify Delta Dental within 60 days of the birth of a child. Additional Premium will be required if the Subscriber is not enrolled for family coverage. When additional Premium is required, Premium will be charged from the first day of the month following the date of birth. If the Premium payment is not made, coverage for the newborn child will cease on the 61st day after birth unless within one year after birth the Subscriber pays Delta Dental all past due Premium and 5.5% interest per year on any past due Premium.

If the Subscriber notifies Delta Dental and pays the additional Premium, if any is required, within 60 days of an adoption or placement for adoption, the adopted child's coverage will be effective on the date of adoption, the date of a final order granting adoption, or the date the child is placed for adoption, whichever comes first.

An Eligible Employee who waived coverage for his/her Dependents because his/her Dependents were covered under other insurance may elect coverage for his/her Dependents to be effective on the first day of the month following the loss of such other coverage. The Eligible Employee must apply for such change in coverage within 30 days of the event causing the loss of the other coverage.

3.4 Enrollment

Eligible Employees must elect coverage during the initial eligibility period specified in the application for enrollment or during an Open Enrollment Period, if applicable, in order to receive Benefits. Persons not eligible during an Open Enrollment Period may be enrolled immediately upon attaining eligibility.

The Group agrees to complete and furnish to Delta Dental on or prior to the first day of every month eligibility data in a format approved by Delta Dental showing all Subscriber change information. Delta Dental will be obligated to provide Benefits only to Eligible Employees and Dependents who are enrolled and are reported on the list of Subscribers submitted by the Group and for whom the appropriate Premium has been paid under Article IV of this Contract for the period for which Benefits are provided.

The Open Enrollment Period is the period of time during which Eligible Employees and Subscribers may elect or change coverage, if such period is offered to the Group in the Declarations. Except as otherwise stated in this Contract, if an Eligible Employee declined coverage for himself/herself, or family coverage if family coverage is available under this Contract, then election of coverage or a change to family coverage may only occur during the Open Enrollment Period. Any changes made will be effective on the renewal date of the Contract.

3.5 Termination of Subscriber and Covered Dependent Coverage

- (a) Subject to any rights to continue coverage provided under Paragraph 3.6, enrollment under this Contract of any Subscriber or Covered Dependent may be terminated, or renewal of enrollment refused by Delta Dental, under the following circumstances:
 - (i) The Contract is cancelled or not renewed under Article VIII. If cancelled, coverage ends on the effective date of cancellation. If nonrenewed, coverage ends on the expiration date.
 - (ii) The date on which the Subscriber or Covered Dependent loses eligibility. Eligibility of employees shall terminate on the date on which full-time employment terminates. Dependents of an employee are eligible until the employee's eligibility terminates or until loss of Dependent status, whichever occurs first. Loss of Dependent status shall occur on the date on which the Dependent ceases to meet the requirements contained in Section 3.1 (b) herein.
 - (iii) Upon ten days' written notice if the Subscriber or Covered Dependent knowingly perpetrates or permits another person to make a material misrepresentation in obtaining Benefits under this Contract.

- (iv) Termination of coverage of a Subscriber shall automatically terminate the coverage of any Dependent of that Subscriber on the same date that the Subscriber's coverage terminates.
- (b) Upon termination of Subscriber or Covered Dependent coverage as indicated above, no further Benefits shall be provided under this Contract to a terminated Subscriber or Covered Dependent.

3.6 Continued Coverage

Under Title X of the Consolidated Omnibus Reconciliation Act of 1985 (COBRA), Subscribers and Covered Dependents in employer groups of more than 20 employees ("Qualified Beneficiaries") are permitted to elect continuation of coverage under this Contract upon the occurrence of any of the following "Qualifying Events":

- (a) Subscriber:
 - (i) Termination of employment, voluntary or involuntary, except for reasons of gross misconduct; or
 - (ii) Reduction in hours to fewer than the minimum required to be an Eligible Employee under this Contract.
- (b) Covered Dependents:
 - (i) If the Covered Dependent is the Subscriber's spouse:
 - (A) Death of Subscriber; or
 - (B) Termination of Subscriber's employment, except for reasons of gross misconduct; or
 - (C) Reduction of Subscriber's hours to fewer than the minimum required for eligibility for coverage under this Contract; or
 - (D) Divorce or legal separation from Subscriber; or
 - (E) Subscriber's Medicare entitlement.
 - (ii) If the Covered Dependent is the Subscriber's child:
 - (A) Child ceases to be a Dependent; or
 - (B) Death of Subscriber; or
 - (C) Termination of Subscriber's employment, except for reasons of gross misconduct; or

- (D) Reduction in Subscriber's hours to less than the minimum required to be eligible as a Subscriber under this Contract; or
- (E) Subscriber becomes entitled to Medicare; or
- (F) Parents become divorced or legally separated.

The Group must provide notice to the Subscriber and to Covered Dependents, as applicable, of the right to elect COBRA continuation coverage.

A Covered Dependent whose coverage is terminated due to divorce, legal separation or cessation of eligibility for Dependent coverage must provide the Group notice of such event within 60 days of its occurrence.

An election of continuation coverage must be made within 60 days beginning on the later of the date of the Qualifying Event or the date the Subscriber receives notice of election rights. The COBRA election by a Subscriber or covered spouse is deemed an election by all others who would lose coverage as a result of the same Qualifying Event unless otherwise specified in the election or the Covered Beneficiary independently elects COBRA continuation coverage.

If election of COBRA continuation coverage is timely, the coverage begins on the date of the Qualifying Event and ends on the earlier of:

- (a) Eighteen months after the Subscriber's employment termination or reduction in hours.
- (b) Twenty-nine months after the Qualifying Event for:
 - (i) a Qualified Beneficiary who is determined to be disabled under the Social Security Act at any time during the first 60 days of COBRA coverage and who notifies the Group of such determination within the first 18 months of COBRA coverage; and for
 - (ii) any nondisabled Qualified Beneficiaries with respect to the same Qualifying Event.
- (c) For Qualified Beneficiaries other than the Subscriber, 36 months after the date of the initial Qualifying Event for all other Qualifying Events.
- (d) The date on which the Qualified Beneficiary receiving continuation in coverage fails to make a timely payment of Premium. Delta Dental will not reinstate COBRA continuation coverage once terminated for nonpayment of Premium.
- (e) The date on which the Group ceases to offer this Contract to any of its employees or members.

- (f) The date on which coverage begins under another group dental plan, as applicable. However, a person who has elected COBRA continuation coverage and whose new plan contains a pre-existing limitation clause can maintain COBRA continuation coverage until all pre-existing limitations under the new plan are satisfied.
- (g) The date the Qualified Beneficiary becomes entitled to Medicare benefits.

The first Premium must be paid to the Group within 45 days of the election of COBRA continuation coverage. Future Premium payments must be paid by the first day of each month.

In accordance with ERISA Section 602(3), premium for a qualified disabled person will be 150% of the single, family, or other applicable Rate for the coverage during months 19 through 29 of COBRA continuation coverage. The premium for all other COBRA continuation coverage will not exceed 100% of the Rate in effect for the Group during months one through 18, and will not exceed 102% of the Rate in effect for the Group during months 19 through 36, if applicable.

ARTICLE IV PREMIUMS; DEDUCTIBLES; INSURANCE; COVERAGE REQUIREMENTS

4.1 Premiums

- (a) Premiums payable by the Group under this Contract are based on the number of Subscribers and the applicable Rate under each Benefit option at the time of initial enrollment and are adjusted monthly to reflect the current number of Subscribers. If the number of Subscribers reported by the Group for any month during the term is less than the number of Subscribers reported for the first month of the Contract Term by greater than 10%, or drops below the required minimum enrollment identified in the Declarations, Delta Dental may adjust the Rate or terminate this Contract as provided in Paragraph 8.1(b).
- (b) The Group agrees to pay Delta Dental the Premium in full by the first day of the month for which coverage is in effect. The Contract provides a 31-day grace period. If Premiums are not paid on or before the date they are due, they must be paid during the 31-day period following that date. The Contract will terminate at the end of the grace period if the Premiums have not been paid. The Group is responsible for payment of Premiums for coverage provided during the grace period.
- (c) In the event Delta Dental is notified of any change to, or termination of, coverage of a Subscriber with respect to which the Group failed to provide prompt notice, Delta Dental will refund or adjust Premium retroactively for a three-month period preceding the date of such notice, provided Delta Dental has paid no claims during that three-month period. No adjustment will be made if Delta Dental has paid claims after the change to or termination of coverage.

- (d) The Group agrees to permit Delta Dental, by its auditors or authorized representatives, on reasonable advance written notice, to inspect its records to verify the accuracy of lists of Eligible Employees and Dependents prepared by the Group and submitted to Delta Dental.

4.2 Deductible

In addition to any other limitations on specific Benefits that are described in the Schedule of Benefits, Benefits also are subject to any Deductible described in the Declarations. Subscribers are required to satisfy any applicable Deductible before Delta Dental is obligated to pay Benefits under the Contract.

4.3 Coinsurance

In addition to any other limitations on specific Benefits that are described in the Schedule of Benefits, Benefits will be subject to the Coinsurance indicated in the Schedule of Benefits. Subscribers and Covered Dependents are required to pay any such Coinsurance amounts directly to the provider.

4.4 Optional Procedures

Delta Dental will pay the applicable MPA for the least expensive Dental Procedure that is adequate to restore the tooth or dental arch to contour and function, but only if the more expensive Dental Procedure is a Benefit of this Contract. The Subscriber or Covered Dependent will be responsible for either the remainder of the Provider's fee if a more expensive covered Dental Procedure is selected or the entire fee if the more expensive Dental Procedure is not a Benefit. The Coinsurance and Deductible will apply regardless of which Dental Procedure is selected.

4.5 Dental Procedure Incurred

A Dental Procedure is incurred on the date it is completed. Dental Procedures are considered for Benefits if they are incurred during the Contract Term and a claim is filed within one year after the date on which the Dental Procedure is incurred. The Subscriber or Covered Dependent will be responsible for payment for any Dental Procedures that are completed after termination of the Subscriber's or Covered Dependent's coverage.

ARTICLE V GENERAL EXCLUSIONS

This Contract does NOT cover any of the following:

- 5.1** Dental Procedures, services, treatment or supplies provided or commenced prior to the effective date of the Subscriber's or Covered Dependent's coverage under this Contract or after the termination date of coverage, unless otherwise indicated.

- 5.2** Dental Procedures, services, treatment or supplies to treat injuries or conditions compensable under worker's compensation or employer's liability laws.
- 5.3** Charges for completion of forms.
- 5.4** Charges for consultation.
- 5.5** Dental Procedures, services, treatment or supplies excluded as provided in the Declarations.
- 5.6** Dental Procedures, services, treatment or supplies not specifically covered under this Contract or excluded by Delta Dental rules and regulations, including Delta Dental processing policies, which may change periodically and are printed on the Explanation of Benefits and Explanation of Payment forms.
- 5.7** Prescription drugs, premedications or relative analgesia.
- 5.8** Preventive control programs.
- 5.9** Charges for failure to keep a scheduled appointment.
- 5.10** Charges by any hospital or other surgical or treatment facility, or any additional fees charged by a Provider for treatment in any such facility.
- 5.11** Charges for treatment of, or services related to, temporomandibular joint dysfunction.
- 5.12** Dental Procedures, services, treatment and supplies that are determined to be partially or wholly cosmetic in nature including, but not limited to, charges for personalization or characterization of prosthetic appliances.
- 5.13** Crowns placed on Covered Dependents under age 12, other than prefabricated crowns.
- 5.14** Prosthetics placed on Covered Dependents under age 16.
- 5.15** Appliances, restorations, or procedures for:
 - (a) increasing vertical dimension;
 - (b) restoring occlusion;
 - (c) correcting harmful habits;
 - (d) replacing tooth structure lost by attrition, erosion, abrasion, or abfraction;
 - (e) correcting congenital or developmental malformations except in newly born children;

- (f) replacement, provisional and temporary services;
 - (g) implantology techniques (unless otherwise noted in the Declarations);
 - (h) splints, unless necessary as a result of accidental injury.
- 5.16** Dental Procedures, services, treatment or supplies provided by an individual other than a Provider.
- 5.17** Dental Procedures, services, treatment or supplies to treat injuries or diseases caused by riots or any form of civil disobedience.
- 5.18** Dental Procedures, services, treatment or supplies to treat injuries sustained while committing a felony or engaging in an illegal occupation.
- 5.19** Dental Procedures, services, treatment or supplies to treat injuries intentionally inflicted.
- 5.20** Replacement of lost or stolen dentures or charges for duplicate dentures.
- 5.21** Dental Procedures, services, treatment or supplies in cases for which, in the professional judgment of the attending Provider, a satisfactory result cannot be obtained.
- 5.22** Claims not submitted to Delta Dental of Wisconsin within 15 months from the date the procedure was provided.
- 5.23** Local anesthetic is covered as part of a Dental Procedure, service or treatment. General anesthetic or intravenous sedation is a Benefit only when billed with covered oral surgery (cutting procedures).
- 5.24** If orthodontic procedures are included as Benefits under this Contract, the repair and replacement of orthodontic appliances is not covered.
- 5.25** Services for which benefit is provided by a medical or health plan.

ARTICLE VI COORDINATION OF BENEFITS AND PROCEDURES

6.1 Applicability

- (a) This Coordination of Benefits (COB) provision applies to This Plan when a Subscriber or Covered Dependent has health care coverage under more than one Plan. "Plan" and "This Plan" as used in this Article VI are defined below.

- (b) If this COB provision applies, the order of benefit determination rules shall be applied first. The rules determine whether the Benefits of This Plan are determined before or after those of another Plan. The Benefits of This Plan:
 - (i) shall not be reduced when, under the order of benefit determination rules, this Plan determines its benefits before another Plan, but
 - (ii) may be reduced when, under the order of benefit determination rules, another Plan determines its benefits first. This reduction is described in Paragraph 6.4 below, Effect on the Benefits of This Plan.

6.2 Definitions

In addition to the definitions of this Contract, the following definitions apply to this Article:

- (a) “Allowable Expense” means an item of expense that is covered at least in part by one or more of the Plans covering the person for whom the claim is made.

When a Plan provides benefits in the form of services, the cash value of each procedure provided shall be considered both an Allowable Expense and a dental Benefit paid.

- (b) “Claim Determination Period” means a calendar year during which Allowable Expenses are compared with total benefits payable under the policy (without applying COB). It does not include any part of a year during which a person has no coverage under This Plan, or any part of a year before the date this COB provision or a similar provision takes effect.
- (c) “Plan” means any of the following that provides benefits or services for, or because of, medical or dental care or treatment:
 - (i) Group insurance or group-type coverage, whether insured or uninsured, that includes continuous 24-hour coverage. This includes prepayment, group practice or individual practice coverage. It also includes coverage other than school accident-type coverage.
 - (ii) Coverage under a governmental plan or coverage that is required or provided by law. This does not include a state plan under Medicaid, Title XIX, Grants to States for Medical Assistance Programs, or the United States Social Security Plan whose benefits, by law, are excess to those of any private insurance program or other nongovernmental program. Each contract or other arrangement for coverage under (i) or (ii) is a separate Plan. Also, if an arrangement has two parts and COB rules apply only to one of the two, each of the parts is a separate Plan.

- (d) “Primary Plan/Secondary Plan”: The order of benefit determination rules state whether This Plan is a Primary Plan or Secondary Plan as to another Plan covering the person.

When This Plan is a Secondary Plan, its dental Benefits are determined after those of the other Plan and may be reduced because of the other Plan’s benefits.

When Delta Dental is the Secondary Plan, Delta Dental may reduce the Benefits under this Plan only when the sum of the following exceeds the total Allowable Expense in a Claim Determination Period.

- (i) The benefits the Secondary Plan would pay for Allowable Expenses in the absence of COB; plus
- (ii) The benefits that would be payable under other applicable Plans for Allowable Expenses in the absence of COB, whether or not claim is made.

The amount by which the Secondary Plan’s benefits are reduced shall be used by the Secondary Plan to pay Allowable Expenses not otherwise paid, which were incurred during the Claim Determination Period by the person for whom the claim is made. As each claim is submitted, the Secondary Plan determines its obligation to pay for Allowable Expenses based on all claims which were submitted up to that point in time during the Claim Determination Period.

When there are more than two Plans covering the person, This Plan may be a Primary Plan as to one or more other Plans and may be a Secondary Plan as to a different Plan or Plans.

- (e) “This Plan” means this Contract.

6.3 Order of Benefit Determination Rules

- (a) General. When there is a basis for a claim under This Plan and another Plan, This Plan is a Secondary Plan, which has its Benefits determined after those of the other Plan, unless:
 - (i) the other Plan has rules coordinating its benefits with those of This Plan; and
 - (ii) both those rules and This Plan’s rules described in subparagraph (b) require that This Plan’s dental Benefits be determined before those of the other Plan.
- (b) Rules. This Plan determines its order of benefits using the first of the following rules, which applies.
 - (i) Nondependent/Dependent. The benefits of the Plan that covers the person as an employee, member or subscriber are determined before those of the

Plan that covers the person as a dependent of an employee, member or subscriber.

- (ii) Dependent Child/Parents Not Separated or Divorced. Except as stated in subparagraph (iii) (C) below, when This Plan and another Plan cover the same child as a dependent of different persons, called “parents”:
 - (A) the benefits of the Plan of the parent whose birthday falls earlier in the calendar year are determined before those of the Plan of the parent whose birthday falls later in the calendar year; but
 - (B) if both parents have the same birthday, the benefits of the Plan that covered the parent longer are determined before those of the Plan that covered the other parent.

However, if the other Plan does not have the rule described in (A) but instead has a rule based upon the gender of the parent, and if, as a result, the Plans do not agree on the order of benefits, the rule in the other Plan shall determine the order of benefits.

- (iii) Dependent Child/Separated or Divorced Parents. If two or more Plans cover a person as a dependent child of divorced or separated parents, benefits for the child are determined in this order:
 - (A) first, the Plan of the parent with custody of the child;
 - (B) then, the Plan of the spouse of the parent with custody of the child; and
 - (C) finally, the Plan of the parent not having custody of the child.

Also, if the specific terms of a court decree state that the parents have joint custody of the child and do not specify that one parent has responsibility for the child’s health care expenses or if the court decree states that both parents shall be responsible for the health care needs of the child but gives physical custody of the child to one parent and the entities obligated to pay or provide benefits of the respective parents’ Plans have actual knowledge of those terms, benefits for the dependent child shall be determined according to Paragraph 6.3(b)(ii).

However, if the specific terms of a court decree state that one of the parents is responsible for the health care expenses of a child, and the entity obligated to pay or provide the Benefits of the Plan of that parent has actual knowledge of those terms, the Benefits of that Plan are determined first. This paragraph does not apply with respect to any Claim Determination

Period or plan year during which any benefits are actually paid or provided before the entity has that actual knowledge.

- (iv) Active/Inactive Employee. The benefits of a Plan which cover a person as an employee who is neither laid off nor retired or as that employee's dependent(s) are determined before those of a Plan which covers that person as a laid off or retired employee or as that employee's dependent. If the other Plan does not have this rule and if, as a result, the Plans do not agree on the order of benefits, this rule (iv) is ignored.
- (v) Continuation Coverage.
 - (A) If a person has continuation coverage under federal or state law and is also covered under another Plan, the following shall determine the order of benefits:
 1. First, the benefits of a Plan covering the employee, member, or subscriber or dependent of an employee, member, or subscriber.
 2. Second, the benefits under the continuation coverage.
 - (B) If the other Plan does not have the rule described in subparagraph (A), and if as a result, the Plans do not agree on the order of benefits, this paragraph (v) is ignored.
- (vi) Longer/Shorter Length of Coverage. If none of the above rules determines the order of benefits, the benefits of the Plan that covered an employee, member or subscriber longer are determined before those of the Plan which covered that person for the shorter time.

If a covered person is entitled to coverage under a group health care plan which primarily covers services or expenses other than dental care, and if the covered person first became eligible under the Plans on the same date, this Plan shall be the secondary payor for those services covered by both Plans.

6.4 Effect on the Benefits of This Plan

- (a) When This Paragraph Applies. This Paragraph 6.4 applies when, in accordance with Paragraph 6.3, Order of Benefit Determination Rules, This Plan is a Secondary Plan as to one or more other plans. In that event, benefits of This Plan may be reduced under this paragraph so that the total benefits paid or provided by all Plans during a Claim Determination Period are not more than the total Allowable Expenses. Such other Plan or Plans are referred to as "the other Plans" in (b).
- (b) Reduction in This Plan's Benefits. The benefits that would be payable under This Plan in the absence of this COB provision will be reduced by the benefits payable for the total Allowable Expenses in a Claim Determination Period under the other

Plans, in the absence of provisions with a purpose like that of this COB provision, whether or not claim is made.

When a Plan provides benefits in the form of services, the cash value of each service rendered will be considered both an expense incurred and a benefit payable.

When the benefits of This Plan are reduced as described above, each benefit is reduced in proportion. It is then charged against any applicable Benefit limit of This Plan.

- (c) No rule in other Plan. If the Other Plan does not have rules coordinating benefits with those of This Plan, the benefits of the other Plan are determined first.

6.5 Right to Receive and Release Needed Information

Delta Dental has the right to decide the facts it needs to apply these rules. Delta Dental may get needed facts from or give them to any other organization or person without the consent of the insured but only as needed to apply these COB rules. Medical records remain confidential as provided by applicable state and federal law. Each person claiming benefits under This Plan must give Delta Dental any facts it needs to pay the claim.

6.6 Facility of Payment

A payment made under another Plan may include an amount that should have been paid under This Plan. If it does, This Plan may pay that amount to the organization that made that payment. That amount will then be treated as though it were a Benefit paid under This Plan. Delta Dental will not have to pay that amount again. The term “payment made” means the cash value of the benefits provided in the form of services.

6.7 Right of Recovery

If the amount of the payments made by Delta Dental is more than it should have paid under this COB provision, it may recover the excess, at its option, from one or more of:

- (a) the person(s) it has paid or for whom it has paid;
- (b) insurance companies; or
- (c) other organizations.

The “amount of payments made” includes the cash value of any benefits provided in the form of services.

**ARTICLE VII
CLAIMS AND GRIEVANCE PROCEDURES**

7.1 Prior Approval of Benefits

Your group dental plan does not require prior approval before dental services are provided. However a Subscriber or Covered Dependent, or the Subscriber's or Covered Dependent's Provider, may request a predetermination of Benefits to obtain advance information on coverage under the Group's plan before services are rendered. Payment, however, is limited to the Benefits that are covered under the Group's plan and is subject to any applicable deductibles, copayments, coinsurance, waiting periods, and annual lifetime benefit maximums.

7.2 How to Contest a Claim Denial

(a) Urgent Care Situations:

- (i) Method of Notification. Notice of an Urgent Care Grievance will be accepted by Delta Dental if made by a Subscriber or Covered Dependent, or that person's representative, by telephone or in writing directed to:

Delta Dental of Wisconsin, Inc.
2801 Hoover Road, P.O. Box 828
Stevens Point, WI 54481-0828
800-236-3712

- (ii) Resolution Process. If the Urgent Care Grievance cannot be resolved through informal discussions, consultations or conferences during the first 48 hours after Delta Dental's receipt of the Urgent Care Grievance, the Subscriber, Covered Dependent, or a designated representative may appear before Delta Dental's Grievance Committee to present written or oral information with the right to ask questions before the Grievance Committee.
- (iii) Time Limitation for Resolution. An Urgent Care Grievance will be resolved, whether informally or by the Grievance Committee, within 72 hours of its receipt by Delta Dental.

(b) All Other Grievance Situations Not Including Urgent Care:

- (i) Denial of a Claim for Benefits.

If a Subscriber or Covered Dependent makes a claim for Benefits under the Group's dental plan and the claim is denied in whole or in part, the Subscriber or the Covered Dependent, or his/her service provider, will receive written notification within 30 days after Delta Dental receives the claim, unless special circumstances require an extension of time for

processing. The claims decision will be sent on a form entitled "Explanation of Benefits."

If additional time is necessary for processing a claim for Benefits, Delta Dental will notify the Subscriber or the Covered Dependent and his/her service provider of the extension and the reason it is necessary within the initial 30-day period. If an extension is needed because either the Subscriber or Covered Dependent or his/her service provider did not submit information necessary to make a Benefits determination, the notice of extension will describe the required information. The Subscriber or Covered Dependent, or his/her service provider, will have 45 days from receipt of the notice to provide the specified information.

(ii) **Appealing a Claim Denial.**

If the Subscriber or Covered Dependent has questions about the denial of his/her claim for Benefits, he/she should contact Delta Dental at **800-236-3712**. Because most questions about Benefits can be answered informally, Delta Dental encourages Subscribers and Covered Dependents to first try resolving any problem by talking with Delta Dental. However, Subscribers and Covered Dependents have the right to file an appeal requesting that Delta Dental formally review the Benefits determination.

To file a Grievance or to appeal a Benefits determination, contact Delta Dental's Benefit Services Department at **800-236-3712**, fax your request to 715-343-7616, or mail your request to:

Delta Dental of Wisconsin, Inc.
2801 Hoover Road, P.O. Box 828
Stevens Point, WI 54481-0828

The Subscriber or Covered Dependent should provide the reasons why he/she disagrees with Delta Dental's Benefits determination and include any documentation he/she believes supports his/her claim. He/she should include the Subscriber's name, the Covered Dependent's name if applicable, and the Subscriber's member number on all supporting documents.

(iii) **Resolution Procedure.**

Delta Dental will acknowledge the Grievance or Benefits determination appeal within five days of its receipt by Delta Dental. Delta Dental will attempt to resolve the Grievance or Benefits determination appeal through informal discussions, consultations or conferences. In the event that the Grievance or appeal remains unresolved, the Subscriber or Covered Dependent, or his/her representative, has the right to appear before Delta Dental's Grievance Committee to present written or oral information and to

question the Grievance Committee. The Committee shall advise the Subscriber, Covered Dependent, or his/her representative, of the time and place of the meeting at least seven calendar days before the meeting.

If the Subscriber or Covered Dependent does not exhaust the appeal procedures described above, and if he/she files a lawsuit against the Group's plan and/or Delta Dental, as applicable, seeking payment of Benefits, the court may not permit the Subscriber or Covered Dependent to go forward with his/her lawsuit because he/she failed to utilize Delta Dental's grievance/claims appeal procedures. No legal action can be brought against Delta Dental later than three years after the date of the Grievance Committee's final decision on the review of the Benefits determination.

(iv) Time Limitations for Resolution.

Delta Dental will attempt to resolve all Grievances and Benefit determination appeals within 30 calendar days after receipt by Delta Dental. Delta Dental will inform the Subscriber or Covered Dependent of its decision in writing. If the appeal is denied in whole or in part, the notice will include the following information:

- (A) The specific reason(s) for the denial of the appeal;
- (B) Reference to the specific Contract provision(s) on which the denial is based;
- (C) A statement that the claimant is entitled to receive, upon request and free of charge, reasonable access to, and copies of, all documents, records, and other information relevant to the claimant's claim;
- (D) A statement describing any voluntary appeal procedures offered by Delta Dental and the claimant's right to obtain information about such procedures; and a statement of the claimant's right to bring a civil action under Section 502(a) of ERISA;
- (E) If an internal processing policy or other similar criterion was relied upon in the denial of the appeal, the notice of such denial also will include either the specific processing policy or a statement that such processing policy was relied upon in denying the appeal and that a copy of that processing policy will be provided free of charge to the claimant upon request;
- (F) If the denial of the appeal was based on a dental necessity, experimental treatment or similar exclusion or limit, the notice of such denial also will include an explanation of the scientific or clinical judgment for the determination, applying the terms of the Contract to

the claimant's circumstances, or a statement that such explanation will be provided free of charge upon request;

If the Grievance or Benefit determination appeal cannot be resolved within 30 days from receipt by Delta Dental, Delta Dental will notify the Subscriber, Covered Dependent, or his/her representative, in writing that it intends to extend the period of time for resolution an additional 30 days. The notification will state when resolution may be expected and the reasons for the additional time needed.

All Grievances and Benefit Determination appeals will be resolved within 60 days from date of receipt by Delta Dental.

Delta Dental's Grievance Committee shall consist of four persons: a consultant chosen by Delta Dental, a representative of Delta Dental management, Delta Dental's claim administrator, and a Subscriber in a company plan who is not a Delta Dental employee.

The Subscriber or Covered Dependent may resolve any grievance through the Delta Dental's Grievance procedure outlined above. The Subscriber or Covered Dependent may also contact the OFFICE OF THE COMMISSIONER OF INSURANCE, a state agency that enforces Wisconsin's insurance laws, and file a complaint. The Subscriber or Covered Dependent can contact the OFFICE OF THE COMMISSIONER OF INSURANCE BY WRITING TO:

OFFICE OF THE COMMISSIONER OF INSURANCE
Complaints Department
P.O. Box 7873
Madison, WI 53707-7573

or the Subscriber or Covered Dependent can call 800-236-8517 outside of Madison, or 608-266-0103 in Madison, and request a complaint form.

ARTICLE VIII TERM; TERMINATION; NONRENEWAL

8.1 Term

This Contract shall remain in force for the term stated in the Declarations as long as the Premium is paid on a timely basis unless terminated sooner as specified in Paragraph 8.2. This Contract will renew continuously and automatically on the anniversary date of the effective date of this Contract unless the Group requests nonrenewal.

8.2 Cancellation

- (a) The Group may cancel this Contract by giving Delta Dental 30 days' notice in writing.

- (b) Delta Dental may cancel the Contract by giving the Group ten days' notice in writing upon the occurrence of any one or more of the following events:
 - (i) The Group fails to make a required Premium payment within the 31-day grace period.
 - (ii) For substantial breach of contract if the Group fails to furnish Delta Dental with accurate enrollment data pursuant to Paragraph 3.4 of this Contract.
 - (iii) For substantial breach of contract if the Group permits enrollment which is contrary to specifications in the Declarations, or the initial group application.
 - (iv) For substantial change in the risk assumed if the Group changes the amount of Subscriber contribution or the conditions under which Benefits are offered, including but not limited to flexible benefit plans, flexible spending accounts, cafeteria plans, and the introduction of other plans from which the Subscribers may choose.
 - (v) For misrepresentation if the information relied upon in the application was inaccurately represented and would have caused the Group to be unacceptable to Delta Dental at the time this Contract was issued.
- (c) Delta Dental may cancel this Contract upon giving the Group 30 days' written notice in the event of any of the following:
 - (i) For substantial breach of contract if the Group refuses to allow Delta Dental (by its auditors or other authorized representatives) to inspect its records in order to verify the accuracy of the Subscriber and Covered Dependent list.
 - (ii) The Group is no longer engaged in the type of business Delta Dental agreed to insure.

8.3 Nonrenewal

Should Delta Dental exercise its right to nonrenew this Contract, it will give the Group notice of such nonrenewal at least 60 days prior to the expiration date. Nonrenewal may occur if the Group allows enrollment to fall below the amount specified in Item 2 of the Declarations.

ARTICLE IX GENERAL PROVISIONS

9.1 Limitation of Liability

- (a) Nothing herein contained shall interfere with the professional relationship between the Subscriber or Covered Dependent and a Provider. In no instance shall Delta Dental be liable for conduct, including but not limited to, tortious

conduct, negligence or the wrongful acts or omissions of any Provider or other professional practitioner or their agents or employees, in the provision or receipt of health care.

- (b) No agent has authority to change this Contract or waive any of its provisions.
- (c) The Group understands and acknowledges that no insurer can guarantee one hundred percent accuracy and that errors will occur from time to time. If a clerical error or other administrative mistake occurs, that error will not deprive Subscribers or Covered Dependents of coverage under the policy that they otherwise would have had and it will not create coverage for Subscribers or Covered Dependents that does not otherwise exist under the policy.

9.2 Rights of Subscribers and Covered Dependents

The rights of each Subscriber to receive Benefits are outlined in this Contract and the Declarations attached to this Contract. Nothing contained herein shall limit the right of Delta Dental and the Group, which right is hereby expressly reserved, to amend or terminate this Contract, or to modify the appendixes hereto on a prospective basis from time to time, and any such amendment, termination and/or modification shall automatically be effective as against the Subscribers and Covered Dependents without notice to or consent of any Subscriber or Covered Dependent.

9.3 Entire Agreement

This Contract constitutes the entire agreement between Delta Dental and the Group and may not be altered or amended except in writing, provided that specific Benefits and coverage options specified in the Declarations may be modified upon agreement of both parties and will be effective not less than 60 days after Delta Dental delivers updated Declarations to the Group, except as otherwise required by law.

9.4 Endorsements

Nothing contained in any endorsement to this Contract shall affect any of the conditions, provisions, or limitations of this Contract, except as expressly provided in the endorsement. This Contract shall govern over any conflicting information provided by the Group to its employees and Subscribers.

9.5 Advertising and Promotion Control

Delta Dental reserves the right to control the use of its name and all symbols, trademarks and service marks presently existing, or hereinafter established, with respect to it or to any Delta Dental option. The Group agrees that it will not use such name, symbols, trademarks, or service marks in advertising or promotional materials or otherwise without prior written consent of Delta Dental and will cease any and all usage immediately upon Delta Dental's request or upon termination of this Contract.

9.6 Notices

Any request for change to any of the provisions of this Contract shall be in writing except as otherwise specifically provided herein. Such request is considered to be delivered when delivery is in person or when sent by registered or certified United States mail return receipt requested, proper postage prepaid, and properly addressed to:

Delta Dental of Wisconsin, Inc.
c/o President
P.O. Box 828
Stevens Point, WI 54481-0828

9.7 Assignment

Neither party shall have the right to assign or otherwise transfer its rights or obligations under this Contract except with the prior written consent of the other; provided, however, that a successor in interest by merger, operation of law, assignment, purchase, or otherwise of the entire business of a party hereto shall acquire all interests of such party hereunder.

9.8 Legal Action

No suit at law or in equity shall be brought to recover upon any cause of action arising out of or relating to this Contract, or to Benefits provided hereunder, without exhausting Grievance procedures established by Delta Dental, nor after the expiration of three years from the event upon which any such cause of action is based.

9.9 Governing Law

This Contract is delivered in the State of Wisconsin and is governed and construed under and pursuant to its laws.

9.10 Nonwaiver and Severability

No delay or failure by Delta Dental to exercise any remedy or right accruing to it hereunder shall impair any such remedy or right or be construed to be a waiver of any such remedy or right, nor shall it affect any subsequent remedies or rights that Delta Dental may have hereunder, whether or not the circumstances are the same.

The unenforceability or invalidity of any provision of this Contract as to any person or circumstances shall not render that provision or those provisions unenforceable or invalid as to any other person or circumstances, and in all other respects it and the remainder of this Contract shall remain valid and enforceable.

9.11 Rules and Regulations

Delta Dental may, from time to time, establish such guidelines and processing policies as are reasonably necessary or appropriate to administer the Benefits provided under this Contract, and the Group agrees to be bound by any such rules and regulations.

9.12 Oral Statements

No oral statements of any person shall modify or otherwise affect the Benefits, limitations, conditions and exclusions of this Contract, convey or void any coverage, increase or reduce Benefits under this Contract, including the Certificate and the Schedule of Benefits, or be used in the prosecution or defense of a claim under this Contract.

9.13 Subrogation

If Benefits are paid on a Subscriber's or Covered Dependent's behalf under this Contract, Delta Dental is entitled to all rights of recovery the Subscriber or Covered Dependent may have against any person or organization for the recovery of those Benefits to the extent of Delta Dental's payment. Delta Dental can only subrogate if the Subscriber or Covered Dependent is made whole for damages (is fully compensated for all damages, including any award for loss of employment, pain and suffering, taking into consideration the Subscriber's or Covered Dependent's comparative negligence). The Subscriber or Covered Dependent must sign and deliver to Delta Dental any legal papers relating to that recovery, help exercise these rights of recovery and do nothing to harm these rights. If the Subscriber or Covered Dependent is made whole for all damages from another person or organization for Benefits paid or provided under this Contract, the Subscriber or Covered Dependent must repay Delta Dental to the extent of Benefits paid or provided under this Contract.

**DELTA DENTAL OF WISCONSIN, INC.
A NOT-FOR-PROFIT SERVICE CORPORATION
CONTRACT TO PROVIDE DENTAL CARE BENEFITS**

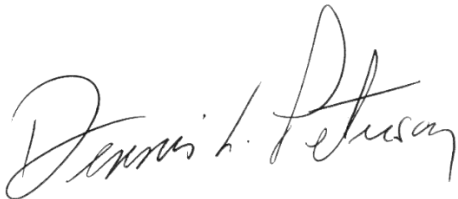
**DELTA DENTAL PPO
Declarations**

The term of this Contract between **County of Dane** and **Delta Dental of Wisconsin, Inc.**, P.O. Box 828, Stevens Point, Wisconsin will be April 1, 2018 through December 31, 2018 and January 1 through December 31 thereafter. This Contract will be automatically renewed, subject to the provisions of Article VIII. This Contract is issued in consideration of the Group's Application and advance payment of initial Premium.

Delta Dental and the above-named Group agree to the obligations and provisions of this Contract. The limit of Delta Dental's liability for Benefits is as stated in this Contract. Delta Dental's obligations are subject to all other terms and conditions of this Contract.

Claim settlement under this Contract is based upon a predetermined methodology, which may be less than the provider's billed charge.

DELTA DENTAL OF WISCONSIN, INC.


BY: _____

Dennis L. Peterson
President & CEO

DATE: March 16, 2018

1. CONTRACT NUMBER(S): 00704 - 00000

2. REQUIRED ENROLLMENT:

(a) Of the Employer Units where the Employer funds 100% of the premium, 100% of all eligible full-time employees must be enrolled. 100% of those employees with dependents must enroll for family coverage. Of the Quasi-governmental units where the Employer funds less than 100% of the premium, that same percentage of all eligible employees must be enrolled and that same percentage of those employees with dependents must enroll for family coverage.

(b) If enrollment drops below 10% of initial enrollment, Delta Dental reserves the right to review the Rates or to terminate coverage.

(c) In addition to this Delta Dental plan, the following Delta Dental Benefit options and/or other dental plans will be offered to this Group's employees: no other dental plans offered.

(d) Changes in enrollment status will be considered during an Open Enrollment Period 30 days prior to the Contract renewal date, with changes becoming effective on the renewal date. Open enrollment will be determined by both the Group and Delta Dental.

3. TERMS OF ELIGIBILITY:

(a) Eligibility begins:

For eligible new employees, eligibility begins the first day of the month following the waiting period.

(b) For eligible new employees, the waiting period is 30 days.

(c) For employees enrolling their Dependents:

Dependent children are eligible through the end of the month in which they attain age 26, regardless of student status, or if age 26 and beyond, to the date they lose eligibility due to the Dependent's inability to meet all of the requirements contained in Section 3.1 (b) of the Master Group Contract.

4. DEDUCTIBLE LIMITATIONS: Delta Dental shall not be obligated to pay any Deductible indicated in the Declarations, in whole or in part, during the term of this Contract.

The Deductible for Dental Procedures provided by Delta Dental PPO Providers is \$25 per Subscriber and per Covered Dependent, per Benefit Accumulation Period; however, no family will pay more than \$75 per Benefit Accumulation Period in Deductibles regardless of the number of family members covered.

The Deductible for Dental Procedures provided by Delta Dental Premier Providers is \$25 per Subscriber and per Covered Dependent, per Benefit Accumulation Period; however, no family will pay more than \$75 per Benefit Accumulation Period in Deductibles regardless of the number of family members covered.

The Deductible for Dental Procedures provided by Noncontracted Providers is \$25 per Subscriber and per Covered Dependent, per Benefit Accumulation Period; however, no family will pay more than \$75 per Benefit Accumulation Period in Deductibles regardless of the number of family members covered.

- 5. MAXIMUM CONTRACT BENEFITS PER PERSON:** The maximum total Benefit payable in any Benefit Accumulation Period is limited to the amount specified below.

The maximum total Benefit per Subscriber and per Covered Dependent, per Benefit Accumulation Period for Dental Procedures provided by Delta Dental PPO Providers is \$2,000, or \$2,000 for Dental Procedures provided by Delta Dental Premier Providers, or \$2,000 for Dental Procedures provided by Noncontracted Providers. In no case will the maximum total Benefit exceed \$2,000 regardless of the network chosen.

- 6. ORTHODONTIC MAXIMUM BENEFIT:** Delta Dental's obligation for orthodontic Benefits is limited to the lifetime maximum specified in this Item of the Declarations.

The maximum lifetime orthodontic Benefit is \$2,000 for each Subscriber and each Covered Dependent. Dependent children are covered to age 26.

- 7. MONTHLY PREMIUM:**

Single Coverage (employee, 1 Party) - \$46.61

Family Coverage (employee and spouse, 2 Party) - \$131.45

Family Coverage (employee and child(ren)) - \$131.45

Family Coverage (full family, 3+ Party) - \$131.45

- 8. SCHEDULE OF BENEFITS, LIMITATIONS AND COVERAGE PERCENTAGE:**

This Contract provides the following Benefits subject to the Coverage percentage listed for each Benefit and subject to any applicable Deductible. The Coverage and Coinsurance percentages may vary based upon the network membership of the treating Provider at the time the Dental Procedure is completed. The application of the Deductible, if any, also may vary based upon the network membership of the treating Provider at the time the Dental Procedure is completed.

For example, if the Coverage percentage shown is "80," that Benefit is 80% of the Maximum Plan Allowance, after satisfaction of any applicable Deductible. In the same

example, the Coinsurance (the amount the patient must pay) would be the remaining 20%.

If the Coverage percentage shown is "0", that Benefit is not provided in the Group Contract.

The Benefit Accumulation Period begins on January 1, 2018, ends on December 31, 2018 and thereafter shall be the 12 month period beginning on January 1st.

PPO = Delta Dental PPO Provider Premier = Delta Dental Premier Provider NC = Noncontracted Provider

Does Deductible Apply? Yes/No			Coverage Percentage			Benefit
PPO	Premier	NC	PPO	Premier	NC	
N	N	N	100	100	100	Evaluations at six month intervals.
N	N	N	100	100	100	Full mouth series x-rays at thirty six month intervals; either individual images, or panoramic image, including bitewings.
N	N	N	100	100	100	Bitewing x-rays at six month intervals (limited to a set of four images).
N	N	N	100	100	100	Prophylaxis (teeth cleaning) or periodontal maintenance procedure at six month intervals.
Y	Y	Y	80	80	80	Prophylaxis. Periodontal maintenance procedure.
N	N	N	100	100	100	Topical fluoride applications at six month intervals for Covered Dependent children up to age 19.
N	N	N	100	100	100	Space maintainers for retaining space when a posterior primary tooth is prematurely lost.
Y	Y	Y	80	80	80	Emergency treatment to relieve pain.
Y	Y	Y	80	80	80	Topical application of sealants for Covered Dependents up to age 16. Application is limited to the occlusal surface of permanent molars which are free of decay and restorations. Benefits for sealants are limited to one application per tooth per lifetime.
Y	Y	Y	80	80	80	Amalgam (silver) restorations.
Y	Y	Y	80	80	80	Composite (tooth colored) restorations for all teeth.

Does Deductible Apply? Yes/No			Coverage Percentage			Benefit
PPO	Premier	NC	PPO	Premier	NC	
Y	Y	Y	80	80	80	Prefabricated crowns – one per tooth at three year intervals.
Y	Y	Y	80	80	80	Endodontics including root canal treatment.
Y	Y	Y	80	80	80	Surgical endodontic treatment.
Y	Y	Y	80	80	80	Non-surgical periodontics, including procedures necessary for the treatment of diseases of the gums and bone supporting the teeth. Benefit is limited to once per quadrant at 24 month intervals.
Y	Y	Y	80	80	80	Surgical periodontic treatment; benefit is limited to once per quadrant at 36 month intervals.
Y	Y	Y	80	80	80	Non-surgical extractions.
Y	Y	Y	80	80	80	Oral surgery (cutting procedures) and surgical extractions including pre-operative and post-operative care.
Y	Y	Y	80	80	80	Crowns, inlays, or onlays are provided when teeth are broken down by dental decay or accidental injury and may no longer be restored adequately with a filling material. Coverage for the purpose of replacing a defective existing crown, inlay or onlay will be provided only after a five year period from the date on which the defective item was last supplied, whether or not Delta Dental paid for the original Dental Procedure as a Benefit under this Contract. Porcelain veneers on crowns are Benefits on the six front teeth, bicuspids, and upper first molars.

Does Deductible Apply? Yes/No			Coverage Percentage			Benefit
PPO	Premier	NC	PPO	Premier	NC	
Y	Y	Y	80	80	80	<p>Prosthetics, including fixed bridgework, implants, partial dentures, and complete dentures to replace missing permanent teeth. Coverage for the purpose of replacing a defective existing prosthetic will be provided only after a five year period from the date on which the defective item was last supplied, whether or not Delta Dental paid for the original Dental Procedure as a Benefit under this Contract.</p> <p>Porcelain veneers on crowns or pontics are Benefits on the six front teeth, bicuspids, and upper first molars.</p> <p>Fixed bridges, implants, partial/complete dentures are provided where chewing function is impaired due to missing teeth. A fixed bridge or implant and implant related procedures may be a Benefit if no more than two teeth are missing in the dental arch in which the bridge or implant is proposed. Delta Dental will provide for replacement of missing teeth with the least elaborate procedure when three or more teeth are missing in the dental arch.</p> <p>Coverage for initial replacement of teeth is not limited to those lost while a Subscriber or Covered Dependent.</p>
Y	Y	Y	80	80	80	<p>Repairs and adjustments to prosthetic appliances. Denture reline or rebase is a Benefit at three year intervals.</p>

Does Deductible Apply? Yes/No			Coverage Percentage			Benefit
PPO	Premier	NC	PPO	Premier	NC	
Y	Y	Y	50	50	50	<p>Orthodontic appliances, treatment and related services for orthodontic purposes including evaluation, x-rays, extractions, photographs, and study models, subject to the orthodontic maximum benefit.</p> <p>Repair or replacement of orthodontic appliances are not covered.</p> <p>Delta Dental calculates all orthodontic treatment schedules according to the following formula:</p> <ul style="list-style-type: none"> - 25% of the total Maximum Plan Allowance (subject to the Coverage Percentage stated herein and any applicable Deductible) is considered the initial payment to be paid by Delta Dental, subject to the Coverage Percentage, any applicable Deductible and the orthodontic maximum Benefit stated herein. - The remainder of the Maximum Plan Allowance is divided by the months of treatment and the resulting amount is paid monthly by Delta Dental, subject to the Coverage Percentage, any applicable Deductible and the orthodontic maximum Benefit stated herein. <p>If orthodontic treatment is stopped for any reason before it is complete, Delta Dental will suspend all monthly payments.</p> <p>Coverage includes orthodontic treatment in progress. Treatment is in progress if an appliance or banding has been placed and the patient is receiving treatment by the attending orthodontist according to a current treatment plan. Liability for orthodontic treatment in progress shall extend only to the unearned portion of the treatment in progress (that portion occurring after enrollment) and Delta Dental shall be the sole determinant of this unearned amount eligible for coverage. However, there are no Benefits available for Dental Procedures, including orthodontic treatment in progress, after coverage terminates.</p>

OPTIONAL PROCEDURES

Delta Dental will pay the applicable Maximum Plan Allowance for the least expensive Dental Procedure that is adequate to restore the tooth or dental arch to contour and function, but only if the more expensive Dental Procedure is a Benefit of this Contract. The Subscriber or Covered Dependent will be responsible for either the remainder of the Provider's fee if a more expensive covered Dental Procedure is selected or the entire fee if the more expensive Dental Procedure is not a Benefit. The Coinsurance and Deductible will apply regardless of which Dental Procedure is selected.

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POLICY ENDORSEMENT NO. 00704 00000 - 03162018

Endorsement to Declarations

This Endorsement is attached to and forms a part of the Master Group Contract to provide dental care Benefits between **County of Dane** and **Delta Dental of Wisconsin, Inc.** and supersedes any previous endorsement provided to you regarding Evidence-Based Integrated Care Plan, ("EBICP").

This Endorsement modifies the group dental Benefits afforded by your Master Group Contract, Declarations, and any Insuring Agreement Endorsements attached thereto, issued by Delta Dental of Wisconsin, Inc. and must be read in conjunction therewith. All terms and conditions of your Master Group Contract, Declarations, and any Insuring Agreement Endorsements attached thereto remain in effect except as modified by this Endorsement. Please read this Endorsement carefully.

Please be advised that on April 1, 2018, the following Evidence-Based Integrated Care Plan ("EBICP") Benefits are provided under your Policy. To participate in EBICP, eligible dental plan enrollees or their Providers are required to set the appropriate health condition indicator online at deltadentalwi.com or a Delta Dental of Wisconsin representative will assist in setting the EBICP indicator by telephone. The EBICP Periodontal Disease health condition indicator will be automatically updated when non-surgical or surgical periodontal procedures are processed by Delta Dental of Wisconsin.

The EBICP Benefits are as follows:

Periodontal Disease

1. With an indicator of surgical or non-surgical treatment of **Periodontal Disease**, a participant is eligible for up to two additional dental visits in a Benefit year for periodontal maintenance or adult prophylaxis.
2. With an indicator of surgical or non-surgical treatment of **Periodontal Disease**, a participant is eligible for topical fluoride application beyond the age limitation of the Master Group Contract.

Diabetes

1. With an indicator of a **Diabetes** diagnosis, a participant is eligible for up to two additional dental visits in a Benefit year for periodontal maintenance or adult prophylaxis.

Pregnancy

1. With an indicator of **Pregnancy**, a participant is eligible for one additional dental visit for adult prophylaxis or periodontal maintenance during the pregnancy.

High Risk Cardiac Conditions

1. With an indicator for **High Risk Cardiac Conditions**, a participant is eligible for up to two additional dental visits in a Benefit year for periodontal maintenance or adult prophylaxis. High risk cardiac condition indicators are:
 - History of infective endocarditis
 - Certain congenital heart defects (such as having one ventricle instead of the normal two)
 - Individuals with artificial heart valves
 - Heart valve defects caused by acquired conditions like rheumatic heart disease
 - Hyper tropic cardiomyopathy which causes abnormal thickening of the heart muscle
 - Individuals with pulmonary shunts or conduits
 - Mitral valve prolapse with regurgitation (blood leakage)

Suppressed Immune System Conditions

1. With an indicator for **Suppressed Immune System Conditions**, a participant is eligible for up to two additional dental visits in a Benefit year for periodontal maintenance or adult prophylaxis.
2. With an indicator of **Suppressed Immune System Conditions**, a participant is eligible for topical fluoride application beyond the age limitation of the Master Group Contract.

Kidney Failure or Dialysis Conditions

1. With an indicator for **Kidney Failure or Dialysis Conditions**, a participant is eligible for up to two additional dental visits in a Benefit year for periodontal maintenance or adult prophylaxis.

Cancer Related Chemotherapy and/or Radiation

1. With an indicator for **Cancer Related Chemotherapy and/or Radiation**, a participant is eligible for up to two additional dental visits in a Benefit year for periodontal maintenance or adult prophylaxis.
2. With an indicator of **Cancer Related Chemotherapy and/or Radiation**, a participant is eligible for topical fluoride application beyond the age limitation of the Master Group Contract.

THIS ENDORSEMENT IS PART OF THE MASTER GROUP CONTRACT, DECLARATIONS AND INSURING AGREEMENT REFERENCED HEREIN AND SHOULD BE KEPT WITH THOSE DOCUMENTS.

DELTA DENTAL OF WISCONSIN, INC.
A NOT-FOR-PROFIT SERVICE CORPORATION
CONTRACT TO PROVIDE DENTAL CARE BENEFITS

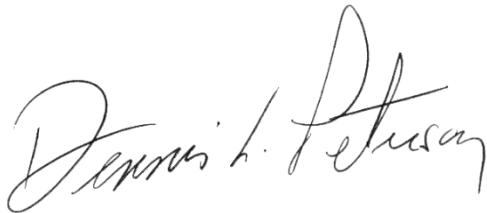
DELTA DENTAL PPO
Declarations

The term of this Contract between **County of Dane** and **Delta Dental of Wisconsin, Inc.**, P.O. Box 828, Stevens Point, Wisconsin will be April 1, 2018 through December 31, 2018 and January 1 through December 31 thereafter. This Contract will be automatically renewed, subject to the provisions of Article VIII. This Contract is issued in consideration of the Group's Application and advance payment of initial Premium.

Delta Dental and the above-named Group agree to the obligations and provisions of this Contract. The limit of Delta Dental's liability for Benefits is as stated in this Contract. Delta Dental's obligations are subject to all other terms and conditions of this Contract.

Claim settlement under this Contract is based upon a predetermined methodology, which may be less than the provider's billed charge.

DELTA DENTAL OF WISCONSIN, INC.



BY: _____

Dennis L. Peterson
President & CEO

DATE: March 22, 2018

1. CONTRACT NUMBER(S): 07805 - 00000

2. REQUIRED ENROLLMENT:

(a) Of the Employer Units where the Employer funds 100% of the premium, 100% of all eligible full-time employees must be enrolled. 100% of those employees with dependents must enroll for family coverage. Of the Quasi-governmental units where the Employer funds less than 100% of the premium, that same percentage of all eligible employees must be enrolled and that same percentage of those employees with dependents must enroll for family coverage.

(b) If enrollment drops below 10% of initial enrollment, Delta Dental reserves the right to review the Rates or to terminate coverage.

(c) In addition to this Delta Dental plan, the following Delta Dental benefit options and/or other dental plans will be offered to this Group's employees: no other dental plans offered.

(d) An Open Enrollment Period is available only to eligible Dependents who meet the requirements contained in Section 3.1 (b) of the Master Group Contract. The Open Enrollment Period will occur during the 30 days prior to the Contract renewal date, with changes becoming effective on the renewal date.

3. TERMS OF ELIGIBILITY:

(a) Eligibility begins:

For eligible new employees, eligibility begins the first day of the month following the waiting period.

(b) For eligible new employees, the waiting period is 30 days.

(c) For employees enrolling their Dependents:

Dependent children are eligible through the end of the month in which they attain age 26, regardless of student status, or if age 26 and beyond, to the date they lose eligibility due to the Dependent's inability to meet all of the requirements contained in Section 3.1 (b) of the Master Group Contract.

4. DEDUCTIBLE LIMITATIONS: Delta Dental shall not be obligated to pay any Deductible indicated in the Declarations, in whole or in part, during the term of this Contract.

The Deductible for Dental Procedures provided by Delta Dental PPO Providers is \$25 per Subscriber and per Covered Dependent, per Benefit Accumulation Period; however, no family will pay more than \$75 per Benefit Accumulation Period in Deductibles regardless of the number of family members covered.

The Deductible for Dental Procedures provided by Delta Dental Premier Providers is \$25 per Subscriber and per Covered Dependent, per Benefit Accumulation Period; however, no family will pay more than \$75 per Benefit Accumulation Period in Deductibles regardless of the number of family members covered.

The Deductible for Dental Procedures provided by Noncontracted Providers is \$25 per Subscriber and per Covered Dependent, per Benefit Accumulation Period; however, no family will pay more than \$75 per Benefit Accumulation Period in Deductibles regardless of the number of family members covered.

- 5. MAXIMUM CONTRACT BENEFITS PER PERSON:** The maximum total Benefit payable in any Benefit Accumulation Period is limited to the amount specified below.

The maximum total Benefit per Subscriber and per Covered Dependent, per Benefit Accumulation Period for Dental Procedures provided by Delta Dental PPO Providers is \$2,000, or \$2,000 for Dental Procedures provided by Delta Dental Premier Providers, or \$2,000 for Dental Procedures provided by Noncontracted Providers. In no case will the maximum total Benefit exceed \$2,000 regardless of the network chosen.

- 6. ORTHODONTIC MAXIMUM BENEFIT:** Delta Dental's obligation for orthodontic Benefits is limited to the lifetime maximum specified in this Item of the Declarations.

The maximum lifetime orthodontic Benefit is \$2,000 for each Subscriber and each Covered Dependent. Dependent children are covered to age 26.

- 7. MONTHLY PREMIUM:**

Single Coverage (employee, 1 Party) - \$46.61

Family Coverage (employee and spouse, 2 Party) - \$93.22

Family Coverage (employee and child(ren)) - \$131.45

Family Coverage (full family, 3+ Party) - \$131.45

- 8. SCHEDULE OF BENEFITS, LIMITATIONS AND COVERAGE PERCENTAGE:**

This Contract provides the following Benefits subject to the Coverage percentage listed for each Benefit and subject to any applicable Deductible. The Coverage and Coinsurance percentages may vary based upon the network membership of the treating Provider at the time the Dental Procedure is completed. The application of the Deductible, if any, also may vary based upon the network membership of the treating Provider at the time the Dental Procedure is completed.

For example, if the Coverage percentage shown is “80,” that Benefit is 80% of the Maximum Plan Allowance, after satisfaction of any applicable Deductible. In the same example, the Coinsurance (the amount the patient must pay) would be the remaining 20%.

If the Coverage percentage shown is “0”, that Benefit is not provided in the Group Contract.

The Benefit Accumulation Period begins on January 1, 2018, ends on December 31, 2018 and thereafter shall be the 12 month period beginning on January 1st.

PPO = Delta Dental PPO Provider Premier = Delta Dental Premier Provider NC = Noncontracted Provider

Does Deductible Apply? Yes/No			Coverage Percentage			Benefit
PPO	Premier	NC	PPO	Premier	NC	
N	N	N	100	100	100	Evaluations at six month intervals.
N	N	N	100	100	100	Full mouth series x-rays at thirty six month intervals; either individual images, or panoramic image, including bitewings.
N	N	N	100	100	100	Bitewing x-rays at six month intervals (limited to a set of four images).
N	N	N	100	100	100	Prophylaxis (teeth cleaning) or periodontal maintenance procedure at six month intervals.
Y	Y	Y	80	80	80	Prophylaxis. Periodontal maintenance procedure.
N	N	N	100	100	100	Topical fluoride applications at six month intervals for Covered Dependent children up to age 19.
N	N	N	100	100	100	Space maintainers for retaining space when a posterior primary tooth is prematurely lost.
Y	Y	Y	80	80	80	Emergency treatment to relieve pain.
Y	Y	Y	80	80	80	Topical application of sealants for Covered Dependents up to age 16. Application is limited to the occlusal surface of permanent molars which are free of decay and restorations. Benefits for sealants are limited to one application per tooth per lifetime.
Y	Y	Y	80	80	80	Amalgam (silver) restorations.

Does Deductible Apply? Yes/No			Coverage Percentage			Benefit
PPO	Premier	NC	PPO	Premier	NC	
Y	Y	Y	80	80	80	Composite (tooth colored) restorations for all teeth.
Y	Y	Y	80	80	80	Prefabricated crowns – one per tooth at three year intervals.
Y	Y	Y	80	80	80	Endodontics including root canal treatment.
Y	Y	Y	80	80	80	Surgical endodontic treatment.
Y	Y	Y	80	80	80	Non-surgical periodontics, including procedures necessary for the treatment of diseases of the gums and bone supporting the teeth. Benefit is limited to once per quadrant at 24 month intervals.
Y	Y	Y	80	80	80	Surgical periodontic treatment; benefit is limited to once per quadrant at 36 month intervals.
Y	Y	Y	80	80	80	Non-surgical extractions.
Y	Y	Y	80	80	80	Oral surgery (cutting procedures) and surgical extractions including pre-operative and post-operative care.
Y	Y	Y	80	80	80	Crowns, inlays, or onlays are provided when teeth are broken down by dental decay or accidental injury and may no longer be restored adequately with a filling material. Coverage for the purpose of replacing a defective existing crown, inlay or onlay will be provided only after a five year period from the date on which the defective item was last supplied, whether or not Delta Dental paid for the original Dental Procedure as a Benefit under this Contract. Porcelain veneers on crowns are Benefits on the six front teeth, bicuspids, and upper first molars.

Does Deductible Apply? Yes/No			Coverage Percentage			Benefit
PPO	Premier	NC	PPO	Premier	NC	
Y	Y	Y	80	80	80	<p>Prosthetics, including fixed bridgework, implants, partial dentures, and complete dentures to replace missing permanent teeth. Coverage for the purpose of replacing a defective existing prosthetic will be provided only after a five year period from the date on which the defective item was last supplied, whether or not Delta Dental paid for the original Dental Procedure as a Benefit under this Contract.</p> <p>Porcelain veneers on crowns or pontics are Benefits on the six front teeth, bicuspids, and upper first molars.</p> <p>Fixed bridges, implants, partial/complete dentures are provided where chewing function is impaired due to missing teeth. A fixed bridge or implant and implant related procedures may be a Benefit if no more than two teeth are missing in the dental arch in which the bridge or implant is proposed. Delta Dental will provide for replacement of missing teeth with the least elaborate procedure when three or more teeth are missing in the dental arch.</p> <p>Coverage for initial replacement of teeth is not limited to those lost while a Subscriber or Covered Dependent.</p>
Y	Y	Y	80	80	80	<p>Repairs and adjustments to prosthetic appliances. Denture reline or rebase is a Benefit at three year intervals.</p>

Does Deductible Apply? Yes/No			Coverage Percentage			Benefit
PPO	Premier	NC	PPO	Premier	NC	
Y	Y	Y	50	50	50	<p>Orthodontic appliances, treatment and related services for orthodontic purposes including evaluation, x-rays, extractions, photographs, and study models, subject to the orthodontic maximum benefit.</p> <p>Repair or replacement of orthodontic appliances are not covered.</p> <p>Delta Dental calculates all orthodontic treatment schedules according to the following formula:</p> <ul style="list-style-type: none"> - 25% of the total Maximum Plan Allowance (subject to the Coverage Percentage stated herein and any applicable Deductible) is considered the initial payment to be paid by Delta Dental, subject to the Coverage Percentage, any applicable Deductible and the orthodontic maximum Benefit stated herein. - The remainder of the Maximum Plan Allowance is divided by the months of treatment and the resulting amount is paid monthly by Delta Dental, subject to the Coverage Percentage, any applicable Deductible and the orthodontic maximum Benefit stated herein. <p>If orthodontic treatment is stopped for any reason before it is complete, Delta Dental will suspend all monthly payments.</p> <p>Coverage includes orthodontic treatment in progress. Treatment is in progress if an appliance or banding has been placed and the patient is receiving treatment by the attending orthodontist according to a current treatment plan. Liability for orthodontic treatment in progress shall extend only to the unearned portion of the treatment in progress (that portion occurring after enrollment) and Delta Dental shall be the sole determinant of this unearned amount eligible for coverage. However, there are no Benefits available for Dental Procedures, including orthodontic treatment in progress, after coverage terminates.</p>

OPTIONAL PROCEDURES

Delta Dental will pay the applicable Maximum Plan Allowance for the least expensive Dental Procedure that is adequate to restore the tooth or dental arch to contour and function, but only if the more expensive Dental Procedure is a Benefit of this Contract. The Subscriber or Covered Dependent will be responsible for either the remainder of the Provider's fee if a more expensive covered Dental Procedure is selected or the entire fee if the more expensive Dental Procedure is not a Benefit. The Coinsurance and Deductible will apply regardless of which Dental Procedure is selected.

V7PSMBQAJVM03272018

POLICY ENDORSEMENT NO. 07805 00000 - 03222018

Endorsement to Declarations

This Endorsement is attached to and forms a part of the Master Group Contract to provide dental care Benefits between **County of Dane** and **Delta Dental of Wisconsin, Inc.** and supersedes any previous endorsement provided to you regarding Evidence-Based Integrated Care Plan, ("EBICP").

This Endorsement modifies the group dental Benefits afforded by your Master Group Contract, Declarations, and any Insuring Agreement Endorsements attached thereto, issued by Delta Dental of Wisconsin, Inc. and must be read in conjunction therewith. All terms and conditions of your Master Group Contract, Declarations, and any Insuring Agreement Endorsements attached thereto remain in effect except as modified by this Endorsement. Please read this Endorsement carefully.

Please be advised that on April 1, 2018, the following Evidence-Based Integrated Care Plan ("EBICP") Benefits are provided under your Policy. To participate in EBICP, eligible dental plan enrollees or their Providers are required to set the appropriate health condition indicator online at deltadentalwi.com or a Delta Dental of Wisconsin representative will assist in setting the EBICP indicator by telephone. The EBICP Periodontal Disease health condition indicator will be automatically updated when non-surgical or surgical periodontal procedures are processed by Delta Dental of Wisconsin.

The EBICP Benefits are as follows:

Periodontal Disease

1. With an indicator of surgical or non-surgical treatment of **Periodontal Disease**, a participant is eligible for up to two additional dental visits in a Benefit year for periodontal maintenance or adult prophylaxis.
2. With an indicator of surgical or non-surgical treatment of **Periodontal Disease**, a participant is eligible for topical fluoride application beyond the age limitation of the Master Group Contract.

Diabetes

1. With an indicator of a **Diabetes** diagnosis, a participant is eligible for up to two additional dental visits in a Benefit year for periodontal maintenance or adult prophylaxis.

Pregnancy

1. With an indicator of **Pregnancy**, a participant is eligible for one additional dental visit for adult prophylaxis or periodontal maintenance during the pregnancy.

High Risk Cardiac Conditions

1. With an indicator for **High Risk Cardiac Conditions**, a participant is eligible for up to two additional dental visits in a Benefit year for periodontal maintenance or adult prophylaxis. High risk cardiac condition indicators are:
 - History of infective endocarditis
 - Certain congenital heart defects (such as having one ventricle instead of the normal two)
 - Individuals with artificial heart valves
 - Heart valve defects caused by acquired conditions like rheumatic heart disease
 - Hyper tropic cardiomyopathy which causes abnormal thickening of the heart muscle
 - Individuals with pulmonary shunts or conduits
 - Mitral valve prolapse with regurgitation (blood leakage)

Suppressed Immune System Conditions

1. With an indicator for **Suppressed Immune System Conditions**, a participant is eligible for up to two additional dental visits in a Benefit year for periodontal maintenance or adult prophylaxis.
2. With an indicator of **Suppressed Immune System Conditions**, a participant is eligible for topical fluoride application beyond the age limitation of the Master Group Contract.

Kidney Failure or Dialysis Conditions

1. With an indicator for **Kidney Failure or Dialysis Conditions**, a participant is eligible for up to two additional dental visits in a Benefit year for periodontal maintenance or adult prophylaxis.

Cancer Related Chemotherapy and/or Radiation

1. With an indicator for **Cancer Related Chemotherapy and/or Radiation**, a participant is eligible for up to two additional dental visits in a Benefit year for periodontal maintenance or adult prophylaxis.
2. With an indicator of **Cancer Related Chemotherapy and/or Radiation**, a participant is eligible for topical fluoride application beyond the age limitation of the Master Group Contract.

THIS ENDORSEMENT IS PART OF THE MASTER GROUP CONTRACT, DECLARATIONS AND INSURING AGREEMENT REFERENCED HEREIN AND SHOULD BE KEPT WITH THOSE DOCUMENTS.

DELTA DENTAL OF WISCONSIN, INC.
A NOT-FOR-PROFIT SERVICE CORPORATION
CONTRACT TO PROVIDE DENTAL CARE BENEFITS

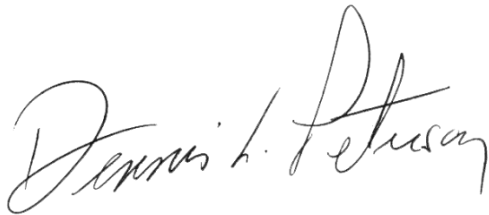
DELTA DENTAL PPO
Declarations

The term of this Contract between **County of Dane** and **Delta Dental of Wisconsin, Inc.**, P.O. Box 828, Stevens Point, Wisconsin will be April 1, 2018 through December 31, 2018 and January 1 through December 31 thereafter. This Contract will be automatically renewed, subject to the provisions of Article VIII. This Contract is issued in consideration of the Group's Application and advance payment of initial Premium.

Delta Dental and the above-named Group agree to the obligations and provisions of this Contract. The limit of Delta Dental's liability for Benefits is as stated in this Contract. Delta Dental's obligations are subject to all other terms and conditions of this Contract.

Claim settlement under this Contract is based upon a predetermined methodology, which may be less than the provider's billed charge.

DELTA DENTAL OF WISCONSIN, INC.



BY: _____

Dennis L. Peterson
President & CEO

DATE: March 22, 2018

1. CONTRACT NUMBER(S): 05012 - 00000

2. REQUIRED ENROLLMENT:

(a) Of the Employer Units where the Employer funds 100% of the premium, 100% of all eligible full-time employees must be enrolled. 100% of those employees with dependents must enroll for family coverage. Of the Quasi-governmental units where the Employer funds less than 100% of the premium, that same percentage of all eligible employees must be enrolled and that same percentage of those employees with dependents must enroll for family coverage.

(b) If enrollment drops below 10% of initial enrollment, Delta Dental reserves the right to review the Rates or to terminate coverage.

(c) In addition to this Delta Dental plan, the following Delta Dental Benefit options and/or other dental plans will be offered to this Group's employees: no other dental plans offered.

(d) Changes in enrollment status will be considered during an Open Enrollment Period 30 days prior to the Contract renewal date, with changes becoming effective on the renewal date. Open enrollment will be determined by both the Group and Delta Dental.

3. TERMS OF ELIGIBILITY:

(a) Eligibility begins:

For eligible new employees, eligibility begins the first day of the month following the waiting period.

(b) For eligible new employees, the waiting period is 30 days.

(c) For employees enrolling their Dependents:

Dependent children are eligible through the end of the month in which they attain age 26, regardless of student status, or if age 26 and beyond, to the date they lose eligibility due to the Dependent's inability to meet all of the requirements contained in Section 3.1 (b) of the Master Group Contract.

4. DEDUCTIBLE LIMITATIONS: Delta Dental shall not be obligated to pay any Deductible indicated in the Declarations, in whole or in part, during the term of this Contract.

The Deductible for Dental Procedures provided by Delta Dental PPO Providers is \$25 per Subscriber and per Covered Dependent, per Benefit Accumulation Period; however, no family will pay more than \$75 per Benefit Accumulation Period in Deductibles regardless of the number of family members covered.

The Deductible for Dental Procedures provided by Delta Dental Premier Providers is \$25 per Subscriber and per Covered Dependent, per Benefit Accumulation Period; however, no family will pay more than \$75 per Benefit Accumulation Period in Deductibles regardless of the number of family members covered.

The Deductible for Dental Procedures provided by Noncontracted Providers is \$25 per Subscriber and per Covered Dependent, per Benefit Accumulation Period; however, no family will pay more than \$75 per Benefit Accumulation Period in Deductibles regardless of the number of family members covered.

- 5. MAXIMUM CONTRACT BENEFITS PER PERSON:** The maximum total Benefit payable in any Benefit Accumulation Period is limited to the amount specified below.

The maximum total Benefit per Subscriber and per Covered Dependent, per Benefit Accumulation Period for Dental Procedures provided by Delta Dental PPO Providers is \$2,000, or \$2,000 for Dental Procedures provided by Delta Dental Premier Providers, or \$2,000 for Dental Procedures provided by Noncontracted Providers. In no case will the maximum total Benefit exceed \$2,000 regardless of the network chosen.

- 6. ORTHODONTIC MAXIMUM BENEFIT:** Delta Dental's obligation for orthodontic Benefits is limited to the lifetime maximum specified in this Item of the Declarations.

The maximum lifetime orthodontic Benefit is \$2,000 for each Subscriber and each Covered Dependent. Dependent children are covered to age 26.

- 7. MONTHLY PREMIUM:**

Single Coverage (employee, 1 Party) - \$46.61

Family Coverage (employee and spouse, 2 Party) - \$131.45

Family Coverage (employee and child(ren)) - \$131.45

Family Coverage (full family, 3+ Party) - \$131.45

- 8. SCHEDULE OF BENEFITS, LIMITATIONS AND COVERAGE PERCENTAGE:**

This Contract provides the following Benefits subject to the Coverage percentage listed for each Benefit and subject to any applicable Deductible. The Coverage and Coinsurance percentages may vary based upon the network membership of the treating Provider at the time the Dental Procedure is completed. The application of the Deductible, if any, also may vary based upon the network membership of the treating Provider at the time the Dental Procedure is completed.

For example, if the Coverage percentage shown is “80,” that Benefit is 80% of the Maximum Plan Allowance, after satisfaction of any applicable Deductible. In the same example, the Coinsurance (the amount the patient must pay) would be the remaining 20%.

If the Coverage percentage shown is “0”, that Benefit is not provided in the Group Contract.

The Benefit Accumulation Period begins on January 1, 2018, ends on December 31, 2018 and thereafter shall be the 12 month period beginning on January 1st.

PPO = Delta Dental PPO Provider Premier = Delta Dental Premier Provider NC = Noncontracted Provider

Does Deductible Apply? Yes/No			Coverage Percentage			Benefit
PPO	Premier	NC	PPO	Premier	NC	
N	N	N	100	100	100	Evaluations at six month intervals.
N	N	N	100	100	100	Full mouth series x-rays at thirty six month intervals; either individual images, or panoramic image, including bitewings.
N	N	N	100	100	100	Bitewing x-rays at six month intervals (limited to a set of four images).
N	N	N	100	100	100	Prophylaxis (teeth cleaning) or periodontal maintenance procedure at six month intervals.
Y	Y	Y	80	80	80	Prophylaxis. Periodontal maintenance procedure.
N	N	N	100	100	100	Topical fluoride applications at six month intervals for Covered Dependent children up to age 19.
N	N	N	100	100	100	Space maintainers for retaining space when a posterior primary tooth is prematurely lost.
Y	Y	Y	80	80	80	Emergency treatment to relieve pain.
Y	Y	Y	80	80	80	Topical application of sealants for Covered Dependents up to age 16. Application is limited to the occlusal surface of permanent molars which are free of decay and restorations. Benefits for sealants are limited to one application per tooth per lifetime.
Y	Y	Y	80	80	80	Amalgam (silver) restorations.

Does Deductible Apply? Yes/No			Coverage Percentage			Benefit
PPO	Premier	NC	PPO	Premier	NC	
Y	Y	Y	80	80	80	Composite (tooth colored) restorations for all teeth.
Y	Y	Y	80	80	80	Prefabricated crowns – one per tooth at three year intervals.
Y	Y	Y	80	80	80	Endodontics including root canal treatment.
Y	Y	Y	80	80	80	Surgical endodontic treatment.
Y	Y	Y	80	80	80	Non-surgical periodontics, including procedures necessary for the treatment of diseases of the gums and bone supporting the teeth. Benefit is limited to once per quadrant at 24 month intervals.
Y	Y	Y	80	80	80	Surgical periodontic treatment; benefit is limited to once per quadrant at 36 month intervals.
Y	Y	Y	80	80	80	Non-surgical extractions.
Y	Y	Y	80	80	80	Oral surgery (cutting procedures) and surgical extractions including pre-operative and post-operative care.
Y	Y	Y	80	80	80	Crowns, inlays, or onlays are provided when teeth are broken down by dental decay or accidental injury and may no longer be restored adequately with a filling material. Coverage for the purpose of replacing a defective existing crown, inlay or onlay will be provided only after a five year period from the date on which the defective item was last supplied, whether or not Delta Dental paid for the original Dental Procedure as a Benefit under this Contract. Porcelain veneers on crowns are Benefits on the six front teeth, bicuspid, and upper first molars.

Does Deductible Apply? Yes/No			Coverage Percentage			Benefit
PPO	Premier	NC	PPO	Premier	NC	
Y	Y	Y	80	80	80	<p>Prosthetics, including fixed bridgework, implants, partial dentures, and complete dentures to replace missing permanent teeth. Coverage for the purpose of replacing a defective existing prosthetic will be provided only after a five year period from the date on which the defective item was last supplied, whether or not Delta Dental paid for the original Dental Procedure as a Benefit under this Contract.</p> <p>Porcelain veneers on crowns or pontics are Benefits on the six front teeth, bicuspids, and upper first molars.</p> <p>Fixed bridges, implants, partial/complete dentures are provided where chewing function is impaired due to missing teeth. A fixed bridge or implant and implant related procedures may be a Benefit if no more than two teeth are missing in the dental arch in which the bridge or implant is proposed. Delta Dental will provide for replacement of missing teeth with the least elaborate procedure when three or more teeth are missing in the dental arch.</p> <p>Coverage for initial replacement of teeth is not limited to those lost while a Subscriber or Covered Dependent.</p>
Y	Y	Y	80	80	80	<p>Repairs and adjustments to prosthetic appliances. Denture reline or rebase is a Benefit at three year intervals.</p>

Does Deductible Apply? Yes/No			Coverage Percentage			Benefit
PPO	Premier	NC	PPO	Premier	NC	
Y	Y	Y	50	50	50	<p>Orthodontic appliances, treatment and related services for orthodontic purposes including evaluation, x-rays, extractions, photographs, and study models, subject to the orthodontic maximum benefit.</p> <p>Repair or replacement of orthodontic appliances are not covered.</p> <p>Delta Dental calculates all orthodontic treatment schedules according to the following formula:</p> <ul style="list-style-type: none"> - 25% of the total Maximum Plan Allowance (subject to the Coverage Percentage stated herein and any applicable Deductible) is considered the initial payment to be paid by Delta Dental, subject to the Coverage Percentage, any applicable Deductible and the orthodontic maximum Benefit stated herein. - The remainder of the Maximum Plan Allowance is divided by the months of treatment and the resulting amount is paid monthly by Delta Dental, subject to the Coverage Percentage, any applicable Deductible and the orthodontic maximum Benefit stated herein. <p>If orthodontic treatment is stopped for any reason before it is complete, Delta Dental will suspend all monthly payments.</p> <p>Coverage includes orthodontic treatment in progress. Treatment is in progress if an appliance or banding has been placed and the patient is receiving treatment by the attending orthodontist according to a current treatment plan. Liability for orthodontic treatment in progress shall extend only to the unearned portion of the treatment in progress (that portion occurring after enrollment) and Delta Dental shall be the sole determinant of this unearned amount eligible for coverage. However, there are no Benefits available for Dental Procedures, including orthodontic treatment in progress, after coverage terminates.</p>

OPTIONAL PROCEDURES

Delta Dental will pay the applicable Maximum Plan Allowance for the least expensive Dental Procedure that is adequate to restore the tooth or dental arch to contour and function, but only if the more expensive Dental Procedure is a Benefit of this Contract. The Subscriber or Covered Dependent will be responsible for either the remainder of the Provider's fee if a more expensive covered Dental Procedure is selected or the entire fee if the more expensive Dental Procedure is not a Benefit. The Coinsurance and Deductible will apply regardless of which Dental Procedure is selected.

V7PSMBQAJVM03272018

POLICY ENDORSEMENT NO. 05012 00000 - 03222018

Endorsement to Declarations

This Endorsement is attached to and forms a part of the Master Group Contract to provide dental care Benefits between **County of Dane** and **Delta Dental of Wisconsin, Inc.** and supersedes any previous endorsement provided to you regarding Evidence-Based Integrated Care Plan, ("EBICP").

This Endorsement modifies the group dental Benefits afforded by your Master Group Contract, Declarations, and any Insuring Agreement Endorsements attached thereto, issued by Delta Dental of Wisconsin, Inc. and must be read in conjunction therewith. All terms and conditions of your Master Group Contract, Declarations, and any Insuring Agreement Endorsements attached thereto remain in effect except as modified by this Endorsement. Please read this Endorsement carefully.

Please be advised that on April 1, 2018, the following Evidence-Based Integrated Care Plan ("EBICP") Benefits are provided under your Policy. To participate in EBICP, eligible dental plan enrollees or their Providers are required to set the appropriate health condition indicator online at deltadentalwi.com or a Delta Dental of Wisconsin representative will assist in setting the EBICP indicator by telephone. The EBICP Periodontal Disease health condition indicator will be automatically updated when non-surgical or surgical periodontal procedures are processed by Delta Dental of Wisconsin.

The EBICP Benefits are as follows:

Periodontal Disease

1. With an indicator of surgical or non-surgical treatment of **Periodontal Disease**, a participant is eligible for up to two additional dental visits in a Benefit year for periodontal maintenance or adult prophylaxis.
2. With an indicator of surgical or non-surgical treatment of **Periodontal Disease**, a participant is eligible for topical fluoride application beyond the age limitation of the Master Group Contract.

Diabetes

1. With an indicator of a **Diabetes** diagnosis, a participant is eligible for up to two additional dental visits in a Benefit year for periodontal maintenance or adult prophylaxis.

Pregnancy

1. With an indicator of **Pregnancy**, a participant is eligible for one additional dental visit for adult prophylaxis or periodontal maintenance during the pregnancy.

High Risk Cardiac Conditions

1. With an indicator for **High Risk Cardiac Conditions**, a participant is eligible for up to two additional dental visits in a Benefit year for periodontal maintenance or adult prophylaxis. High risk cardiac condition indicators are:
 - History of infective endocarditis
 - Certain congenital heart defects (such as having one ventricle instead of the normal two)
 - Individuals with artificial heart valves
 - Heart valve defects caused by acquired conditions like rheumatic heart disease
 - Hyper tropic cardiomyopathy which causes abnormal thickening of the heart muscle
 - Individuals with pulmonary shunts or conduits
 - Mitral valve prolapse with regurgitation (blood leakage)

Suppressed Immune System Conditions

1. With an indicator for **Suppressed Immune System Conditions**, a participant is eligible for up to two additional dental visits in a Benefit year for periodontal maintenance or adult prophylaxis.
2. With an indicator of **Suppressed Immune System Conditions**, a participant is eligible for topical fluoride application beyond the age limitation of the Master Group Contract.

Kidney Failure or Dialysis Conditions

1. With an indicator for **Kidney Failure or Dialysis Conditions**, a participant is eligible for up to two additional dental visits in a Benefit year for periodontal maintenance or adult prophylaxis.

Cancer Related Chemotherapy and/or Radiation

1. With an indicator for **Cancer Related Chemotherapy and/or Radiation**, a participant is eligible for up to two additional dental visits in a Benefit year for periodontal maintenance or adult prophylaxis.
2. With an indicator of **Cancer Related Chemotherapy and/or Radiation**, a participant is eligible for topical fluoride application beyond the age limitation of the Master Group Contract.

THIS ENDORSEMENT IS PART OF THE MASTER GROUP CONTRACT, DECLARATIONS AND INSURING AGREEMENT REFERENCED HEREIN AND SHOULD BE KEPT WITH THOSE DOCUMENTS.

POLICY ENDORSEMENT NO. 704 - 0 - 05122020

Attached to and forming a part of the Contract to Provide Dental Care Benefits between County Of Dane and Delta Dental of Wisconsin, Inc.

It is agreed and understood that Declarations, Section 7, Monthly Premium will be replaced with the following, effective January 1, 2021 and ending on December 31, 2021:

Single Coverage (employee, 1 Party)	\$48.94
Family Coverage (employee and spouse, 2 Party)	\$138.02
Family Coverage (employee and child(ren))	\$138.02
Family Coverage (full family, 3+ Party)	\$138.02

DentalRateEndorse 10.08

POLICY ENDORSEMENT NO. 7805 - 0 - 05122020

Attached to and forming a part of the Contract to Provide Dental Care Benefits between County Of Dane and Delta Dental of Wisconsin, Inc.

It is agreed and understood that Declarations, Section 7, Monthly Premium will be replaced with the following, effective January 1, 2021 and ending on December 31, 2021:

Single Coverage (employee, 1 Party)	\$48.94
Family Coverage (employee and spouse, 2 Party)	\$97.88
Family Coverage (employee and child(ren))	\$138.02
Family Coverage (full family, 3+ Party)	\$138.02

DentalRateEndorse 10.08



Delta Dental of Wisconsin
www.deltadentalwi.com

Amy Utzig
County Of Dane
210 Martin Luther King Jr Blvd
Madison WI 53709-0000

Thank you for choosing Delta Dental as your dental benefits company. Your renewal for the upcoming year is enclosed.

Group number: 5012-0 Renewal date: January 1, 2021

<u>Coverage Type</u>	<u>Current Rate</u>	<u>Renewal Rate</u>	<u>Change</u>
Single Coverage (employee, 1 Party)	\$48.94	\$48.94	.00%
Family Coverage (employee and spouse, 2 Party)	\$138.02	\$138.02	.00%
Family Coverage (employee and child(ren))	\$138.02	\$138.02	.00%
Family Coverage (full family, 3+ Party)	\$138.02	\$138.02	.00%

Provider costs, claims experience, and plan design changes (if applicable) influence the rates for your dental plan. As your dental carrier, we are committed to controlling these costs and helping you incorporate plan innovations that deliver the best value for your benefits investment.

Delta Dental’s leadership in dental benefits provides you with:

- The largest dental networks across the United States, with agreed-to fee schedules and treatment guarantees that save money for you and your employees.
- Cost management strategies that save groups over \$100 million annually.

If you are satisfied with your current plan and renewal rates, no action is required. The new rates will automatically go into effect on your renewal date.

However, if you have concerns about your renewal, would like to explore options for changing your plan, or if we can be of further assistance, please contact your agent who is listed below or call us at 800-236-3713 or email sales@deltadentalwi.com.

Thank you for allowing Delta Dental to serve your dental benefits needs.

Sunshine Mikulak
Sr Account Manager

cc: Gerald Brown
M3 INSURANCE SOLUTIONS
PO Box 8950
Madison WI 53708-8950

POLICY ENDORSEMENT NO. 5012 - 0 - 05122020

Attached to and forming a part of the Contract to Provide Dental Care Benefits between County Of Dane and Delta Dental of Wisconsin, Inc.

It is agreed and understood that Declarations, Section 7, Monthly Premium will be replaced with the following, effective January 1, 2021 and ending on December 31, 2021:

Single Coverage (employee, 1 Party)	\$48.94
Family Coverage (employee and spouse, 2 Party)	\$138.02
Family Coverage (employee and child(ren))	\$138.02
Family Coverage (full family, 3+ Party)	\$138.02

Dane County Active Census for Dental Insurance

Coverage*: empty box means they do not have dental coverage

ORG_LEVEL_CODE	DEPARTMENT_CODE	UNIT_CODE	PERSON_CODE	PLAN_CODE
168	1815	ATTORNEYS	760	DENTAL
168	1815	ATTORNEYS	6104	DENTAL
168	1815	ATTORNEYS	6573	DENTAL
168	1815	ATTORNEYS	10158	DENTAL
168	1815	ATTORNEYS	14287	DENTAL
168	1890	ATTORNEYS	9887	DENTAL
168	1890	ATTORNEYS	13850	DENTAL
168	1890	ATTORNEYS	12575	DENTAL
168	1890	ATTORNEYS	8411	DENTAL
168	1890	ATTORNEYS	13281	DENTAL
168	1890	ATTORNEYS	7788	DENTAL
168	1965	ATTORNEYS	1289	DENTAL
168	1965	ATTORNEYS	9688	DENTAL
168	1965	ATTORNEYS	12130	DENTAL
168	1965	ATTORNEYS	11489	DENTAL
168	1965	ATTORNEYS	12452	DENTAL
168	1965	ATTORNEYS	12656	DENTAL
168	1965	ATTORNEYS	13694	DENTAL
288	2600	ATTORNEYS	11523	DENTAL
288	2600	ATTORNEYS	12500	
288	2600	ATTORNEYS	12617	DENTAL
288	2600	ATTORNEYS	5769	DENTAL
288	2600	ATTORNEYS	8912	DENTAL
288	2600	ATTORNEYS	8909	DENTAL
288	2600	ATTORNEYS	7251	DENTAL
288	2600	ATTORNEYS	14836	DENTAL
288	2600	ATTORNEYS	11138	DENTAL
288	2600	ATTORNEYS	12493	DENTAL
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024	0165	CITIZEN-MEM	14392	
024	0165	CITIZEN-MEM	10886	

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515	6039	CITIZEN-MEM	14882
515	6039	CITIZEN-MEM	14883
515	6039	CITIZEN-MEM	14447
515	6039	CITIZEN-MEM	14885
524	6165	CITIZEN-MEM	14340
524	6165	CITIZEN-MEM	11213
524	6165	CITIZEN-MEM	11702
524	6165	CITIZEN-MEM	8116

524	6165	CITIZEN-MEM	9739	
024	0165	CNTY BDCHAIR	10887	DENTAL
024	0165	CNTY BOARD	14632	
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024	0165	CNTY BOARD	14642	
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024	0165	CNTY BOARD	13726	
024	0165	CNTY BOARD	14640	
024	0165	CNTY BOARD	9499	
024	0165	CNTY BOARD	9500	
024	0165	CNTY BOARD	11412	
096	1050	JC-705	11183	DENTAL
096	1050	JC-705	14070	DENTAL
096	1050	JC-705	10391	DENTAL
096	1050	JC-705	9568	DENTAL
096	1050	JC-705	9355	
096	1050	JC-705	10462	DENTAL
096	1050	JC-705	11615	DENTAL
096	1135	JC-705	1450	DENTAL
096	1135	JC-705	2212	DENTAL

096	1675	JC-705	14069	
096	1675	JC-705	11219	DENTAL
096	1675	JC-705	13631	DENTAL
096	1675	JC-705	13531	DENTAL
096	1675	JC-705	14850	DENTAL
096	1675	JC-705	818	DENTAL
096	1675	JC-705	14403	DENTAL
096	1675	JC-705	14466	DENTAL
096	1675	JC-705	8884	DENTAL
096	1675	JC-705	4027	DENTAL
096	1675	JC-705	15083	DENTAL
096	1675	JC-705	13992	DENTAL
096	1675	JC-705	8981	DENTAL
096	1675	JC-705	14565	
096	1675	JC-705	11259	DENTAL
096	1675	JC-705	14407	DENTAL
096	1675	JC-705	6837	DENTAL
096	1675	JC-705	14848	
096	1675	JC-705	13634	DENTAL
096	1675	JC-705	14469	DENTAL
096	1675	JC-705	8499	DENTAL
510	5580	JC-705	13383	
510	5580	JC-705	13307	DENTAL
510	5580	JC-705	14273	DENTAL
510	5580	JC-705	14820	
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510	5580	JC-705	9234	DENTAL
510	5580	JC-705	14583	DENTAL
510	5580	JC-705	3391	DENTAL
510	5580	JC-705	14841	
510	5580	JC-705	8502	DENTAL
510	5580	JC-705	12546	DENTAL
510	5580	JC-705	4635	DENTAL
510	5580	JC-705	11209	DENTAL
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510	5580	JC-705	11498	DENTAL
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510	5580	JC-705	10388	DENTAL
510	5580	JC-705	14267	DENTAL
510	5580	JC-705	10717	DENTAL
510	5580	JC-705	11529	DENTAL
510	5580	JC-705	14584	DENTAL
510	5580	JC-705	10343	DENTAL
510	5580	JC-705	10355	DENTAL

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510	5580	JC-705	13862	
510	5580	JC-705	12699	DENTAL
510	5580	JC-705	11384	DENTAL
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510	5580	JC-705	11683	
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510	5580	JC-705	12512	DENTAL
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510	5580	JC-705	11076	DENTAL
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510	5580	JC-705	11530	DENTAL
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510	5580	JC-705	13716	DENTAL
510	5580	JC-705	12701	DENTAL
510	5580	JC-705	11362	DENTAL
510	5580	JC-705	6189	DENTAL
510	5580	JC-705	7038	DENTAL
510	5580	JC-705	11280	DENTAL
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510	5580	JC-705	14269	DENTAL
510	5580	JC-705	3394	
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510	5580	JC-705	11363	DENTAL
510	5580	JC-705	13618	
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510	5580	JC-705	10718	DENTAL
510	5580	JC-705	3257	DENTAL
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510	5580	JC-705	14844	
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510	5580	JC-705	13866	DENTAL
510	5580	JC-705	3824	DENTAL
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510	5580	JC-705	10956	DENTAL
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510	5580	JC-705	10805	DENTAL
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510	5580	JC-705	14845	
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510	5580	JC-705	12926	DENTAL
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510	5580	JC-705	803	DENTAL
510	5580	JC-705	12957	DENTAL
510	5580	JC-705	15086	
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510	5580	JC-705	14445	DENTAL
510	5580	JC-705	12392	DENTAL
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510	5580	JC-705	8872	
510	5580	JC-705	13675	DENTAL
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510	5580	JC-705	12164	DENTAL
510	5580	JC-705	14664	DENTAL
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510	5580	JC-705	13863	DENTAL
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510	5580	JC-705	13308	
510	5580	JC-705	13487	DENTAL
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510	5580	JC-705	13309	
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510	5580	JC-705	13622	DENTAL
024	0165	JC-720	14380	DENTAL
055	0700	JC-720	12921	DENTAL
060	0765	JC-720	13553	DENTAL
060	0765	JC-720	14137	DENTAL
096	0915	JC-720	9467	DENTAL
096	1025	JC-720	11930	DENTAL
096	1050	JC-720	11608	DENTAL
096	1060	JC-720	10412	DENTAL
096	1060	JC-720	6951	DENTAL
096	1060	JC-720	9050	DENTAL
096	1060	JC-720	12272	DENTAL
096	1060	JC-720	7600	DENTAL
096	1060	JC-720	13490	DENTAL
096	1060	JC-720	4147	DENTAL
096	1060	JC-720	10128	DENTAL
096	1060	JC-720	12586	DENTAL
096	1060	JC-720	1031	DENTAL
096	1060	JC-720	3737	DENTAL
096	1060	JC-720	9313	DENTAL
096	1060	JC-720	6438	DENTAL
096	1060	JC-720	12673	DENTAL
096	1070	JC-720	13818	DENTAL
096	1080	JC-720	6179	DENTAL
096	1080	JC-720	3845	DENTAL
096	1100	JC-720	10997	DENTAL
096	1110	JC-720	9615	DENTAL
096	1110	JC-720	11293	DENTAL
096	1120	JC-720	9921	DENTAL
096	1120	JC-720	5881	DENTAL
096	1145	JC-720	14179	DENTAL
096	1145	JC-720	10397	DENTAL
096	1145	JC-720	11858	
096	1145	JC-720	2428	DENTAL
096	1145	JC-720	11597	DENTAL
096	1155	JC-720	7069	DENTAL
096	1175	JC-720	10650	DENTAL
096	1230	JC-720	9864	DENTAL
096	1230	JC-720	10766	DENTAL
096	1230	JC-720	3012	DENTAL
096	1365	JC-720	12336	DENTAL
096	1440	JC-720	3381	DENTAL
096	1635	JC-720	1854	DENTAL

096	1640	JC-720	5605	DENTAL
096	1640	JC-720	9975	DENTAL
096	1645	JC-720	9280	DENTAL
096	1645	JC-720	7852	DENTAL
096	1660	JC-720	4460	DENTAL
096	1660	JC-720	9879	DENTAL
096	1665	JC-720	8821	DENTAL
120	1755	JC-720	553	DENTAL
120	1755	JC-720	4502	DENTAL
168	1890	JC-720	13510	DENTAL
168	1890	JC-720	14374	DENTAL
168	1890	JC-720	1641	DENTAL
168	1890	JC-720	10878	DENTAL
168	1890	JC-720	10849	DENTAL
168	1965	JC-720	8646	DENTAL
168	1965	JC-720	10861	DENTAL
168	1965	JC-720	2603	DENTAL
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168	1965	JC-720	9961	DENTAL
168	1965	JC-720	10371	DENTAL
168	1965	JC-720	10629	DENTAL
168	1965	JC-720	11913	DENTAL
168	1965	JC-720	13475	DENTAL
168	1965	JC-720	10532	DENTAL
168	1965	JC-720	6257	DENTAL
168	1965	JC-720	13904	DENTAL
168	1965	JC-720	10630	
168	1965	JC-720	5445	DENTAL
168	1965	JC-720	10734	DENTAL
168	1965	JC-720	7128	DENTAL
168	1965	JC-720	8826	DENTAL
168	1965	JC-720	13913	DENTAL
168	1965	JC-720	12559	DENTAL
168	1965	JC-720	10856	DENTAL
168	1965	JC-720	10570	DENTAL
168	1965	JC-720	12956	DENTAL
168	1965	JC-720	9685	DENTAL
168	1965	JC-720	12833	DENTAL
168	1965	JC-720	4954	DENTAL
168	1965	JC-720	9479	DENTAL
168	1965	JC-720	15075	DENTAL
168	1965	JC-720	13472	DENTAL
168	1965	JC-720	12576	DENTAL
168	1965	JC-720	12747	DENTAL
168	1965	JC-720	9764	DENTAL
168	1965	JC-720	9026	DENTAL
168	1965	JC-720	7718	DENTAL

168	1965	JC-720	14074	DENTAL
168	1965	JC-720	4081	DENTAL
168	1965	JC-720	5799	DENTAL
168	1965	JC-720	10559	DENTAL
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180	2040	JC-720	13275	DENTAL
180	2040	JC-720	12510	DENTAL
180	2040	JC-720	11400	DENTAL
180	2040	JC-720	11089	
180	2040	JC-720	12503	DENTAL
180	2040	JC-720	10844	DENTAL
180	2040	JC-720	11809	
180	2040	JC-720	10944	DENTAL
180	2040	JC-720	9616	DENTAL
180	2040	JC-720	9583	DENTAL
180	2040	JC-720	9721	DENTAL
180	2040	JC-720	13404	DENTAL
288	2580	JC-720	7607	DENTAL
288	2580	JC-720	9768	
288	2580	JC-720	11684	DENTAL
288	2580	JC-720	10055	DENTAL
288	2580	JC-720	10768	DENTAL
288	2580	JC-720	893	DENTAL
288	2580	JC-720	3727	DENTAL
288	2580	JC-720	205	DENTAL
288	2580	JC-720	11393	
288	2580	JC-720	12026	DENTAL
288	2580	JC-720	11912	DENTAL
288	2580	JC-720	2228	DENTAL
288	2580	JC-720	12405	DENTAL
288	2580	JC-720	14372	DENTAL
288	2580	JC-720	11805	DENTAL
288	2580	JC-720	3039	DENTAL
288	2580	JC-720	14127	DENTAL
288	2580	JC-720	9619	DENTAL
288	2580	JC-720	14598	DENTAL
288	2580	JC-720	12489	DENTAL
288	2580	JC-720	1805	DENTAL
288	2580	JC-720	13319	DENTAL
288	2580	JC-720	4588	DENTAL
288	2580	JC-720	13536	DENTAL
288	2580	JC-720	12070	DENTAL
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288	2580	JC-720	10200	DENTAL
288	2580	JC-720	14247	DENTAL
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288	2580	JC-720	7303	DENTAL

288	2580	JC-720	5837	DENTAL
288	2580	JC-720	13692	DENTAL
288	2580	JC-720	9256	DENTAL
288	2580	JC-720	13477	DENTAL
288	2580	JC-720	12036	DENTAL
288	2580	JC-720	13857	DENTAL
288	2580	JC-720	12592	DENTAL
288	2580	JC-720	10087	DENTAL
288	2580	JC-720	9780	DENTAL
288	2580	JC-720	11197	DENTAL
288	2580	JC-720	12338	DENTAL
288	2580	JC-720	14018	DENTAL
288	2580	JC-720	13483	DENTAL
288	2580	JC-720	10804	DENTAL
288	2580	JC-720	14048	DENTAL
288	2580	JC-720	8522	DENTAL
288	2580	JC-720	10221	DENTAL
288	2580	JC-720	10579	DENTAL
288	2580	JC-720	10774	DENTAL
288	2580	JC-720	13980	DENTAL
288	2580	JC-720	11371	DENTAL
288	2580	JC-720	4752	DENTAL
288	2580	JC-720	9656	DENTAL
288	2580	JC-720	12538	DENTAL
288	2580	JC-720	12049	DENTAL
288	2580	JC-720	10605	DENTAL
288	2580	JC-720	2980	DENTAL
288	2580	JC-720	15165	DENTAL
288	2580	JC-720	14060	DENTAL
288	2580	JC-720	1790	DENTAL
288	2580	JC-720	10769	
288	2580	JC-720	11218	DENTAL
288	2580	JC-720	10081	DENTAL
288	2600	JC-720	3983	DENTAL
288	2600	JC-720	13313	DENTAL
288	2600	JC-720	13304	DENTAL
288	2600	JC-720	13610	DENTAL
288	2600	JC-720	10966	DENTAL
288	2600	JC-720	13555	DENTAL
288	2600	JC-720	4872	DENTAL
288	2600	JC-720	12705	DENTAL
288	2600	JC-720	11515	
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288	2600	JC-720	8931	DENTAL
288	2600	JC-720	7667	DENTAL
288	2600	JC-720	13855	DENTAL
288	2600	JC-720	3345	DENTAL

288	2600	JC-720	1782	DENTAL
288	2600	JC-720	14338	DENTAL
288	2600	JC-720	11504	
288	2715	JC-720	13277	DENTAL
288	2715	JC-720	4449	DENTAL
288	2715	JC-720	14226	DENTAL
316	2865	JC-720	1769	DENTAL
316	2865	JC-720	6074	DENTAL
330	2940	JC-720	5329	DENTAL
330	2940	JC-720	13045	DENTAL
351	3030	JC-720	8617	DENTAL
351	3030	JC-720	7602	DENTAL
351	3030	JC-720	10519	DENTAL
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351	3030	JC-720	3634	DENTAL
351	3030	JC-720	9706	DENTAL
351	3030	JC-720	11423	DENTAL
351	3030	JC-720	11436	DENTAL
351	3030	JC-720	12243	DENTAL
351	3030	JC-720	9246	DENTAL
351	3030	JC-720	9861	DENTAL
351	3030	JC-720	13776	DENTAL
351	3030	JC-720	11306	DENTAL
351	3030	JC-720	12629	DENTAL
351	3030	JC-720	10057	DENTAL
351	3030	JC-720	12787	DENTAL
351	3030	JC-720	2264	DENTAL
351	3030	JC-720	13856	DENTAL
351	3030	JC-720	12094	DENTAL
351	3030	JC-720	4886	DENTAL
351	3030	JC-720	10078	DENTAL
351	3030	JC-720	3614	DENTAL
351	3030	JC-720	14124	DENTAL
351	3030	JC-720	13291	DENTAL
351	3045	JC-720	8734	DENTAL
351	3045	JC-720	8201	DENTAL
351	3045	JC-720	8202	DENTAL
351	3060	JC-720	10581	DENTAL
351	3060	JC-720	13278	DENTAL
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351	3060	JC-720	12043	
351	3060	JC-720	11518	
351	3060	JC-720	7695	DENTAL
351	3075	JC-720	13329	DENTAL
372	3165	JC-720	9346	DENTAL
372	3165	JC-720	10089	DENTAL

372	3165	JC-720	8545	DENTAL
372	3165	JC-720	5621	DENTAL
372	3165	JC-720	5039	DENTAL
372	3165	JC-720	11694	DENTAL
372	3165	JC-720	12722	
372	3200	JC-720	10530	DENTAL
372	3255	JC-720	13041	DENTAL
372	3255	JC-720	10067	DENTAL
372	3255	JC-720	10110	DENTAL
372	3255	JC-720	7617	DENTAL
372	3255	JC-720	14366	DENTAL
372	3255	JC-720	9491	DENTAL
372	3255	JC-720	12037	DENTAL
372	3255	JC-720	1412	DENTAL
372	3255	JC-720	6976	DENTAL
372	3255	JC-720	10607	DENTAL
372	3255	JC-720	3028	DENTAL
372	3255	JC-720	7820	DENTAL
372	3255	JC-720	3400	DENTAL
372	3255	JC-720	11370	DENTAL
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372	3255	JC-720	13042	DENTAL
372	3255	JC-720	922	DENTAL
372	3255	JC-720	9231	DENTAL
372	3255	JC-720	13679	
372	3315	JC-720	12369	DENTAL
372	3315	JC-720	12429	DENTAL
372	3315	JC-720	14717	DENTAL
372	3315	JC-720	13525	DENTAL
372	3315	JC-720	15079	DENTAL
372	3315	JC-720	12475	DENTAL
372	3315	JC-720	12395	DENTAL
372	3315	JC-720	15115	DENTAL
372	3315	JC-720	14719	DENTAL
372	3315	JC-720	13828	DENTAL
372	3315	JC-720	14120	DENTAL
372	3315	JC-720	12131	DENTAL
372	3315	JC-720	9347	DENTAL
372	3315	JC-720	13771	DENTAL
372	3315	JC-720	10529	DENTAL
372	3315	JC-720	12260	DENTAL
372	3315	JC-720	15081	DENTAL
372	3315	JC-720	13392	DENTAL
372	3315	JC-720	7663	DENTAL
372	3315	JC-720	14613	DENTAL

372	3315	JC-720	14614	DENTAL
372	3315	JC-720	9858	DENTAL
372	3315	JC-720	11922	DENTAL
372	3315	JC-720	12400	DENTAL
372	3315	JC-720	8894	DENTAL
372	3315	JC-720	11196	DENTAL
372	3315	JC-720	14461	DENTAL
372	3315	JC-720	2997	DENTAL
372	3315	JC-720	14109	DENTAL
372	3315	JC-720	7998	
372	3315	JC-720	11376	DENTAL
372	3315	JC-720	10708	
372	3315	JC-720	11782	DENTAL
372	3315	JC-720	13431	DENTAL
372	3315	JC-720	7665	DENTAL
372	3315	JC-720	14031	DENTAL
372	3315	JC-720	13228	DENTAL
372	3315	JC-720	2985	DENTAL
372	3315	JC-720	14471	DENTAL
372	3315	JC-720	13982	DENTAL
372	3315	JC-720	13269	DENTAL
372	3315	JC-720	11104	DENTAL
372	3315	JC-720	12409	DENTAL
372	3315	JC-720	9740	DENTAL
372	3315	JC-720	14560	DENTAL
372	3315	JC-720	6875	
372	3315	JC-720	5477	DENTAL
372	3315	JC-720	9146	DENTAL
372	3315	JC-720	11830	DENTAL
372	3315	JC-720	14610	DENTAL
372	3315	JC-720	9488	DENTAL
372	3315	JC-720	9418	DENTAL
372	3390	JC-720	8028	DENTAL
372	3390	JC-720	8922	DENTAL
372	3390	JC-720	4564	DENTAL
372	3390	JC-720	13849	DENTAL
372	3390	JC-720	12077	DENTAL
372	3390	JC-720	10235	DENTAL
372	3395	JC-720	7589	
385	3540	JC-720	12692	DENTAL
385	3540	JC-720	13608	
385	3540	JC-720	11514	DENTAL
385	3540	JC-720	12394	DENTAL
385	3540	JC-720	12790	DENTAL
385	3540	JC-720	10400	DENTAL
385	3540	JC-720	14866	DENTAL
385	3540	JC-720	12446	DENTAL

385	3540	JC-720	12241	DENTAL
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385	3540	JC-720	11750	DENTAL
385	3540	JC-720	11748	DENTAL
385	3540	JC-720	13251	DENTAL
385	3540	JC-720	11753	DENTAL
385	3540	JC-720	3592	DENTAL
385	3540	JC-720	8998	DENTAL
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385	3540	JC-720	11997	DENTAL
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385	3540	JC-720	12397	DENTAL
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385	3540	JC-720	11129	DENTAL
385	3540	JC-720	8524	DENTAL
385	3540	JC-720	8200	
385	3540	JC-720	12795	DENTAL
385	3540	JC-720	4001	
385	3540	JC-720	14188	DENTAL
385	3540	JC-720	14189	DENTAL
385	3540	JC-720	13974	DENTAL
385	3540	JC-720	11516	DENTAL
385	3540	JC-720	10767	DENTAL
385	3540	JC-720	13252	DENTAL
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385	3540	JC-720	1400	DENTAL
385	3540	JC-720	12798	DENTAL
385	3540	JC-720	12160	DENTAL
385	3540	JC-720	11046	DENTAL
385	3540	JC-720	10202	DENTAL
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385	3540	JC-720	8827	DENTAL
385	3540	JC-720	9485	DENTAL
385	3540	JC-720	12003	DENTAL
385	3540	JC-720	12406	DENTAL
385	3540	JC-720	12461	DENTAL
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385	3540	JC-720	12407	DENTAL
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385	3540	JC-720	11378	DENTAL
385	3540	JC-720	13178	DENTAL
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385	3540	JC-720	12167	DENTAL
385	3540	JC-720	12801	DENTAL
385	3540	JC-720	9789	DENTAL
385	3540	JC-720	13607	DENTAL
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396	3615	JC-720	9421	DENTAL
396	3765	JC-720	14078	DENTAL
420	3840	JC-720	1455	DENTAL
420	3840	JC-720	14588	DENTAL
420	3915	JC-720	12622	DENTAL
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420	3915	JC-720	7291	DENTAL
420	3990	JC-720	12096	DENTAL
420	3990	JC-720	12355	DENTAL
420	3990	JC-720	7885	
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420	3990	JC-720	5770	DENTAL
420	3990	JC-720	13469	DENTAL
420	3990	JC-720	14830	
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524	6165	JC-720	15162	
538	6190	JC-720	3264	DENTAL
538	6315	JC-720	13616	DENTAL
538	6315	JC-720	11755	DENTAL
564	6480	JC-720	8026	DENTAL
564	6480	JC-720	12245	DENTAL
564	6585	JC-720	12936	DENTAL
564	6695	JC-720	10556	DENTAL
564	6705	JC-720	14982	

612	6915	JC-720	12476	DENTAL
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612	6915	JC-720	4424	DENTAL
612	6915	JC-720	10829	
612	6915	JC-720	11229	DENTAL
648	6990	JC-720	6628	DENTAL
648	6990	JC-720	12962	DENTAL
648	6990	JC-720	8006	DENTAL
648	6990	JC-720	13853	DENTAL
684	7665	JC-720	14363	
684	7665	JC-720	12083	DENTAL
696	7730	JC-720	8027	DENTAL
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696	7740	JC-720	4974	DENTAL
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696	7740	JC-720	8460	DENTAL
696	7740	JC-720	11887	DENTAL
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696	7740	JC-720	447	DENTAL
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696	7740	JC-720	7565	DENTAL
696	7740	JC-720	11070	DENTAL
696	7740	JC-720	10056	DENTAL
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696	7740	JC-720	9916	DENTAL
696	7840	JC-720	5726	DENTAL
696	7840	JC-720	12440	DENTAL
720	7890	JC-720	14589	
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795	8355	JC-720	5619	DENTAL
795	8355	JC-720	13784	DENTAL
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820	8790	JC-720	13292	DENTAL

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048	0240	JC-CONFIDNT	12468	DENTAL
168	1890	JC-CONFIDNT	12788	DENTAL
372	3165	JC-CONFIDNT	13282	DENTAL
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564	6705	LOCAL-65	15088	DENTAL
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648	7140	LOCAL-65	7146	DENTAL
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168	1890	LTE-JC-720	11630	
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288	2580	LTE-JC-720	5594
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096	1060	LTE-SPECIAL	12984
096	1070	LTE-SPECIAL	9243
096	1675	LTE-SPECIAL	12205
096	1675	LTE-SPECIAL	12206
372	3255	LTE-SPECIAL	10682
515	6040	LTE-SPECIAL	3749

515	6040	LTE-SPECIAL	2951	
515	6042	LTE-SPECIAL	14224	
515	6042	LTE-SPECIAL	11786	
515	6050	LTE-SPECIAL	6639	
820	8940	LTE-SPECIAL	14280	
820	8940	LTE-SPECIAL	14281	
288	2735	LTE-STAFF-ATTY	14480	
288	2735	LTE-STAFF-ATTY	15132	
288	2735	LTE-STAFF-ATTY	13518	
288	2735	LTE-STAFF-ATTY	15134	
288	2735	LTE-STAFF-ATTY	15137	
288	2735	LTE-STAFF-ATTY	15138	
351	3060	LTE-SW-2634	14616	
420	3840	LTE-SW-2634	13983	
420	3840	LTE-SW-2634	14763	
420	3840	LTE-SW-2634	14526	
420	3840	LTE-SW-2634	9275	
420	3840	LTE-SW-2634	15089	
420	3840	LTE-SW-2634	14875	
515	6040	LTE-SW-2634	10198	
515	6054	LTE-SW-2634	14596	
515	6072	LTE-SW-2634	1142	
515	6072	LTE-SW-2634	4525	
515	6572	LTE-SW-2634	13938	
510	5580	LTE-UPQHC-1199	12432	
510	6120	LTE-UPQHC-1199	14854	
510	6120	LTE-UPQHC-1199	14857	
510	6120	LTE-UPQHC-1199	14865	
520	6130	LTE-UPQHC-1199	11726	
520	6130	LTE-UPQHC-1199	189	
372	3255	LTE-WPPA-NONSUPV	1602	
372	3255	LTE-WPPA-NONSUPV	11772	
720	7890	MGR-AGENTS	11039	DENTAL
048	0390	MGR-CONTRACT	11676	DENTAL
055	0700	MGR-CONTRACT	661	DENTAL
096	0915	MGR-CONTRACT	5694	DENTAL
168	1815	MGR-CONTRACT	8443	DENTAL
330	2940	MGR-CONTRACT	14834	DENTAL
330	2940	MGR-CONTRACT	12373	DENTAL
330	2940	MGR-CONTRACT	11120	DENTAL
385	3540	MGR-CONTRACT	9358	DENTAL
396	3615	MGR-CONTRACT	11478	DENTAL
420	3840	MGR-CONTRACT	4837	DENTAL
515	6039	MGR-CONTRACT	12756	DENTAL
520	6130	MGR-CONTRACT	10508	DENTAL
524	6165	MGR-CONTRACT	7067	DENTAL
538	6190	MGR-CONTRACT	581	DENTAL

564	6480	MGR-CONTRACT	9555	DENTAL
612	6915	MGR-CONTRACT	12414	DENTAL
648	6990	MGR-CONTRACT	11137	DENTAL
684	7665	MGR-CONTRACT	11047	DENTAL
696	7730	MGR-CONTRACT	3017	
795	8355	MGR-CONTRACT	2638	DENTAL
820	8790	MGR-CONTRACT	8895	DENTAL
820	8790	MGR-CONTRACT	14215	DENTAL
048	0240	MGR-ELECTED	1370	DENTAL
060	0765	MGR-ELECTED	6962	DENTAL
120	1755	MGR-ELECTED	11682	DENTAL
180	2040	MGR-ELECTED	4891	DENTAL
288	2580	MGR-ELECTED	4978	DENTAL
372	3165	MGR-ELECTED	6799	DENTAL
024	0165	MGR-PROF	10220	DENTAL
024	0165	MGR-PROF	12456	DENTAL
024	0165	MGR-PROF	10709	DENTAL
024	0165	MGR-PROF	12897	DENTAL
024	0165	MGR-PROF	4402	DENTAL
048	0240	MGR-PROF	12691	DENTAL
048	0240	MGR-PROF	8836	DENTAL
048	0240	MGR-PROF	13428	DENTAL
048	0240	MGR-PROF	10082	DENTAL
048	0430	MGR-PROF	14499	DENTAL
048	0615	MGR-PROF	7282	DENTAL
055	0700	MGR-PROF	4986	DENTAL
055	0700	MGR-PROF	2232	DENTAL
060	0765	MGR-PROF	13109	DENTAL
096	0915	MGR-PROF	12125	DENTAL
096	0915	MGR-PROF	4894	DENTAL
096	0915	MGR-PROF	10528	DENTAL
096	0915	MGR-PROF	8746	DENTAL
096	1025	MGR-PROF	8015	DENTAL
096	1025	MGR-PROF	13287	
096	1060	MGR-PROF	10578	
096	1230	MGR-PROF	7440	DENTAL
096	1230	MGR-PROF	7830	DENTAL
096	1230	MGR-PROF	7115	DENTAL
096	1230	MGR-PROF	3775	DENTAL
096	1230	MGR-PROF	7611	DENTAL
096	1365	MGR-PROF	14115	DENTAL
096	1365	MGR-PROF	9441	DENTAL
096	1440	MGR-PROF	139	DENTAL
096	1440	MGR-PROF	9213	DENTAL
096	1440	MGR-PROF	1250	DENTAL
096	1440	MGR-PROF	11061	DENTAL
096	1675	MGR-PROF	13295	DENTAL

096	1675	MGR-PROF	11605	DENTAL
096	1675	MGR-PROF	14618	DENTAL
120	1755	MGR-PROF	13812	DENTAL
168	1815	MGR-PROF	3555	DENTAL
168	1815	MGR-PROF	10712	DENTAL
168	1815	MGR-PROF	9293	DENTAL
168	1890	MGR-PROF	8658	DENTAL
168	1965	MGR-PROF	10819	DENTAL
168	1965	MGR-PROF	4133	DENTAL
168	1965	MGR-PROF	14135	DENTAL
168	1965	MGR-PROF	12577	DENTAL
180	2040	MGR-PROF	1072	DENTAL
288	2580	MGR-PROF	5808	DENTAL
288	2580	MGR-PROF	8798	DENTAL
288	2580	MGR-PROF	7196	DENTAL
288	2580	MGR-PROF	12217	DENTAL
288	2600	MGR-PROF	1039	DENTAL
288	2600	MGR-PROF	2323	DENTAL
316	2865	MGR-PROF	8596	DENTAL
330	2940	MGR-PROF	12616	DENTAL
330	2940	MGR-PROF	12761	DENTAL
330	2940	MGR-PROF	8828	DENTAL
351	3030	MGR-PROF	5421	DENTAL
351	3030	MGR-PROF	2883	DENTAL
351	3045	MGR-PROF	9177	DENTAL
351	3060	MGR-PROF	3729	DENTAL
351	3060	MGR-PROF	8002	DENTAL
351	3065	MGR-PROF	177	DENTAL
351	3075	MGR-PROF	864	DENTAL
372	3165	MGR-PROF	1911	DENTAL
372	3165	MGR-PROF	2684	DENTAL
372	3165	MGR-PROF	2527	
372	3255	MGR-PROF	13684	DENTAL
372	3255	MGR-PROF	5707	DENTAL
372	3315	MGR-PROF	2324	DENTAL
372	3315	MGR-PROF	5510	DENTAL
372	3315	MGR-PROF	8	DENTAL
372	3390	MGR-PROF	4475	DENTAL
372	3390	MGR-PROF	3669	DENTAL
385	3540	MGR-PROF	3404	
385	3540	MGR-PROF	7841	DENTAL
385	3540	MGR-PROF	10187	DENTAL
385	3540	MGR-PROF	10402	DENTAL
385	3540	MGR-PROF	7330	DENTAL
385	3540	MGR-PROF	6237	DENTAL
385	3540	MGR-PROF	9363	DENTAL
385	3540	MGR-PROF	4546	DENTAL

385	3540	MGR-PROF	4524	DENTAL
385	3540	MGR-PROF	12002	DENTAL
385	3540	MGR-PROF	10775	DENTAL
385	3540	MGR-PROF	10023	DENTAL
396	3615	MGR-PROF	9216	DENTAL
396	3690	MGR-PROF	15173	
420	3840	MGR-PROF	10414	DENTAL
420	3990	MGR-PROF	11852	DENTAL
510	5565	MGR-PROF	12358	DENTAL
510	5565	MGR-PROF	14444	DENTAL
510	5565	MGR-PROF	2656	DENTAL
510	5565	MGR-PROF	1334	DENTAL
510	5580	MGR-PROF	4049	DENTAL
510	5580	MGR-PROF	5035	DENTAL
510	5580	MGR-PROF	10322	DENTAL
510	5580	MGR-PROF	8738	DENTAL
510	5580	MGR-PROF	9517	DENTAL
510	5580	MGR-PROF	10732	DENTAL
510	5580	MGR-PROF	13284	DENTAL
515	6039	MGR-PROF	13569	DENTAL
515	6039	MGR-PROF	11803	DENTAL
515	6039	MGR-PROF	14335	DENTAL
515	6039	MGR-PROF	13714	DENTAL
515	6039	MGR-PROF	14425	DENTAL
515	6039	MGR-PROF	14283	DENTAL
515	6039	MGR-PROF	12952	DENTAL
515	6039	MGR-PROF	9286	DENTAL
515	6039	MGR-PROF	829	DENTAL
515	6039	MGR-PROF	8515	DENTAL
515	6039	MGR-PROF	13798	DENTAL
515	6039	MGR-PROF	9592	DENTAL
515	6040	MGR-PROF	11368	DENTAL
515	6040	MGR-PROF	431	DENTAL
515	6040	MGR-PROF	10093	DENTAL
515	6040	MGR-PROF	12459	DENTAL
515	6040	MGR-PROF	5702	DENTAL
515	6040	MGR-PROF	10377	DENTAL
515	6041	MGR-PROF	11738	DENTAL
515	6042	MGR-PROF	14784	DENTAL
515	6042	MGR-PROF	7569	DENTAL
515	6042	MGR-PROF	4173	DENTAL
515	6042	MGR-PROF	4156	DENTAL
515	6042	MGR-PROF	1825	DENTAL
515	6043	MGR-PROF	1908	DENTAL
515	6043	MGR-PROF	12372	DENTAL
515	6044	MGR-PROF	11040	DENTAL
515	6044	MGR-PROF	11618	DENTAL

515	6045	MGR-PROF	15152	DENTAL
515	6045	MGR-PROF	12431	DENTAL
515	6045	MGR-PROF	11658	DENTAL
515	6046	MGR-PROF	13762	DENTAL
515	6046	MGR-PROF	9054	DENTAL
515	6046	MGR-PROF	4388	DENTAL
515	6048	MGR-PROF	1306	DENTAL
515	6050	MGR-PROF	1776	DENTAL
515	6050	MGR-PROF	14496	DENTAL
515	6050	MGR-PROF	4060	DENTAL
515	6050	MGR-PROF	3324	DENTAL
515	6050	MGR-PROF	6781	DENTAL
515	6050	MGR-PROF	13473	DENTAL
515	6053	MGR-PROF	6193	DENTAL
515	6053	MGR-PROF	7120	DENTAL
515	6053	MGR-PROF	11092	DENTAL
515	6053	MGR-PROF	4200	DENTAL
515	6053	MGR-PROF	2652	DENTAL
515	6053	MGR-PROF	4030	DENTAL
515	6054	MGR-PROF	10883	DENTAL
515	6054	MGR-PROF	7273	DENTAL
515	6054	MGR-PROF	10341	DENTAL
515	6054	MGR-PROF	10062	DENTAL
515	6054	MGR-PROF	7324	DENTAL
515	6054	MGR-PROF	8760	DENTAL
515	6054	MGR-PROF	3784	DENTAL
515	6054	MGR-PROF	1034	DENTAL
515	6054	MGR-PROF	6627	DENTAL
515	6060	MGR-PROF	9859	DENTAL
515	6060	MGR-PROF	14337	DENTAL
515	6060	MGR-PROF	6546	DENTAL
515	6062	MGR-PROF	1452	DENTAL
515	6062	MGR-PROF	10260	DENTAL
515	6062	MGR-PROF	10865	DENTAL
515	6062	MGR-PROF	6996	DENTAL
515	6062	MGR-PROF	7183	DENTAL
515	6062	MGR-PROF	9920	DENTAL
515	6062	MGR-PROF	7102	DENTAL
515	6062	MGR-PROF	1896	DENTAL
515	6062	MGR-PROF	7494	DENTAL
515	6062	MGR-PROF	7819	DENTAL
515	6070	MGR-PROF	1046	DENTAL
515	6070	MGR-PROF	646	
515	6070	MGR-PROF	15069	DENTAL
515	6070	MGR-PROF	7574	DENTAL
515	6072	MGR-PROF	7223	DENTAL
515	6072	MGR-PROF	5857	DENTAL

515	6072	MGR-PROF	1195	DENTAL
515	6073	MGR-PROF	2254	DENTAL
515	6074	MGR-PROF	10261	DENTAL
515	6080	MGR-PROF	11165	DENTAL
520	6130	MGR-PROF	13614	DENTAL
520	6130	MGR-PROF	14071	DENTAL
520	6130	MGR-PROF	14557	DENTAL
520	6130	MGR-PROF	13596	DENTAL
520	6130	MGR-PROF	1086	DENTAL
520	6130	MGR-PROF	13268	DENTAL
520	6130	MGR-PROF	12710	DENTAL
520	6130	MGR-PROF	1376	DENTAL
520	6130	MGR-PROF	10551	DENTAL
520	6130	MGR-PROF	10294	DENTAL
520	6130	MGR-PROF	12713	DENTAL
520	6130	MGR-PROF	12748	DENTAL
520	6130	MGR-PROF	12677	DENTAL
520	6130	MGR-PROF	14615	DENTAL
520	6130	MGR-PROF	10668	DENTAL
520	6130	MGR-PROF	10670	DENTAL
520	6130	MGR-PROF	15070	DENTAL
538	6190	MGR-PROF	5417	DENTAL
538	6315	MGR-PROF	9863	DENTAL
564	6480	MGR-PROF	14396	DENTAL
564	6585	MGR-PROF	9539	DENTAL
564	6695	MGR-PROF	14408	DENTAL
612	6915	MGR-PROF	5627	DENTAL
648	6990	MGR-PROF	4554	DENTAL
648	6990	MGR-PROF	12401	DENTAL
684	7665	MGR-PROF	14029	DENTAL
684	7665	MGR-PROF	14172	DENTAL
684	7665	MGR-PROF	9492	DENTAL
684	7665	MGR-PROF	14456	DENTAL
684	7665	MGR-PROF	14597	DENTAL
684	7665	MGR-PROF	11073	DENTAL
684	7665	MGR-PROF	14849	DENTAL
696	7730	MGR-PROF	11186	DENTAL
696	7730	MGR-PROF	12018	DENTAL
696	7740	MGR-PROF	7984	DENTAL
696	7740	MGR-PROF	1905	DENTAL
696	7740	MGR-PROF	3809	DENTAL
696	7740	MGR-PROF	15078	DENTAL
696	7745	MGR-PROF	13416	DENTAL
696	7810	MGR-PROF	3725	DENTAL
696	7810	MGR-PROF	12509	DENTAL
696	7840	MGR-PROF	6072	DENTAL
720	7890	MGR-PROF	13288	DENTAL

795	8355	MGR-PROF	8365	DENTAL
795	8355	MGR-PROF	1135	DENTAL
795	8355	MGR-PROF	4582	DENTAL
795	8355	MGR-PROF	15166	
795	8355	MGR-PROF	12124	DENTAL
795	8355	MGR-PROF	15068	DENTAL
795	8355	MGR-PROF	2064	DENTAL
795	8355	MGR-PROF	4585	DENTAL
795	8355	MGR-PROF	14177	DENTAL
795	8355	MGR-PROF	9364	DENTAL
795	8355	MGR-PROF	10363	DENTAL
795	8675	MGR-PROF	1798	DENTAL
820	8790	MGR-PROF	11757	DENTAL
820	8790	MGR-PROF	9235	DENTAL
820	8790	MGR-PROF	6831	DENTAL
820	8790	MGR-PROF	14822	DENTAL
820	8790	MGR-PROF	12823	DENTAL
820	8865	MGR-PROF	5409	DENTAL
820	8865	MGR-PROF	1045	DENTAL
820	8940	MGR-PROF	85	DENTAL
820	9015	MGR-PROF	12350	DENTAL
820	9090	MGR-PROF	14276	DENTAL
820	9090	MGR-PROF	14543	DENTAL
820	9090	MGR-PROF	14090	DENTAL
820	9090	MGR-PROF	12716	DENTAL
820	9090	MGR-PROF	12605	DENTAL
820	9090	MGR-PROF	12004	DENTAL
820	9090	MGR-PROF	11674	DENTAL
820	9090	MGR-PROF	14019	
024	0165	PROF-REP	14377	DENTAL
055	0700	PROF-REP	11880	
055	0700	PROF-REP	1379	DENTAL
055	0700	PROF-REP	14067	DENTAL
060	0765	PROF-REP	14455	DENTAL
096	0915	PROF-REP	9547	DENTAL
096	1230	PROF-REP	7392	DENTAL
096	1230	PROF-REP	8136	DENTAL
096	1230	PROF-REP	12385	DENTAL
096	1365	PROF-REP	1402	DENTAL
096	1365	PROF-REP	2194	DENTAL
096	1365	PROF-REP	12869	DENTAL
096	1365	PROF-REP	9813	DENTAL
096	1365	PROF-REP	11927	DENTAL
096	1440	PROF-REP	9226	DENTAL
096	1440	PROF-REP	4055	DENTAL
096	1440	PROF-REP	12384	DENTAL
096	1440	PROF-REP	14436	DENTAL

096	1440	PROF-REP	5390	DENTAL
096	1440	PROF-REP	1890	DENTAL
096	1440	PROF-REP	3252	DENTAL
096	1440	PROF-REP	12128	DENTAL
096	1440	PROF-REP	12923	DENTAL
096	1440	PROF-REP	4549	DENTAL
096	1440	PROF-REP	6260	DENTAL
096	1440	PROF-REP	14725	DENTAL
096	1440	PROF-REP	5791	DENTAL
096	1440	PROF-REP	14585	DENTAL
096	1440	PROF-REP	10334	DENTAL
096	1440	PROF-REP	10690	DENTAL
096	1440	PROF-REP	13670	DENTAL
096	1440	PROF-REP	1299	DENTAL
096	1440	PROF-REP	11606	DENTAL
096	1440	PROF-REP	2204	DENTAL
096	1440	PROF-REP	196	DENTAL
096	1440	PROF-REP	14193	
096	1440	PROF-REP	12315	DENTAL
096	1440	PROF-REP	13695	DENTAL
096	1440	PROF-REP	7028	DENTAL
096	1440	PROF-REP	9774	DENTAL
096	1440	PROF-REP	10937	DENTAL
096	1440	PROF-REP	13280	
096	1440	PROF-REP	11304	DENTAL
096	1440	PROF-REP	2969	
096	1440	PROF-REP	13270	DENTAL
096	1440	PROF-REP	12025	DENTAL
096	1440	PROF-REP	13671	DENTAL
096	1440	PROF-REP	14400	DENTAL
096	1440	PROF-REP	14734	DENTAL
096	1440	PROF-REP	14138	DENTAL
096	1440	PROF-REP	11865	DENTAL
096	1440	PROF-REP	12838	DENTAL
096	1590	PROF-REP	7652	DENTAL
096	1590	PROF-REP	10491	DENTAL
096	1590	PROF-REP	13602	DENTAL
288	2580	PROF-REP	13723	DENTAL
330	2940	PROF-REP	8520	DENTAL
330	2940	PROF-REP	14827	DENTAL
330	2940	PROF-REP	14570	DENTAL
330	2940	PROF-REP	14113	DENTAL
330	2940	PROF-REP	11939	DENTAL
330	2940	PROF-REP	12875	DENTAL
330	2940	PROF-REP	7095	DENTAL
330	2940	PROF-REP	13560	DENTAL
330	2940	PROF-REP	13040	DENTAL

330	2940	PROF-REP	11642	DENTAL
330	2940	PROF-REP	12150	DENTAL
372	3165	PROF-REP	10323	DENTAL
372	3165	PROF-REP	8865	DENTAL
372	3255	PROF-REP	4984	DENTAL
372	3255	PROF-REP	14102	DENTAL
372	3255	PROF-REP	8098	DENTAL
372	3315	PROF-REP	1941	
372	3315	PROF-REP	10251	DENTAL
372	3315	PROF-REP	5502	DENTAL
372	3315	PROF-REP	3010	DENTAL
372	3315	PROF-REP	764	DENTAL
372	3315	PROF-REP	4602	DENTAL
372	3315	PROF-REP	6462	DENTAL
372	3315	PROF-REP	12433	DENTAL
372	3390	PROF-REP	11390	DENTAL
385	3540	PROF-REP	10831	DENTAL
385	3540	PROF-REP	10787	
385	3540	PROF-REP	11269	DENTAL
385	3540	PROF-REP	10610	DENTAL
385	3560	PROF-REP	1945	DENTAL
396	3615	PROF-REP	2242	DENTAL
396	3615	PROF-REP	9108	DENTAL
396	3765	PROF-REP	14567	DENTAL
515	6039	PROF-REP	14534	DENTAL
515	6039	PROF-REP	10969	DENTAL
515	6039	PROF-REP	11736	DENTAL
515	6039	PROF-REP	14423	DENTAL
515	6039	PROF-REP	12364	DENTAL
515	6039	PROF-REP	12316	DENTAL
515	6039	PROF-REP	14611	DENTAL
515	6039	PROF-REP	13437	DENTAL
515	6039	PROF-REP	14905	DENTAL
515	6039	PROF-REP	15168	
515	6039	PROF-REP	10487	DENTAL
515	6039	PROF-REP	12853	DENTAL
515	6041	PROF-REP	12920	DENTAL
515	6041	PROF-REP	15080	DENTAL
515	6041	PROF-REP	11766	DENTAL
515	6041	PROF-REP	14745	DENTAL
515	6042	PROF-REP	11870	DENTAL
515	6042	PROF-REP	11610	DENTAL
515	6042	PROF-REP	11856	DENTAL
515	6042	PROF-REP	11634	DENTAL
515	6042	PROF-REP	11881	DENTAL
515	6042	PROF-REP	12313	DENTAL
515	6042	PROF-REP	13595	DENTAL

515	6042	PROF-REP	11877	DENTAL
515	6042	PROF-REP	11635	DENTAL
515	6042	PROF-REP	11637	DENTAL
515	6042	PROF-REP	13897	DENTAL
515	6042	PROF-REP	12892	DENTAL
515	6042	PROF-REP	14220	DENTAL
515	6042	PROF-REP	12685	DENTAL
515	6042	PROF-REP	13894	DENTAL
515	6042	PROF-REP	11794	DENTAL
515	6042	PROF-REP	11624	DENTAL
515	6042	PROF-REP	15076	DENTAL
515	6042	PROF-REP	13140	DENTAL
515	6042	PROF-REP	11859	DENTAL
515	6042	PROF-REP	7818	DENTAL
515	6042	PROF-REP	11644	DENTAL
515	6042	PROF-REP	11860	DENTAL
515	6042	PROF-REP	6632	DENTAL
515	6042	PROF-REP	11871	DENTAL
515	6042	PROF-REP	11883	DENTAL
515	6042	PROF-REP	9004	DENTAL
515	6042	PROF-REP	11625	DENTAL
515	6042	PROF-REP	13900	DENTAL
515	6042	PROF-REP	11876	DENTAL
515	6042	PROF-REP	11614	DENTAL
515	6042	PROF-REP	11793	DENTAL
515	6042	PROF-REP	12123	DENTAL
515	6042	PROF-REP	12121	DENTAL
515	6042	PROF-REP	11647	DENTAL
515	6042	PROF-REP	11884	DENTAL
515	6043	PROF-REP	12624	DENTAL
515	6045	PROF-REP	14552	DENTAL
515	6046	PROF-REP	13768	DENTAL
515	6046	PROF-REP	14370	DENTAL
515	6048	PROF-REP	7442	DENTAL
515	6048	PROF-REP	11765	DENTAL
515	6050	PROF-REP	2611	DENTAL
515	6062	PROF-REP	12973	
515	6070	PROF-REP	401	DENTAL
515	6071	PROF-REP	11975	DENTAL
515	6080	PROF-REP	15151	DENTAL
515	6080	PROF-REP	12218	DENTAL
515	6080	PROF-REP	10534	DENTAL
515	6080	PROF-REP	10149	DENTAL
520	6130	PROF-REP	10540	DENTAL
520	6130	PROF-REP	10541	DENTAL
520	6130	PROF-REP	10542	DENTAL
520	6130	PROF-REP	11026	DENTAL

520	6130	PROF-REP	10553	DENTAL
520	6130	PROF-REP	11347	DENTAL
520	6130	PROF-REP	14391	DENTAL
520	6130	PROF-REP	10545	DENTAL
520	6130	PROF-REP	12335	DENTAL
520	6130	PROF-REP	4114	DENTAL
520	6130	PROF-REP	14472	DENTAL
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520	6130	PROF-REP	11316	DENTAL
520	6130	PROF-REP	13116	DENTAL
520	6130	PROF-REP	13523	DENTAL
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520	6130	PROF-REP	7134	DENTAL
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520	6130	PROF-REP	14079	DENTAL
520	6130	PROF-REP	13397	DENTAL
520	6130	PROF-REP	13036	DENTAL
520	6130	PROF-REP	10291	DENTAL
520	6130	PROF-REP	14009	DENTAL
520	6130	PROF-REP	10509	DENTAL
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520	6130	PROF-REP	13598	DENTAL
520	6130	PROF-REP	10552	DENTAL
520	6130	PROF-REP	1339	DENTAL
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520	6130	PROF-REP	2679	DENTAL
520	6130	PROF-REP	12044	DENTAL
520	6130	PROF-REP	11093	DENTAL
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520	6130	PROF-REP	14782	DENTAL
520	6130	PROF-REP	10565	DENTAL
520	6130	PROF-REP	14825	DENTAL
520	6130	PROF-REP	8858	DENTAL
520	6130	PROF-REP	6511	DENTAL
520	6130	PROF-REP	14068	DENTAL
520	6130	PROF-REP	7634	DENTAL
520	6130	PROF-REP	14601	
520	6130	PROF-REP	14478	DENTAL

520	6130	PROF-REP	8896	DENTAL
520	6130	PROF-REP	14491	DENTAL
520	6130	PROF-REP	12900	DENTAL
520	6130	PROF-REP	10567	DENTAL
520	6130	PROF-REP	12207	DENTAL
520	6130	PROF-REP	10555	DENTAL
538	6190	PROF-REP	2302	DENTAL
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538	6190	PROF-REP	8797	DENTAL
538	6190	PROF-REP	7335	DENTAL
538	6205	PROF-REP	202	DENTAL
538	6205	PROF-REP	7288	DENTAL
538	6205	PROF-REP	7908	DENTAL
538	6205	PROF-REP	9265	DENTAL
538	6205	PROF-REP	1143	DENTAL
538	6315	PROF-REP	7640	DENTAL
538	6315	PROF-REP	8554	DENTAL
538	6315	PROF-REP	5823	DENTAL
538	6315	PROF-REP	9831	DENTAL
538	6315	PROF-REP	7168	DENTAL
538	6315	PROF-REP	8807	DENTAL
552	6390	PROF-REP	1920	DENTAL
552	6390	PROF-REP	3018	DENTAL
552	6390	PROF-REP	10176	DENTAL
564	6480	PROF-REP	12224	DENTAL
564	6480	PROF-REP	9720	DENTAL
564	6480	PROF-REP	6868	DENTAL
564	6705	PROF-REP	12609	DENTAL
648	7140	PROF-REP	13649	DENTAL
684	7665	PROF-REP	14171	DENTAL
684	7665	PROF-REP	14397	DENTAL
684	7665	PROF-REP	14354	DENTAL
696	7730	PROF-REP	14274	DENTAL
696	7730	PROF-REP	3392	DENTAL
696	7730	PROF-REP	4074	DENTAL
696	7730	PROF-REP	12729	DENTAL
696	7730	PROF-REP	13703	DENTAL
696	7730	PROF-REP	12939	DENTAL
696	7740	PROF-REP	11198	DENTAL
696	7740	PROF-REP	10225	DENTAL
696	7740	PROF-REP	10073	DENTAL
696	7740	PROF-REP	12953	DENTAL
696	7740	PROF-REP	13624	DENTAL
696	7740	PROF-REP	9591	DENTAL
696	7750	PROF-REP	12547	
696	7750	PROF-REP	13362	DENTAL
696	7750	PROF-REP	8615	DENTAL

696	7750	PROF-REP	12954	DENTAL
696	7750	PROF-REP	530	DENTAL
696	7750	PROF-REP	14092	DENTAL
696	7750	PROF-REP	8497	DENTAL
696	7750	PROF-REP	9601	DENTAL
696	7810	PROF-REP	931	DENTAL
696	7810	PROF-REP	12855	DENTAL
696	7810	PROF-REP	12561	DENTAL
696	7810	PROF-REP	12550	DENTAL
696	7810	PROF-REP	1016	DENTAL
696	7810	PROF-REP	14582	DENTAL
696	7810	PROF-REP	13959	DENTAL
696	7810	PROF-REP	3045	DENTAL
696	7810	PROF-REP	13017	DENTAL
720	7890	PROF-REP	14650	DENTAL
795	8355	PROF-REP	7666	DENTAL
795	8675	PROF-REP	8621	DENTAL
795	8675	PROF-REP	9846	DENTAL
795	8675	PROF-REP	3748	DENTAL
795	8675	PROF-REP	11374	DENTAL
820	8790	PROF-REP	14401	DENTAL
820	8790	PROF-REP	14126	
820	9090	PROF-REP	7314	DENTAL
288	2580	SW-2634	14720	
288	2715	SW-2634	1862	DENTAL
288	2715	SW-2634	14214	DENTAL
288	2715	SW-2634	9851	DENTAL
288	2715	SW-2634	13479	DENTAL
288	2715	SW-2634	11796	DENTAL
288	2730	SW-2634	3245	DENTAL
316	2865	SW-2634	14498	DENTAL
316	2865	SW-2634	11677	DENTAL
316	2865	SW-2634	12961	DENTAL
316	2865	SW-2634	12014	DENTAL
316	2865	SW-2634	4586	DENTAL
316	2865	SW-2634	9763	DENTAL
316	2865	SW-2634	8161	DENTAL
316	2865	SW-2634	12983	DENTAL
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351	3060	SW-2634	3405	DENTAL
351	3060	SW-2634	12031	DENTAL
351	3060	SW-2634	12219	DENTAL
351	3060	SW-2634	14652	DENTAL

351	3060	SW-2634	2319	DENTAL
351	3060	SW-2634	10925	DENTAL
351	3060	SW-2634	1741	DENTAL
351	3060	SW-2634	3693	DENTAL
351	3065	SW-2634	12839	DENTAL
351	3065	SW-2634	13358	DENTAL
351	3065	SW-2634	10984	DENTAL
351	3065	SW-2634	12896	DENTAL
351	3075	SW-2634	2441	DENTAL
351	3075	SW-2634	13713	DENTAL
351	3075	SW-2634	14303	DENTAL
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372	3315	SW-2634	12221	DENTAL
372	3315	SW-2634	14566	DENTAL
372	3315	SW-2634	11804	DENTAL
372	3315	SW-2634	13306	DENTAL
420	3840	SW-2634	8418	DENTAL
420	3840	SW-2634	13585	DENTAL
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420	3840	SW-2634	5215	DENTAL
420	3840	SW-2634	13852	DENTAL
420	3840	SW-2634	10729	DENTAL
420	4065	SW-2634	3765	DENTAL
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510	5580	SW-2634	2160	DENTAL
510	5580	SW-2634	400	DENTAL
510	5580	SW-2634	12810	DENTAL
510	5580	SW-2634	13436	DENTAL
510	5580	SW-2634	13354	DENTAL
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515	6043	SW-2634	9855	DENTAL
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515	6044	SW-2634	11845	DENTAL
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515	6044	SW-2634	6684	DENTAL
515	6044	SW-2634	12964	DENTAL
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515	6044	SW-2634	3801	
515	6044	SW-2634	7261	DENTAL
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515	6045	SW-2634	12087	DENTAL
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515	6045	SW-2634	170	DENTAL
515	6045	SW-2634	5438	DENTAL
515	6045	SW-2634	11149	DENTAL
515	6045	SW-2634	12568	DENTAL
515	6046	SW-2634	15158	
515	6046	SW-2634	14878	DENTAL
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515	6046	SW-2634	13500	DENTAL
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515	6053	SW-2634	10399	DENTAL
515	6053	SW-2634	7308	DENTAL

515	6053	SW-2634	7816	DENTAL
515	6053	SW-2634	14100	DENTAL
515	6053	SW-2634	15123	DENTAL
515	6053	SW-2634	11399	DENTAL
515	6053	SW-2634	10646	DENTAL
515	6053	SW-2634	11440	DENTAL
515	6053	SW-2634	1773	DENTAL
515	6053	SW-2634	8825	DENTAL
515	6053	SW-2634	7757	DENTAL
515	6053	SW-2634	12932	DENTAL
515	6053	SW-2634	14753	DENTAL
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515	6053	SW-2634	8255	DENTAL
515	6053	SW-2634	8397	DENTAL
515	6053	SW-2634	6997	DENTAL
515	6053	SW-2634	1480	DENTAL
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515	6053	SW-2634	9285	DENTAL
515	6053	SW-2634	7046	DENTAL
515	6053	SW-2634	9974	DENTAL
515	6053	SW-2634	5423	DENTAL
515	6053	SW-2634	14819	DENTAL
515	6053	SW-2634	9201	DENTAL
515	6053	SW-2634	12071	
515	6053	SW-2634	7831	DENTAL
515	6053	SW-2634	1701	DENTAL
515	6053	SW-2634	13851	DENTAL
515	6053	SW-2634	5403	DENTAL
515	6053	SW-2634	6998	DENTAL
515	6053	SW-2634	11894	DENTAL
515	6053	SW-2634	14477	DENTAL
515	6053	SW-2634	5017	DENTAL
515	6053	SW-2634	10970	DENTAL
515	6053	SW-2634	12222	DENTAL
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515	6054	SW-2634	7110	DENTAL
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515	6054	SW-2634	14747	DENTAL
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515	6054	SW-2634	7810	DENTAL
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515	6054	SW-2634	14551	DENTAL
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515	6054	SW-2634	11202	DENTAL
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515	6072	SW-2634	6545	DENTAL
515	6072	SW-2634	14571	DENTAL
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515	6072	SW-2634	7963	DENTAL
515	6072	SW-2634	8936	DENTAL
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515	6072	SW-2634	9741	DENTAL
515	6072	SW-2634	9946	DENTAL
515	6072	SW-2634	8404	DENTAL
515	6072	SW-2634	12494	DENTAL
515	6072	SW-2634	3573	DENTAL
515	6072	SW-2634	5391	DENTAL
515	6072	SW-2634	313	DENTAL
515	6072	SW-2634	10879	DENTAL
515	6072	SW-2634	2578	DENTAL
515	6072	SW-2634	14378	DENTAL
515	6072	SW-2634	6653	DENTAL
515	6073	SW-2634	2247	DENTAL
515	6073	SW-2634	5376	DENTAL
515	6073	SW-2634	2945	DENTAL
515	6073	SW-2634	3049	DENTAL
515	6073	SW-2634	6610	DENTAL
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515	6073	SW-2634	705	DENTAL
515	6073	SW-2634	12163	DENTAL
515	6073	SW-2634	4526	DENTAL
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515	6074	SW-2634	6250	DENTAL
515	6074	SW-2634	8439	DENTAL
515	6074	SW-2634	12931	DENTAL
096	1050	TRADES	15154	

096	1145	TRADES	14497	DENTAL
096	1145	TRADES	9981	DENTAL
096	1145	TRADES	10104	DENTAL
096	1145	TRADES	14398	DENTAL
096	1145	TRADES	5022	DENTAL
096	1145	TRADES	9268	DENTAL
648	7140	TRADES	14027	DENTAL
820	8940	TRADES	11590	DENTAL
820	8940	TRADES	9561	DENTAL
820	8940	TRADES	12270	DENTAL
820	8940	TRADES	12937	DENTAL
820	9090	TRADES	11162	DENTAL
820	9090	TRADES	12505	DENTAL
510	5580	UPQHC-1199	10632	DENTAL
510	5580	UPQHC-1199	10387	
510	5580	UPQHC-1199	10521	DENTAL
510	5580	UPQHC-1199	15065	
510	5580	UPQHC-1199	13640	
510	5580	UPQHC-1199	15160	
510	5580	UPQHC-1199	12816	
510	5580	UPQHC-1199	11075	DENTAL
510	5580	UPQHC-1199	6181	
510	5580	UPQHC-1199	13391	
510	5580	UPQHC-1199	11077	DENTAL
510	5580	UPQHC-1199	15161	
510	5580	UPQHC-1199	14010	
510	5580	UPQHC-1199	10653	DENTAL
510	5580	UPQHC-1199	10684	
510	5580	UPQHC-1199	14979	
510	5580	UPQHC-1199	10308	DENTAL
510	5580	UPQHC-1199	13619	DENTAL
510	5580	UPQHC-1199	7478	DENTAL
510	5580	UPQHC-1199	12119	DENTAL
510	5580	UPQHC-1199	7064	DENTAL
510	5580	UPQHC-1199	11279	
510	5580	UPQHC-1199	12813	DENTAL
510	5580	UPQHC-1199	9944	DENTAL
510	5580	UPQHC-1199	13842	
510	5580	UPQHC-1199	8528	DENTAL
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510	5580	UPQHC-1199	11365	DENTAL
510	5580	UPQHC-1199	7112	
510	5580	UPQHC-1199	7101	DENTAL
510	5580	UPQHC-1199	11711	DENTAL
510	5580	UPQHC-1199	11824	DENTAL
510	5580	UPQHC-1199	11706	DENTAL
510	5580	UPQHC-1199	10779	DENTAL

520	6130	UPQHC-1199	14776	DENTAL
520	6130	UPQHC-1199	14542	DENTAL
520	6130	UPQHC-1199	14357	DENTAL
520	6130	UPQHC-1199	14361	DENTAL
520	6130	UPQHC-1199	13337	DENTAL
520	6130	UPQHC-1199	1813	DENTAL
520	6130	UPQHC-1199	11791	DENTAL
520	6130	UPQHC-1199	14176	DENTAL
520	6130	UPQHC-1199	14033	DENTAL
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520	6130	UPQHC-1199	10826	DENTAL
520	6130	UPQHC-1199	12922	DENTAL
520	6130	UPQHC-1199	14007	DENTAL
520	6130	UPQHC-1199	10265	DENTAL
520	6130	UPQHC-1199	14008	DENTAL
520	6130	UPQHC-1199	13339	DENTAL
520	6130	UPQHC-1199	12422	DENTAL
520	6130	UPQHC-1199	13709	DENTAL
520	6130	UPQHC-1199	14677	DENTAL
520	6130	UPQHC-1199	8479	DENTAL
520	6130	UPQHC-1199	10271	DENTAL
520	6130	UPQHC-1199	10301	DENTAL
520	6130	UPQHC-1199	10275	DENTAL
520	6130	UPQHC-1199	10276	DENTAL
520	6130	UPQHC-1199	14512	DENTAL
520	6130	UPQHC-1199	14467	DENTAL
520	6130	UPQHC-1199	10279	DENTAL
520	6130	UPQHC-1199	14548	DENTAL
520	6130	UPQHC-1199	10281	DENTAL
520	6130	UPQHC-1199	13712	DENTAL
520	6130	UPQHC-1199	10282	
520	6130	UPQHC-1199	14025	DENTAL
520	6130	UPQHC-1199	10288	DENTAL
520	6130	UPQHC-1199	14826	DENTAL
520	6130	UPQHC-1199	13285	DENTAL
520	6130	UPQHC-1199	14761	DENTAL
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372	3165	WPPA-NONSUPV	10111	DENTAL
372	3165	WPPA-NONSUPV	13241	DENTAL
372	3165	WPPA-NONSUPV	12829	DENTAL
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372	3165	WPPA-NONSUPV	12831	DENTAL
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372	3165	WPPA-NONSUPV	217	DENTAL
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372	3165	WPPA-NONSUPV	13247	DENTAL
372	3165	WPPA-NONSUPV	13328	DENTAL
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372	3165	WPPA-NONSUPV	13486	DENTAL
372	3165	WPPA-NONSUPV	11495	DENTAL
372	3165	WPPA-NONSUPV	13248	DENTAL
372	3165	WPPA-NONSUPV	12951	DENTAL
372	3255	WPPA-NONSUPV	11348	DENTAL
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372	3255	WPPA-NONSUPV	5883	DENTAL
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372	3255	WPPA-NONSUPV	8911	DENTAL
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372	3255	WPPA-NONSUPV	4869	DENTAL
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372	3255	WPPA-NONSUPV	518	DENTAL
372	3255	WPPA-NONSUPV	5473	DENTAL
372	3255	WPPA-NONSUPV	9376	DENTAL
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372	3255	WPPA-NONSUPV	1889	DENTAL
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372	3255	WPPA-NONSUPV	12050	DENTAL
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372	3255	WPPA-NONSUPV	6826	DENTAL
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372	3315	WPPA-NONSUPV	7837	DENTAL
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372	3390	WPPA-NONSUPV	11688	DENTAL
372	3390	WPPA-NONSUPV	4579	DENTAL

372	3390	WPPA-NONSUPV	2225	DENTAL
372	3390	WPPA-NONSUPV	12403	
372	3390	WPPA-NONSUPV	4620	DENTAL
372	3390	WPPA-NONSUPV	3818	DENTAL
372	3390	WPPA-NONSUPV	5051	DENTAL
372	3390	WPPA-NONSUPV	240	DENTAL
372	3390	WPPA-NONSUPV	9967	
372	3390	WPPA-NONSUPV	5649	DENTAL
372	3390	WPPA-NONSUPV	4966	DENTAL
372	3390	WPPA-NONSUPV	8280	DENTAL
372	3390	WPPA-NONSUPV	9781	DENTAL
372	3390	WPPA-NONSUPV	7577	DENTAL
372	3390	WPPA-NONSUPV	8039	DENTAL
372	3390	WPPA-NONSUPV	1938	DENTAL
372	3390	WPPA-NONSUPV	2339	DENTAL
372	3390	WPPA-NONSUPV	11355	DENTAL
372	3390	WPPA-NONSUPV	12186	DENTAL
372	3390	WPPA-NONSUPV	7406	DENTAL
372	3390	WPPA-NONSUPV	7154	DENTAL
372	3390	WPPA-NONSUPV	8237	DENTAL
372	3390	WPPA-NONSUPV	2999	DENTAL
372	3390	WPPA-NONSUPV	10258	DENTAL
372	3390	WPPA-NONSUPV	10772	DENTAL
372	3390	WPPA-NONSUPV	8448	DENTAL
372	3390	WPPA-NONSUPV	7845	DENTAL
372	3390	WPPA-NONSUPV	12268	DENTAL
372	3390	WPPA-NONSUPV	12305	DENTAL
372	3390	WPPA-NONSUPV	12834	DENTAL
372	3390	WPPA-NONSUPV	10042	DENTAL
372	3390	WPPA-NONSUPV	4552	DENTAL
372	3390	WPPA-NONSUPV	9094	DENTAL
372	3390	WPPA-NONSUPV	12410	DENTAL
372	3390	WPPA-NONSUPV	9969	DENTAL
372	3390	WPPA-NONSUPV	2314	DENTAL
372	3390	WPPA-NONSUPV	9867	DENTAL
372	3390	WPPA-NONSUPV	3243	DENTAL
372	3390	WPPA-NONSUPV	9868	DENTAL
372	3390	WPPA-NONSUPV	7737	DENTAL
372	3390	WPPA-NONSUPV	6197	DENTAL
372	3390	WPPA-NONSUPV	9180	DENTAL
372	3390	WPPA-NONSUPV	1431	DENTAL
372	3390	WPPA-NONSUPV	9972	DENTAL
372	3390	WPPA-NONSUPV	2217	DENTAL
372	3390	WPPA-NONSUPV	1085	DENTAL
372	3390	WPPA-NONSUPV	2539	DENTAL
372	3395	WPPA-NONSUPV	6514	DENTAL
372	3395	WPPA-NONSUPV	8233	DENTAL

372	3395	WPPA-NONSUPV	2657	DENTAL
372	3395	WPPA-NONSUPV	8767	DENTAL
372	3165	WPPA-SUPV	1125	DENTAL
372	3165	WPPA-SUPV	8624	DENTAL
372	3165	WPPA-SUPV	4405	DENTAL
372	3165	WPPA-SUPV	8915	DENTAL
372	3165	WPPA-SUPV	2677	DENTAL
372	3165	WPPA-SUPV	11712	DENTAL
372	3255	WPPA-SUPV	3329	DENTAL
372	3255	WPPA-SUPV	3724	DENTAL
372	3255	WPPA-SUPV	2334	DENTAL
372	3255	WPPA-SUPV	6263	DENTAL
372	3255	WPPA-SUPV	3627	DENTAL
372	3315	WPPA-SUPV	271	DENTAL
372	3315	WPPA-SUPV	6729	DENTAL
372	3315	WPPA-SUPV	9204	DENTAL
372	3315	WPPA-SUPV	5358	DENTAL
372	3315	WPPA-SUPV	12827	DENTAL
372	3315	WPPA-SUPV	12183	DENTAL
372	3315	WPPA-SUPV	5396	DENTAL
372	3315	WPPA-SUPV	3325	DENTAL
372	3315	WPPA-SUPV	8913	DENTAL
372	3315	WPPA-SUPV	7348	DENTAL
372	3315	WPPA-SUPV	4066	DENTAL
372	3315	WPPA-SUPV	1891	DENTAL
372	3315	WPPA-SUPV	12047	DENTAL
372	3315	WPPA-SUPV	10949	DENTAL
372	3315	WPPA-SUPV	12736	DENTAL
372	3315	WPPA-SUPV	5052	DENTAL
372	3315	WPPA-SUPV	423	DENTAL
372	3315	WPPA-SUPV	9586	DENTAL
372	3315	WPPA-SUPV	9790	DENTAL
372	3315	WPPA-SUPV	4545	
372	3390	WPPA-SUPV	2218	DENTAL
372	3390	WPPA-SUPV	10268	DENTAL
372	3390	WPPA-SUPV	5287	
372	3390	WPPA-SUPV	9083	DENTAL
372	3390	WPPA-SUPV	11687	DENTAL
372	3390	WPPA-SUPV	9584	DENTAL
372	3390	WPPA-SUPV	9091	DENTAL
372	3390	WPPA-SUPV	8042	DENTAL
372	3390	WPPA-SUPV	11323	DENTAL
372	3390	WPPA-SUPV	9968	DENTAL
372	3390	WPPA-SUPV	3362	DENTAL
372	3390	WPPA-SUPV	7557	DENTAL
372	3390	WPPA-SUPV	1364	DENTAL
372	3390	WPPA-SUPV	5865	DENTAL

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COUNTY OF DANE
Retiree Dental Enrollment

Members Eligible as of 03/18/2021

Report Run Date: 3/18/21

Member Number	Dependent Number	Member Relationship	Current Rate Description	Current Rate Description	Member Birth Date
8000058471	1	Subscriber	Self	Self	August-43
8000064790	1	Subscriber	Self + Spouse	Self + Spouse	October-51
8000064790	2	Spouse	Self + Spouse	Self + Spouse	April-49
8000206004	1	Subscriber	Self	Self	September-46
8000314854	1	Subscriber	Self	Self	March-37
8000319962	1	Subscriber	Self	Self	March-42
8000327258	1	Subscriber	Self + Spouse	Self + Spouse	June-37
8000327258	2	Spouse	Self + Spouse	Self + Spouse	August-40
8000458573	1	Subscriber	Self + Spouse	Self + Spouse	February-54
8000458573	2	Spouse	Self + Spouse	Self + Spouse	January-53
8000559764	1	Subscriber	Self	Self	October-44
8000591320	1	Subscriber	Self	Self	February-36
8000596684	1	Subscriber	Self + Spouse	Self + Spouse	December-53
8000596684	2	Spouse	Self + Spouse	Self + Spouse	August-58
8000645583	1	Subscriber	Self + Spouse	Self + Spouse	October-53
8000645583	2	Spouse	Self + Spouse	Self + Spouse	November-51
8000762075	1	Subscriber	Self	Self	January-50
8000798228	1	Subscriber	Self + Spouse	Self + Spouse	February-50
8000798228	2	Spouse	Self + Spouse	Self + Spouse	July-46
8001120762	1	Subscriber	Self	Self	January-40
8001223252	1	Subscriber	Self	Self	December-48
8001239678	1	Subscriber	Self	Self	September-53
8001556677	1	Subscriber	Self + Spouse	Self + Spouse	May-52
8001556677	2	Spouse	Self + Spouse	Self + Spouse	September-45

8001768130	1	Subscriber	Self	Self	January-53
8001785107	1	Subscriber	Self + Spouse	Self + Spouse	October-48
8001785107	2	Spouse	Self + Spouse	Self + Spouse	August-47
8001969829	1	Subscriber	Self + Spouse	Self + Spouse	July-45
8001969829	2	Spouse	Self + Spouse	Self + Spouse	September-44
8002160252	1	Subscriber	Self + Spouse	Self + Spouse	December-61
8002160252	2	Spouse	Self + Spouse	Self + Spouse	April-59
8002328974	1	Subscriber	Self	Self	August-54
8002369637	1	Subscriber	Self	Self	August-53
8002437590	1	Subscriber	Self + Spouse	Self + Spouse	July-41
8002437590	2	Spouse	Self + Spouse	Self + Spouse	August-47
8002440699	1	Subscriber	Self + Spouse	Self + Spouse	June-47
8002440699	2	Spouse	Self + Spouse	Self + Spouse	June-47
8002565593	1	Subscriber	Self	Self	September-58
8002669807	1	Subscriber	Self	Self	November-51
8003117267	1	Subscriber	Self	Self	February-41
8003341727	1	Subscriber	Self + Spouse	Self + Spouse	March-51
8003341727	2	Spouse	Self + Spouse	Self + Spouse	March-51
8003353333	1	Subscriber	Self + Spouse	Self + Spouse	November-62
8003353333	2	Spouse	Self + Spouse	Self + Spouse	October-61
8003381584	1	Subscriber	Self + Spouse	Self + Spouse	May-54
8003381584	2	Spouse	Self + Spouse	Self + Spouse	February-55
8003468538	1	Subscriber	Self	Self	March-50
8003518363	1	Subscriber	Self + Family	Self + Family	September-62
8003518363	2	Spouse	Self + Family	Self + Family	July-61
8003518363	3	Child	Self + Family	Self + Family	October-96
8003518363	4	Child	Self + Family	Self + Family	June-00
8003539927	1	Subscriber	Self	Self	February-59
8003677632	1	Subscriber	Self	Self	October-50
8003701375	1	Subscriber	Self	Self	August-33
8003740288	1	Subscriber	Self	Self	February-54
8003818753	1	Subscriber	Self + Family	Self + Family	June-66
8003818753	2	Spouse	Self + Family	Self + Family	August-66

8003818753	3	Child	Self + Family	Self + Family	January-00
8003818753	4	Child	Self + Family	Self + Family	October-02
8004821956	1	Subscriber	Self	Self	November-44
8004830803	1	Subscriber	Self	Self	December-53
8004872238	1	Subscriber	Self	Self	July-53
8004896023	1	Subscriber	Self	Self	December-50
8004927941	1	Subscriber	Self + Spouse	Self + Spouse	February-52
8004927941	2	Spouse	Self + Spouse	Self + Spouse	November-49
8004941567	1	Subscriber	Self	Self	December-47
8005316613	1	Subscriber	Self	Self	June-29
8005341218	1	Subscriber	Self	Self	August-47
8005430552	1	Subscriber	Self + Spouse	Self + Spouse	January-31
8005430552	2	Spouse	Self + Spouse	Self + Spouse	November-24
8005575826	1	Subscriber	Self	Self	July-40
8005582102	1	Subscriber	Self	Self	September-35
8005687073	1	Subscriber	Self	Self	May-47
8005778840	1	Subscriber	Self	Self	October-48
8005845380	1	Subscriber	Self	Self	August-51
8006054322	1	Subscriber	Self + Spouse	Self + Spouse	December-60
8006054322	2	Spouse	Self + Spouse	Self + Spouse	October-57
8006068363	1	Subscriber	Self	Self	February-35
8006284600	1	Subscriber	Self	Self	August-41
8006479050	1	Subscriber	Self + Spouse	Self + Spouse	August-41
8006479050	2	Spouse	Self + Spouse	Self + Spouse	September-39
8006589433	1	Subscriber	Self	Self	January-48
8006637451	1	Subscriber	Self	Self	June-35
8006751163	1	Subscriber	Self	Self	January-53
8006789593	1	Subscriber	Self	Self	February-36
8006791044	1	Subscriber	Self	Self	January-38
8006952673	1	Subscriber	Self	Self	October-44
8007095388	1	Subscriber	Self	Self	June-63
8007199962	1	Subscriber	Self	Self	July-42
8007423885	1	Subscriber	Self	Self	February-41

8007698965	1	Subscriber	Self	Self	February-56
8007705621	1	Subscriber	Self	Self	March-48
8007788603	1	Subscriber	Self + Family	Self + Family	August-61
8007788603	2	Spouse	Self + Family	Self + Family	November-59
8007788603	4	Child	Self + Family	Self + Family	January-97
8008105032	1	Subscriber	Self	Self	December-31
8008127084	1	Subscriber	Self	Self	November-39
8008212782	1	Subscriber	Self + Spouse	Self + Spouse	March-51
8008212782	2	Spouse	Self + Spouse	Self + Spouse	December-50
8008244085	1	Subscriber	Self	Self	September-55
8008411232	1	Subscriber	Self	Self	June-47
8008519993	1	Subscriber	Self	Self	December-57
8008629623	1	Subscriber	Self + Spouse	Self + Spouse	July-57
8008629623	2	Spouse	Self + Spouse	Self + Spouse	April-57
8008724482	1	Subscriber	Self + Family	Self + Family	July-65
8008724482	3	Child	Self + Family	Self + Family	April-04
8008735529	1	Subscriber	Self + Spouse	Self + Spouse	July-50
8008735529	2	Spouse	Self + Spouse	Self + Spouse	November-47
8008743147	1	Subscriber	Self	Self	December-45
8008810412	1	Subscriber	Self + Spouse	Self + Spouse	March-52
8008810412	2	Spouse	Self + Spouse	Self + Spouse	June-57
8008928726	1	Subscriber	Self	Self	August-29
8008941381	1	Subscriber	Self + Spouse	Self + Spouse	September-58
8008941381	2	Spouse	Self + Spouse	Self + Spouse	February-53
8009027495	1	Subscriber	Self + Spouse	Self + Spouse	December-56
8009027495	2	Spouse	Self + Spouse	Self + Spouse	March-71
8009033300	1	Subscriber	Self + Spouse	Self + Spouse	December-44
8009033300	2	Spouse	Self + Spouse	Self + Spouse	November-46
8009106136	1	Subscriber	Self	Self	August-55
8009642810	1	Subscriber	Self + Spouse	Self + Spouse	June-62
8009642810	2	Spouse	Self + Spouse	Self + Spouse	July-63
8009659268	1	Subscriber	Self + Spouse	Self + Spouse	June-40
8009659268	2	Spouse	Self + Spouse	Self + Spouse	November-40

8009738652	1	Subscriber	Self + Spouse	Self + Spouse	May-54
8009738652	2	Spouse	Self + Spouse	Self + Spouse	December-57
8009760265	1	Subscriber	Self	Self	March-57
8010056069	1	Subscriber	Self	Self	April-35
8010090477	1	Subscriber	Self + Spouse	Self + Spouse	April-55
8010090477	2	Spouse	Self + Spouse	Self + Spouse	September-56
8010111688	1	Subscriber	Self	Self	July-52
8010214772	1	Subscriber	Self + Spouse	Self + Spouse	July-43
8010214772	2	Spouse	Self + Spouse	Self + Spouse	September-43
8010301897	1	Subscriber	Self	Self	January-51
8010422098	1	Subscriber	Self	Self	January-58
8010581771	1	Subscriber	Self	Self	February-46
8010754991	1	Subscriber	Self + Spouse	Self + Spouse	December-51
8010754991	2	Spouse	Self + Spouse	Self + Spouse	August-49
8011436741	1	Subscriber	Self	Self	May-60
8011506681	1	Subscriber	Self	Self	November-28
8011694916	1	Subscriber	Self	Self	July-50
8011735606	1	Subscriber	Self + Family	Self + Family	January-64
8011735606	2	Spouse	Self + Family	Self + Family	April-67
8011735606	5	Child	Self + Family	Self + Family	October-99
8011898694	1	Subscriber	Self + Spouse	Self + Spouse	January-64
8011898694	2	Spouse	Self + Spouse	Self + Spouse	June-62
8012005657	1	Subscriber	Self	Self	November-38
8012196154	1	Subscriber	Self + Spouse	Self + Spouse	August-59
8012196154	2	Spouse	Self + Spouse	Self + Spouse	June-57
8012281565	1	Subscriber	Self	Self	July-39
8012310031	1	Subscriber	Self + Spouse	Self + Spouse	January-59
8012310031	2	Spouse	Self + Spouse	Self + Spouse	August-51
8012727035	1	Subscriber	Self	Self	June-44
8012767540	1	Subscriber	Self	Self	March-41
8012842378	1	Subscriber	Self	Self	February-48
8013172132	1	Subscriber	Self	Self	August-58
8013310533	1	Subscriber	Self	Self	August-56

8013364820	1	Subscriber	Self	Self	February-34
8013454274	1	Subscriber	Self	Self	July-61
8013883780	1	Subscriber	Self + Spouse	Self + Spouse	October-60
8013883780	2	Spouse	Self + Spouse	Self + Spouse	May-55
8013919666	1	Subscriber	Self	Self	April-52
8013984535	1	Subscriber	Self + Spouse	Self + Spouse	September-66
8013984535	2	Spouse	Self + Spouse	Self + Spouse	January-68
8014036622	1	Subscriber	Self + Spouse	Self + Spouse	January-49
8014036622	2	Spouse	Self + Spouse	Self + Spouse	November-42
8014482257	1	Subscriber	Self	Self	December-52
8014589296	1	Subscriber	Self	Self	February-62
8014609083	1	Subscriber	Self + Spouse	Self + Spouse	December-58
8014609083	2	Spouse	Self + Spouse	Self + Spouse	March-62
8014831427	1	Subscriber	Self	Self	August-38
8014848668	1	Subscriber	Self	Self	April-41
8014872839	1	Subscriber	Self	Self	February-36
8015011625	1	Subscriber	Self	Self	September-42
8015145848	1	Subscriber	Self	Self	December-48
8015429709	1	Subscriber	Self	Self	November-61
8015585559	1	Subscriber	Self + Spouse	Self + Spouse	September-61
8015585559	2	Spouse	Self + Spouse	Self + Spouse	October-58
8015851610	1	Subscriber	Self + Family	Self + Family	January-57
8015851610	2	Spouse	Self + Family	Self + Family	June-48
8015851610	3	Child	Self + Family	Self + Family	October-96
8015853927	1	Subscriber	Self + Spouse	Self + Spouse	December-37
8015853927	2	Spouse	Self + Spouse	Self + Spouse	April-42
8015866724	1	Subscriber	Self	Self	March-48
8016510746	1	Subscriber	Self	Self	April-41
8016672969	1	Subscriber	Self + Spouse	Self + Spouse	January-43
8016672969	2	Spouse	Self + Spouse	Self + Spouse	June-43
8016870076	1	Subscriber	Self + Family	Self + Family	February-71
8016870076	2	Spouse	Self + Family	Self + Family	March-71
8016870076	7	Child	Self + Family	Self + Family	June-10

8016941079	1	Subscriber	Self + Spouse	Self + Spouse	January-63
8016941079	2	Spouse	Self + Spouse	Self + Spouse	January-55
8017027175	1	Subscriber	Self	Self	September-68
8017106586	1	Subscriber	Self	Self	May-34
8017224638	1	Subscriber	Self	Self	November-65
8017281354	1	Subscriber	Self	Self	March-31
8017375883	1	Subscriber	Self + Spouse	Self + Spouse	January-28
8017375883	2	Spouse	Self + Spouse	Self + Spouse	May-30
8017387151	1	Subscriber	Self + Spouse	Self + Spouse	December-46
8017387151	2	Spouse	Self + Spouse	Self + Spouse	October-50
8017455510	1	Subscriber	Self + Spouse	Self + Spouse	July-54
8017455510	2	Spouse	Self + Spouse	Self + Spouse	October-54
8017541022	1	Subscriber	Self + Family	Self + Family	June-57
8017541022	2	Spouse	Self + Family	Self + Family	February-63
8017541022	5	Child	Self + Family	Self + Family	June-00
8017553590	1	Subscriber	Self + Spouse	Self + Spouse	June-52
8017553590	2	Spouse	Self + Spouse	Self + Spouse	January-52
8017637023	1	Subscriber	Self + Spouse	Self + Spouse	May-53
8017637023	2	Spouse	Self + Spouse	Self + Spouse	January-57
8017640466	1	Subscriber	Self + Spouse	Self + Spouse	August-61
8017640466	2	Spouse	Self + Spouse	Self + Spouse	April-60
8017742127	1	Subscriber	Self	Self	December-57
8017745828	1	Subscriber	Self	Self	March-45
8017762869	1	Subscriber	Self + Spouse	Self + Spouse	September-43
8017762869	2	Spouse	Self + Spouse	Self + Spouse	October-40
8018045615	1	Subscriber	Self + Spouse	Self + Spouse	December-46
8018045615	2	Spouse	Self + Spouse	Self + Spouse	November-47
8018058343	1	Subscriber	Self	Self	March-52
8018065651	1	Subscriber	Self	Self	March-47
8018071922	1	Subscriber	Self	Self	May-58
8018179885	1	Subscriber	Self	Self	December-48
8018491943	1	Subscriber	Self	Self	March-56
8018534422	1	Subscriber	Self	Self	December-47

8018622522	1	Subscriber	Self + Spouse	Self + Spouse	May-48
8018622522	2	Spouse	Self + Spouse	Self + Spouse	March-49
8018628350	1	Subscriber	Self	Self	October-27
8018671378	1	Subscriber	Self	Self	November-46
8018701890	1	Subscriber	Self + Family	Self + Family	June-59
8018701890	2	Spouse	Self + Family	Self + Family	December-62
8018701890	6	Child	Self + Family	Self + Family	December-95
8018731653	1	Subscriber	Self	Self	December-46
8018810890	1	Subscriber	Self	Self	November-41
8018966257	1	Subscriber	Self	Self	September-18
8019308657	1	Subscriber	Self	Self	January-39
8019342237	1	Subscriber	Self	Self	January-38
8019472613	1	Subscriber	Self + Spouse	Self + Spouse	May-50
8019472613	2	Spouse	Self + Spouse	Self + Spouse	April-49
8019536643	1	Subscriber	Self	Self	February-50
8019606321	1	Subscriber	Self + Spouse	Self + Spouse	June-54
8019606321	2	Spouse	Self + Spouse	Self + Spouse	June-55
8019970872	1	Subscriber	Self	Self	March-49
8020127763	1	Subscriber	Self + Spouse	Self + Spouse	November-49
8020127763	2	Spouse	Self + Spouse	Self + Spouse	August-51
8020238754	1	Subscriber	Self + Spouse	Self + Spouse	January-51
8020238754	2	Spouse	Self + Spouse	Self + Spouse	January-50
8020640011	1	Subscriber	Self + Family	Self + Family	September-67
8020640011	2	Spouse	Self + Family	Self + Family	August-67
8020640011	4	Child	Self + Family	Self + Family	October-95
8020640011	5	Child	Self + Family	Self + Family	August-99
8020640011	6	Child	Self + Family	Self + Family	October-02
8020644334	1	Subscriber	Self	Self	June-42
8020748172	1	Subscriber	Self + Spouse	Self + Spouse	May-60
8020748172	2	Spouse	Self + Spouse	Self + Spouse	April-57
8020761474	1	Subscriber	Self	Self	November-52
8020799959	1	Subscriber	Self + Spouse	Self + Spouse	November-49
8020799959	2	Spouse	Self + Spouse	Self + Spouse	January-39

8020895900	1	Subscriber	Self + Spouse	Self + Spouse	April-53
8020895900	2	Spouse	Self + Spouse	Self + Spouse	October-51
8021164980	1	Subscriber	Self + Spouse	Self + Spouse	March-54
8021164980	2	Spouse	Self + Spouse	Self + Spouse	September-54
8021698585	1	Subscriber	Self	Self	February-47
8021708060	1	Subscriber	Self	Self	December-23
8021799451	1	Subscriber	Self + Spouse	Self + Spouse	November-51
8021799451	2	Spouse	Self + Spouse	Self + Spouse	October-53
8021931466	1	Subscriber	Self + Spouse	Self + Spouse	June-48
8021931466	2	Spouse	Self + Spouse	Self + Spouse	April-44
8022120561	1	Subscriber	Self + Spouse	Self + Spouse	July-57
8022120561	2	Spouse	Self + Spouse	Self + Spouse	May-58
8022151915	1	Subscriber	Self	Self	April-51
8022253092	1	Subscriber	Self	Self	April-38
8022339664	1	Subscriber	Self	Self	August-54
8022341684	1	Subscriber	Self	Self	January-44
8022489831	1	Subscriber	Self + Spouse	Self + Spouse	October-54
8022489831	2	Spouse	Self + Spouse	Self + Spouse	April-50
8022730648	1	Subscriber	Self	Self	December-43
8022833342	1	Subscriber	Self	Self	March-57
8022884498	1	Subscriber	Self	Self	February-53
8022987095	1	Subscriber	Self + Spouse	Self + Spouse	December-53
8022987095	2	Spouse	Self + Spouse	Self + Spouse	April-53
8023031272	1	Subscriber	Self + Family	Self + Family	February-61
8023031272	2	Spouse	Self + Family	Self + Family	January-63
8023031272	5	Child	Self + Family	Self + Family	June-95
8023031272	6	Child	Self + Family	Self + Family	February-98
8023031272	7	Child	Self + Family	Self + Family	June-96
8023070122	1	Subscriber	Self	Self	December-39
8023074036	1	Subscriber	Self	Self	January-50
8023197619	1	Subscriber	Self	Self	May-53
8023220442	1	Subscriber	Self	Self	May-49
8023310677	1	Subscriber	Self	Self	January-37

8023437307	1	Subscriber	Self	Self	May-50
8023996000	1	Subscriber	Self + Spouse	Self + Spouse	September-47
8023996000	2	Spouse	Self + Spouse	Self + Spouse	June-50
8024218619	1	Subscriber	Self + Spouse	Self + Spouse	June-58
8024218619	2	Spouse	Self + Spouse	Self + Spouse	June-63
8024226572	1	Subscriber	Self + Spouse	Self + Spouse	January-46
8024226572	2	Spouse	Self + Spouse	Self + Spouse	July-51
8024256995	1	Subscriber	Self + Spouse	Self + Spouse	August-50
8024256995	2	Spouse	Self + Spouse	Self + Spouse	March-48
8024391545	1	Subscriber	Self	Self	January-54
8024429036	1	Subscriber	Self	Self	August-56
8024473154	1	Subscriber	Self	Self	April-67
8024517560	1	Subscriber	Self + Spouse	Self + Spouse	June-43
8024517560	2	Spouse	Self + Spouse	Self + Spouse	May-48
8024562639	1	Subscriber	Self	Self	January-46
8024568673	1	Subscriber	Self + Spouse	Self + Spouse	January-55
8024568673	2	Spouse	Self + Spouse	Self + Spouse	January-49
8024590380	1	Subscriber	Self + Family	Self + Family	June-61
8024590380	2	Spouse	Self + Family	Self + Family	June-61
8024590380	4	Child	Self + Family	Self + Family	May-97
8024680822	1	Subscriber	Self + Spouse	Self + Spouse	September-49
8024680822	2	Spouse	Self + Spouse	Self + Spouse	October-44
8024691787	1	Subscriber	Self	Self	February-51
8024738203	1	Subscriber	Self	Self	July-53
8024948843	1	Subscriber	Self	Self	July-41
8025037749	1	Subscriber	Self	Self	February-57
8025131878	1	Subscriber	Self + Spouse	Self + Spouse	May-49
8025131878	2	Spouse	Self + Spouse	Self + Spouse	February-51
8025356778	1	Subscriber	Self	Self	August-48
8025636630	1	Subscriber	Self	Self	March-48
8025901820	1	Subscriber	Self	Self	March-48
8026041043	1	Subscriber	Self + Spouse	Self + Spouse	July-42
8026041043	2	Spouse	Self + Spouse	Self + Spouse	April-51

8026135163	1	Subscriber	Self + Spouse	Self + Spouse	July-56
8026135163	2	Spouse	Self + Spouse	Self + Spouse	January-47
8026233758	1	Subscriber	Self	Self	May-41
8026234564	1	Subscriber	Self + Spouse	Self + Spouse	May-55
8026234564	2	Spouse	Self + Spouse	Self + Spouse	December-55
8026251303	1	Subscriber	Self + Spouse	Self + Spouse	September-57
8026251303	2	Spouse	Self + Spouse	Self + Spouse	May-62
8026279180	1	Subscriber	Self	Self	September-45
8026292696	1	Subscriber	Self	Self	October-38
8026366912	1	Subscriber	Self + Children	Self + Children	September-59
8026366912	3	Child	Self + Children	Self + Children	December-95
8026417359	1	Subscriber	Self	Self	May-46
8026420562	1	Subscriber	Self + Spouse	Self + Spouse	October-50
8026420562	2	Spouse	Self + Spouse	Self + Spouse	May-46
8026626419	1	Subscriber	Self	Self	June-44
8026656108	1	Subscriber	Self	Self	March-53
8026758583	1	Subscriber	Self	Self	July-46
8027422561	1	Subscriber	Self + Spouse	Self + Spouse	July-44
8027422561	2	Spouse	Self + Spouse	Self + Spouse	April-46
8027657655	1	Subscriber	Self	Self	January-55
8027813232	1	Subscriber	Self	Self	December-53
8027974767	1	Subscriber	Self + Spouse	Self + Spouse	January-43
8027974767	2	Spouse	Self + Spouse	Self + Spouse	December-49
8028259769	1	Subscriber	Self + Spouse	Self + Spouse	July-49
8028259769	2	Spouse	Self + Spouse	Self + Spouse	July-50
8028320790	1	Subscriber	Self	Self	July-53
8028490981	1	Subscriber	Self	Self	February-37
8028540555	1	Subscriber	Self	Self	November-47
8028549664	1	Subscriber	Self	Self	September-36
8028734557	1	Subscriber	Self	Self	June-51
8028917165	1	Subscriber	Self	Self	December-53
8029014789	1	Subscriber	Self + Spouse	Self + Spouse	August-50
8029014789	2	Spouse	Self + Spouse	Self + Spouse	June-50

8029026456	1	Subscriber	Self + Spouse	Self + Spouse	August-48
8029026456	2	Spouse	Self + Spouse	Self + Spouse	March-49
8029248666	1	Subscriber	Self	Self	January-55
8029385471	1	Subscriber	Self + Spouse	Self + Spouse	October-61
8029385471	2	Spouse	Self + Spouse	Self + Spouse	November-55
8029412267	1	Subscriber	Self + Spouse	Self + Spouse	October-51
8029412267	2	Spouse	Self + Spouse	Self + Spouse	May-52
8029496778	1	Subscriber	Self	Self	July-26
8029559461	1	Subscriber	Self	Self	January-48
8030322628	1	Subscriber	Self + Spouse	Self + Spouse	April-51
8030322628	2	Spouse	Self + Spouse	Self + Spouse	March-58
8030379265	1	Subscriber	Self	Self	January-36
8030527964	1	Subscriber	Self	Self	January-50
8030597400	1	Subscriber	Self + Spouse	Self + Spouse	September-53
8030597400	2	Spouse	Self + Spouse	Self + Spouse	July-51
8030787042	1	Subscriber	Self + Spouse	Self + Spouse	October-54
8030787042	2	Spouse	Self + Spouse	Self + Spouse	November-52
8031259267	1	Subscriber	Self	Self	July-54
8031302916	1	Subscriber	Self + Family	Self + Family	July-50
8031302916	2	Spouse	Self + Family	Self + Family	November-52
8031384253	1	Subscriber	Self + Spouse	Self + Spouse	October-58
8031384253	2	Spouse	Self + Spouse	Self + Spouse	August-54
8031448874	1	Subscriber	Self	Self	August-57
8031579414	1	Subscriber	Self	Self	September-24
8031639859	1	Subscriber	Self	Self	November-29
8031775579	1	Subscriber	Self	Self	November-57
8031787789	1	Subscriber	Self	Self	May-65
8031828889	1	Subscriber	Self	Self	February-48
8031926766	1	Subscriber	Self	Self	July-37
8031972009	1	Subscriber	Self	Self	March-29
8032016235	1	Subscriber	Self	Self	May-52
8032178004	1	Subscriber	Self + Family	Self + Family	March-68
8032178004	4	Child	Self + Family	Self + Family	October-97

8032363412	1	Subscriber	Self + Spouse	Self + Spouse	March-53
8032363412	2	Spouse	Self + Spouse	Self + Spouse	November-54
8032495052	1	Subscriber	Self	Self	July-57
8032498904	1	Subscriber	Self	Self	December-50
8032511680	1	Subscriber	Self	Self	May-52
8032648415	1	Subscriber	Self	Self	April-44
8032654748	1	Subscriber	Self	Self	June-40
8032706614	1	Subscriber	Self	Self	September-55
8032726045	1	Subscriber	Self + Spouse	Self + Spouse	November-51
8032726045	2	Spouse	Self + Spouse	Self + Spouse	July-55
8032741660	1	Subscriber	Self	Self	October-53
8032789828	1	Subscriber	Self	Self	December-57
8032801128	1	Subscriber	Self	Self	August-32
8032826065	1	Subscriber	Self + Spouse	Self + Spouse	November-62
8032826065	2	Spouse	Self + Spouse	Self + Spouse	March-65
8032874367	1	Subscriber	Self + Spouse	Self + Spouse	August-49
8032874367	2	Spouse	Self + Spouse	Self + Spouse	December-45
8032983484	1	Subscriber	Self + Spouse	Self + Spouse	February-48
8032983484	2	Spouse	Self + Spouse	Self + Spouse	October-46
8033260383	1	Subscriber	Self	Self	January-56
8033331829	1	Subscriber	Self	Self	July-48
8033484431	1	Subscriber	Self + Family	Self + Family	May-66
8033484431	2	Spouse	Self + Family	Self + Family	December-71
8033484431	3	Child	Self + Family	Self + Family	August-02
8033484431	4	Child	Self + Family	Self + Family	January-07
8033518857	1	Subscriber	Self + Spouse	Self + Spouse	June-44
8033518857	2	Spouse	Self + Spouse	Self + Spouse	March-46
8033873051	1	Subscriber	Self	Self	September-55
8034097788	1	Subscriber	Self + Spouse	Self + Spouse	October-56
8034097788	2	Spouse	Self + Spouse	Self + Spouse	July-52
8034659208	1	Subscriber	Self	Self	February-59
8034835100	1	Subscriber	Self + Spouse	Self + Spouse	June-61
8034835100	2	Spouse	Self + Spouse	Self + Spouse	June-62

8034836514	1	Subscriber	Self	Self	August-34
8035029969	1	Subscriber	Self	Self	January-50
8035162401	1	Subscriber	Self + Spouse	Self + Spouse	October-51
8035162401	2	Spouse	Self + Spouse	Self + Spouse	November-52
8035212060	1	Subscriber	Self	Self	February-72
8035284771	1	Subscriber	Self	Self	April-48
8035391572	1	Subscriber	Self	Self	November-46
8035458728	1	Subscriber	Self + Spouse	Self + Spouse	June-65
8035458728	2	Spouse	Self + Spouse	Self + Spouse	November-66
8035518211	1	Subscriber	Self + Spouse	Self + Spouse	July-47
8035518211	2	Spouse	Self + Spouse	Self + Spouse	September-48
8035733177	1	Subscriber	Self + Spouse	Self + Spouse	August-52
8035733177	2	Spouse	Self + Spouse	Self + Spouse	October-51
8036035617	1	Subscriber	Self + Spouse	Self + Spouse	January-49
8036035617	2	Spouse	Self + Spouse	Self + Spouse	March-43
8036106199	1	Subscriber	Self	Self	January-67
8036110626	1	Subscriber	Self + Spouse	Self + Spouse	April-47
8036110626	2	Spouse	Self + Spouse	Self + Spouse	December-51
8036141956	1	Subscriber	Self + Spouse	Self + Spouse	January-61
8036141956	2	Spouse	Self + Spouse	Self + Spouse	December-52
8036179538	1	Subscriber	Self	Self	September-32
8036229808	1	Subscriber	Self + Family	Self + Family	September-38
8036229808	2	Spouse	Self + Family	Self + Family	March-42
8036229808	3	Child	Self + Family	Self + Family	November-04
8036277465	1	Subscriber	Self + Family	Self + Family	October-49
8036277465	2	Spouse	Self + Family	Self + Family	January-47
8036277465	6	Child	Self + Family	Self + Family	August-97
8036296516	1	Subscriber	Self	Self	January-64
8036300309	1	Subscriber	Self + Spouse	Self + Spouse	March-48
8036300309	2	Spouse	Self + Spouse	Self + Spouse	October-46
8036343910	1	Subscriber	Self + Spouse	Self + Spouse	June-45
8036343910	2	Spouse	Self + Spouse	Self + Spouse	March-47
8036393436	1	Subscriber	Self + Spouse	Self + Spouse	May-60

8036393436	2	Spouse	Self + Spouse	Self + Spouse	July-58
8036497102	1	Subscriber	Self + Spouse	Self + Spouse	October-60
8036497102	2	Spouse	Self + Spouse	Self + Spouse	June-58
8036615896	1	Subscriber	Self	Self	January-47
8036688112	1	Subscriber	Self	Self	May-64
8036871111	1	Subscriber	Self + Spouse	Self + Spouse	July-46
8036871111	2	Spouse	Self + Spouse	Self + Spouse	June-46
8037007027	1	Subscriber	Self	Self	December-54
8037173890	1	Subscriber	Self + Family	Self + Family	June-61
8037173890	2	Spouse	Self + Family	Self + Family	December-62
8037286233	1	Subscriber	Self	Self	October-50
8037406443	1	Subscriber	Self	Self	September-53
8037711857	1	Subscriber	Self	Self	December-56
8037852790	1	Subscriber	Self + Spouse	Self + Spouse	October-55
8037852790	2	Spouse	Self + Spouse	Self + Spouse	December-55
8037863029	1	Subscriber	Self	Self	May-66
8038037312	1	Subscriber	Self + Spouse	Self + Spouse	January-50
8038037312	2	Spouse	Self + Spouse	Self + Spouse	April-50
8038098263	1	Subscriber	Self	Self	May-57
8038521081	1	Subscriber	Self + Spouse	Self + Spouse	August-63
8038521081	2	Spouse	Self + Spouse	Self + Spouse	January-66
8038583752	1	Subscriber	Self + Spouse	Self + Spouse	July-52
8038583752	2	Spouse	Self + Spouse	Self + Spouse	November-51
8038691333	1	Subscriber	Self	Self	September-44
8038760029	1	Subscriber	Self	Self	November-57
8038991483	1	Subscriber	Self + Spouse	Self + Spouse	October-53
8038991483	2	Spouse	Self + Spouse	Self + Spouse	June-53
8039062630	1	Subscriber	Self + Spouse	Self + Spouse	June-51
8039062630	2	Spouse	Self + Spouse	Self + Spouse	August-53
8039270059	1	Subscriber	Self	Self	May-34
8039594034	1	Subscriber	Self	Self	August-35
8039828390	1	Subscriber	Self + Spouse	Self + Spouse	May-51
8039828390	2	Spouse	Self + Spouse	Self + Spouse	January-48

8039878059	1	Subscriber	Self	Self	September-49
8039929914	1	Subscriber	Self	Self	April-50
8040185530	1	Subscriber	Self	Self	May-45
8040266037	1	Subscriber	Self	Self	December-45
8040318977	1	Subscriber	Self + Spouse	Self + Spouse	March-52
8040318977	2	Spouse	Self + Spouse	Self + Spouse	July-52
8040379834	1	Subscriber	Self	Self	January-44
8040468277	1	Subscriber	Self + Spouse	Self + Spouse	December-55
8040468277	2	Spouse	Self + Spouse	Self + Spouse	March-56
8040803251	1	Subscriber	Self + Spouse	Self + Spouse	August-48
8040803251	2	Spouse	Self + Spouse	Self + Spouse	May-45
8040854980	1	Subscriber	Self	Self	August-59
8041031939	1	Subscriber	Self	Self	May-40
8041126039	1	Subscriber	Self + Family	Self + Family	May-50
8041126039	2	Spouse	Self + Family	Self + Family	August-54
8041126039	4	Child	Self + Family	Self + Family	October-86
8041217020	1	Subscriber	Self	Self	March-49
8041254546	1	Subscriber	Self	Self	December-52
8041617047	1	Subscriber	Self	Self	May-40
8041665781	1	Subscriber	Self	Self	October-36
8041784719	1	Subscriber	Self	Self	January-56
8041824853	1	Subscriber	Self	Self	February-48
8042001235	1	Subscriber	Self	Self	September-43
8042030618	1	Subscriber	Self	Self	November-53
8042085715	1	Subscriber	Self + Spouse	Self + Spouse	February-51
8042085715	2	Spouse	Self + Spouse	Self + Spouse	July-37
8042372050	1	Subscriber	Self + Spouse	Self + Spouse	July-61
8042372050	2	Spouse	Self + Spouse	Self + Spouse	October-51
8042450138	1	Subscriber	Self	Self	August-48
8042580067	1	Subscriber	Self + Spouse	Self + Spouse	October-45
8042580067	2	Spouse	Self + Spouse	Self + Spouse	July-54
8042643232	1	Subscriber	Self + Spouse	Self + Spouse	March-62
8042643232	2	Spouse	Self + Spouse	Self + Spouse	October-61

8042869892	1	Subscriber	Self	Self	November-50
8043123581	1	Subscriber	Self + Spouse	Self + Spouse	February-60
8043123581	2	Spouse	Self + Spouse	Self + Spouse	June-45
8043207973	1	Subscriber	Self	Self	May-45
8043535477	1	Subscriber	Self	Self	March-32
8043545391	1	Subscriber	Self	Self	November-61
8044144244	1	Subscriber	Self	Self	August-49
8044155877	1	Subscriber	Self + Spouse	Self + Spouse	December-39
8044155877	2	Spouse	Self + Spouse	Self + Spouse	August-41
8044256544	1	Subscriber	Self	Self	March-42
8044274378	1	Subscriber	Self	Self	March-40
8044294550	1	Subscriber	Self + Spouse	Self + Spouse	July-55
8044294550	2	Spouse	Self + Spouse	Self + Spouse	November-54
8044360560	1	Subscriber	Self	Self	January-50
8044481998	1	Subscriber	Self	Self	July-43
8044626349	1	Subscriber	Self	Self	June-44
8044810443	1	Subscriber	Self + Spouse	Self + Spouse	September-56
8044810443	2	Spouse	Self + Spouse	Self + Spouse	March-48
8045055519	1	Subscriber	Self	Self	April-38
8045162538	1	Subscriber	Self + Spouse	Self + Spouse	December-53
8045162538	2	Spouse	Self + Spouse	Self + Spouse	April-49
8045237251	1	Subscriber	Self + Spouse	Self + Spouse	January-51
8045237251	2	Spouse	Self + Spouse	Self + Spouse	August-50
8045277424	1	Subscriber	Self + Spouse	Self + Spouse	January-44
8045277424	2	Spouse	Self + Spouse	Self + Spouse	May-44
8045290608	1	Subscriber	Self + Spouse	Self + Spouse	October-53
8045290608	2	Spouse	Self + Spouse	Self + Spouse	January-57
8045436211	1	Subscriber	Self + Spouse	Self + Spouse	June-50
8045436211	2	Spouse	Self + Spouse	Self + Spouse	May-46
8045470417	1	Subscriber	Self	Self	March-62
8045530738	1	Subscriber	Self + Spouse	Self + Spouse	June-48
8045530738	2	Spouse	Self + Spouse	Self + Spouse	October-48
8045551674	1	Subscriber	Self + Spouse	Self + Spouse	May-44

8045551674	2	Spouse	Self + Spouse	Self + Spouse	January-48
8045570314	1	Subscriber	Self	Self	June-54
8045625625	1	Subscriber	Self	Self	April-33
8045669107	1	Subscriber	Self + Spouse	Self + Spouse	February-54
8045669107	2	Spouse	Self + Spouse	Self + Spouse	November-51
8045725034	1	Subscriber	Self	Self	April-32
8045764432	1	Subscriber	Self + Spouse	Self + Spouse	September-49
8045764432	2	Spouse	Self + Spouse	Self + Spouse	June-58
8046006893	1	Subscriber	Self	Self	October-47
8046051869	1	Subscriber	Self	Self	July-57
8046222628	1	Subscriber	Self	Self	May-46
8046271271	1	Subscriber	Self	Self	February-53
8046279719	1	Subscriber	Self	Self	May-58
8046552362	1	Subscriber	Self + Spouse	Self + Spouse	October-49
8046552362	2	Spouse	Self + Spouse	Self + Spouse	March-55
8046572224	1	Subscriber	Self	Self	October-58
8046718214	1	Subscriber	Self + Spouse	Self + Spouse	November-61
8046718214	2	Spouse	Self + Spouse	Self + Spouse	May-61
8047120691	1	Subscriber	Self	Self	July-54
8047266099	1	Subscriber	Self	Self	September-56
8047296121	1	Subscriber	Self	Self	May-65
8047447955	1	Subscriber	Self	Self	February-33
8047662278	1	Subscriber	Self + Spouse	Self + Spouse	August-47
8047662278	2	Spouse	Self + Spouse	Self + Spouse	June-47
8047666149	1	Subscriber	Self	Self	October-65
8047715635	1	Subscriber	Self	Self	August-52
8047730785	1	Subscriber	Self + Family	Self + Family	February-51
8047730785	2	Spouse	Self + Family	Self + Family	May-54
8047730785	4	Child	Self + Family	Self + Family	July-95
8047901306	1	Subscriber	Self + Spouse	Self + Spouse	October-49
8047901306	2	Spouse	Self + Spouse	Self + Spouse	May-50
8047907537	1	Subscriber	Self	Self	October-49
8048369304	1	Subscriber	Self	Self	August-36

8048379110	1	Subscriber	Self + Spouse	Self + Spouse	September-39
8048379110	2	Spouse	Self + Spouse	Self + Spouse	March-47
8048594894	1	Subscriber	Self	Self	July-49
8048648691	1	Subscriber	Self	Self	October-34
8048674088	1	Subscriber	Self	Self	January-49
8048704071	1	Subscriber	Self	Self	September-53
8048748898	1	Subscriber	Self + Spouse	Self + Spouse	April-50
8048748898	2	Spouse	Self + Spouse	Self + Spouse	June-56
8048762086	1	Subscriber	Self	Self	October-39
8048813756	1	Subscriber	Self + Family	Self + Family	July-61
8048813756	2	Spouse	Self + Family	Self + Family	July-57
8048813756	3	Child	Self + Family	Self + Family	July-97
8048813756	4	Child	Self + Family	Self + Family	August-94
8049021684	1	Subscriber	Self + Spouse	Self + Spouse	May-43
8049021684	2	Spouse	Self + Spouse	Self + Spouse	May-46
8049024490	1	Subscriber	Self	Self	December-44
8049029990	1	Subscriber	Self	Self	September-45
8049278068	1	Subscriber	Self	Self	June-46
8049563320	1	Subscriber	Self + Spouse	Self + Spouse	February-59
8049563320	2	Spouse	Self + Spouse	Self + Spouse	March-57
8049903365	1	Subscriber	Self	Self	April-56
8050001943	1	Subscriber	Self	Self	August-36
8050058139	1	Subscriber	Self	Self	January-49
8050303698	1	Subscriber	Self	Self	September-46
8050729332	1	Subscriber	Self	Self	September-63
8050945767	1	Subscriber	Self	Self	April-53
8050990127	1	Subscriber	Self	Self	April-58
8051278417	1	Subscriber	Self + Spouse	Self + Spouse	September-53
8051278417	2	Spouse	Self + Spouse	Self + Spouse	June-56
8051369789	1	Subscriber	Self	Self	August-50
8051650470	1	Subscriber	Self + Spouse	Self + Spouse	June-50
8051650470	2	Spouse	Self + Spouse	Self + Spouse	March-44
8051696698	1	Subscriber	Self	Self	December-44

8051958474	1	Subscriber	Self + Spouse	Self + Spouse	March-55
8051958474	2	Spouse	Self + Spouse	Self + Spouse	January-65
8052040032	1	Subscriber	Self	Self	November-52
8052100414	1	Subscriber	Self	Self	January-52
8052223518	1	Subscriber	Self	Self	July-40
8052255318	1	Subscriber	Self + Family	Self + Family	September-63
8052255318	2	Spouse	Self + Family	Self + Family	February-69
8052255318	3	Child	Self + Family	Self + Family	April-02
8052401335	1	Subscriber	Self	Self	October-38
8052525268	1	Subscriber	Self	Self	June-37
8052712171	1	Subscriber	Self	Self	October-61
8052791396	1	Subscriber	Self + Spouse	Self + Spouse	May-58
8052791396	2	Spouse	Self + Spouse	Self + Spouse	April-58
8052961101	1	Subscriber	Self + Spouse	Self + Spouse	November-45
8052961101	2	Spouse	Self + Spouse	Self + Spouse	January-46
8053052371	1	Subscriber	Self	Self	July-53
8053195175	1	Subscriber	Self	Self	November-57
8053249776	1	Subscriber	Self	Self	June-44
8053722448	1	Subscriber	Self	Self	May-42
8053877227	1	Subscriber	Self + Spouse	Self + Spouse	June-41
8053877227	2	Spouse	Self + Spouse	Self + Spouse	June-40
8053961202	1	Subscriber	Self	Self	February-56
8053962715	1	Subscriber	Self	Self	August-39
8054047115	1	Subscriber	Self + Spouse	Self + Spouse	September-41
8054047115	2	Spouse	Self + Spouse	Self + Spouse	September-44
8054071912	1	Subscriber	Self + Spouse	Self + Spouse	February-57
8054071912	2	Spouse	Self + Spouse	Self + Spouse	March-55
8054156643	1	Subscriber	Self	Self	October-44
8054700371	1	Subscriber	Self	Self	May-41
8054771007	1	Subscriber	Self	Self	November-59
8054840308	1	Subscriber	Self + Family	Self + Family	April-64
8054840308	2	Spouse	Self + Family	Self + Family	October-68
8054840308	3	Child	Self + Family	Self + Family	April-00

8055282428	1	Subscriber	Self + Spouse	Self + Spouse	September-55
8055282428	2	Spouse	Self + Spouse	Self + Spouse	August-56
8055678284	1	Subscriber	Self + Spouse	Self + Spouse	August-49
8055678284	2	Spouse	Self + Spouse	Self + Spouse	January-53
8055855892	1	Subscriber	Self	Self	January-53
8056069197	1	Subscriber	Self	Self	October-46
8056069408	1	Subscriber	Self + Spouse	Self + Spouse	June-52
8056069408	2	Spouse	Self + Spouse	Self + Spouse	February-55
8056277117	1	Subscriber	Self	Self	May-52
8056375787	1	Subscriber	Self + Spouse	Self + Spouse	August-39
8056375787	2	Spouse	Self + Spouse	Self + Spouse	December-37
8056698403	1	Subscriber	Self + Spouse	Self + Spouse	January-39
8056698403	2	Spouse	Self + Spouse	Self + Spouse	July-40
8056766434	1	Subscriber	Self + Family	Self + Family	October-62
8056766434	2	Spouse	Self + Family	Self + Family	May-57
8056766434	4	Child	Self + Family	Self + Family	March-00
8056773017	1	Subscriber	Self + Spouse	Self + Spouse	August-51
8056773017	2	Spouse	Self + Spouse	Self + Spouse	February-52
8056830418	1	Subscriber	Self	Self	August-56
8057187749	1	Subscriber	Self	Self	March-43
8057197162	1	Subscriber	Self	Self	January-53
8057249287	1	Subscriber	Self	Self	June-34
8057276107	1	Subscriber	Self	Self	January-41
8057338754	1	Subscriber	Self	Self	August-47
8057436523	1	Subscriber	Self	Self	April-43
8057498984	1	Subscriber	Self	Self	December-43
8057500521	1	Subscriber	Self + Spouse	Self + Spouse	October-53
8057500521	2	Spouse	Self + Spouse	Self + Spouse	November-52
8057582608	1	Subscriber	Self	Self	February-55
8057683310	1	Subscriber	Self	Self	July-46
8057846834	1	Subscriber	Self + Spouse	Self + Spouse	November-33
8057846834	2	Spouse	Self + Spouse	Self + Spouse	September-38
8057927223	1	Subscriber	Self	Self	February-33

8058049986	1	Subscriber	Self + Family	Self + Family	July-56
8058049986	2	Spouse	Self + Family	Self + Family	August-55
8058049986	5	Child	Self + Family	Self + Family	January-92
8058326277	1	Subscriber	Self + Spouse	Self + Spouse	April-48
8058326277	2	Spouse	Self + Spouse	Self + Spouse	November-49
8058425808	1	Subscriber	Self + Spouse	Self + Spouse	April-45
8058425808	2	Spouse	Self + Spouse	Self + Spouse	July-46
8058431981	1	Subscriber	Self	Self	February-53
8058595942	1	Subscriber	Self + Spouse	Self + Spouse	June-41
8058595942	2	Spouse	Self + Spouse	Self + Spouse	August-41
8058634353	1	Subscriber	Self + Spouse	Self + Spouse	September-36
8058634353	2	Spouse	Self + Spouse	Self + Spouse	December-35
8059012942	1	Subscriber	Self	Self	August-55
8059129299	1	Subscriber	Self	Self	December-50
8059238625	1	Subscriber	Self	Self	September-46
8059265624	1	Subscriber	Self + Spouse	Self + Spouse	October-55
8059265624	2	Spouse	Self + Spouse	Self + Spouse	May-55
8059381136	1	Subscriber	Self	Self	November-38
8059420033	1	Subscriber	Self	Self	April-51
8059562448	1	Subscriber	Self	Self	October-59
8059702634	1	Subscriber	Self	Self	February-63
8059822859	1	Subscriber	Self + Spouse	Self + Spouse	January-50
8059822859	2	Spouse	Self + Spouse	Self + Spouse	February-48
8059946306	1	Subscriber	Self	Self	September-62
8059986828	1	Subscriber	Self	Self	September-48
8060081621	1	Subscriber	Self	Self	January-32
8060089243	1	Subscriber	Self	Self	January-61
8060380633	1	Subscriber	Self	Self	July-58
8060776868	1	Subscriber	Self	Self	April-63
8060808794	1	Subscriber	Self	Self	September-48
8060896118	1	Subscriber	Self	Self	April-41
8061028356	1	Subscriber	Self + Spouse	Self + Spouse	December-55
8061028356	2	Spouse	Self + Spouse	Self + Spouse	January-56

8061054851	1	Subscriber	Self + Spouse	Self + Spouse	March-52
8061054851	2	Spouse	Self + Spouse	Self + Spouse	November-52
8061120860	1	Subscriber	Self + Spouse	Self + Spouse	May-35
8061120860	2	Spouse	Self + Spouse	Self + Spouse	May-41
8061470762	1	Subscriber	Self	Self	January-41
8061535746	1	Subscriber	Self	Self	November-46
8061664557	1	Subscriber	Self	Self	October-36
8062014265	1	Subscriber	Self	Self	June-72
8062095608	1	Subscriber	Self	Self	April-31
8062249104	1	Subscriber	Self + Spouse	Self + Spouse	August-57
8062249104	2	Spouse	Self + Spouse	Self + Spouse	September-55
8062528875	1	Subscriber	Self	Self	July-36
8062607382	1	Subscriber	Self + Spouse	Self + Spouse	January-57
8062607382	2	Spouse	Self + Spouse	Self + Spouse	February-58
8062833202	1	Subscriber	Self	Self	April-51
8063078765	1	Subscriber	Self	Self	June-48
8063143450	1	Subscriber	Self	Self	August-28
8063184816	1	Subscriber	Self	Self	October-43
8063192066	1	Subscriber	Self + Spouse	Self + Spouse	January-59
8063192066	2	Spouse	Self + Spouse	Self + Spouse	February-59
8063193521	1	Subscriber	Self	Self	May-60
8063274897	1	Subscriber	Self + Spouse	Self + Spouse	December-48
8063274897	2	Spouse	Self + Spouse	Self + Spouse	November-51
8063378082	1	Subscriber	Self	Self	June-40
8063499194	1	Subscriber	Self + Spouse	Self + Spouse	October-59
8063499194	2	Spouse	Self + Spouse	Self + Spouse	January-62
8063499299	1	Subscriber	Self + Family	Self + Family	January-67
8063499299	2	Spouse	Self + Family	Self + Family	March-68
8063499299	3	Child	Self + Family	Self + Family	July-96
8063499299	4	Child	Self + Family	Self + Family	March-99
8063499299	5	Child	Self + Family	Self + Family	August-03
8063505602	1	Subscriber	Self	Self	December-48
8063519600	1	Subscriber	Self + Spouse	Self + Spouse	October-52

8063519600	2	Spouse	Self + Spouse	Self + Spouse	August-44
8063534977	1	Subscriber	Self	Self	June-48
8063629948	1	Subscriber	Self + Spouse	Self + Spouse	September-35
8063629948	2	Spouse	Self + Spouse	Self + Spouse	March-40
8063792777	1	Subscriber	Self	Self	March-48
8063889914	1	Subscriber	Self + Spouse	Self + Spouse	December-48
8063889914	2	Spouse	Self + Spouse	Self + Spouse	March-55
8063946726	1	Subscriber	Self + Spouse	Self + Spouse	June-47
8063946726	2	Spouse	Self + Spouse	Self + Spouse	March-52
8064058906	1	Subscriber	Self	Self	July-49
8064143390	1	Subscriber	Self + Spouse	Self + Spouse	July-62
8064143390	2	Spouse	Self + Spouse	Self + Spouse	January-62
8064199132	1	Subscriber	Self	Self	October-56
8064291929	1	Subscriber	Self + Spouse	Self + Spouse	August-46
8064291929	2	Spouse	Self + Spouse	Self + Spouse	April-43
8064303337	1	Subscriber	Self	Self	October-50
8064430974	1	Subscriber	Self + Spouse	Self + Spouse	December-44
8064430974	2	Spouse	Self + Spouse	Self + Spouse	October-43
8064512482	1	Subscriber	Self	Self	April-51
8064519567	1	Subscriber	Self + Spouse	Self + Spouse	April-47
8064519567	2	Spouse	Self + Spouse	Self + Spouse	September-52
8064616923	1	Subscriber	Self + Family	Self + Family	September-60
8064616923	2	Spouse	Self + Family	Self + Family	December-63
8064616923	4	Child	Self + Family	Self + Family	May-96
8064616923	5	Child	Self + Family	Self + Family	September-98
8065129468	1	Subscriber	Self + Spouse	Self + Spouse	January-58
8065129468	2	Spouse	Self + Spouse	Self + Spouse	September-51
8065430201	1	Subscriber	Self + Spouse	Self + Spouse	October-51
8065430201	2	Spouse	Self + Spouse	Self + Spouse	February-49
8065433915	1	Subscriber	Self	Self	February-40
8065499552	1	Subscriber	Self	Self	April-40
8065706362	1	Subscriber	Self	Self	January-46
8065784916	1	Subscriber	Self + Spouse	Self + Spouse	September-48

8065784916	2	Spouse	Self + Spouse	Self + Spouse	January-48
8065820949	1	Subscriber	Self	Self	June-46
8065828681	1	Subscriber	Self + Spouse	Self + Spouse	November-52
8065828681	2	Spouse	Self + Spouse	Self + Spouse	January-51
8065862249	1	Subscriber	Self	Self	December-50
8066090027	1	Subscriber	Self	Self	September-39
8066185160	1	Subscriber	Self	Self	August-54
8066193562	1	Subscriber	Self	Self	February-47
8066257337	1	Subscriber	Self	Self	July-54
8066335124	1	Subscriber	Self	Self	April-42
8066540483	1	Subscriber	Self	Self	March-57
8066629795	1	Subscriber	Self + Spouse	Self + Spouse	May-59
8066629795	2	Spouse	Self + Spouse	Self + Spouse	August-44
8066684258	1	Subscriber	Self	Self	October-46
8066742239	1	Subscriber	Self	Self	August-43
8066936448	1	Subscriber	Self	Self	October-51
8067076912	1	Subscriber	Self	Self	October-47
8067202636	1	Subscriber	Self	Self	July-52
8068275573	1	Subscriber	Self	Self	February-49
8068329200	1	Subscriber	Self	Self	September-43
8068336559	1	Subscriber	Self + Spouse	Self + Spouse	October-58
8068336559	2	Spouse	Self + Spouse	Self + Spouse	May-54
8068348556	1	Subscriber	Self + Spouse	Self + Spouse	September-50
8068348556	2	Spouse	Self + Spouse	Self + Spouse	July-51
8068597118	1	Subscriber	Self + Spouse	Self + Spouse	December-54
8068597118	2	Spouse	Self + Spouse	Self + Spouse	November-53
8068749566	1	Subscriber	Self	Self	February-54
8068759694	1	Subscriber	Self + Spouse	Self + Spouse	September-49
8068759694	2	Spouse	Self + Spouse	Self + Spouse	October-47
8069054063	1	Subscriber	Self	Self	August-27
8069129180	1	Subscriber	Self + Spouse	Self + Spouse	April-64
8069129180	2	Spouse	Self + Spouse	Self + Spouse	March-55
8069156785	1	Subscriber	Self + Spouse	Self + Spouse	May-57

8069156785	2	Spouse	Self + Spouse	Self + Spouse	February-61
8069174153	1	Subscriber	Self	Self	March-36
8069239534	1	Subscriber	Self	Self	October-40
8069500095	1	Subscriber	Self + Spouse	Self + Spouse	March-47
8069500095	2	Spouse	Self + Spouse	Self + Spouse	July-46
8069682003	1	Subscriber	Self	Self	December-39
8069719546	1	Subscriber	Self	Self	August-48
8069930332	1	Subscriber	Self	Self	January-39
8070015505	1	Subscriber	Self	Self	May-38
8070024693	1	Subscriber	Self + Spouse	Self + Spouse	March-51
8070024693	2	Spouse	Self + Spouse	Self + Spouse	November-50
8070083078	1	Subscriber	Self + Spouse	Self + Spouse	May-56
8070083078	2	Spouse	Self + Spouse	Self + Spouse	March-54
8070126771	1	Subscriber	Self	Self	August-49
8070219629	1	Subscriber	Self + Spouse	Self + Spouse	October-54
8070219629	2	Spouse	Self + Spouse	Self + Spouse	December-56
8070251886	1	Subscriber	Self	Self	October-51
8070287470	1	Subscriber	Self + Spouse	Self + Spouse	January-56
8070287470	2	Spouse	Self + Spouse	Self + Spouse	July-58
8070430905	1	Subscriber	Self + Spouse	Self + Spouse	December-49
8070430905	2	Spouse	Self + Spouse	Self + Spouse	June-52
8070516892	1	Subscriber	Self + Spouse	Self + Spouse	October-54
8070516892	2	Spouse	Self + Spouse	Self + Spouse	October-57
8070549263	1	Subscriber	Self + Spouse	Self + Spouse	November-46
8070549263	2	Spouse	Self + Spouse	Self + Spouse	July-46
8070851231	1	Subscriber	Self + Spouse	Self + Spouse	October-47
8070851231	2	Spouse	Self + Spouse	Self + Spouse	November-45
8070875397	1	Subscriber	Self	Self	May-50
8070952072	1	Subscriber	Self	Self	November-63
8071008440	1	Subscriber	Self + Spouse	Self + Spouse	May-52
8071008440	2	Spouse	Self + Spouse	Self + Spouse	July-50
8071065306	1	Subscriber	Self	Self	February-48
8071153548	1	Subscriber	Self + Spouse	Self + Spouse	March-44

8071153548	2	Spouse	Self + Spouse	Self + Spouse	October-50
8071154603	1	Subscriber	Self + Spouse	Self + Spouse	October-61
8071154603	2	Spouse	Self + Spouse	Self + Spouse	June-58
8071214084	1	Subscriber	Self	Self	September-54
8071370076	1	Subscriber	Self	Self	July-43
8071425418	1	Subscriber	Self + Spouse	Self + Spouse	January-54
8071425418	2	Spouse	Self + Spouse	Self + Spouse	June-54
8071625037	1	Subscriber	Self + Spouse	Self + Spouse	July-46
8071625037	2	Spouse	Self + Spouse	Self + Spouse	October-48
8071714908	1	Subscriber	Self	Self	June-62
8071781154	1	Subscriber	Self + Spouse	Self + Spouse	August-53
8071781154	2	Spouse	Self + Spouse	Self + Spouse	December-41
8071882236	1	Subscriber	Self + Family	Self + Family	January-54
8071882236	3	Child	Self + Family	Self + Family	January-96
8071882236	4	Child	Self + Family	Self + Family	October-98
8071896079	1	Subscriber	Self + Spouse	Self + Spouse	August-38
8071896079	2	Spouse	Self + Spouse	Self + Spouse	January-40
8071907370	1	Subscriber	Self	Self	December-42
8072183587	1	Subscriber	Self	Self	September-47
8072220765	1	Subscriber	Self + Spouse	Self + Spouse	September-45
8072220765	2	Spouse	Self + Spouse	Self + Spouse	July-43
8072264287	1	Subscriber	Self + Spouse	Self + Spouse	January-43
8072264287	2	Spouse	Self + Spouse	Self + Spouse	May-48
8072393903	1	Subscriber	Self	Self	November-37
8072826994	1	Subscriber	Self	Self	September-36
8072892660	1	Subscriber	Self + Spouse	Self + Spouse	August-46
8072892660	2	Spouse	Self + Spouse	Self + Spouse	September-54
8072923194	1	Subscriber	Self	Self	March-44
8073152512	1	Subscriber	Self + Spouse	Self + Spouse	October-60
8073152512	2	Spouse	Self + Spouse	Self + Spouse	September-58
8073213592	1	Subscriber	Self + Spouse	Self + Spouse	May-54
8073213592	2	Spouse	Self + Spouse	Self + Spouse	November-54
8073325751	1	Subscriber	Self + Spouse	Self + Spouse	October-52

8073325751	2	Spouse	Self + Spouse	Self + Spouse	June-53
8073422702	1	Subscriber	Self + Children	Self + Children	December-55
8073422702	4	Child	Self + Children	Self + Children	October-95
8073422702	5	Child	Self + Children	Self + Children	December-97
8073525416	1	Subscriber	Self	Self	June-51
8073592037	1	Subscriber	Self	Self	July-61
8073843072	1	Subscriber	Self + Spouse	Self + Spouse	December-53
8073843072	2	Spouse	Self + Spouse	Self + Spouse	November-51
8074118858	1	Subscriber	Self	Self	July-45
8074186891	1	Subscriber	Self + Spouse	Self + Spouse	August-58
8074186891	2	Spouse	Self + Spouse	Self + Spouse	February-57
8074208597	1	Subscriber	Self + Spouse	Self + Spouse	April-55
8074208597	2	Spouse	Self + Spouse	Self + Spouse	March-51
8074272330	1	Subscriber	Self + Spouse	Self + Spouse	March-67
8074272330	2	Spouse	Self + Spouse	Self + Spouse	July-66
8074485619	1	Subscriber	Self	Self	April-48
8074640443	1	Subscriber	Self	Self	February-48
8074735699	1	Subscriber	Self	Self	July-47
8074938121	1	Subscriber	Self	Self	May-47
8074945604	1	Subscriber	Self	Self	December-45
8074958661	1	Subscriber	Self	Self	September-37
8075013449	1	Subscriber	Self + Spouse	Self + Spouse	March-58
8075013449	2	Spouse	Self + Spouse	Self + Spouse	October-60
8075029828	1	Subscriber	Self + Spouse	Self + Spouse	August-53
8075029828	2	Spouse	Self + Spouse	Self + Spouse	August-56
8075058054	1	Subscriber	Self + Spouse	Self + Spouse	January-55
8075058054	2	Spouse	Self + Spouse	Self + Spouse	February-59
8075064170	1	Subscriber	Self	Self	October-56
8075172955	1	Subscriber	Self	Self	October-47
8075370477	1	Subscriber	Self + Family	Self + Family	July-64
8075370477	2	Spouse	Self + Family	Self + Family	December-50
8075370477	3	Child	Self + Family	Self + Family	October-99
8075370477	4	Child	Self + Family	Self + Family	July-04

8075388642	1	Subscriber	Self + Spouse	Self + Spouse	November-46
8075388642	2	Spouse	Self + Spouse	Self + Spouse	January-46
8075539390	1	Subscriber	Self + Spouse	Self + Spouse	November-50
8075539390	2	Spouse	Self + Spouse	Self + Spouse	February-62
8075638499	1	Subscriber	Self	Self	October-57
8075660644	1	Subscriber	Self	Self	January-53
8075861028	1	Subscriber	Self	Self	July-37
8076127031	1	Subscriber	Self + Spouse	Self + Spouse	July-48
8076127031	2	Spouse	Self + Spouse	Self + Spouse	January-48
8076578900	1	Subscriber	Self	Self	July-41
8076593933	1	Subscriber	Self	Self	May-59
8076890550	1	Subscriber	Self	Self	March-58
8077024643	1	Subscriber	Self	Self	June-60
8077648180	1	Subscriber	Self + Spouse	Self + Spouse	August-55
8077648180	2	Spouse	Self + Spouse	Self + Spouse	May-43
8077708254	1	Subscriber	Self	Self	December-33
8077800798	1	Subscriber	Self	Self	September-56
8077917249	1	Subscriber	Self	Self	October-46
8078025237	1	Subscriber	Self + Spouse	Self + Spouse	July-51
8078025237	2	Spouse	Self + Spouse	Self + Spouse	November-45
8078747218	1	Subscriber	Self + Spouse	Self + Spouse	February-42
8078747218	2	Spouse	Self + Spouse	Self + Spouse	August-43
8078772864	1	Subscriber	Self	Self	September-40
8078883841	1	Subscriber	Self + Spouse	Self + Spouse	October-41
8078883841	2	Spouse	Self + Spouse	Self + Spouse	February-46
8079067258	1	Subscriber	Self + Spouse	Self + Spouse	September-48
8079067258	2	Spouse	Self + Spouse	Self + Spouse	January-50
8079070962	1	Subscriber	Self	Self	July-44
8079175299	1	Subscriber	Self + Spouse	Self + Spouse	September-57
8079175299	2	Spouse	Self + Spouse	Self + Spouse	February-60
8079255432	1	Subscriber	Self	Self	March-43
8079301553	1	Subscriber	Self + Spouse	Self + Spouse	January-59
8079301553	2	Spouse	Self + Spouse	Self + Spouse	May-61

8079317465	1	Subscriber	Self	Self	June-56
8079349411	1	Subscriber	Self + Spouse	Self + Spouse	November-56
8079349411	2	Spouse	Self + Spouse	Self + Spouse	November-60
8079398267	1	Subscriber	Self + Spouse	Self + Spouse	May-45
8079398267	2	Spouse	Self + Spouse	Self + Spouse	October-47
8079517552	1	Subscriber	Self	Self	January-33
8079563824	1	Subscriber	Self	Self	March-41
8079610796	1	Subscriber	Self	Self	December-47
8079819736	1	Subscriber	Self + Spouse	Self + Spouse	July-58
8079819736	2	Spouse	Self + Spouse	Self + Spouse	October-58
8079906421	1	Subscriber	Self	Self	January-50
8080372319	1	Subscriber	Self + Family	Self + Family	August-62
8080372319	2	Spouse	Self + Family	Self + Family	November-60
8080372319	3	Child	Self + Family	Self + Family	November-95
8080372319	4	Child	Self + Family	Self + Family	September-98
8080607865	1	Subscriber	Self + Spouse	Self + Spouse	August-58
8080607865	2	Spouse	Self + Spouse	Self + Spouse	April-51
8080776415	1	Subscriber	Self + Spouse	Self + Spouse	October-54
8080776415	2	Spouse	Self + Spouse	Self + Spouse	September-58
8081030506	1	Subscriber	Self	Self	January-27
8081145713	1	Subscriber	Self	Self	February-50
8081398256	1	Subscriber	Self + Spouse	Self + Spouse	December-37
8081398256	2	Spouse	Self + Spouse	Self + Spouse	July-51
8081418266	1	Subscriber	Self + Spouse	Self + Spouse	January-45
8081418266	2	Spouse	Self + Spouse	Self + Spouse	August-44
8081431128	1	Subscriber	Self	Self	July-56
8081475759	1	Subscriber	Self + Spouse	Self + Spouse	October-48
8081475759	2	Spouse	Self + Spouse	Self + Spouse	June-48
8081500508	1	Subscriber	Self	Self	August-55
8081700852	1	Subscriber	Self	Self	February-20
8081727409	1	Subscriber	Self + Spouse	Self + Spouse	May-35
8081727409	2	Spouse	Self + Spouse	Self + Spouse	April-42
8081819702	1	Subscriber	Self	Self	December-55

8081892537	1	Subscriber	Self + Spouse	Self + Spouse	November-50
8081892537	2	Spouse	Self + Spouse	Self + Spouse	July-51
8082278810	1	Subscriber	Self + Spouse	Self + Spouse	June-47
8082278810	2	Spouse	Self + Spouse	Self + Spouse	March-39
8082341730	1	Subscriber	Self	Self	November-63
8082397246	1	Subscriber	Self + Spouse	Self + Spouse	January-44
8082397246	2	Spouse	Self + Spouse	Self + Spouse	September-46
8082434011	1	Subscriber	Self	Self	March-54
8082557311	1	Subscriber	Self	Self	July-44
8082651291	1	Subscriber	Self + Family	Self + Family	February-58
8082651291	2	Spouse	Self + Family	Self + Family	June-60
8082651291	4	Child	Self + Family	Self + Family	April-89
8082664978	1	Subscriber	Self + Spouse	Self + Spouse	February-27
8082664978	2	Spouse	Self + Spouse	Self + Spouse	February-39
8082739440	1	Subscriber	Self + Spouse	Self + Spouse	March-41
8082739440	2	Spouse	Self + Spouse	Self + Spouse	September-41
8082884528	1	Subscriber	Self + Spouse	Self + Spouse	August-44
8082884528	2	Spouse	Self + Spouse	Self + Spouse	March-44
8083126674	1	Subscriber	Self	Self	October-53
8083138468	1	Subscriber	Self + Spouse	Self + Spouse	December-51
8083138468	2	Spouse	Self + Spouse	Self + Spouse	January-54
8083361701	1	Subscriber	Self	Self	May-48
8083771678	1	Subscriber	Self	Self	November-47
8083807668	1	Subscriber	Self + Spouse	Self + Spouse	September-39
8083807668	2	Spouse	Self + Spouse	Self + Spouse	November-41
8083822160	1	Subscriber	Self + Spouse	Self + Spouse	June-56
8083822160	2	Spouse	Self + Spouse	Self + Spouse	August-48
8083839925	1	Subscriber	Self	Self	February-52
8083849539	1	Subscriber	Self + Children	Self + Children	February-54
8083849539	3	Child	Self + Children	Self + Children	December-99
8083876311	1	Subscriber	Self + Spouse	Self + Spouse	October-50
8083876311	2	Spouse	Self + Spouse	Self + Spouse	February-51
8083906653	1	Subscriber	Self	Self	October-54

8084115580	1	Subscriber	Self + Spouse	Self + Spouse	April-43
8084115580	2	Spouse	Self + Spouse	Self + Spouse	April-48
8084169788	1	Subscriber	Self	Self	November-49
8084189521	1	Subscriber	Self + Spouse	Self + Spouse	October-46
8084189521	2	Spouse	Self + Spouse	Self + Spouse	October-44
8084242324	1	Subscriber	Self + Spouse	Self + Spouse	August-47
8084242324	2	Spouse	Self + Spouse	Self + Spouse	June-50
8084330806	1	Subscriber	Self	Self	January-42
8084784707	1	Subscriber	Self	Self	April-41
8084918190	1	Subscriber	Self	Self	October-35
8085005788	1	Subscriber	Self + Family	Self + Family	April-58
8085005788	2	Spouse	Self + Family	Self + Family	October-70
8085005788	3	Child	Self + Family	Self + Family	November-00
8085370853	1	Subscriber	Self	Self	April-26
8085511333	1	Subscriber	Self + Spouse	Self + Spouse	November-58
8085511333	2	Spouse	Self + Spouse	Self + Spouse	September-62
8085646073	1	Subscriber	Self + Spouse	Self + Spouse	November-38
8085646073	2	Spouse	Self + Spouse	Self + Spouse	December-35
8085710272	1	Subscriber	Self + Spouse	Self + Spouse	October-50
8085710272	2	Spouse	Self + Spouse	Self + Spouse	November-51
8085771198	1	Subscriber	Self + Spouse	Self + Spouse	September-46
8085771198	2	Spouse	Self + Spouse	Self + Spouse	February-53
8085898154	1	Subscriber	Self	Self	May-46
8086004030	1	Subscriber	Self	Self	March-50
8086213217	1	Subscriber	Self	Self	September-30
8086226098	1	Subscriber	Self + Spouse	Self + Spouse	September-51
8086226098	2	Spouse	Self + Spouse	Self + Spouse	October-55
8086301292	1	Subscriber	Self + Spouse	Self + Spouse	July-48
8086301292	2	Spouse	Self + Spouse	Self + Spouse	January-46
8086476333	1	Subscriber	Self	Self	January-48
8086659138	1	Subscriber	Self + Spouse	Self + Spouse	March-54
8086659138	2	Spouse	Self + Spouse	Self + Spouse	March-57
8086672014	1	Subscriber	Self	Self	December-43

8087006035	1	Subscriber	Self	Self	November-34
8087039992	1	Subscriber	Self	Self	November-44
8087112364	1	Subscriber	Self + Spouse	Self + Spouse	May-52
8087112364	2	Spouse	Self + Spouse	Self + Spouse	December-51
8087177999	1	Subscriber	Self	Self	January-51
8087362539	1	Subscriber	Self + Spouse	Self + Spouse	November-49
8087362539	2	Spouse	Self + Spouse	Self + Spouse	December-48
8087608195	1	Subscriber	Self	Self	July-74
8087830323	1	Subscriber	Self	Self	January-57
8087991887	1	Subscriber	Self	Self	February-54
8088040470	1	Subscriber	Self	Self	September-48
8088087456	1	Subscriber	Self	Self	November-50
8088216477	1	Subscriber	Self + Spouse	Self + Spouse	December-57
8088216477	2	Spouse	Self + Spouse	Self + Spouse	November-54
8088375374	1	Subscriber	Self + Spouse	Self + Spouse	January-42
8088375374	2	Spouse	Self + Spouse	Self + Spouse	April-42
8088425766	1	Subscriber	Self	Self	March-28
8088473567	1	Subscriber	Self + Spouse	Self + Spouse	August-53
8088473567	2	Spouse	Self + Spouse	Self + Spouse	February-48
8088495838	1	Subscriber	Self + Family	Self + Family	December-57
8088495838	2	Spouse	Self + Family	Self + Family	May-53
8088495838	3	Child	Self + Family	Self + Family	April-95
8088495838	4	Child	Self + Family	Self + Family	July-97
8088778593	1	Subscriber	Self + Spouse	Self + Spouse	November-48
8088778593	2	Spouse	Self + Spouse	Self + Spouse	July-47
8088834179	1	Subscriber	Self	Self	January-40
8088880268	1	Subscriber	Self	Self	July-53
8089570084	1	Subscriber	Self + Spouse	Self + Spouse	January-47
8089570084	2	Spouse	Self + Spouse	Self + Spouse	January-47
8089643132	1	Subscriber	Self	Self	May-58
8090017771	1	Subscriber	Self	Self	September-40
8090058707	1	Subscriber	Self	Self	February-30
8090194162	1	Subscriber	Self	Self	July-60

8090213661	1	Subscriber	Self	Self	August-42
8090259067	1	Subscriber	Self	Self	April-53
8090340439	1	Subscriber	Self	Self	March-47
8090368533	1	Subscriber	Self + Spouse	Self + Spouse	February-47
8090368533	2	Spouse	Self + Spouse	Self + Spouse	August-42
8090368790	1	Subscriber	Self	Self	June-49
8090462137	1	Subscriber	Self + Spouse	Self + Spouse	March-42
8090462137	2	Spouse	Self + Spouse	Self + Spouse	August-41
8090545086	1	Subscriber	Self	Self	December-64
8090731767	1	Subscriber	Self + Spouse	Self + Spouse	September-53
8090731767	2	Spouse	Self + Spouse	Self + Spouse	July-40
8090903189	1	Subscriber	Self + Spouse	Self + Spouse	October-56
8090903189	2	Spouse	Self + Spouse	Self + Spouse	September-59
8090940822	1	Subscriber	Self	Self	February-45
8090942691	1	Subscriber	Self	Self	August-48
8091236671	1	Subscriber	Self + Spouse	Self + Spouse	January-40
8091236671	2	Spouse	Self + Spouse	Self + Spouse	March-45
8091719715	1	Subscriber	Self	Self	November-53
8091758356	1	Subscriber	Self	Self	July-39
8091770492	1	Subscriber	Self	Self	March-52
8091843222	1	Subscriber	Self + Spouse	Self + Spouse	January-47
8091843222	2	Spouse	Self + Spouse	Self + Spouse	July-65
8092044803	1	Subscriber	Self	Self	November-38
8092157629	1	Subscriber	Self	Self	March-39
8092290202	1	Subscriber	Self + Spouse	Self + Spouse	August-43
8092290202	2	Spouse	Self + Spouse	Self + Spouse	January-44
8092334338	1	Subscriber	Self + Spouse	Self + Spouse	June-59
8092334338	2	Spouse	Self + Spouse	Self + Spouse	October-60
8092490347	1	Subscriber	Self + Spouse	Self + Spouse	December-45
8092490347	2	Spouse	Self + Spouse	Self + Spouse	February-44
8092566217	1	Subscriber	Self	Self	February-47
8092621479	1	Subscriber	Self + Family	Self + Family	March-55
8092621479	2	Spouse	Self + Family	Self + Family	May-59

8092621479	7	Child	Self + Family	Self + Family	August-97
8092686032	1	Subscriber	Self	Self	December-26
8092815374	1	Subscriber	Self	Self	November-49
8092823124	1	Subscriber	Self	Self	December-59
8093112643	1	Subscriber	Self	Self	May-49
8093283518	1	Subscriber	Self + Spouse	Self + Spouse	December-51
8093283518	2	Spouse	Self + Spouse	Self + Spouse	January-51
8093463478	1	Subscriber	Self	Self	May-42
8093508754	1	Subscriber	Self	Self	April-52
8093556061	1	Subscriber	Self + Spouse	Self + Spouse	July-53
8093556061	2	Spouse	Self + Spouse	Self + Spouse	February-57
8093604719	1	Subscriber	Self + Spouse	Self + Spouse	May-64
8093604719	2	Spouse	Self + Spouse	Self + Spouse	May-64
8093622003	1	Subscriber	Self	Self	July-59
8093688435	1	Subscriber	Self + Spouse	Self + Spouse	May-52
8093688435	2	Spouse	Self + Spouse	Self + Spouse	June-54
8093926908	1	Subscriber	Self + Spouse	Self + Spouse	December-59
8093926908	2	Spouse	Self + Spouse	Self + Spouse	July-60
8094064075	1	Subscriber	Self + Spouse	Self + Spouse	December-57
8094064075	2	Spouse	Self + Spouse	Self + Spouse	February-46
8094164418	1	Subscriber	Self + Spouse	Self + Spouse	January-63
8094164418	2	Spouse	Self + Spouse	Self + Spouse	October-63
8094421751	1	Subscriber	Self + Spouse	Self + Spouse	March-57
8094421751	2	Spouse	Self + Spouse	Self + Spouse	October-58
8094538497	1	Subscriber	Self	Self	January-55
8094735224	1	Subscriber	Self	Self	July-41
8094833848	1	Subscriber	Self	Self	May-41
8094881822	1	Subscriber	Self + Spouse	Self + Spouse	May-48
8094881822	2	Spouse	Self + Spouse	Self + Spouse	June-55
8094930325	1	Subscriber	Self	Self	August-55
8095051306	1	Subscriber	Self	Self	November-47
8095267973	1	Subscriber	Self + Family	Self + Family	October-66
8095267973	2	Spouse	Self + Family	Self + Family	October-64

8095267973	3	Child	Self + Family	Self + Family	March-02
8095329106	1	Subscriber	Self	Self	January-40
8095453699	1	Subscriber	Self	Self	February-52
8095584583	1	Subscriber	Self + Spouse	Self + Spouse	January-57
8095584583	2	Spouse	Self + Spouse	Self + Spouse	February-56
8095597972	1	Subscriber	Self + Spouse	Self + Spouse	October-58
8095597972	2	Spouse	Self + Spouse	Self + Spouse	March-59
8095835947	1	Subscriber	Self	Self	September-49
8095933605	1	Subscriber	Self + Spouse	Self + Spouse	March-56
8095933605	2	Spouse	Self + Spouse	Self + Spouse	March-56
8096145146	1	Subscriber	Self + Spouse	Self + Spouse	May-55
8096145146	2	Spouse	Self + Spouse	Self + Spouse	August-45
8096242944	1	Subscriber	Self	Self	February-27
8096245842	1	Subscriber	Self	Self	July-55
8096299133	1	Subscriber	Self	Self	November-50
8096790987	1	Subscriber	Self + Family	Self + Family	November-62
8096790987	2	Spouse	Self + Family	Self + Family	April-63
8096790987	5	Child	Self + Family	Self + Family	January-99
8096823257	1	Subscriber	Self	Self	January-49
8096998534	1	Subscriber	Self + Spouse	Self + Spouse	July-65
8096998534	2	Spouse	Self + Spouse	Self + Spouse	March-62
8097223271	1	Subscriber	Self + Spouse	Self + Spouse	April-55
8097223271	2	Spouse	Self + Spouse	Self + Spouse	July-46
8097269393	1	Subscriber	Self	Self	August-51
8097413161	1	Subscriber	Self	Self	April-34
8097430816	1	Subscriber	Self + Spouse	Self + Spouse	May-49
8097430816	2	Spouse	Self + Spouse	Self + Spouse	September-52
8097482421	1	Subscriber	Self	Self	November-50
8097561707	1	Subscriber	Self + Spouse	Self + Spouse	February-48
8097561707	2	Spouse	Self + Spouse	Self + Spouse	July-50
8097577238	1	Subscriber	Self	Self	November-47
8097798039	1	Subscriber	Self	Self	June-54
8097927748	1	Subscriber	Self	Self	July-22

8098035940	1	Subscriber	Self + Spouse	Self + Spouse	August-52
8098035940	2	Spouse	Self + Spouse	Self + Spouse	March-52
8098045455	1	Subscriber	Self + Family	Self + Family	April-64
8098045455	2	Spouse	Self + Family	Self + Family	October-64
8098045455	3	Child	Self + Family	Self + Family	December-97
8098045455	4	Child	Self + Family	Self + Family	April-00
8098066365	1	Subscriber	Self	Self	May-39
8098144378	1	Subscriber	Self + Family	Self + Family	November-66
8098144378	2	Spouse	Self + Family	Self + Family	May-63
8098144378	3	Child	Self + Family	Self + Family	October-97
8098144378	4	Child	Self + Family	Self + Family	April-03
8098389066	1	Subscriber	Self	Self	April-37
8098394835	1	Subscriber	Self + Spouse	Self + Spouse	June-47
8098394835	2	Spouse	Self + Spouse	Self + Spouse	October-47
8098447597	1	Subscriber	Self + Spouse	Self + Spouse	September-60
8098447597	2	Spouse	Self + Spouse	Self + Spouse	September-58
8098458796	1	Subscriber	Self	Self	July-31
8098604614	1	Subscriber	Self + Spouse	Self + Spouse	March-59
8098604614	2	Spouse	Self + Spouse	Self + Spouse	February-61
8098610538	1	Subscriber	Self + Spouse	Self + Spouse	March-54
8098610538	2	Spouse	Self + Spouse	Self + Spouse	August-54
8098796125	1	Subscriber	Self + Spouse	Self + Spouse	December-57
8098796125	2	Spouse	Self + Spouse	Self + Spouse	January-64
8098857189	1	Subscriber	Self + Spouse	Self + Spouse	April-44
8098857189	2	Spouse	Self + Spouse	Self + Spouse	May-51
8099516992	1	Subscriber	Self	Self	May-46
8099647467	1	Subscriber	Self	Self	January-64
8099716339	1	Subscriber	Self	Self	July-55
8099932682	1	Subscriber	Self	Self	May-50
8099953532	1	Subscriber	Self + Spouse	Self + Spouse	April-57
8099953532	2	Spouse	Self + Spouse	Self + Spouse	December-56

Subscriber Hire Date	Eligibility Effective Date	Eligibility Termination Date	Member Address Line 1
6/19/1989	12/13/2017		39 PAGET ROAD
12/22/1984	3/1/2017		1101 OAK WAY
12/22/1984	3/1/2017		1101 OAK WAY
	10/1/2008		306 N SECOND ST
	1/1/2013		618 JUPITER DR APT 4011
	3/1/2009		1708 NORTHFIELD PL
2/1/1985	5/1/2007		6336 BRIARCLIFF LANE
2/1/1985	5/1/2007		6336 BRIARCLIFF LANE
	12/1/2017		1906 SHERIDAN DR
	12/1/2017		1906 SHERIDAN DR
8/23/1993	1/1/2015		5114 STONEHAVEN DR
	11/1/2014		6762 GOEDEN RD
	10/1/2012		733 WILLOW CREEK PKWY
	10/1/2012		733 WILLOW CREEK PKWY
12/22/1984	2/1/2017		14045 QUARRY DR
12/22/1984	2/1/2017		14045 QUARRY DR
	10/1/2008		1628 WAUNONA WAY
	3/1/2010		1716 RUSTIC DR
	3/1/2010		1716 RUSTIC DR
	1/1/2006		2048 WILLIAMS DRIVE
5/14/2001	11/1/2015		1712 DELAWARE DR APT 1
9/25/1989	10/1/2018		10 CHEROKEE CIRCLE 202
2/2/1998	2/1/2019		13081 N VINTAGE DR
2/2/1998	2/1/2019		13081 N VINTAGE DR

7/5/1977	3/1/2015		420 NEW AGE CIR
	9/1/2011		534 LAKE WISCONSIN DR
	9/1/2011		534 LAKE WISCONSIN DR
	2/1/2013		547 S RANDALL AVE
	2/1/2013		547 S RANDALL AVE
	9/1/2020		5338 COMANCHE WAY
	9/1/2020		5338 COMANCHE WAY
9/8/2009	2/1/2018		808 GARFIELD ST
	2/1/2010		1309 DEBRA LN
	4/1/2006		4865 MAPLE AVE
	4/1/2006		4865 MAPLE AVE
5/11/2008	5/1/2015		708 PARK ST
5/11/2008	5/1/2015		708 PARK ST
	3/1/2020		211 FOREST ST
	3/1/2017		1730 N SHERMAN AVE
	1/1/2007		1657 S JARGO RD
7/31/1995	3/1/2020		605 CLEMONS AVE
7/31/1995	3/1/2020		605 CLEMONS AVE
9/25/1989	6/4/2016		3150 CASTLETON CROSSING
9/25/1989	6/4/2016		3150 CASTLETON CROSSING
12/22/1984	6/1/2015		5409 GREENLEAF DR
12/22/1984	6/1/2015		5409 GREENLEAF DR
5/11/2008	2/1/2017		4413 ODANA RD
	4/1/2019		702 EAGLE CREST DR
	4/1/2019		702 EAGLE CREST DR
	4/1/2019		702 EAGLE CREST DR
	4/1/2019		702 EAGLE CREST DR
10/13/1993	12/1/2018		1330 N STOUGHTON RD APT 4
4/1/1980	1/1/2013		5532 CENTURY AVE 2
	12/1/2008		3010 PELHAM ROAD
6/19/1989	4/1/2010		3802 PAUS ST
3/27/1988	9/1/2019		2917 WINTER PARK PL
3/27/1988	9/1/2019		2917 WINTER PARK PL

3/27/1988	9/1/2019		2917 WINTER PARK PL
3/27/1988	9/1/2019		2917 WINTER PARK PL
	4/1/2008		4252 N LINCOLN AVE
	2/1/2020		208 ELLEN COURT
11/17/1991	5/1/2011		3150 DORCHESTER WAY
6/19/1989	10/1/2020		506 BRIAN ST
6/19/1989	4/1/2008		PO BOX 1351
6/19/1989	4/1/2008		PO BOX 1351
8/12/1991	5/1/2013		2 HALLOWS CIRCLE
	6/1/2011		APT 2009
	4/1/2020		1012 PASADENA PKWY
	4/1/2006		421 TOEPFER AVE
	4/1/2006		421 TOEPFER AVE
	12/1/2010		143 BRICKSON RD
	7/1/2020		3303 GREGORY STREET
	10/1/2008		633 SPRINGBROOK CIR
	10/1/2017		W4619 CTY HWY K
	2/1/2014		N2956 MICHAEL DR
3/10/2014	8/1/2016		N3043 E ROCKDALE RD
3/10/2014	8/1/2016		N3043 E ROCKDALE RD
	1/1/2021		649 SPRINGBROOK CIR
	1/1/2006		902 N HIGH POINT RD APT 248
12/22/1984	3/1/2008		5355 HANSONS LANDING 401
12/22/1984	3/1/2008		5355 HANSONS LANDING 401
	3/1/2015		29465 GROSBEAK RD
	1/1/2006		5413 HERRO LN
12/22/1984	2/1/2014		8501 GREENWAY BLVD 105
	6/1/2008		201 SOUTH YELLOWSTONE DR 200
	1/1/2006		325 PRAIRIE WAY BLVD APT 311
	2/1/2012		601 SAMUEL DR
2/22/1993	11/1/2016		W7390 REYNOLDS DR
	1/1/2020		5309 GROVELAND TER
	2/1/2011		2808 ALLEGHENY DR

6/2/2008	5/1/2017		1438 HOOKER AVE
4/1/1988	2/1/2010		815 NEW WATERFORD DR APT 101
8/21/1995	3/1/2021		105 FRIGATE DR
8/21/1995	3/1/2021		105 FRIGATE DR
8/21/1995	3/1/2021		105 FRIGATE DR
	8/1/2020		9401 OLD SAUK ROAD APT 343
1/1/1985	1/1/2006		227 PARKVIEW LANE
	1/1/2017		2005 RAE LN
	1/1/2017		2005 RAE LN
	2/1/2021		215 MEMPHIS AVE
	1/1/2006		APT 125
2/1/1985	8/1/2014		359 GOLDEN AVE
4/23/2001	7/1/2020		3399 SWINBURNE DR
4/23/2001	7/1/2020		3399 SWINBURNE DR
3/12/1989	4/1/2017		N5302 HWY SS
3/12/1989	4/1/2017		N5302 HWY SS
	4/1/2014		W5819 DURST RD
	4/1/2014		W5819 DURST RD
	11/1/2014		5070 COUNTY TRUNK KP
9/1/1977	1/1/2016		18 ELDON CT
9/1/1977	1/1/2016		18 ELDON CT
	12/1/2019		4796 VERNON RD
4/1/1980	12/1/2020		2822 IRVINGTON WAY
4/1/1980	12/1/2020		2822 IRVINGTON WAY
	5/1/2018		29 N SEVENTH ST
	5/1/2018		29 N SEVENTH ST
6/19/1989	10/1/2008		5505 ENGLEWOOD DR
6/19/1989	10/1/2008		5505 ENGLEWOOD DR
	6/25/2018		1665 BARBER RD
	10/1/2020		1019 ASH LANE
	10/1/2020		1019 ASH LANE
	4/1/2006		2210 SCHROEDER LANE
	4/1/2006		2210 SCHROEDER LANE

	1/1/2014		1885 RANGE TRL
	1/1/2014		1885 RANGE TRL
2/1/1985	3/1/2016		1508 HORSESHOE CIRCLE
	1/1/2007		810 POWERS AVE
3/18/1996	3/1/2020		1335 JUDD RD
3/18/1996	3/1/2020		1335 JUDD RD
	9/1/2016		2214 CENTER AVE
	4/1/2008		1830 ROWLEY AVE
	4/1/2008		1830 ROWLEY AVE
1/19/1993	8/1/2016		621 LAKE SHORE DR
6/15/1992	11/1/2020		6822 VALIANT DR
7/1/1985	9/1/2006		1510 20TH ST
	5/1/2015		7314 SHOWER CT
	5/1/2015		7314 SHOWER CT
	4/1/2010		9 INVERRARY CT
	1/1/2006		287 KEARNEY WAY
1/2/2009	3/1/2009		3015 EDMONTON DR
	10/1/2018		808 LEVANGER LN
	10/1/2018		808 LEVANGER LN
	10/1/2018		808 LEVANGER LN
	3/1/2019		6539 LINDEN CIR
	3/1/2019		6539 LINDEN CIR
	1/1/2007		5726 MEADOWOOD DR
10/12/1987	12/1/2020		2105 LAKELAND AVE
10/12/1987	12/1/2020		2105 LAKELAND AVE
	1/1/2006		3939 HWY 19
	3/1/2019		813 SOUTH SHORE DR
	3/1/2019		813 SOUTH SHORE DR
	2/1/2021		2720 JACQUELYN DR
8/12/1991	10/1/2008		815 NEW WATERFORD DR APT 101
	7/16/2020		4809 MARSH RD
4/23/2001	6/1/2016		227 S FAIR OAKS AVE
4/1/1980	5/1/2016		6795 HWY 73

	1/1/2006		201 N WALBRIDGE AVE APT 322
	1/1/2006		1924 HAWKINSON
	3/1/2021		1510 GOLF VIEW RD UNIT F
	3/1/2021		1510 GOLF VIEW RD UNIT F
9/7/1977	11/1/2009		920 HUBBELL ST
	2/1/2021		2514 BIGLER CIR
	2/1/2021		2514 BIGLER CIR
	6/1/2007		328 HUBBELL ST
	6/1/2007		328 HUBBELL ST
4/5/1976	2/1/2016		1210 DEBRA LANE
4/1/1985	6/1/2020		220 W GARFIELD ST APT 2
	1/1/2021		14 BROOKINS CT
	1/1/2021		14 BROOKINS CT
	4/1/2007		6798 WOODLAND DR
	5/1/2008		5490 CADDIS BEND APT 204
	7/1/2012		4623 WILLOW ST
12/22/1984	7/1/2012		849 W UNION BELL DR
	11/1/2019		71 MAYFLOWER CR
	4/1/2017		1009 COTTONWOOD DR
	1/1/2021		6108 EXCHANGE ST
	1/1/2021		6108 EXCHANGE ST
2/1/1985	1/1/2007		106 VIRGINIA TERR
2/1/1985	1/1/2007		106 VIRGINIA TERR
2/1/1985	1/1/2007		106 VIRGINIA TERR
9/1/1985	3/1/2014		4001 HIAWATHA DR
9/1/1985	3/1/2014		4001 HIAWATHA DR
	4/13/2014		7110 DONNA DR
	4/1/2009		901 CTH MM
	2/1/2010		601 VALLEY ST
	2/1/2010		601 VALLEY ST
4/18/2006	5/1/2015		APT 111
4/18/2006	5/1/2015		APT 111
4/18/2006	5/1/2015		APT 111

	3/1/2018		N1119 INGLES DRIVE
	3/1/2018		N1119 INGLES DRIVE
	12/1/2020		703 WEST ST
	10/1/2019		5110 BLACK OAK DR
2/22/1993	10/1/2020		1122 GLACIER HILL DR
	1/1/2008		1020 LIBERTY BLVD APT 304
	1/1/2007		10890 CAVE MOUNDS RD
	1/1/2007		10890 CAVE MOUNDS RD
5/1/2008	10/1/2008		2137 LAKELAND AVE
5/1/2008	10/1/2008		2137 LAKELAND AVE
	9/1/2009		4918 KNOX LANE
	9/1/2009		4918 KNOX LANE
2/25/2003	9/1/2020		40 SHERMAN COURT
2/25/2003	9/1/2020		40 SHERMAN COURT
2/25/2003	9/1/2020		40 SHERMAN COURT
	3/1/2016		502 SOUTH ST
	3/1/2016		502 SOUTH ST
2/24/2003	3/1/2015		4457 DEWEY DRIVE
2/24/2003	3/1/2015		4457 DEWEY DRIVE
	2/1/2017		3762 LARS VALE RD
	2/1/2017		3762 LARS VALE RD
	2/1/2013		9139 N RAVEN DR
12/22/1984	10/1/2008		1903 SW PALM CITY RD APT I
	10/1/2012		2735 RIVER DR
	10/1/2012		2735 RIVER DR
4/1/1980	9/1/2009		W7061 THOMAN RD
4/1/1980	9/1/2009		W7061 THOMAN RD
4/22/1992	9/1/2018		515 S MIDVALE BLVD APT 128
	1/1/2019		3446 RICHARD ST
12/22/1984	6/1/2008		970 WALNUT ST
	6/1/2018		6409 BRIDGE RD APT 204
	4/1/2018		601 SAWYER 5212
2/1/1985	10/1/2008		613 CENTER ST

6/19/1989	1/1/2016		4272 PELLA LANE
6/19/1989	1/1/2016		4272 PELLA LANE
	1/1/2006		APT 201
	1/21/2021		5946 RIVER RD
	3/1/2018		W3998 HWY 106
	3/1/2018		W3998 HWY 106
	3/1/2018		W3998 HWY 106
12/22/1984	9/1/2011		927 EMERALD ST
	1/1/2006		617 HAVEY ROAD
	1/1/2006		APT 306
	8/1/2009		812 MCCLELLAN DR
	8/1/2008		512 HANKS HOLLOW TRAIL
	7/1/2007		1204 HIAWATHA DRIVE
	7/1/2007		1204 HIAWATHA DRIVE
4/1/1980	10/1/2008		N3946 OLD F ROAD
	3/1/2018		6472 HARVEST MOON CT
	3/1/2018		6472 HARVEST MOON CT
	10/1/2008		585 TOEPFER AVENUE
	3/1/2015		917 ROBY RD
	3/1/2015		917 ROBY RD
6/1/2004	5/1/2017		2965 SIGGELKOW ROAD
6/1/2004	5/1/2017		2965 SIGGELKOW ROAD
4/11/1994	2/1/2021		5403 HANKINS CT
4/11/1994	2/1/2021		5403 HANKINS CT
4/11/1994	2/1/2021		5403 HANKINS CT
4/11/1994	2/1/2021		5403 HANKINS CT
4/11/1994	2/1/2021		5403 HANKINS CT
8/5/1973	10/1/2008		5120 N AUTUMN LANE
2/1/1985	8/1/2019		W6283 STATE RD 60
2/1/1985	8/1/2019		W6283 STATE RD 60
11/2/1976	2/1/2016		1210 DEBRA LANE
	2/1/2009		10933 CAVE OF THE MOUNDS
	2/1/2009		10933 CAVE OF THE MOUNDS

	9/1/2017		517 PLUTO ST
	9/1/2017		517 PLUTO ST
11/15/1993	2/1/2019		490 ORCHARD DR
11/15/1993	2/1/2019		490 ORCHARD DR
	10/1/2008		305 ASH
	3/1/2015		601 BERGUM RD
	3/1/2010		N8238 COUNTY ROAD D
	3/1/2010		N8238 COUNTY ROAD D
	4/1/2006		3354 RIDGEWAY AVE
	4/1/2006		3354 RIDGEWAY AVE
	4/1/2019		845 SHOOTING STAR CIR
	4/1/2019		845 SHOOTING STAR CIR
4/25/2000	3/1/2015		5023 MANITOWOC PKWY
	1/1/2006		APT 205
	5/12/2013		APT 111A
	10/5/2016		717 GANNON AVE
	10/1/2018		N7421 NEWVILLE RD
	10/1/2018		N7421 NEWVILLE RD
4/1/1985	6/1/2018		608 HARRISON ST
	4/1/2020		2295 GOLD DR
	4/1/2013		2530 LEOPOLD WAY
3/12/2001	4/1/2019		8939 PINE HALLOW PL
3/12/2001	4/1/2019		8939 PINE HALLOW PL
3/1/1985	4/1/2014		N7970 GOULD HILL RD
3/1/1985	4/1/2014		N7970 GOULD HILL RD
3/1/1985	4/1/2014		N7970 GOULD HILL RD
3/1/1985	4/1/2014		N7970 GOULD HILL RD
3/1/1985	4/1/2014		N7970 GOULD HILL RD
	6/1/2010		3200 CONSERVANCY LN
	3/1/2016		6160 DELL DRIVE APT 110
9/8/1980	7/1/2015		19938 N RAWHIDE WAY
3/27/2005	8/1/2012		3803 MONONA DR APT 311
	4/1/2007		6711 NORTH AVE

	6/1/2018		S7672 LUCILLE LN
11/21/1988	3/1/2010		PO BOX 283
11/21/1988	3/1/2010		PO BOX 283
	9/1/2020		2891 WAUBESA AVE
	9/1/2020		2891 WAUBESA AVE
	10/1/2008		14 SHERMAN TERRACE 4
	10/1/2008		14 SHERMAN TERRACE 4
	7/1/2007		8202 HIGH VIEW DR 153
	7/1/2007		8202 HIGH VIEW DR 153
	9/1/2012		429 E LINNERUD DR
4/15/2009	5/1/2018		1610 SHANDOAH DR
	10/1/2020		63 BRAEBURN WAY
	4/1/2015		124 E NORTH ST
	4/1/2015		124 E NORTH ST
11/17/1991	4/1/2009		W4939 STATE RD 106
7/2/1985	6/1/2013		2 HOLLYBROOK CT
7/2/1985	6/1/2013		2 HOLLYBROOK CT
	12/1/2017		3472 FREEDOM LN
	12/1/2017		3472 FREEDOM LN
	12/1/2017		3472 FREEDOM LN
9/11/2000	11/1/2015		7410 NORTH PASS
9/11/2000	11/1/2015		7410 NORTH PASS
	2/1/2010		709 WHEELER RD
9/29/1984	7/1/2015		2813 OAKRIDGE AVE
3/1/1985	4/1/2016		APT 206
11/10/2008	4/1/2018		W3830 MOORE RD
	4/1/2006		3410 SUNNY LN
	4/1/2006		3410 SUNNY LN
4/12/1999	11/1/2014		624 LOUIS CT
	10/1/2008		28850 COZY ACRES LN
3/1/1985	11/1/2010		1135 E DAYTON ST
4/14/1997	2/1/2012		1248 GASLIGHT DR
4/14/1997	2/1/2012		1248 GASLIGHT DR

4/1/1980	2/1/2013		5677 RIVER RD
4/1/1980	2/1/2013		5677 RIVER RD
	1/1/2012		2189 RINDEN ROAD
3/6/1978	1/1/2013	3/31/2021	8 VICKSBURG COURT
3/6/1978	1/1/2013	3/31/2021	8 VICKSBURG COURT
	2/1/2013		1134 STANEK RD
	2/1/2013		1134 STANEK RD
3/1/1985	2/1/2010		991 CTH N
	1/1/2006		1811 BARANCO WAY
	2/1/2021		710 MESTA LN 2
	2/1/2021		710 MESTA LN 2
1/1/1996	9/1/2015		2302 DANBURY ST
	10/1/2008		5513 SCHLUTER RD
	10/1/2008		5513 SCHLUTER RD
	8/1/2010		2730 BIRCHWOOD PASS
	4/1/2014		W11360 HWY 127
6/5/2000	10/1/2010		425 N MAIN
1/4/1993	3/1/2009		2756 YAHARA RD
1/4/1993	3/1/2009		2756 YAHARA RD
11/21/1988	10/1/2008		1096 IVAWOOD WAY
4/1/1985	3/1/2020		109 W KOHLER ST
	10/1/2008		5198 WILD HEATHER DR
	10/1/2008		5198 WILD HEATHER DR
2/2/2009	8/1/2014		18962 OLD Q RD
2/2/2009	8/1/2014		18962 OLD Q RD
	2/28/2020		745 KENSINGTON SQ
	1/1/2006		116 ANASTASIA LAKES DRIVE
	5/1/2015		414 S MAIN ST
	1/1/2006		1801 MANLEY ST
5/11/2008	9/1/2013		P O BOX 6012
4/21/1993	4/1/2016		4506 ODANA RD
	8/1/2013		5120 SPAANEM AVE
	8/1/2013		5120 SPAANEM AVE

7/1/1985	3/1/2011		3094 SHADYSIDE DR
7/1/1985	3/1/2011		3094 SHADYSIDE DR
5/11/2008	8/19/2020		4501 AZTEC TRAIL
9/25/1989	12/1/2016		7626 MIDTOWN RD APT 105
9/25/1989	12/1/2016		7626 MIDTOWN RD APT 105
	10/1/2008		5750 CTY J
	10/1/2008		5750 CTY J
	11/1/2009		1033 BAY RIDGE RD
	10/1/2008		5304 HOUGH ST
	6/1/2013		217 AVALON ROAD
	6/1/2013		217 AVALON ROAD
	5/1/2008		895 HIGHLAND TRL
3/1/1985	2/1/2010		1501 JACKSON ST
	3/1/2014		6402 MOUND DR
	3/1/2014		6402 MOUND DR
5/11/2008	6/1/2016		6678 EAST CRIMSON SAGE DR
5/11/2008	6/1/2016		6678 EAST CRIMSON SAGE DR
2/24/2003	9/1/2019		17 S WICKHAM CT APT 2
1/5/1998	8/1/2012		1512 RUTLEDGE ST
1/5/1998	8/1/2012		1512 RUTLEDGE ST
4/1/1980	3/1/2014		54 ROCK GROVE DR
4/1/1980	3/1/2014		54 ROCK GROVE DR
	10/1/2014		12856 E PONCE ST
	1/1/2007		120 E KOHLER
	1/1/2006		405 BLUE VIEW DR
	2/1/2021		421 GANNON AVE
5/4/1987	7/1/2019		5607 BARBARA DR
10/16/1995	5/1/2020		8313 SHALE DR
	1/1/2006		9054 FARVIEW RD
	8/1/2020		1954 SCHLIMGEN AVE
	11/1/2011		P O BOX 578
11/1/1988	5/1/2017		2937 SETTLEMENT DR
11/1/1988	5/1/2017		2937 SETTLEMENT DR

1/12/1998	3/1/2020		UNIT B
1/12/1998	3/1/2020		UNIT B
7/11/1993	9/1/2007		W3296 NORTON RD
	10/24/2015		5441 KALESEY CT 61
	12/1/2014		5226 KEVINS WAY
	8/1/2010		PO BOX 336
	10/1/2008		40 POND VIEW WAY
3/1/1980	4/1/2012		7139 LIGHTHOUSE DR
4/17/1995	8/1/2018		1014 FRIAR LANE
4/17/1995	8/1/2018		1014 FRIAR LANE
12/5/1988	8/1/2012		710 E STATE ST
9/9/1991	2/1/2016		165 DIVISON ST APT 1
	1/1/2011		2110 SHAFER DR
	3/1/2019		6302 MINERAL POINT RD UNIT 107
	3/1/2019		6302 MINERAL POINT RD UNIT 107
11/17/1991	10/1/2012		711 KENSINGTON SQ
11/17/1991	10/1/2012		711 KENSINGTON SQ
2/1/1985	2/1/2012		902 NORTH EDGE TRAIL
2/1/1985	2/1/2012		902 NORTH EDGE TRAIL
12/1/2018	12/1/2018		104 EAST ST
9/25/1989	12/1/2018		28 PAGET RD
	3/1/2021		684 HARVEST LN
	3/1/2021		684 HARVEST LN
	3/1/2021		684 HARVEST LN
	3/1/2021		684 HARVEST LN
	9/1/2011		1317 DALE AVE
	9/1/2011		1317 DALE AVE
	9/1/2012		2031 FLOWERING DR
3/7/1983	5/1/2018		2618 HOLSTEIN LN
3/7/1983	5/1/2018		2618 HOLSTEIN LN
10/8/2012	2/1/2021		416 DEVONSHIRE RD
2/1/1985	9/1/2020		2708 BAER ST
2/1/1985	9/1/2020		2708 BAER ST

	1/1/2006		3538 WYOTA AVE
4/1/1980	10/1/2014		225 S MAIN ST
7/1/1985	6/1/2017		2950 SNOWMIST TRAIL
7/1/1985	6/1/2017		2950 SNOWMIST TRAIL
4/17/2012	6/1/2012		PO BOX 1546
	7/1/2014		3022 FAIRVIEW ST APT 2
	2/1/2013		5005 IRONWOOD DR
	10/1/2018		6864 TUSCAN RIDGE CIRCLE
	10/1/2018		6864 TUSCAN RIDGE CIRCLE
	9/1/2014		2990 ROIDT DR
	9/1/2014		2990 ROIDT DR
9/1/1985	6/1/2018		6708 MAPLE CT
9/1/1985	6/1/2018		6708 MAPLE CT
1/27/1980	7/1/2015		145 S MARQUETTE ST
1/27/1980	7/1/2015		145 S MARQUETTE ST
	3/1/2020		880 GARDEN DR 89
	10/1/2006		1100 MCCOY PARK RD
	10/1/2006		1100 MCCOY PARK RD
	4/1/2015		1033 GREIG TRAIL
	4/1/2015		1033 GREIG TRAIL
	4/1/2008		4025 TOKAY BLVD
	1/1/2010		1640 KOSHKONONG RD
	1/1/2010		1640 KOSHKONONG RD
	1/1/2010		1640 KOSHKONONG RD
	4/1/2015		5749 BITTERSWEET PL
	4/1/2015		5749 BITTERSWEET PL
	4/1/2015		5749 BITTERSWEET PL
3/1/1985	3/1/2021		5865 POND ROAD
	3/1/2013		4226 BROWN LANE
	3/1/2013		4226 BROWN LANE
	2/1/2010		5395 WESTPORT RD
	2/1/2010		5395 WESTPORT RD
	8/1/2018		4640 HWY TT

	8/1/2018		4640 HWY TT
	3/1/2021		5481 MARIE RD
	3/1/2021		5481 MARIE RD
	3/1/2017		1629 WAUNONA WAY
11/17/1991	2/1/2015		450 HILLCREST LANE
12/22/1984	3/1/2012		1151 FITNESS RUN
12/22/1984	3/1/2012		1151 FITNESS RUN
	9/1/2020		921 BLAINE DRIVE
1/11/1993	2/1/2021		PO BOX 137
1/11/1993	2/1/2021		PO BOX 137
3/29/1999	6/1/2020		4909 BUCKEYE RD
	2/1/2019		733 HINTZE RD
4/10/2000	7/1/2017		105 FROSTY CT
	11/1/2009		PO BOX 1
	11/1/2009		PO BOX 1
	1/31/2021		N8228 HWY J
	11/1/2012		1322 BLACKWOLF TR
	11/1/2012		1322 BLACKWOLF TR
7/1/1985	3/1/2019		912 WOODWARD DR
	3/1/2017		N1723 STATE ROAD 22
	3/1/2017		N1723 STATE ROAD 22
	2/1/2011		406 MEADOW CREST TRAIL
	2/1/2011		406 MEADOW CREST TRAIL
	6/1/2008		441 S SECOND ST
2/2/1998	10/1/2019		202 MORNINGSIDE AVE
	3/1/2016		1105 BURNINGWOOD WAY
	3/1/2016		1105 BURNINGWOOD WAY
4/27/2009	8/1/2015		1821 JENIFER ST
4/27/2009	8/1/2015		1821 JENIFER ST
	1/1/2006		4018 ALPINE AVE
	3/1/2010		1 POINSETTIA DR
	8/1/2017		100 FEMRITE DR 208
	8/1/2017		100 FEMRITE DR 208

	12/1/2009		1 MAPLE WOOD LA NO 301
	12/1/2010		1858 CTH A
	11/1/2013		1117 LINCOLN RD
2/1/1985	4/1/2016		3656 BERG RD
7/1/1985	10/1/2008		60 CAMPION DR
7/1/1985	10/1/2008		60 CAMPION DR
	5/4/2016		6519 CHESTNUT CIRCLE
	7/1/2018		5113 CONEY WESTON PL
	7/1/2018		5113 CONEY WESTON PL
	11/1/2009		111 EMILY CIR
	11/1/2009		111 EMILY CIR
	4/1/2020		3827 MONONA DR APT 73
	1/1/2007		PO BOX 8
1/12/1998	7/1/2014		5002 SHORE ACRES RD
1/12/1998	7/1/2014		5002 SHORE ACRES RD
1/12/1998	7/1/2014		5002 SHORE ACRES RD
6/19/1989	3/1/2015		1643 FRITZ RD
6/11/2007	10/1/2017		201 THIRD AVE 25
7/1/1985	2/1/2013		1222 MEADOWLARK DRIVE
	10/1/2015		1219 2ND ST BOX 485
2/10/1992	4/1/2018		424 CAPITAL ST
	1/1/2017		655 SCOTT ST
	11/1/2018		5766 WILSHIRE DR
	4/25/2020		440 WATER ST UNIT 304
12/22/1984	1/1/2019		813 CARINA LN
12/22/1984	1/1/2019		813 CARINA LN
7/1/1985	4/1/2017		3605 LAKE VIEW DR
7/1/1985	4/1/2017		3605 LAKE VIEW DR
	4/1/2015		4259 MOHAWK DR
8/12/1991	6/1/2018		239 C THOMSON LN
8/12/1991	6/1/2018		239 C THOMSON LN
	10/1/2013		4158 LADYBANK ST
	10/1/2013		4158 LADYBANK ST

	10/1/2010		W8401 KENT RD
2/2/2010	4/1/2010		916 HIALEAH ST
2/2/2010	4/1/2010		916 HIALEAH ST
12/22/1984	8/1/2014		5644 LOVICK RD
	4/1/2012		4549 FALCON CT
2/11/1990	8/1/2014		6901 FIELDWOOD RD
11/9/1976	6/1/2013		5722 BITTERSWEET PL
8/12/1991	4/1/2006		613 SOUTH SHORE DR
8/12/1991	4/1/2006		613 SOUTH SHORE DR
	10/1/2008		403 FROST WOODS ROAD
	7/1/2016		1512 WEST MAIN ST APT 4
	3/1/2017		2953 KILTIE DR
	3/1/2017		2953 KILTIE DR
	6/1/2009		681 HWY A
8/12/1991	5/1/2009		4296 OAK HILL RD
	6/1/2012		7078 PARKSIDE CIRCLE
12/22/1984	12/1/2011		10414 W TROPICANA CIR
12/22/1984	12/1/2011		10414 W TROPICANA CIR
7/1/1985	1/1/2006		205 CRYSTAL LN
6/30/2003	9/1/2018		3956 OAK PARK RD
6/30/2003	9/1/2018		3956 OAK PARK RD
9/1/1985	5/1/2010		209 INDIAN SUMMER RD
9/1/1985	5/1/2010		209 INDIAN SUMMER RD
	4/1/2008		185 MEADOW LANE
	4/1/2008		185 MEADOW LANE
3/30/1981	6/1/2019		1118 CORAL DR
3/30/1981	6/1/2019		1118 CORAL DR
7/1/1985	11/1/2017		2114 OAKRIDGE AVE
7/1/1985	11/1/2017		2114 OAKRIDGE AVE
	5/1/2017		620 FREDERICK ST
	3/1/2017		6125 WATERFORD RD
	3/1/2017		6125 WATERFORD RD
1/27/2003	10/1/2008		5450 LIVERPOOL ST

1/27/2003	10/1/2008		5450 LIVERPOOL ST
4/1/1980	9/1/2009		3921 PAUS ST
	1/1/2006		5401 VICAR LN
1/4/1979	10/1/2017		918 SARDONYX WAY
1/4/1979	10/1/2017		918 SARDONYX WAY
	1/1/2006		7707 N BROOKLINE DR APT 209
	3/1/2014		280 DIVISION ST 305
	3/1/2014		280 DIVISION ST 305
	8/1/2011		5326 RAYWOOD RD
7/1/1984	2/3/2018		W420 HWY 92
	6/1/2010		W8401 KENT RD
	6/1/2019		701 YORKTOWN RD
	7/1/2017		3162 REBEL DR
1/21/1974	7/1/2013		4211 SANDSTONE DR
1/21/1974	7/1/2013		4211 SANDSTONE DR
12/22/1984	9/1/2020		W4720 STATE ROAD 16
	3/1/2012		4625 SIDEKICK DR
	3/1/2012		4625 SIDEKICK DR
8/26/1974	2/1/2012		926 CHANDLER LN
	5/29/2014		205 FARNHAM ST
	5/1/2020		601 2ND ST
	7/1/2018		4713 GOLDFINCH DR
3/9/1987	6/1/2014		15 FAWN RIDGE CIRCLE
3/9/1987	6/1/2014		15 FAWN RIDGE CIRCLE
12/22/1984	2/1/2021		457 CHARLES LANE
	10/1/2015		2214 E COUNTY RD M
2/1/1985	2/1/2009		2931 TUSCANY WAY
2/1/1985	2/1/2009		2931 TUSCANY WAY
2/1/1985	2/1/2009		2931 TUSCANY WAY
	6/1/2014		2638 PENNWALL CIR
	6/1/2014		2638 PENNWALL CIR
	1/19/2017		712 WILLOW RUN ST
	1/1/2007		805 HENRY ST

	4/1/2006		2825 EGRE RD
	4/1/2006		2825 EGRE RD
12/22/1984	9/1/2011		570 SCOTT ST
	1/1/2006		7025 WOODSIDE OAKS CR
	3/1/2014		631 CARDINAL WAY
2/27/1977	7/1/2015		W5141 COUNTY HWY DM
	3/1/2013		192 DEPOT ROAD
	3/1/2013		192 DEPOT ROAD
2/1/1985	6/1/2007		409 MELODY LANE
4/19/2015	9/1/2020		743 GRACE ST
4/19/2015	9/1/2020		743 GRACE ST
4/19/2015	9/1/2020		743 GRACE ST
4/19/2015	9/1/2020		743 GRACE ST
	10/1/2008		2507 51ST ST SOUTH
	10/1/2008		2507 51ST ST SOUTH
	10/1/2008		2212 HOLIDAY DR
6/17/1991	10/1/2008		1817 PARK ST
	6/1/2007		314 S MAIN ST UNIT 302
6/3/2013	8/1/2018		308 CHEYENNE CT
6/3/2013	8/1/2018		308 CHEYENNE CT
3/7/2003	8/1/2014		704 CUMBERLAND CT
	1/1/2007		360 MILLER ST
	3/1/2018		4215 MAJOR AVE
8/14/2000	10/1/2012		2355 BLUEGRASS LN
12/22/1984	3/1/2021		6698 CHARLIE GRIMM RD
	10/1/2008		1302 WYLDHAVEN AVE
	7/1/2018		1821 SACTJEN ST
	9/1/2014		314 ARBOR RIDGE DR
	9/1/2014		314 ARBOR RIDGE DR
	10/1/2013		805 SOUTH SHORE DRIVE
	4/1/2006		4924 MAHER AVE
	4/1/2006		4924 MAHER AVE
	2/1/2011		3015 EDMONTON DR

	10/1/2019		1126 WAYRIDGE DR
	10/1/2019		1126 WAYRIDGE DR
2/1/1985	5/1/2018		1915 MAPLE ST PO BOX 98
10/7/2013	4/1/2018		709 HIGHCLIFF TRAIL
	1/1/2007		408 MICHELE STREET
4/9/1990	11/1/2017		5325 TREE RIDGE TR
4/9/1990	11/1/2017		5325 TREE RIDGE TR
4/9/1990	11/1/2017		5325 TREE RIDGE TR
	1/1/2006		4815 COTTAGE GROVE RD APT 123
	8/1/2006		110 S HENRY ST APT 309
	3/1/2017		5470 CADDIS BND APT 201
2/1/1985	3/1/2021		1785 LUNDE CIR
2/1/1985	3/1/2021		1785 LUNDE CIR
6/1/2004	8/1/2008		617 BALTZELL ST
6/1/2004	8/1/2008		617 BALTZELL ST
	2/1/2015		422 N BALDWIN ST
9/19/1994	1/1/2013		9039 39TH STREET CIRCLE EAST
	1/1/2006		33 CHEROKEE CR UNIT 104
	9/1/2015		443 LINCOLN ST
	4/1/2006		1005 N STEWART RD LOT 311
	4/1/2006		1005 N STEWART RD LOT 311
2/1/1989	3/1/2020		2821 NO OAKS RIDGE
1/15/1990	8/1/2012		6759 CTY RD C
	4/1/2006		500 LOWELL ST
	4/1/2006		500 LOWELL ST
12/5/1985	1/1/2014		6608 FRANKLIN AVE
12/5/1985	1/1/2014		6608 FRANKLIN AVE
	1/1/2007		UNIT 201
	7/1/2016		5507 TONYAWATHA TRAIL
7/1/1985	3/1/2020		5193 BYRNE ROAD
	12/1/2018		603 RIVERVIEW DR
	12/1/2018		603 RIVERVIEW DR
	12/1/2018		603 RIVERVIEW DR

3/1/1985	11/1/2018		311 ONEIDA ST
3/1/1985	11/1/2018		311 ONEIDA ST
	1/1/2018		2913 GRANDVIEW BLVD
	1/1/2018		2913 GRANDVIEW BLVD
4/15/2002	3/1/2017		2560 NEW TOWN DRIVE APT 217
8/12/1991	4/1/2015		420 S LEXINGTON PKWY
	8/1/2012		609 MAPLE DR
	8/1/2012		609 MAPLE DR
11/1/2001	10/1/2018		2922 CIMARRON TRAIL
12/22/1984	4/1/2006		442 GRANDVIEW DR
12/22/1984	4/1/2006		442 GRANDVIEW DR
	4/1/2006		5477 WESTHIRE CIR APT 203
	4/1/2006		5477 WESTHIRE CIR APT 203
10/20/2003	1/1/2018		5317 MILWARD DR
10/20/2003	1/1/2018		5317 MILWARD DR
10/20/2003	1/1/2018		5317 MILWARD DR
9/15/1975	9/1/2013		5801 ROANOKE DR
9/15/1975	9/1/2013		5801 ROANOKE DR
8/22/2005	7/1/2014		667 SPRINGBROOK CIRCLE
6/19/1989	10/1/2008		1321 ROSEDALE AVE
	3/1/2018		1101 BLUEBIRD TRL
	1/1/2006		722 RISLEY OAK CT
	10/1/2008		505 CRESTVIEW DR
	7/1/2014		6 SOUTH BLACKHAWK AVE
	10/1/2008		W6844 US HWY 12
7/21/1974	10/1/2019		608 HARRISON ST
	6/1/2018		4424 DEER POINT DR
	6/1/2018		4424 DEER POINT DR
11/17/1991	9/1/2011		169 DIXON STREET
	10/1/2008		5735 SANDHILL DR
	4/1/2006		9203 CTH Y
	4/1/2006		9203 CTH Y
	5/1/2012		784 HWY 51 E

	1/1/2012		302 S MARIETTA ST
	1/1/2012		302 S MARIETTA ST
	1/1/2012		302 S MARIETTA ST
	12/1/2007		3020 TRENTON DR
	12/1/2007		3020 TRENTON DR
	1/1/2007		6680 REDSTONE LANE
	1/1/2007		6680 REDSTONE LANE
9/1/1975	2/1/2013		2915 TURBOT DR
10/7/2001	12/1/2011		6194 HOMESTEAD DR
10/7/2001	12/1/2011		6194 HOMESTEAD DR
	6/1/2018		6222 LOMAX LANE
	6/1/2018		6222 LOMAX LANE
	11/1/2008		1070 ELDON WAY
	10/1/2008		3217 OLD STAGE RD
11/11/1974	2/1/2009		6710 SCHROEDER RD NO 8
	8/1/2016		316 LAKEWOOD BOULEVARD
	8/1/2016		316 LAKEWOOD BOULEVARD
	4/1/2017		721 ZIEGLER ROAD
10/30/2006	6/1/2019		4513 AMERICAN ASH
	12/1/2014		5711 MAIN ST
	5/1/2020		5606 W NETHERWOOD RD
	3/1/2012		1145 BERLIN ROAD
	3/1/2012		1145 BERLIN ROAD
	7/1/2019		PO BOX 358
	6/1/2019		926 OCEAN RD
	1/1/2006		6379 EVEREST DR
	2/1/2019		1417 LAKE VIEW
6/17/1991	12/1/2020		4717 SHAFFER AVENUE
	12/1/2020		450 W SUNWEST DR 74
6/2/2003	8/1/2015		4701 DECLARATION LANE
	5/1/2018		W5258 S OSPREY DR
	3/1/2018		3539 ORVOLD PARK DR
	3/1/2018		3539 ORVOLD PARK DR

	6/1/2016		1823 BLUFF RD
	6/1/2016		1823 BLUFF RD
	4/1/2006		5694 HARBORT RD
	4/1/2006		5694 HARBORT RD
	3/1/2009		5900 HAMMERSLEY ROAD
2/1/1985	2/1/2010		2603 PRAIRIE RIDGE
	1/1/2006		84 KESSEL COURT 28
5/19/2008	6/1/2008		970 WALNUT ST
	1/1/2006		6720 CENTURY AVE NO315
	3/1/2020		6101 IMPERIAL DR
	3/1/2020		6101 IMPERIAL DR
	6/1/2008		4 HIDDEN HOLLOW TRL
	1/1/2017		6051 HAGEN HILL CIR
	1/1/2017		6051 HAGEN HILL CIR
	1/1/2006		APT 210
	1/1/2012		2121 TAFT ST
	1/1/2006		7019 HAVENSWOOD DR
	10/1/2014		201 N WALBRIDGE AVE APT 102
2/1/1985	3/1/2016		N8132 MCELROY RD
2/1/1985	3/1/2016		N8132 MCELROY RD
8/5/1985	12/1/2020		6533 FAIRHAVEN RD
	10/1/2008		401 ASPEN CT
	10/1/2008		401 ASPEN CT
	11/1/2007		4322 PRAIRIE FOX DR
9/25/1989	1/1/2021		1270 STONEWOOD CROSSING 3107
9/25/1989	1/1/2021		1270 STONEWOOD CROSSING 3107
8/12/1991	6/1/2020		2332 AAVANG RD
8/12/1991	6/1/2020		2332 AAVANG RD
8/12/1991	6/1/2020		2332 AAVANG RD
8/12/1991	6/1/2020		2332 AAVANG RD
8/12/1991	6/1/2020		2332 AAVANG RD
10/14/1985	2/1/2012		2218 KENDALL AVE
	5/1/2017		4904 TURNER AVE

	5/1/2017		4904 TURNER AVE
	10/1/2008		5530 CENTURY AVENUE APT 4
	4/1/2006		405 LANCE LN
	4/1/2006		405 LANCE LN
	11/1/2013		4506 ODANA RD
5/11/2008	8/1/2011		817 N PARKVIEW ST
5/11/2008	8/1/2011		817 N PARKVIEW ST
	7/1/2014		3375 VINBURN RD
	7/1/2014		3375 VINBURN RD
5/1/2003	4/1/2009		2525 CHAMBERLAIN AVE
	1/1/2019		W4536 BURKE DR
	1/1/2019		W4536 BURKE DR
	3/1/2015		9224 FARGO ROAD
12/22/1984	4/1/2012		3391 KUEHLING DR
12/22/1984	4/1/2012		3391 KUEHLING DR
	9/16/2016		717 MORNINGSTAR LN
7/1/1985	6/1/2006		1837 BARRINGTON DR
7/1/1985	6/1/2006		1837 BARRINGTON DR
12/21/2008	6/1/2018		634 FREDERICK LN
4/1/1985	10/1/2008		6303 VICKSBURG RD
4/1/1985	10/1/2008		6303 VICKSBURG RD
	2/1/2021		800 NORSE RDG
	2/1/2021		800 NORSE RDG
	2/1/2021		800 NORSE RDG
	2/1/2021		800 NORSE RDG
	6/1/2018		133 S BEEBE ST
	6/1/2018		133 S BEEBE ST
1/26/2004	2/1/2014		1018 BRYNHILL DR
1/26/2004	2/1/2014		1018 BRYNHILL DR
2/1/1985	2/1/2010		3757 N WHITE HAWK DR 1
	7/1/2015		1809 COUNTRYSIDE DR
1/1/1985	6/1/2018		1137 FRITZ ROAD
	10/1/2011		701 WHITEHALL DR

	10/1/2011		701 WHITEHALL DR
3/1/1985	10/1/2008		230 MEADOWSIDE DRIVE
	6/1/2017		516 ALLEN ST
	6/1/2017		516 ALLEN ST
4/27/2009	9/1/2016		6634 GETTYSBURG DR
	1/1/2006		416 N AUSTIN RD
	6/1/2014		W14019 SELWOOD DR
6/19/1989	10/1/2008		2138 CHADBOURNE AVE
6/19/1989	9/1/2016		695 S PERRY PKY
3/17/1997	7/1/2010		1136 DRAKE ST
	3/1/2017		1910 VAHLEN ST
	7/1/2014		8501 OLD SAUK RD 102
	7/1/2014		8501 OLD SAUK RD 102
	10/1/2008		10917 PATRICE PINES LANE
11/21/1988	9/1/2007		345 WATERMAN ST
	7/1/2018		50 WHITCOMB CIR 1
	8/1/2011		5691 NORFOLK DR
12/22/1984	2/1/2010		310 CROSSING RIDGE CRT
6/16/2003	5/1/2014		1818 SHERIDAN DR
2/1/1985	11/1/2006		1406 BASKERVILLE AVE
2/27/1995	3/1/2020		5 BRIAN CT
2/27/1995	3/1/2020		5 BRIAN CT
12/22/1984	3/1/2014		9664 LEE VALLEY RD
12/22/1984	3/1/2014		9664 LEE VALLEY RD
	3/1/2018		416 PARK ST
	3/1/2018		416 PARK ST
3/1/1985	7/1/2013		438 WATER ST
7/1/1985	2/1/2010		6 N WESTERN AVE
7/1/1985	2/1/2010		6 N WESTERN AVE
	1/1/2006		222 S BRISTOL ST APT 314
6/18/1984	6/1/2019		3875 OBSERVATORY RD
6/18/1984	6/1/2019		3875 OBSERVATORY RD
	3/1/2020		202 PANTHER TR

	3/1/2020		202 PANTHER TR
	5/1/2012		434 WYALUSING DR
	8/1/2008		1512 DRESDEN RD
7/1/1985	1/1/2007		UNIT A
7/1/1985	1/1/2007		UNIT A
	6/1/2014		W11350 BAY DR
	10/1/2008		503 PROSPECT ROAD
	1/1/2006		1869 DUNNWOOD WAY
	1/1/2006		6401 OFFSHORE DR 302
	10/1/2008		2775 40TH ST W
	10/1/2008		2775 40TH ST W
	3/1/2019		4743 NORA LN
	3/1/2019		4743 NORA LN
1/13/1972	4/1/2008		7944 WATTS RD APT 210
1/23/2015	1/1/2020		6352 GOOSE LAKE DR
1/23/2015	1/1/2020		6352 GOOSE LAKE DR
	2/1/2012		2038 E DAYTON ST
8/12/1991	12/1/2020		506 TARA CT
8/12/1991	12/1/2020		506 TARA CT
	2/1/2013		111 N GROVE ST
	2/1/2013		111 N GROVE ST
12/22/1984	3/1/2020		3771 SUNNY WOOD DR
12/22/1984	3/1/2020		3771 SUNNY WOOD DR
8/12/1991	12/1/2010		6307 ELMWOOD AVE
8/12/1991	12/1/2010		6307 ELMWOOD AVE
	12/1/2011		4218 SENNETH ST
	12/1/2011		4218 SENNETH ST
2/1/1985	10/1/2008		30 DEER POINT TRL
10/3/1993	3/1/2017		3260 KINGS FOREST CT
8/6/1978	3/1/2018		6110 MIDWOOD AVE
8/6/1978	3/1/2018		6110 MIDWOOD AVE
3/5/2001	4/1/2010		4203 SANDSTONE DR
9/25/1989	11/1/2006		918 OCEAN ROAD

9/25/1989	11/1/2006		918 OCEAN ROAD
	2/14/2019		127 13TH AVE
	2/14/2019		127 13TH AVE
6/17/1991	10/1/2014		390 PAGELOW LANE
	2/1/2010		327 PO BOX
	3/1/2020		4514 EAST BUCKEYE RD
	3/1/2020		4514 EAST BUCKEYE RD
	1/1/2012		14 HASTINGS CIR
	1/1/2012		14 HASTINGS CIR
8/23/1999	1/31/2021		925 SOUTH ST
	6/1/2011		4914 MARATHON DR
	6/1/2011		4914 MARATHON DR
	1/1/2019		630 HAVEY RD
	1/1/2019		630 HAVEY RD
	1/1/2019		630 HAVEY RD
	4/1/2006		99 COUNTY ROAD N
	4/1/2006		99 COUNTY ROAD N
	1/1/2013		5218 CAMILLA RD
	1/27/2011		4702 ANNIVERSARY LANE
	10/1/2008		120 SIMON CRESTWAY
	10/1/2008		120 SIMON CRESTWAY
	1/1/2008		3105 TODD DRIVE BOX 37
	1/1/2008		3105 TODD DRIVE BOX 37
	1/1/2006		APT 210
	1/1/2006		40 S WALNUT DR
	7/1/2014		1813 RUTLEDGE
	7/1/2014		1813 RUTLEDGE
	1/1/2006		6401 PIZARRO CIR
7/1/1985	4/1/2020		2008 LEWIS ST
7/1/1985	4/1/2020		2008 LEWIS ST
	8/1/2017		2240 CTY RD F
	8/1/2017		2240 CTY RD F
3/1/1985	5/1/2014		2101 CLIFF CT

3/1/1985	5/1/2014		2101 CLIFF CT
12/22/1986	6/1/2019		5812 SMITH RIDGE RD
12/22/1986	6/1/2019		5812 SMITH RIDGE RD
12/22/1986	6/1/2019		5812 SMITH RIDGE RD
	2/1/2009		4506 RAHEL
12/14/1992	10/1/2020		118 NORTH 2ND ST
9/2/2008	1/1/2020		24 PARK PL
9/2/2008	1/1/2020		24 PARK PL
	3/11/2012		3078 LONGVIEW DR
	5/1/2017		3526 PORTAGE RD
	5/1/2017		3526 PORTAGE RD
12/22/1984	6/1/2014		6713 COOPER AVE
12/22/1984	6/1/2014		6713 COOPER AVE
11/21/1988	1/1/2021		469 HILLTOP DR
11/21/1988	1/1/2021		469 HILLTOP DR
8/12/1991	10/1/2008		80 POND VIEW WAY
	6/1/2018		2747 TAMI TRAIL
9/19/1994	9/4/2020		W1248 S SHORE DR
	3/1/2014		3255 HARMONY ST
12/21/2008	2/1/2013		61 S FAIR OAKS AVE
	10/1/2008		302 SWANTON RD
9/25/1989	10/1/2018		572 CHERRY WOOD DR
9/25/1989	10/1/2018		572 CHERRY WOOD DR
2/1/1985	9/1/2017		7601 TWINFLOWER DR
2/1/1985	9/1/2017		7601 TWINFLOWER DR
	7/1/2015		6318 EVERGLADE CT
	7/1/2015		6318 EVERGLADE CT
12/1/1986	3/1/2012		6995 CIRCLE TRAM WAY
9/25/1989	5/1/2008		4815 COTTAGE GROVE RD APT 315
7/1/1985	7/1/2018		6422 HUBBARD AVE
7/1/1985	7/1/2018		6422 HUBBARD AVE
7/1/1985	7/1/2018		6422 HUBBARD AVE
7/1/1985	7/1/2018		6422 HUBBARD AVE

	2/1/2013		120 CAMINO DEL SOL
	2/1/2013		120 CAMINO DEL SOL
11/10/1986	4/1/2013		1894 KELLY HILL RD
11/10/1986	4/1/2013		1894 KELLY HILL RD
7/6/1981	3/1/2007		4807 MARSH RD
4/8/2002	3/1/2019		1837 SHERIDAN ST
	1/1/2006		896 SADDLE RIDGE
	6/1/2017		458 JEAN ST
	6/1/2017		458 JEAN ST
	2/1/2010		920 DANIEL ST
	8/1/2015		208 N VAN BUREN ST
	12/1/2020		3726 WILSHIRE LN
11/30/1998	2/1/2021		514 GOLDCOAST LN
6/14/1993	8/19/2019		3413 DOSS STREET
6/14/1993	8/19/2019		3413 DOSS STREET
	1/1/2006		60 KESSEL CT APT 26
	7/1/2018		2938 MUIRFIELD RD
6/19/1989	1/1/2021		9427 CO HWY Y
	10/1/2008		133 PO BOX
	10/1/2008		133 PO BOX
	10/1/2008		4809 ELDORADO LANE
	10/1/2008		4809 ELDORADO LANE
2/1/1985	7/1/2011		717 MARK DR
4/1/1980	10/1/2008		112 EIGHTH ST
4/1/1980	10/1/2008		112 EIGHTH ST
8/1/1990	8/1/2015		243 E MCKINLEY ST
8/1/1990	8/1/2015		243 E MCKINLEY ST
9/16/1968	10/1/2008		5120 N AUTUMN LN
6/11/1984	8/1/2016		14262 LEYBOURNE WAY
6/11/1984	8/1/2016		14262 LEYBOURNE WAY
	10/1/2008		206 STANDISH CT
	7/1/2020		813 REDLAND DR
	7/1/2020		813 REDLAND DR

7/1/1985	5/1/2012		2851 BERKAN ST
	3/1/2019		N1101 8TH LN
	3/1/2019		N1101 8TH LN
	4/1/2011		N3098 OWEN AVE
	4/1/2011		N3098 OWEN AVE
	1/1/2006		28011 JOHNSON RD UNIT 16
	1/1/2007		2251 HWY BB
2/1/1985	6/1/2014		5702 HWY 113
	3/1/2020		17880 HIRSHBRUNNER
	3/1/2020		17880 HIRSHBRUNNER
6/4/1990	11/1/2011		4612 S 102ND LANE
	10/1/2018		PO BOX 384
	10/1/2018		PO BOX 384
	10/1/2018		PO BOX 384
	10/1/2018		PO BOX 384
	3/1/2019		4759 COUNTY RD A
	3/1/2019		4759 COUNTY RD A
2/1/1985	11/1/2015		836 GLENWOOD DR
2/1/1985	11/1/2015		836 GLENWOOD DR
	1/1/2007		PO BOX 930274
	4/1/2017		4351 CO HWY P
	1/1/2009		UNIT 312
	1/1/2009		UNIT 312
1/1/1985	11/1/2007		4254 LOOKOUT TRAIL
1/1/1985	11/1/2007		4254 LOOKOUT TRAIL
	2/1/2013		2831 KINGSTON DR
	2/1/2010		W6644 MARINE CT
	2/1/2010		W6644 MARINE CT
	9/1/2009		11335 EISENHOWER DR
	1/1/2006		9 BARRON CT
	4/1/2006		4237 WANDA PLACE
	4/1/2006		4237 WANDA PLACE
2/1/1985	3/1/2018		4329 DEVOLIS PKWY

12/22/1984	6/1/2018		6715 JAMES DR
12/22/1984	6/1/2018		6715 JAMES DR
6/19/1989	1/1/2019		2606 ARBOR DR APT 112
6/19/1989	1/1/2019		2606 ARBOR DR APT 112
	2/1/2019		4716 CAMDEN ROAD
	1/1/2007		703 KENWOOD CIRCLE
	1/1/2007		703 KENWOOD CIRCLE
	2/1/2012		N10656 CHIEF KUNO TRL
1/1/1979	1/1/2006		3572 CELESTIAL WAY
7/1/1985	10/1/2014		9541 COUNTY ROAD S
7/1/1985	10/1/2014		9541 COUNTY ROAD S
7/1/1985	10/1/2014		9541 COUNTY ROAD S
	4/1/2006		5435 KALESEY CT
	4/1/2006		5435 KALESEY CT
	12/1/2015		232 FARIVIEW CIR
	12/1/2015		232 FARIVIEW CIR
7/1/1985	8/1/2009		1133 BEECH ST
7/1/1985	8/1/2009		1133 BEECH ST
	7/1/2016		10723 W SUNSET DR
	2/1/2013		2805 MEADOWBROOK RD
	2/1/2013		2805 MEADOWBROOK RD
	4/1/2015		6509 RAYMOND RD
3/5/2010	5/1/2010		4803 BURMA RD
12/22/1984	10/1/2008		5490 JAN DR
12/22/1984	10/1/2008		5490 JAN DR
12/22/1984	2/1/2016		1021 DIAMANTE
12/22/1984	2/1/2016		1021 DIAMANTE
12/22/1984	3/8/2015		4239 SUNSET RIDGE
3/1/1985	4/1/2012		526 MILLER AVE
3/1/1985	4/1/2012		526 MILLER AVE
12/22/1984	2/1/2013		N4274 POPLAR AVE
12/22/1984	2/1/2013		N4274 POPLAR AVE
6/20/1988	6/19/2018		22628 COVERED BRIDGE RD

	1/1/2007		4632 TOEPFER RD
	1/1/2007		4632 TOEPFER RD
	9/25/2020		6101 INDIAN MOUND DR
3/13/2009	5/1/2009		5000 BOARDWALK DRIVE 5
3/13/2009	5/1/2009		5000 BOARDWALK DRIVE 5
11/17/1991	1/1/2012		1114 MEADOWLARK DR
11/17/1991	1/1/2012		1114 MEADOWLARK DR
	4/1/2015		10326 W CASHMAN DR
	1/1/2006		50 HERITAGE LN APT 301
	1/1/2006		250 FEMRITE DR 224
1/6/1986	6/1/2013		501 14TH AVE 33
1/6/1986	6/1/2013		501 14TH AVE 33
1/6/1986	6/1/2013		501 14TH AVE 33
	10/1/2009		4922 N SHERMAN UNIT C
4/1/1985	2/1/2012		1645 SUNFIELD ST
4/1/1985	2/1/2012		1645 SUNFIELD ST
	10/1/2008		5509 HAMMERSLEY RD
	10/1/2008		5509 HAMMERSLEY RD
	9/1/2012		W3008 49TH ST
	9/1/2012		W3008 49TH ST
4/1/1980	3/1/2009		N5099 HWY 51
4/1/1980	3/1/2009		N5099 HWY 51
7/1/1985	12/1/2010		6401 OFFSHORE DR 302
	5/1/2016		1019 EDGEWATER RD
	1/1/2006		26 NORTHRIDGE TERR 2
	7/1/2014		505 E DEAN AVE
	7/1/2014		505 E DEAN AVE
2/1/1985	2/1/2015		926 MENOMONIE LANE
2/1/1985	2/1/2015		926 MENOMONIE LANE
4/1/1985	8/1/2018		63 WAUNONA WOODS CT
10/7/2002	10/1/2017		3358 BRADBURY RD
10/7/2002	10/1/2017		3358 BRADBURY RD
	1/1/2006		2102 CHESAPEAKE DR

	1/1/2006		5825 MADSEN CIR
4/1/1980	10/1/2008		390 BELLA WAY
	9/1/2015		1609 ROBY RD
	9/1/2015		1609 ROBY RD
7/1/1985	1/1/2015		1505 LAKE VIEW AVE
	1/1/2012		885 OREGON PARKS AVE
	1/1/2012		885 OREGON PARKS AVE
	3/1/2020		4326 MELODY LN 204
	7/1/2012		476 RIVER RD
	3/1/2015		11060 N LAKEWOODS DR
	11/1/2013		5092 WALBRIDGE AVE
12/31/1985	12/1/2010		324 W SOUTH STREET UPPER
9/25/1989	8/1/2017		316 YORKTOWN RD
9/25/1989	8/1/2017		316 YORKTOWN RD
	4/1/2006		6073 SUN VALLEY PKWY
	4/1/2006		6073 SUN VALLEY PKWY
	1/1/2006		419 ASHTON DR
11/21/1988	12/28/2013		500 W LAWN CIRCLE
11/21/1988	12/28/2013		500 W LAWN CIRCLE
	12/1/2015		25 MILLSTONE RD
	12/1/2015		25 MILLSTONE RD
	12/1/2015	4/30/2021	25 MILLSTONE RD
	12/1/2015		25 MILLSTONE RD
1/3/1996	2/1/2015		6914 BLUFF POINT DR
1/3/1996	2/1/2015		6914 BLUFF POINT DR
	6/1/2006		5202 MILWAUKEE ST
9/1/1976	11/1/2017		5608 CRESTWOOD PLACE
	2/1/2009		608 TOWNSEND ST
	2/1/2009		608 TOWNSEND ST
	6/1/2020		2322 HOARD ST
	2/1/2010		5324 CONGRESS AVE 4
	1/1/2006		22 MILO LN
6/19/1989	8/1/2012		1285 HOBBY HORSE RD

4/1/1980	11/1/2006		100 GILMAN STREET APT 3
	1/1/2016		412 STONERIDGE TER
9/12/1994	2/1/2015		415 CHEROKEE CT
	5/1/2014		808 LEXINGTON DR
	5/1/2014		808 LEXINGTON DR
	5/1/2018		4970 OVERLOOK DRIVE
	4/1/2006		5477 WESTSHIRE CIRCLE 205
	4/1/2006		5477 WESTSHIRE CIRCLE 205
	3/1/2020		66 PO BOX
	2/1/2011		164 NORTHSIDE DR
	2/1/2011		164 NORTHSIDE DR
5/14/2001	3/1/2019		144 BLUE SPRUCE LANE
5/14/2001	3/1/2019		144 BLUE SPRUCE LANE
3/1/1985	2/1/2014		5717 SANDPIPER DR
	10/1/2014		1729 FREMONT AVE
	4/1/2006		6706 SLEEPY HOLLOW RD
	4/1/2006		6706 SLEEPY HOLLOW RD
	12/1/2014		2216 WOODSIDE DR
9/25/1989	1/1/2006		10998 6TH AVE
3/1/2010	5/1/2010		280 DIVISION ST 205
	6/1/2015		1706 SAVANNAH WAY
	6/1/2015		1706 SAVANNAH WAY
	6/1/2012		7015 FRANKLIN AVE
	1/1/2006		521 MAHOGANY WAY
	1/1/2007		66 CHEROKEE CIRCLE 104
	1/1/2007		66 CHEROKEE CIRCLE 104
12/22/1984	8/1/2014		721 PINECREST DR APT 3
12/22/1984	8/1/2014		721 PINECREST DR APT 3
6/19/1989	3/1/2011		APT 702
6/19/1989	3/1/2011		APT 702
	12/1/2009		3477 HEATHERSTONE RDG
	3/1/2018		1735 BAIRD ST
	3/1/2018		1735 BAIRD ST

	3/1/2018		1735 BAIRD ST
	1/1/2007		701 MARBELLA LN APT 112
	1/1/2006		2320 JACKSON ST UNIT 306
6/19/1989	10/1/2012		509 TY TRL
	1/1/2012		4515 GREENGRASS RD
5/11/2008	4/1/2018		6 HOLLYBROOK CT
5/11/2008	4/1/2018		6 HOLLYBROOK CT
4/1/1985	1/1/2006		N3495 LIBERTY ST
	1/1/2020		W7438 WHITE OAK RUN
9/25/1989	2/1/2019		3641 MARIGOLD
9/25/1989	2/1/2019		3641 MARIGOLD
	7/1/2019		3158 TIMBER LN
	7/1/2019		3158 TIMBER LN
8/15/2000	3/1/2020		4350 CLOVER CT
	7/1/2016		W3711 PARDEEVILLE RD
	7/1/2016		W3711 PARDEEVILLE RD
12/22/1984	10/1/2017		541 HARPER DR
12/22/1984	10/1/2017		541 HARPER DR
7/7/1979	8/1/2019		2580 TARGHEE ST
7/7/1979	8/1/2019		2580 TARGHEE ST
	9/1/2018		1660 LIME WOOD ST
	9/1/2018		1660 LIME WOOD ST
	3/1/2020		6509 TRAILS EDGE CT
	3/1/2020		6509 TRAILS EDGE CT
	11/1/2017		5712 TECUMSEH AVE
	4/1/2016		4695 HOLM RD
	3/1/2014		3033 ARTESIAN LN
3/27/2006	4/1/2014		109 WAVERLY DR
3/27/2006	4/1/2014		109 WAVERLY DR
2/2/1998	7/1/2018		5306 VALLEY DR
	10/1/2008		5301 TOWER LINE RD
9/25/1989	11/1/2019		4521 SENTINEL PASS
9/25/1989	11/1/2019		4521 SENTINEL PASS

9/25/1989	11/1/2019		4521 SENTINEL PASS
3/1/1980	11/1/2008		230 S MARQUETTE ST APT 2
9/25/1989	11/1/2016		1150 TASSWOOD DR
7/1/1987	6/1/2018		1022 BULTMAN RD
7/1/1987	6/1/2018		1022 BULTMAN RD
	3/1/2019		2144 HILLEBRAND DR
	3/1/2019		2144 HILLEBRAND DR
2/1/1985	1/1/2011		PO BOX 216
4/1/1985	2/1/2015		671 SPRING ST UNIT 3206
4/1/1985	2/1/2015		671 SPRING ST UNIT 3206
4/20/2005	9/1/2014		772 PLEASANT OAK DR
4/20/2005	9/1/2014		772 PLEASANT OAK DR
	6/1/2008		420 JUNIPER ST
8/13/2001	3/1/2015		2212 HOLIDAY DR
12/1/1979	5/1/2012		1807 EAST ST
5/13/1985	3/1/2016		6872 TUSCAN RIDGE CIRCLE
5/13/1985	3/1/2016		6872 TUSCAN RIDGE CIRCLE
5/13/1985	3/1/2016		6872 TUSCAN RIDGE CIRCLE
	11/24/2020		104 WATERTON WAY
	3/1/2021		714 AVALON ROAD
	3/1/2021		714 AVALON ROAD
11/10/1975	6/1/2016		5238 ESKER DR
11/10/1975	6/1/2016		5238 ESKER DR
	12/1/2015		958 PARK ST APT 104
	1/1/2006		5477 WESTSHIRE CIR 129
6/19/1989	10/1/2008		1347 ASHBURN WAY
6/19/1989	10/1/2008		1347 ASHBURN WAY
3/6/2006	11/1/2014		2320 JACKSON ST 104
6/19/1989	2/1/2014		3046 KINNEY RD
6/19/1989	2/1/2014		3046 KINNEY RD
	8/1/2014		6720 SPRING GROVE CT
	3/1/2017		5105 TOCORA LN
	1/1/2006		612 W VERONA AVE RR 7

9/1/1985	2/1/2013		1209 DEBRA LN
9/1/1985	2/1/2013		1209 DEBRA LN
7/12/1993	11/1/2020		306 HARTFORD COVE
7/12/1993	11/1/2020		306 HARTFORD COVE
7/12/1993	11/1/2020		306 HARTFORD COVE
7/12/1993	11/1/2020		306 HARTFORD COVE
	1/1/2007		5477 WESTSHIRE CIRCLE #220
	2/1/2021		167 HARVEST CIR
	2/1/2021		167 HARVEST CIR
	2/1/2021		167 HARVEST CIR
	2/1/2021		167 HARVEST CIR
12/22/1984	1/1/2006		PO BOX 443
2/1/1985	7/8/2013		8119 OLD SAUK PASS
2/1/1985	7/8/2013		8119 OLD SAUK PASS
6/11/1984	3/1/2016		1266 SCHOOL ST
6/11/1984	3/1/2016		1266 SCHOOL ST
	1/1/2006		2518 DAHLE ST
	5/1/2020		7680 GREENWOOD RD
	5/1/2020		7680 GREENWOOD RD
	5/1/2020		107 OAK SPRINGS CIRCLE
	5/1/2020		107 OAK SPRINGS CIRCLE
	11/1/2020		1227 GATEWAY PASS
	11/1/2020		1227 GATEWAY PASS
12/2/1977	11/1/2006		2893 GLACIER VALLEY RD
12/2/1977	11/1/2006		2893 GLACIER VALLEY RD
	7/1/2020		19850 CHAPEL TRCE
11/20/1994	4/1/2019		500 WINDROWE CT
	4/1/2017		211 VICTORIA CT
	2/1/2011		107 SUTHERLAND CT UNIT 312
3/30/1998	6/1/2020		617 N MADISON ST
3/30/1998	6/1/2020		617 N MADISON ST

Member Address Line 2	Member City	Member State	Member ZIP	Group Master Number
	MADISON	WI	53704	00704
	MADISON	WI	53705	00704
	MADISON	WI	53705	00704
	MT HOREB	WI	53572	00704
	MADISON	WI	53718	00704
	MADISON	WI	53704	00704
	MIDDLETON	WI	53562	00704
	MIDDLETON	WI	53562	00704
	MADISON	WI	53704	00704
	MADISON	WI	53704	00704
	MADISON	WI	53716	00704
	DANE	WI	53529	00704
	WATERTOWN	WI	53094	00704
	WATERTOWN	WI	53094	00704
	RICHLAND CENTER	WI	53581	00704
	RICHLAND CENTER	WI	53581	00704
	MADISON	WI	53713	00704
	SUN PRAIRIE	WI	53590	00704
	SUN PRAIRIE	WI	53590	00704
	STOUGHTON	WI	53589	00704
	SUN PRAIRIE	WI	53590	00704
	MADISON	WI	53704	00704
	TUCSON	AZ	85755	00704
	TUCSON	AZ	85755	00704

	VERONA	WI	53593	00704
	MERRIMAC	WI	53561	00704
	MERRIMAC	WI	53561	00704
	MADISON	WI	53715	00704
	MADISON	WI	53715	00704
	MADISON	WI	53704	00704
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	STOUGHTON	WI	53589	00704
	MADISON	WI	53704	00704
	MADISON	WI	53711	00704
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	STOUGHTON	WI	53589	00704
	STOUGHTON	WI	53589	00704
	FOX LAKE	WI	53933	00704
	MADISON	WI	53704	00704
	DEERFIELD	WI	53531	00704
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	MADISON	WI	53704	00704
	SUN PRAIRIE	WI	53590	00704
	SUN PRAIRIE	WI	53590	00704
	MADISON	WI	53713	00704
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	MIDDLETON	WI	53562	00704
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	MADISON	WI	53719	00704
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	MADISON	WI	53719	00704
	BEVERLY HILLS	FL	34465	00704
	MOUNT HOREB	WI	53572	00704
	MADISON	WI	53719	00704
	MOUNT HOREB	WI	53572	00704
	WOODRUFF	WI	54568	00704
	WOODRUFF	WI	54568	00704
	MADISON	WI	53704	00704
618 JUPITER DRIVE	MADISON	WI	53718	00704
	WAUNAKEE	WI	53597	00704
	MADISON	WI	53711	00704
	MADISON	WI	53711	00704
	EDGERTON	WI	53534	00704
	MADISON	WI	53711	00704
	DE FOREST	WI	53532	00704
	MONTELLO	WI	53949	00704
	LODI	WI	53555	00704
	CAMBRIDGE	WI	53523	00704
	CAMBRIDGE	WI	53523	00704
	DE FOREST	WI	53532	00704
	MADISON	WI	53717	00704
	MADISON	WI	53704	00704
	MADISON	WI	53704	00704
	LONG PRAIRIE	MN	56347	00704
	MADISON	WI	53716	00704
	MIDDLETON	WI	53562	00704
	MADISON	WI	53705	00704
	VERONA	WI	53593	00704
	MADISON	WI	53717	00704
	WAUSAUKEE	WI	54177	00704
	MADISON	WI	53716	00704
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	NAPLES	FL	34104	00704
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	MADISON	WI	53705	00704
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	MADISON	WI	53705	00704
	MIDDLETON	WI	53562	00704
	MARSHALL	WI	53559	00704
	MADISON	WI	53711	00704
	MADISON	WI	53711	00704
	MADISON	WI	53714	00704
8501 OLD SAUK ROAD	MIDDLETON	WI	53562	00704
	WISCONSIN DELLS	WI	53965	00704
	MC FARLAND	WI	53558	00704
	MC FARLAND	WI	53558	00704
	RIO	WI	53960	00704
	RIO	WI	53960	00704
	NEW GLARUS	WI	53574	00704
	NEW GLARUS	WI	53574	00704
	CROSS PLAINS	WI	53528	00704
	MADISON	WI	53716	00704
	MADISON	WI	53716	00704
	MADISON	WI	53704	00704
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	MADISON	WI	53704	00704
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	MADISON	WI	53705	00704
	BLUE MOUNDS	WI	53517	00704
	STOUGHTON	WI	53589	00704
	STOUGHTON	WI	53589	00704
	STOUGHTON	WI	53589	00704
	STOUGHTON	WI	53589	00704

	VERONA	WI	53593	00704
	VERONA	WI	53593	00704
	BLACK EARTH	WI	53515	00704
	MADISON	WI	53714	00704
	OREGON	WI	53575	00704
	OREGON	WI	53575	00704
	MADISON	WI	53704	00704
	MADISON	WI	53726	00704
	MADISON	WI	53726	00704
	BEAVER DAM	WI	53916	00704
	WINDSOR	WI	53598	00704
	BARABOO	WI	53913	00704
	MIDDLETON	WI	53562	00704
	MIDDLETON	WI	53562	00704
	MADISON	WI	53717	00704
	WAUNAKEE	WI	53597	00704
	SUN PRAIRIE	WI	53590	00704
	STOUGHTON	WI	53589	00704
	STOUGHTON	WI	53589	00704
	STOUGHTON	WI	53589	00704
	WINDSOR	WI	53598	00704
	WINDSOR	WI	53598	00704
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	DEFOREST	WI	53532	00704
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	MADISON	WI	53715	00704
	FITCHBURG	WI	53711	00704
	NAPLES	FL	34104	00704
	MADISON	WI	53718	00704
	MADISON	WI	53704	00704
	MARSHALL	WI	53559	00704

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	OREGON	WI	53575	00704
	MADISON	WI	53704	00704
	MADISON	WI	53704	00704
	MARSHALL	WI	53559	00704
	VERONA	WI	53593	00704
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	MADISON	WI	53704	00704
	MOUNT HOREB	WI	53572	00704
	MADISON	WI	53716	00704
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	WAUNAKEE	WI	53597	00704
	MADISON	WI	53711	00704
PO BOX 55	MORRISONVILLE	WI	53571	00704
	GREEN VALLEY	AZ	85614	00704
	BLUE MOUNDS	WI	53517	00704
	STOUGHTON	WI	53589	00704
	MC FARLAND	WI	53558	00704
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	MADISON	WI	53705	00704
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	OREGON	WI	53575	00704
	MOUNT HOREB	WI	53572	00704
	MOUNT HOREB	WI	53572	00704
4 WAUNONA WOODS CT	MADISON	WI	53713	00704
4 WAUNONA WOODS CT	MADISON	WI	53713	00704
4 WAUNONA WOODS CT	MADISON	WI	53713	00704

	PRAIRIE DU SAC	WI	53578	00704
	PRAIRIE DU SAC	WI	53578	00704
	WAUNAKEE	WI	53597	00704
	MADISON	WI	53711	00704
	MADISON	WI	53704	00704
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	BLUE MOUNDS	WI	53517	00704
	BLUE MOUNDS	WI	53517	00704
	MADISON	WI	53704	00704
	MADISON	WI	53704	00704
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	EVANSVILLE	WI	53536	00704
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	DE FOREST	WI	53532	00704
	DE FOREST	WI	53532	00704
	NEW PORT RICHEY	FL	34652	00704
	NEW PORT RICHEY	FL	34652	00704
	DEERFIELD	WI	53531	00704
	DEERFIELD	WI	53531	00704
	MILTON	WI	53563	00704
	STUART	FL	34994	00704
	STOUGHTON	WI	53589	00704
	STOUGHTON	WI	53589	00704
	MONTICELLO	WI	53570	00704
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	MADISON	WI	53711	00704
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	VERONA	WI	53593	00704
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	BLACK EARTH	WI	53515	00704

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	MADISON	WI	53711	00704
	OREGON	WI	53575	00704
	MT HOREB	WI	53572	00704
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	MADISON	WI	53704	00704
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	DEFOREST	WI	53532	00704
	DEFOREST	WI	53532	00704
	MADISON	WI	53705	00704
925 OLD GLORY WAY	SUN PRAIRIE	WI	53590	00704
3111 PHEASANT BRANCH RD	MIDDLETON	WI	53562	00704
	MADISON	WI	53714	00704
	WATERLOO	WI	53594	00704
	WATERLOO	WI	53594	00704
	MADISON	WI	53711	00704
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	SUN PRAIRIE	WI	53590	00704
	VERONA	WI	53593	00704
	VERONA	WI	53593	00704
	BLANCHARDVILLE	WI	53516	00704
	BLANCHARDVILLE	WI	53516	00704
	BLANCHARDVILLE	WI	53516	00704
	BLANCHARDVILLE	WI	53516	00704
	BLANCHARDVILLE	WI	53516	00704
	MIDDLETON	WI	53562	00704
	MADISON	WI	53718	00704
	SURPRISE	AZ	85387	00704
	MADISON	WI	53714	00704
	MIDDLETON	WI	53562	00704

	MERRIMAC	WI	53561	00704
	ARLINGTON	WI	53911	00704
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	MADISON	WI	53711	00704
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	SUN PRAIRIE	WI	53590	00704
	WAUNAKEE	WI	53597	00704
	EVANSVILLE	WI	53536	00704
	DEFOREST	WI	53532	00704
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	FORT ATKINSON	WI	53538	00704
	MADISON	WI	53716	00704
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326 W PINE ST	LAKE MILLS	WI	53551	00704
	RIO	WI	53960	00704
	DEERFIELD	WI	53531	00704
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	DE FOREST	WI	53532	00704
	EASTMAN	WI	54626	00704
	MADISON	WI	53703	00704
	SUN PRAIRIE	WI	53590	00704
	SUN PRAIRIE	WI	53590	00704

	WAUNAKEE	WI	53597	00704
	WAUNAKEE	WI	53597	00704
	COTTAGE GROVE	WI	53527	00704
	MADISON	WI	53718	00704
	MADISON	WI	53718	00704
	MUSCODA	WI	53573	00704
	MUSCODA	WI	53573	00704
	STOUGHTON	WI	53589	00704
	LEANDER	TX	78641	00704
	MADISON	WI	53704	00704
	MADISON	WI	53704	00704
	MADISON	WI	53711	00704
	MONONA	WI	53716	00704
	MONONA	WI	53716	00704
	CROSS PLAINS	WI	53528	00704
	PORTAGE	WI	53901	00704
	OREGON	WI	53575	00704
	STOUGHTON	WI	53589	00704
	STOUGHTON	WI	53589	00704
	THE VILLAGES	FL	32163	00704
	SUN PRAIRIE	WI	53590	00704
	MADISON	WI	53711	00704
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	BLANCHARDVILLE	WI	53516	00704
	BLANCHARDVILLE	WI	53516	00704
	STOUGHTON	WI	53589	00704
	SAINT AUGUSTINE	FL	32080	00704
	DEERFIELD	WI	53531	00704
	MADISON	WI	53704	00704
	MONONA	WI	53716	00704
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	MADISON	WI	53716	00704

	STOUGHTON	WI	53589	00704
	STOUGHTON	WI	53589	00704
	MADISON	WI	53711	00704
	MADISON	WI	53719	00704
	MADISON	WI	53719	00704
	MOUNT HOREB	WI	53572	00704
	MOUNT HOREB	WI	53572	00704
	MADISON	WI	53716	00704
	MC FARLAND	WI	53558	00704
	COLUMBUS	WI	53925	00704
	COLUMBUS	WI	53925	00704
	PRAIRIE DU SAC	WI	53578	00704
	MERRILL	WI	54452	00704
	MIDDLETON	WI	53562	00704
	MIDDLETON	WI	53562	00704
	TUCSON	AZ	85750	00704
	TUCSON	AZ	85750	00704
	MADISON	WI	53711	00704
	MADISON	WI	53703	00704
	MADISON	WI	53703	00704
	NORA SPRINGS	IA	50458	00704
	NORA SPRINGS	IA	50458	00704
	DEWEY	AZ	86327	00704
	SUN PRAIRIE	WI	53590	00704
	MOUNT HOREB	WI	53572	00704
	MADISON	WI	53714	00704
	FITCHBURG	WI	53711	00704
	MADISON	WI	53719	00704
	MAZOMANIE	WI	53560	00704
	MADISON	WI	53704	00704
	BUCKLIN	KS	67834	00704
	MADISON	WI	53713	00704
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75 GOLF PKWY	MADISON	WI	53704	00704
75 GOLF PKWY	MADISON	WI	53704	00704
	JUDA	WI	53550	00704
	WAUNAKEE	WI	53597	00704
	MADISON	WI	53714	00704
	MONTICELLO	WI	53570	00704
	FITCHBURG	WI	53711	00704
	STOCKTON	CA	95219	00704
	MADISON	WI	53711	00704
	MADISON	WI	53711	00704
	ALBANY	WI	53502	00704
	MADISON	WI	53704	00704
	MADISON	WI	53711	00704
	MADISON	WI	53705	00704
	MADISON	WI	53705	00704
	STOUGHTON	WI	53589	00704
	STOUGHTON	WI	53589	00704
	VERONA	WI	53593	00704
	VERONA	WI	53593	00704
PO BOX 191	ARGYLE	WI	53504	00704
	MADISON	WI	53704	00704
	VERONA	WI	53593	00704
	VERONA	WI	53593	00704
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	VERONA	WI	53593	00704
	VERONA	WI	53593	00704
	MADISON	WI	53705	00704
	MADISON	WI	53705	00704
	GRAYSON	GA	30017	00704
	FITCHBURG	WI	53711	00704
	FITCHBURG	WI	53711	00704
	STOUGHTON	WI	53589	00704
	CROSS PLAINS	WI	53528	00704
	CROSS PLAINS	WI	53528	00704

	MADISON	WI	53711	00704
	OREGON	WI	53575	00704
	MADISON	WI	53719	00704
	MADISON	WI	53719	00704
	MADISON	WI	53701	00704
	MADISON	WI	53704	00704
	MADISON	WI	53716	00704
	DE FOREST	WI	53532	00704
	DE FOREST	WI	53532	00704
	STOUGHTON	WI	53589	00704
	STOUGHTON	WI	53589	00704
	MIDDLETON	WI	53562	00704
	MIDDLETON	WI	53562	00704
	MADISON	WI	53704	00704
	MADISON	WI	53704	00704
	SUN PRAIRIE	WI	53590	00704
	FORT ATKINSON	WI	53538	00704
	FORT ATKINSON	WI	53538	00704
	STOUGHTON	WI	53589	00704
	STOUGHTON	WI	53589	00704
	MADISON	WI	53711	00704
	STOUGHTON	WI	53589	00704
	STOUGHTON	WI	53589	00704
	STOUGHTON	WI	53589	00704
	MADISON	WI	53705	00704
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	MADISON	WI	53718	00704
	MADISON	WI	53704	00704
	MADISON	WI	53704	00704
	MADISON	WI	53704	00704
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	SUN PRAIRIE	WI	53590	00704

	SUN PRAIRIE	WI	53590	00704
	OREGON	WI	53575	00704
	OREGON	WI	53575	00704
	MADISON	WI	53713	00704
	BROOKLYN	WI	53521	00704
	SUN PRAIRIE	WI	53590	00704
	SUN PRAIRIE	WI	53590	00704
	MADISON	WI	53704	00704
	BROOKLYN	WI	53521	00704
	BROOKLYN	WI	53521	00704
	MADISON	WI	53716	00704
	MADISON	WI	53704	00704
	MARSHALL	WI	53559	00704
	JUDA	WI	53550	00704
	JUDA	WI	53550	00704
	NEW GLARUS	WI	53574	00704
	SUN PRAIRIE	WI	53590	00704
	SUN PRAIRIE	WI	53590	00704
	MADISON	WI	53704	00704
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	EVANSVILLE	WI	53536	00704
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	MADISON	WI	53704	00704
	VADNAIS HEIGHTS	MN	55127	00704
	FORT MYERS	FL	33905	00704
	MONONA	WI	53716	00704
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	MADISON	WI	53704	00704
	STOUGHTON	WI	53589	00704
	OREGON	WI	53575	00704
	DODGEVILLE	WI	53533	00704
	EVANSVILLE	WI	53536	00704
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	OREGON	WI	53575	00704
	MONONA	WI	53716	00704
	MONONA	WI	53716	00704
	MONONA	WI	53716	00704
	VERONA	WI	53593	00704
	MONROE	WI	53566	00704
	MADISON	WI	53716	00704
	NEW GLARUS	WI	53574	00704
	WISCONSIN DELLS	WI	53965	00704
	OREGON	WI	53575	00704
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	PRAIRIE DU SAC	WI	53578	00704
	MADISON	WI	53718	00704
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	STOUGHTON	WI	53589	00704
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	MADISON	WI	53711	00704
	OREGON	WI	53572	00704
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	GULF SHORES	AL	36542	00704
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	POYNETTE	WI	53955	00704
	ROCKLEDGE	FL	32955	00704
	ROCKLEDGE	FL	32955	00704
	WAUNAKEE	WI	53597	00704
	COTTAGE GROVE	WI	53527	00704
	MADISON	WI	53718	00704
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	MONONA	WI	53716	00704
	STOUGHTON	WI	53589	00704
	SUN PRAIRIE	WI	53590	00704
	SUN PRAIRIE	WI	53590	00704
	EDGERTON	WI	53534	00704
	OREGON	WI	53575	00704
	DE FOREST	WI	53532	00704
	SUN CITY	AZ	85351	00704
	SUN CITY	AZ	85351	00704
	MADISON	WI	53714	00704
	DEERFIELD	WI	53531	00704
	DEERFIELD	WI	53531	00704
	MARSHALL	WI	53559	00704
	MARSHALL	WI	53559	00704
	OREGON	WI	53575	00704
	OREGON	WI	53575	00704
	SUN PRAIRIE	WI	53590	00704
	SUN PRAIRIE	WI	53590	00704
	MADISON	WI	53704	00704
	MADISON	WI	53704	00704
	SUN PRAIRIE	WI	53590	00704
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	WAUNAKEE	WI	53597	00704

	WAUNAKEE	WI	53597	00704
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	VACAVILLE	CA	95687	00704
	VACAVILLE	CA	95687	00704
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	MADISON	WI	53704	00704
	MADISON	WI	53713	00704
	BROOKLYN	WI	53521	00704
	POYNETTE	WI	53955	00704
	DEFOREST	WI	53532	00704
	SUN PRAIRIE	WI	53590	00704
	JANESVILLE	WI	53546	00704
	JANESVILLE	WI	53546	00704
	RIO	WI	53960	00704
	WICKENBURG	AZ	85390	00704
	WICKENBURG	AZ	85390	00704
	SUN PRAIRIE	WI	53590	00704
	MARSHALL	WI	53559	00704
	NEW GLARUS	WI	53574	00704
	MADISON	WI	53714	00704
	MIDDLETON	WI	53562	00704
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	MADISON	WI	53711	00704
	MILTON	WI	53563	00704
	PLOVER	WI	54467	00704
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	PLOVER	WI	54467	00704
	MADISON	WI	53711	00704
	MADISON	WI	53711	00704
	COTTAGE GROVE	WI	53527	00704
	WAUNAKEE	WI	53597	00704

	SUN PRAIRIE	WI	53590	00704
	SUN PRAIRIE	WI	53590	00704
	OREGON	WI	53575	00704
	SARASOTA	FL	34231	00704
	SUN PRAIRIE	WI	53590	00704
	DEFOREST	WI	53532	00704
	CAMBRIDGE	WI	53523	00704
	CAMBRIDGE	WI	53523	00704
	VERONA	WI	53593	00704
	VERONA	WI	53593	00704
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	VERONA	WI	53593	00704
	VERONA	WI	53593	00704
	SAINT PETERSBUR	FL	33707	00704
	SAINT PETERSBUR	FL	33707	00704
	JANESVILLE	WI	53545	00704
	CROSS PLAINS	WI	53528	00704
	VERONA	WI	53593	00704
	DE FOREST	WI	53532	00704
	DE FOREST	WI	53532	00704
	DE FOREST	WI	53532	00704
	SUN PRAIRIE	WI	53590	00704
	MADISON	WI	53716	00704
	MADISON	WI	53711	00704
	WINDSOR	WI	53598	00704
	MONONA	WI	53716	00704
	MADISON	WI	53704	00704
	DELAVAN	WI	53115	00704
	DELAVAN	WI	53115	00704
	MADISON	WI	53715	00704
	MADISON	WI	53716	00704
	MADISON	WI	53716	00704
	SUN PRAIRIE	WI	53590	00704

	MADISON	WI	53704	00704
	MADISON	WI	53704	00704
	BLACK EARTH	WI	53515	00704
	MADISON	WI	53718	00704
	MOUNT HOREB	WI	53572	00704
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	FITCHBURG	WI	53711	00704
	STOUGHTON	WI	53589	00704
	STOUGHTON	WI	53589	00704
	MADISON	WI	53711	00704
	MADISON	WI	53711	00704
	MADISON	WI	53703	00704
	PARRISH	FL	34219	00704
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	EVANSVILLE	WI	53536	00704
	MISSION	TX	78572	00704
	MISSION	TX	78572	00704
	MADISON	WI	53711	00704
	DE FOREST	WI	53532	00704
	STOUGHTON	WI	53589	00704
	STOUGHTON	WI	53589	00704
	MIDDLETON	WI	53562	00704
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1270 LUCERNE DR	VERONA	WI	53593	00704
	MONONA	WI	53716	00704
	OREGON	WI	53575	00704
	MARSHALL	WI	53559	00704
	MARSHALL	WI	53559	00704
	MARSHALL	WI	53559	00704

	BEAVER DAM	WI	53916	00704
	BEAVER DAM	WI	53916	00704
	MADISON	WI	53713	00704
	MADISON	WI	53713	00704
	SUN PRAIRIE	WI	53590	00704
	DEFOREST	WI	53532	00704
	MOUNT HOREB	WI	53572	00704
	MOUNT HOREB	WI	53572	00704
	MADISON	WI	53719	00704
	WAUNAKEE	WI	53597	00704
	WAUNAKEE	WI	53597	00704
	WAUNAKEE	AZ	53597	00704
	WAUNAKEE	AZ	53597	00704
	MADISON	WI	53711	00704
	MADISON	WI	53711	00704
	MADISON	WI	53711	00704
	FITCHBURG	WI	53719	00704
	FITCHBURG	WI	53719	00704
	DEFOREST	WI	53532	00704
	MADISON	WI	53714	00704
	WAUNAKEE	WI	53597	00704
	PRAIRIE DU SAC	WI	53578	00704
	MADISON	WI	53716	00704
	MADISON	WI	53705	00704
	FORT ATKINSON	WI	53538	00704
	MADISON	WI	53711	00704
	JANESVILLE	WI	53546	00704
	JANESVILLE	WI	53546	00704
	MADISON	WI	53704	00704
	MIDDLETON	WI	53562	00704
	SAUK CITY	WI	53583	00704
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	STOUGHTON	WI	53589	00704

	VERONA	WI	53593	00704
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	VERONA	WI	53593	00704
	SUN PRAIRIE	WI	53590	00704
	SUN PRAIRIE	WI	53590	00704
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	MADISON	WI	53713	00704
	BELGIUM	WI	53004	00704
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	MADISON	WI	53711	00704
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	EDGERTON	WI	53534	00704
	STOUGHTON	WI	53589	00704
	MADISON	WI	53711	00704
	MADISON	WI	53704	00704
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	MADISON	WI	53704	00704
	MCFARLAND	WI	53558	00704
	OREGON	WI	53575	00704
	MARSHALL	WI	53559	00704
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	BELLEVILLE	WI	53508	00704
	MADISON	WI	53713	00704
	MADISON	WI	53719	00704
	MADISON	WI	53704	00704
	MADISON	WI	53716	00704
	CASA GRANDE	AZ	85122	00704
	MADISON	WI	53704	00704
	NEW LISBON	WI	53950	00704
	MC FARLAND	WI	53558	00704
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	HAZEL GREEN	WI	53811	00704
	HAZEL GREEN	WI	53811	00704
	WAUNAKEE	WI	53597	00704
	WAUNAKEE	WI	53597	00704
	MADISON	WI	53711	00704
	VERONA	WI	53593	00704
	MADISON	WI	53711	00704
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	MIDDLETON	WI	53562	00704
	WAUNAKEE	WI	53597	00704
	WAUNAKEE	WI	53597	00704
	MADISON	WI	53717	00704
	MADISON	WI	53704	00704
	MADISON	WI	53704	00704
5340 CENTURY AVE	MIDDLETON	WI	53562	00704
	MADISON	WI	53713	00704
	MADISON	WI	53718	00704
	MADISON	WI	53714	00704
	PARDEEVELLE	WI	53954	00704
	PARDEEVELLE	WI	53954	00704
	MADISON	WI	53719	00704
	VERONA	WI	53593	00704
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	JANESVILLE	WI	53546	00704
	SUN PRAIRIE	WI	53590	00704
	SUN PRAIRIE	WI	53590	00704
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	BLUE MOUNDS	WI	53517	00704
	MADISON	WI	53726	00704
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	MIDDLETON	WI	53562	00704
	MADISON	WI	53716	00704
	MADISON	WI	53716	00704
	MADISON	WI	53711	00704
	COTTAGE GROVE	WI	53527	00704
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	SUN PRAIRIE	WI	53590	00704
	SUN PRAIRIE	WI	53590	00704
	MADISON	WI	53705	00704
	RIO	WI	53960	00704
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	MT HOREB	WI	53572	00704
	MC FARLAND	WI	53558	00704
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	SUN PRAIRIE	WI	53590	00704
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	MOUNT HOREB	WI	53572	00704
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PO BOX 637	MARSHALL	WI	53559	00704
PO BOX 637	MARSHALL	WI	53559	00704
	OREGON	WI	53575	00704
	OREGON	WI	53575	00704
	APPLETON	WI	54913	00704
	MIDDLETON	WI	53562	00704
	VERONA	WI	53593	00704
	MADISON	WI	53714	00704

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	CAMBRIDGE	WI	53523	00704
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	JANESVILLE	WI	53545	00704
	PRAIRIE DU SAC	WI	53578	00704
	MADISON	WI	53726	00704
	OREGON	WI	53575	00704
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	MIDDLETON	WI	53562	00704
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	MINOCQUA	WI	54548	00704
	OREGON	WI	53575	00704
	MADISON	WI	53711	00704
	FITCHBURG	WI	53719	00704
	SUN PRAIRIE	WI	53590	00704
	MADISON	WI	53704	00704
	MONONA	WI	53716	00704
	WATERTOWN	WI	53094	00704
	WATERTOWN	WI	53094	00704
	BLANCHARDVILLE	WI	53516	00704
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	CAMBRIDGE	WI	53523	00704
	CAMBRIDGE	WI	53523	00704
	CAMBRIDGE	WI	53523	00704
	DEERFIELD	WI	53531	00704
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	SUN PRAIRIE	WI	53590	00704
	CROSS PLAINS	WI	53528	00704
	CROSS PLAINS	WI	53528	00704
	MONONA	WI	53716	00704

	MONONA	WI	53716	00704
	MADISON	WI	53718	00704
	DAVIS	IL	61019	00704
1517 GOLF VIEW RD	MADISON	WI	53704	00704
1517 GOLF VIEW RD	MADISON	WI	53704	00704
	LODI	WI	53555	00704
	WAUNAKEE	WI	53597	00704
	OREGON	WI	53585	00704
	MADISON	WI	53705	00704
	WEBSTER	MN	55088	00704
	WEBSTER	MN	55088	00704
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	MADISON	WI	53711	00704
	MADISON	WI	53719	00704
	VERONA	WI	53593	00704
	VERONA	WI	53593	00704
	MADISON	WI	53704	00704
	DE FOREST	WI	53532	00704
	DE FOREST	WI	53532	00704
	MOUNT HOREB	WI	53572	00704
	MOUNT HOREB	WI	53572	00704
	DE FOREST	WI	53532	00704
	DE FOREST	WI	53532	00704
	MIDDLETON	WI	53562	00704
	MIDDLETON	WI	53562	00704
	MCFARLAND	WI	53558	00704
	MCFARLAND	WI	53558	00704
	MADISON	WI	53701	00704
	SUN PRAIRIE	WI	53590	00704
	MONONA	WI	53716	00704
	MONONA	WI	53716	00704
	JANESVILLE	WI	53546	00704
	MADISON	WI	53713	00704

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	BARABOO	WI	53913	00704
	BARABOO	WI	53913	00704
	BROOKLYN	WI	53521	00704
	FOX LAKE	WI	53933	00704
	MADISON	WI	53716	00704
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	EDGERTON	WI	53534	00704
	EDGERTON	WI	53534	00704
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	MADISON	WI	53704	00704
	WAUNAKEE	WI	53597	00704
	WAUNAKEE	WI	53597	00704
	MADISON	WI	53713	00704
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325 PRAIRIE WAY BLVD	VERONA	WI	53593	00704
	NORTH AURORA	IL	60542	00704
	MADISON	WI	53704	00704
	MADISON	WI	53704	00704
	MADISON	WI	53719	00704
	CROSS PLAINS	WI	53528	00704
	CROSS PLAINS	WI	53528	00704
	BARNEVELD	WI	53507	00704
	BARNEVELD	WI	53507	00704
	MADISON	WI	53713	00704

	MADISON	WI	53713	00704
	MCFARLAND	WI	53558	00704
	MCFARLAND	WI	53558	00704
	MCFARLAND	WI	53558	00704
	MADISON	WI	53716	00704
	MADISON	WI	53704	00704
	MADISON	WI	53705	00704
	MADISON	WI	53705	00704
	STOUGHTON	WI	53589	00704
	MADISON	WI	53704	00704
	MADISON	WI	53704	00704
	MIDDLETON	WI	53562	00704
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	FITCHBURG	WI	53711	00704
	PALMYRA	WI	53156	00704
	SUN PRAIRIE	WI	53590	00704
	MADISON	WI	53714	00704
	MADISON	WI	53714	00704
	OREGON	WI	53575	00704
	OREGON	WI	53575	00704
	MADISON	WI	53719	00704
	MADISON	WI	53719	00704
	MCFARLAND	WI	53558	00704
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	SUN PRAIRIE	WI	53590	00704
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	EVANSVILLE	WI	53536	00704
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	ESTERO	FL	33928	00704
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	BARNEVELD	WI	53507	00704
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COUNTY OF DANE

00704 * All Groups *

Delta Dental of Wisconsin Plan Management Report

Reporting Period from 3/1/2019 to 2/28/2021

Monthly Activity

A summary of your monthly enrollment and claims.

Month	Number of Claims	Paid Claims	Total Employees	Employees Only	Employees w/Family
Mar 2019	1,346	\$283,300	3,068	1,070	1,695
Apr 2019	1,323	\$271,363	3,073	1,069	1,700
May 2019	1,655	\$343,093	3,078	1,071	1,705
Jun 2019	1,223	\$256,942	3,096	1,083	1,708
Jul 2019	1,480	\$284,306	3,104	1,087	1,711
Aug 2019	1,238	\$239,884	3,111	1,093	1,711
Sep 2019	1,243	\$223,269	3,116	1,091	1,717
Oct 2019	1,532	\$293,497	3,108	1,077	1,723
Nov 2019	1,308	\$252,503	3,107	1,073	1,729
Dec 2019	1,272	\$254,967	3,108	1,072	1,732
Jan 2020	1,414	\$288,462	3,111	1,073	1,737
Feb 2020	1,318	\$281,300	3,116	1,072	1,743
Mar 2020	1,204	\$251,462	3,127	1,080	1,739
Apr 2020	279	\$62,798	3,138	1,085	1,748
May 2020	369	\$68,697	3,135	1,094	1,736
Jun 2020	1,077	\$211,277	3,153	1,106	1,741
Jul 2020	1,592	\$294,233	3,144	1,102	1,735
Aug 2020	1,337	\$257,064	3,135	1,099	1,732
Sep 2020	1,471	\$283,806	3,140	1,098	1,736
Oct 2020	1,152	\$249,124	3,151	1,107	1,741
Nov 2020	982	\$199,079	3,148	1,101	1,744
Dec 2020	1,320	\$266,241	3,141	1,103	1,733
Jan 2021	1,273	\$260,466	3,145	1,107	1,736
Feb 2021	1,266	\$263,589	3,152	1,111	1,740

COUNTY OF DANE
00704 * All Groups *



COUNTY OF DANE

00704

Delta Dental of Wisconsin Plan Management Report

Reporting Period from 3/1/2019 to 2/28/2021

Monthly Activity

A summary of your monthly enrollment and claims.

Month	Number of Claims	Paid Claims	Total Employees	Employees Only	Employees w/Family
Mar 2019	1,068	\$214,175	2,248	611	1,637
Apr 2019	1,034	\$205,926	2,251	610	1,641
May 2019	1,277	\$253,438	2,260	614	1,646
Jun 2019	923	\$188,513	2,272	622	1,650
Jul 2019	1,176	\$218,409	2,277	624	1,653
Aug 2019	1,002	\$191,854	2,284	628	1,656
Sep 2019	992	\$172,286	2,291	629	1,662
Oct 2019	1,197	\$229,550	2,281	612	1,669
Nov 2019	1,021	\$191,763	2,284	610	1,674
Dec 2019	1,008	\$208,814	2,287	610	1,677
Jan 2020	1,127	\$227,541	2,299	614	1,685
Feb 2020	1,045	\$210,338	2,307	615	1,692
Mar 2020	984	\$196,035	2,301	612	1,689
Apr 2020	242	\$51,362	2,312	615	1,697
May 2020	308	\$56,904	2,311	622	1,689
Jun 2020	872	\$166,678	2,325	632	1,693
Jul 2020	1,239	\$222,177	2,314	628	1,686
Aug 2020	1,078	\$200,466	2,308	625	1,683
Sep 2020	1,191	\$228,832	2,309	623	1,686
Oct 2020	900	\$192,308	2,321	628	1,693
Nov 2020	752	\$152,016	2,320	624	1,696
Dec 2020	1,051	\$215,286	2,307	621	1,686
Jan 2021	1,033	\$196,781	2,321	630	1,691
Feb 2021	1,042	\$211,527	2,316	625	1,691

COUNTY OF DANE
00704



COUNTY OF DANE

07805

Delta Dental of Wisconsin Plan Management Report

Reporting Period from 3/1/2019 to 2/28/2021

Monthly Activity

A summary of your monthly enrollment and claims.

Month	Number of Claims	Paid Claims	Total Employees	Employees Only	Employees w/Spouse	Employees w/Children	Employees w/Family
Mar 2019	270	\$67,361	797	453	301	2	41
Apr 2019	283	\$63,960	798	454	302	2	40
May 2019	364	\$84,581	794	452	300	2	40
Jun 2019	285	\$64,992	799	455	302	3	39
Jul 2019	287	\$63,236	802	457	303	3	39
Aug 2019	223	\$44,545	802	458	304	3	37
Sep 2019	246	\$50,403	801	455	305	3	38
Oct 2019	323	\$61,590	803	458	305	3	37
Nov 2019	276	\$58,312	799	456	302	3	38
Dec 2019	255	\$44,615	797	455	301	3	38
Jan 2020	271	\$57,855	788	452	298	3	35
Feb 2020	257	\$67,235	787	451	298	3	35
Mar 2020	213	\$54,297	805	462	305	3	35
Apr 2020	33	\$9,692	804	464	302	3	35
May 2020	60	\$11,726	805	466	302	3	34
Jun 2020	200	\$43,624	807	466	303	3	35
Jul 2020	337	\$69,023	809	466	304	3	36
Aug 2020	251	\$54,538	806	466	301	3	36
Sep 2020	274	\$53,572	810	467	303	3	37
Oct 2020	242	\$55,275	810	471	301	2	36
Nov 2020	223	\$45,521	807	468	301	2	36
Dec 2020	264	\$50,126	812	472	303	2	35
Jan 2021	230	\$61,020	801	467	300	2	32
Feb 2021	212	\$49,503	813	476	298	3	36

COUNTY OF DANE
07805



COUNTY OF DANE

05012

Delta Dental of Wisconsin Plan Management Report

Reporting Period from 3/1/2019 to 2/28/2021

Monthly Activity

A summary of your monthly enrollment and claims.

Month	Number of Claims	Paid Claims	Total Employees	Employees Only	Employees w/Family
Mar 2019	8	\$1,765	23	6	17
Apr 2019	6	\$1,477	24	5	19
May 2019	14	\$5,075	24	5	19
Jun 2019	15	\$3,438	25	6	19
Jul 2019	17	\$2,661	25	6	19
Aug 2019	13	\$3,485	25	7	18
Sep 2019	5	\$580	24	7	17
Oct 2019	12	\$2,357	24	7	17
Nov 2019	11	\$2,428	24	7	17
Dec 2019	9	\$1,537	24	7	17
Jan 2020	16	\$3,066	24	7	17
Feb 2020	16	\$3,727	22	6	16
Mar 2020	7	\$1,131	21	6	15
Apr 2020	4	\$1,744	22	6	16
May 2020	1	\$67	19	6	13
Jun 2020	5	\$975	21	8	13
Jul 2020	16	\$3,033	21	8	13
Aug 2020	8	\$2,060	21	8	13
Sep 2020	6	\$1,402	21	8	13
Oct 2020	10	\$1,541	20	8	12
Nov 2020	7	\$1,542	21	9	12
Dec 2020	5	\$829	22	10	12
Jan 2021	10	\$2,665	23	10	13
Feb 2021	12	\$2,560	23	10	13

COUNTY OF DANE
05012



<u>GROUP#</u>	<u>SUB</u>	<u>LOC</u>	<u>POOL</u>	<u>GROUP NAME</u>	<u>SUB LOCATION</u> <u>DESCRIPTION</u>	<u>BILL CONTACT</u> <u>#EMPLOYEES</u>
704	1	0	0	COUNTY OF DANE	ACTIVE EMPLOYEES	2305
704	2	0	0	COUNTY OF DANE	ASSISTANT DA'S	0
704	700	0	0	COUNTY OF DANE	COBRA	7
5012	3	0	0	COUNTY OF DANE	HOUSING AUTHORITY	5
5012	4	0	0	COUNTY OF DANE	CAPITAL AREA RPC	10
5012	6	0	0	COUNTY OF DANE	WORKFORCE DEV BD OF S CENTR WI	8
7805	202	0	0	COUNTY OF DANE	RETIREES:DIRECT BILL QUARTERLY	171
7805	203	0	0	COUNTY OF DANE	RET:DRCT BILL SURV SPOUSE QUAR	46
7805	204	0	0	COUNTY OF DANE	RET:PRECISN DIRCT BILL MONTHLY	599

Delta Dental PPO Handbook

Delta Dental Of Wisconsin



Your Choice of Provider — Delta Dental PPO plus PremierSM

Delta Dental PPO plus PremierSM is Delta Dental's preferred provider organization (PPO). This option offers an added advantage to patients receiving treatment from a Delta Dental PPO Provider.

As a Delta Dental Subscriber, You are free to see any Provider You choose on a treatment by treatment basis – whether or not the Provider is included in our Delta Dental PPO Provider directory. It is important to remember, however, that Your out-of-pocket costs may be lower when You see a Delta Dental PPO Provider.

Delta Dental PPO Provider

Delta Dental PPO Providers have signed a contract with Delta Dental or another member of the Delta Dental Plans Association, agreeing to accept reduced fees for the Dental Procedures they provide. This reduces Your out-of-pocket costs, because You will be responsible only for applicable Deductible amounts and Coinsurance for covered Benefits. You will be responsible for fees for services that are Noncovered Benefits under Your Group's Contract. And because these Providers agree to fees approved by Delta Dental, they receive payment directly from Delta Dental.

Providers Outside the Delta Dental PPO Network:

Delta Dental Premier Providers

Delta Dental Premier Providers have signed a contract with Delta Dental or another member of the Delta Dental Plans Association, agreeing to accept direct payment from Delta Dental. They have also agreed not to charge You any amount that exceeds the Maximum Plan Allowance (MPA). However, You will still be responsible for Deductibles and Coinsurance, and fees for services that are Noncovered Benefits under Your Group's Contract.

The MPA is the total dollar amount allowed under Your Group's Contract for a specific Benefit. The MPA will be reduced by any Deductible and Coinsurance the Subscriber or the Covered Dependent is required to pay.

Noncontracted Providers

If Your Provider has not signed a contract with Delta Dental, claim payments will still be calculated based on the MPA, but they will be sent directly to You rather than to the Provider. You will then need to reimburse Your Provider through his or her usual billing procedure. You will be responsible for any amount in excess of the MPA, as well as any Deductible and Coinsurance, and fees for services that are not Benefits under Your Group's Contract.

Please note that if the fee charged by a Noncontracted Provider is not allowed in full, Delta Dental is not implying that the Provider is overcharging. Dental fees vary and are based on each Provider's overhead, skill, and experience. Therefore, not every Provider will have fees that fall within the MPA.

For information on Delta Dental PPO and Delta Dental Premier Providers, visit Delta Dental's website at www.deltadentalwi.com or call 800-236-3712.

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Welcome

Delta Dental has been selected by Your employer to provide Your Group dental coverage. All of us at Delta Dental are pleased to bring these important Benefits to You and any Dependents You have enrolled for coverage.

It is important for You to read this Dental Benefit Handbook with the Summary of Benefits. The Summary of Benefits lists the specific Benefits of Your Group dental coverage. Together, the Dental Benefit Handbook and the Summary of Benefits comprise Your certificate of insurance.

This Certificate is not the insurance policy: it is evidence of insurance provided under the Contract between Delta Dental and Your employer. All Benefits are paid according to the terms, conditions and provisions of Your Group's Contract. This Certificate describes the essential features of such insurance. This Certificate replaces and supersedes all Certificates, endorsements and riders that we may have previously issued to You prior to the effective date of this Certificate.

The Contract issued to Your employer is the complete document of insurance and governs all claims processing. It will serve as Delta Dental's primary resource when answering questions regarding Your dental claims. You may examine Your Group's Contract any time by contacting Your employer or Delta Dental during normal business hours.

All claims are settled based on a specific methodology. The eligible amount of a claim may be less than the provider's billed charge.

If a clerical error or other administrative mistake occurs, that error will not deprive You of coverage that You would otherwise have had under this policy. A clerical error or other administrative mistake also will not create coverage that does not otherwise exist under this policy.

Definitions

“Benefit Accumulation Period” means the time period that Deductibles and maximum Benefits accumulate. The Benefit Accumulation Period is the time period shown in the Summary of Benefits.

“Benefit” means those Dental Procedures that are covered by Delta Dental under the terms of Your Group’s Contract as specified in the Summary of Benefits.

“Certificate” means the Dental Benefit Handbook and Summary of Benefits issued to a Subscriber insured through the Group. The Certificate outlines the Benefits provided by Your Group’s Contract.

“Coinsurance” means the percentage of the MPA, after any applicable Deductible is applied, paid by the Subscriber or Covered Dependent for a specific Benefit each time such Benefit is provided under Your Group’s Contract.

“Coverage Percentage” means the percentage of the MPA, after any applicable Deductible is applied, paid by Delta Dental for a specific Benefit, as specified in the Summary of Benefits.

“Covered Dependent” means a Dependent who (a) is listed in the documents necessary for coverage under the Contract, (b) has been accepted by Delta Dental for coverage, and (c) for whom the appropriate premium has been paid.

“Deductible” means the specified dollar amount that a Subscriber or Covered Dependent is required to pay each Benefit Accumulation Period before Delta Dental will pay Benefits as specified in the Summary of Benefits.

“Dental Benefit Handbook” means the Group dental insurance handbook and the Summary of Benefits provided by Delta Dental to Subscribers that outlines the dental Benefits available to Subscribers and Covered Dependents.

“Delta Dental” means Delta Dental of Wisconsin, Inc.

“Delta Dental PPO Provider” means:

- a. Any Provider who has entered into a Delta Dental of Wisconsin PPO Provider agreement or a PPO Provider agreement with another member of the Delta Dental Plans Association to provide or arrange for the provision of Dental Procedures to Subscribers and Covered Dependents, and who abides by such uniform rules and regulations as prescribed by Delta Dental.
- b. Any Provider who is a member or shareholder of a professional dental corporation or other entity that has entered into a corporate Delta Dental of Wisconsin PPO Provider agreement on behalf of its member, shareholder or employee Providers or that has entered into a corporate PPO Provider agreement with another member of the Delta Dental Plans Association on behalf of its member, shareholder or employee Providers.

“Delta Dental Premier Provider” means:

- a. Any Provider who has entered into a Delta Dental of Wisconsin Premier Provider agreement or a Premier Provider agreement with another member of the Delta Dental Plans Association to provide or arrange for the provision of Dental Procedures to Subscribers and Covered Dependents, and who abides by such uniform rules and regulations as prescribed by Delta Dental.

- b. Any Provider who is a member or shareholder of a professional dental corporation or other entity that has entered into a corporate Delta Dental of Wisconsin Premier Provider agreement on behalf of its member, shareholder or employee Providers or that has entered into a corporate Premier Provider agreement with another member of the Delta Dental Plans Association on behalf of its member, shareholder or employee Providers.

“Dental Procedure” means dental treatment provided to a Subscriber of Covered Dependent by a Provider and reported to Delta Dental using the Code on Dental Procedures and Nomenclature (CDT).

“Dependent” means a person who has satisfied the criteria for eligibility listed in Your Group’s Contract.

“Eligible Employee” means an employee or member of the Group who has satisfied the criteria for eligibility to enroll for coverage under Your Group’s Contract.

“Grievance” means any dissatisfaction with the administration, claims practices, or provision of services by Delta Dental that is expressed in writing by or on behalf of a Subscriber or Covered Dependent.

“Group” means the employer, association, union or other organization contracting with Delta Dental to provide Benefits to its Eligible Employees or members and their Dependents, if applicable.

“Master Group Contract” or “Contract” means the Group dental insurance policy issued by Delta Dental to the Group in which Delta Dental agrees to provide dental Benefits to the Subscriber or Covered Dependent. The Contract includes the Group application, the Declarations (including the Schedule of Benefits), the Master Group Contract, and any attached addenda, appendixes, endorsements, schedules or riders.

“Maximum Plan Allowance” or “MPA” means the total dollar amount allowed for a specific Benefit.

“Noncontracted Provider” means a Provider who is not a Delta Dental PPO Provider or Delta Dental Premier Provider.

“Noncovered Benefits” means those Dental Procedures that are not covered by Delta Dental under the terms of Your Group’s Contract.

“PPO” means a preferred provider organization.

“Open Enrollment Period” means an enrollment period during which time any Eligible Employee and/or Dependent may apply to become a Subscriber and/or Covered Dependent, and existing Subscribers may apply to change to another provider network or coverage option, if available, or elect to terminate coverage.

“Premium” means the total monthly fee due for this Contract. The Premium will be based on the Rate and the number of Subscribers.

“Provider” means a person duly licensed under Chapter 447 of the Wisconsin Statutes who acts within the lawful scope of his/her license under Chapter 447 or a person duly licensed in the state or country in which the Dental Procedures are rendered who acts within the lawful scope of his/her license.

“Rate” means the monthly fee required for each Subscriber in accordance with the terms of Your Group’s Contract.

“Subscriber” means an Eligible Employee or member of the Group who (a) has completed and signed the

documents necessary for coverage under the Contract, (b) has been accepted by Delta Dental as a Subscriber, and (c) for whom the appropriate Premium has been paid.

“Summary of Benefits” is a listing of the specific Benefits and Benefit limitations for Dental Procedures provided under the terms of Your Group’s Contract. The Summary of Benefits is provided as an insert with this Dental Benefit Handbook.

“Urgent Care Grievance” means any dissatisfaction with the administration or claims practices of or provision of services by Delta Dental that requires immediate dental attention. Such grievance must be delivered in writing to Delta Dental. See the Grievance Procedures section of this Handbook.

“You” and **“Your”** means the Subscriber.

Filing Claims

To file a claim with Delta Dental, simply present Your employee identification card to the receptionist at the dental office, or give Your member number. Claims must be filed on forms acceptable to Delta Dental.

Predetermination of Benefits

After an examination, Your Provider may recommend a treatment plan. If the services involve crowns, fixed bridgework, implants, or partial or complete dentures, ask Your Provider to send the treatment plan with images to Delta Dental. The available coverage will be calculated and printed on a Predetermination of Benefits form. Copies of the form will be sent to You and Your Provider.

The Predetermination of Benefits form is valid for one year from the date issued.

Predeterminations are not required, but Delta Dental encourages you to use this service. Should you have any questions about a predetermination, just call us at 800-236-3712.

Before You schedule dental appointments, You and Your Provider should discuss the amount to be paid by Delta Dental and Your financial obligation for the proposed treatment.

Optional Procedures

Delta Dental will pay the applicable MPA for the least expensive Dental Procedure that is adequate to restore the tooth or dental arch to contour and function, but only if the more expensive Dental Procedure is a Benefit of Your Group’s Contract. You will be responsible for either the remainder of the Provider’s fee if a more expensive covered Dental Procedure is selected or the entire fee if the more expensive Dental Procedure is not a Benefit. The Coinsurance and Deductible will apply regardless of which Dental Procedure is selected.

Covered Dental Procedures

Only Dental Procedures indicated as Benefits on Your Summary of Benefits insert are covered under Your Group's Contract.

Covered Dental Procedures are subject to the limitations described in the Summary of Benefits and the exclusions outlined in this Dental Benefit Handbook.

Exclusions

1. Dental Procedures, services, treatment or supplies provided or commenced prior to the effective date of Your coverage under this Contract or after the termination date of coverage, unless otherwise indicated
2. Dental Procedures, services, treatment or supplies to treat injuries or conditions compensable under worker's compensation or employer's liability laws
3. Charges for completion of forms
4. Charges for consultation
5. Dental Procedures, services, treatment or supplies excluded as provided in the Summary of Benefits
6. Dental Procedures, services, treatment or supplies not specifically covered under this Contract or excluded by Delta Dental rules and regulations, including Delta Dental processing policies, which may change periodically and are printed on the Explanation of Benefits and Explanation of Payment forms
7. Prescription drugs, premedications or relative analgesia
8. Preventive control programs
9. Charges for failure to keep a scheduled appointment
10. Charges by any hospital or other surgical or treatment facility, or any additional fees charged by a Provider for treatment in any such facility
11. Charges for treatment of, or services related to, temporomandibular joint dysfunction
12. Dental Procedures, services, treatment and supplies that are determined to be partially or wholly cosmetic in nature including, but not limited to, charges for personalization or characterization of prosthetic appliances
13. Crowns placed on Covered Dependents under age 12, other than prefabricated crowns
14. Prosthetics placed on Covered Dependents under age 16
15. Appliances, restorations, or procedures for: (a) increasing vertical dimension; (b) restoring occlusion; (c) correcting harmful habits; (d) replacing tooth structure lost by attrition, erosion, abrasion, or abfraction; (e) correcting congenital or developmental malformations except in newly born children; (f) replacement, provisional and temporary services; (g) implantology techniques (unless otherwise noted in the Summary of Benefits); (h) splints, unless necessary as a result of accidental injury
16. Dental Procedures, services, treatment or supplies provided by an individual other than a Provider

17. Dental Procedures, services, treatment or supplies to treat injuries or diseases caused by riots or any form of civil disobedience
18. Dental Procedures, services, treatment or supplies to treat injuries sustained while committing a felony or engaging in an illegal occupation
19. Dental Procedures, services, treatment or supplies to treat injuries intentionally inflicted
20. Replacement of lost or stolen dentures or charges for duplicate dentures
21. Dental Procedures, services, treatment or supplies in cases for which, in the professional judgment of the attending Provider, a satisfactory result cannot be obtained
22. Claims not submitted to Delta Dental of Wisconsin within 15 months from the date the procedure was provided
23. Local anesthetic is covered as a part of a Dental Procedure, service or treatment. General anesthetic or intravenous sedation is a Benefit only when billed with covered oral surgery (cutting procedures)
24. If orthodontic procedures are included as Benefits under this Contract, the repair and replacement of orthodontic appliances is not covered

Coordination of Benefits

Applicability

This Coordination of Benefits (COB) provision applies to This Plan when You have health care coverage under more than one Plan. "Plan" and "This Plan" as used in this Coordination of Benefits provision are defined below.

If this COB provision applies, the order of benefit determination rules shall be applied first. The rules determine whether the Benefits of This Plan are determined before or after those of another Plan. The Benefits of This Plan:

1. Shall not be reduced when under the order of benefit determination rules, This Plan determines its benefits before another Plan, but
2. May be reduced when, under the order of benefit determination rules, another Plan determines its benefits first. This reduction is described in the paragraph Effect on the Benefits of This Plan.

Definitions

In addition to the definitions contained in this Certificate, the following definitions apply to this Coordination of Benefits provision:

"Allowable Expense" means an item of dental expense that is covered at least in part by one or more of the Plans covering the person for whom the claim is made. When a Plan provides benefits in the form of services, the cash value of each procedure provided shall be considered both an Allowable Expense and a Benefit paid.

"Claim Determination Period" means a calendar year during which Allowable Expenses are compared with total benefits payable under the policy (without applying COB). It does not include any part of a year during which a person has no coverage under This Plan or any part of a year before the date this COB provision or a similar provision takes effect.

“Plan” means any of the following that provides benefits or services for, or because of, medical or dental care or treatment:

1. Group insurance or group-type coverage, whether insured or uninsured, that includes continuous 24-hour coverage. This includes prepayment, group practice or individual practice coverage. It also includes coverage other than school accident-type coverage.
2. Coverage under a governmental plan or coverage that is required or provided by law. This does not include a state plan under Medicaid, Title XIX, grants to States for Medical Assistance Programs, or the United States Social Security Plan whose benefits, by law, are excess to those of any private insurance program or other nongovernmental program. Each contract or other arrangement for coverage under (1) or (2) is a separate Plan. Also, if an arrangement has two parts and COB rules apply only to one of the two, each of the parts is a separate Plan.

“Primary Plan/Secondary Plan” means the order of benefit determination rules state whether This Plan is a Primary Plan or Secondary Plan as to another Plan covering the person. When This Plan is a Secondary Plan, its Benefits are determined after those of the other Plan and may be reduced because of the other Plan’s benefits. When Delta Dental is the Secondary Plan, Delta Dental may reduce the Benefits under its Plan only when the sum of the following exceeds the total allowable expense in a Claim Determination Period.

1. The benefits the Secondary Plan would pay for Allowable Expenses in the absence of COB; plus
2. The benefits that would be payable under other applicable Plans for Allowable Expenses in the absence of COB, whether or not claim is made.

The amount by which the Secondary Plan’s benefits are reduced shall be used by the Secondary Plan to pay Allowable Expenses not otherwise paid, which were incurred during the Claim Determination Period by the person for whom the claim is made. As each claim is submitted, the Secondary Plan determines its obligation to pay for Allowable Expenses based on all claims which were submitted up to that point in time during the Claim Determination Period.

When there are more than two Plans covering the person, This Plan may be a Primary Plan as to one or more other Plans and may be a Secondary Plan as to a different Plan or Plans.

“This Plan” means this Contract that provides Benefits for dental care expenses.

Order of Benefit Determination Rules

General. When there is a basis for a claim under This Plan and another Plan, This Plan is a Secondary Plan, which has its Benefits determined after those of the other Plan, unless:

1. The other Plan has rules coordinating its benefits with those of This Plan; and
2. Both those rules and This Plan’s rules described in subparagraph 2(b) require that This Plan’s Benefits be determined before those of the other Plan.

Rules. This Plan determines its order of Benefits using the first of the following rules, which applies;

1. Nondependent/Dependent. The benefits of the Plan that covers the person as an employee, member or Subscriber are determined before those of the Plan that covers the person as a Dependent of an employee, member or Subscriber.

2. Dependent Child/Parents Not Separated or Divorced. Except as stated in subparagraph (3)(c) below, when This Plan and another Plan cover the same child as a Dependent of different persons, called "parents":
 - a. The benefits of the Plan of the parent whose birthday falls earlier in the calendar year are determined before those of the Plan of the parent whose birthday falls later in the calendar year; but
 - b. If both parents have the same birthday, the benefits of the Plan that covered the parent longer are determined before those of the Plan that covered the other parent.

However, if the other Plan does not have the rule described in (a) but instead has a rule based upon the gender of the parent, and if, as a result, the Plans do not agree on the order of benefits, the rule in the other Plan shall determine the order of benefits.

3. Dependent Child/Separated or Divorced Parents. If two or more Plans cover a person as a Dependent child of divorced or separated parents, benefits for the child are determined in this order:
 - a. First, the Plan of the parent with custody of the child;
 - b. Then, the Plan of the spouse of the parent with custody of the child; and
 - c. Finally, the Plan of the parent not having custody of the child.

Also, if the specific terms of a court decree state that the parents have joint custody of the child and do not specify that one parent has responsibility for the child's dental care expenses or if the court decree states that both parents shall be responsible for the dental care needs of the child but gives physical custody of the child to one parent and the entities obligated to pay or provide benefits of the respective parents' Plans have actual knowledge of those terms, benefits for the Dependent child shall be determined according to Paragraph (2)(b).

However, if the specific terms of a court decree state that one of the parents is responsible for the health care expenses of a child, and the entity obligated to pay or provide the benefits of the Plan of that parent has actual knowledge of those terms, the benefits of that Plan are determined first. This paragraph does not apply with respect to any Claim Determination Period or plan year during which any benefits are actually paid or provided before the entity has that actual knowledge.

4. Active/Inactive Employee. The benefits of a Plan which cover a person as an employee who is neither laid off nor retired or as that employee's Dependent are determined before those of a Plan which covers that person as a laid off or retired employee or as that employee's Dependent. If the other Plan does not have this rule and if, as a result, the Plans do not agree on the order of benefits, this rule (4) is ignored.
5. Continuation Coverage.
 - a. If a person has continuation coverage under federal or state law and is also covered under another Plan, the following shall determine the order of benefits:
 1. First, the benefits of a Plan covering the employee, member, or Subscriber or Dependent of an employee, member, or Subscriber.
 2. Second, the benefits under the continuation coverage.
 - b. If the other Plan does not have the rule described in subparagraph (a), and if as a result, the Plans do not agree on the order of benefits, this paragraph (5) is ignored.

6. Longer/Shorter Length of Coverage. If none of the above rules determines the order of benefits, the Benefits of the Plan that covered an employee, member or Subscriber longer are determined before those of the Plan which covered that person for the shorter time.

If You are entitled to coverage under a group health care Plan which primarily covers services or expenses other than dental care, and if You first became eligible under the medical and dental Plans on the same date. This Plan shall be the secondary payer for those services covered by both Plans.

Effect on the Benefits of This Plan

When This Provision Applies. This “Effect on the Benefits of This Plan” provision applies when, in accordance with the “Order of Benefit Determination Rules” provision above, This Plan is a Secondary Plan as to one or more other Plans. In that event, Benefits of This Plan may be reduced under this paragraph so that the total benefits paid or provided by all Plans during a Claim Determination Period are not more than the total Allowable Expenses. Such other Plan or Plans are referred to as “the other Plans” in the “Reduction in This Plan’s Benefits” provision, below.

Reduction in This Plan’s Benefits. The Benefits that would be payable under This Plan in the absence of this COB provision will be reduced by the benefits payable for the total Allowable Expenses in a Claim Determination Period under the other Plans in the absence of provisions with a purpose like that of this COB provision, whether or not claim is made.

When a Plan provides benefits in the form of services, the cash value of each service rendered will be considered both an expense incurred and a benefit payable.

When the Benefits of This Plan are reduced as described above, each Benefit is reduced in proportion. It is then charged against any applicable Benefit limit of This Plan.

No rule in other Plan. If the other Plan does not have rules coordinating Benefits with those of This Plan, the benefits of the other Plan are determined first.

Right to Receive and Release Needed Information

Delta Dental has the right to decide the facts it needs to apply these rules. Delta Dental may get needed facts from or give them to any other organization or person without the consent of the insured but only as needed to apply these COB rules. Medical and dental records remain confidential as provided by applicable state and federal law. Each person claiming Benefits under This Plan must give Delta Dental any facts it needs to process the claim.

Facility of Payment

A payment made under another Plan may include an amount that should have been paid under This Plan. If it does, This Plan may pay that amount to the organization that made that payment. That amount will then be treated as though it were a Benefit paid under This Plan. Delta Dental will not have to pay that amount again. The term “payment made” means the cash value of the benefits provided in the form of services.

Right of Recovery

If the amount of the payments made by Delta Dental is more than it should have paid under this COB provision, it may recover the excess, at its option, from one or more of:

1. The persons it has paid or for whom it has paid;
2. Insurance companies; or
3. Other organizations.

The “amount of payments made” includes the cash value of any benefits provided in the form of services.

Eligibility

Covered Employee. You are eligible for coverage under Your Group’s Contract while You are a regular employee of the Group who averages the number of hours as determined by Your Group’s Contract and who has completed any waiting period indicated in the Summary of Benefits.

You may also be covered by Your Group’s Contract if You no longer meet these conditions but have elected to continue coverage as described in the Continued Coverage (COBRA) section of this Dental Benefit Handbook.

Covered Dependents. If You are enrolled for family coverage, the following persons may be covered under Your Group’s Contract as Your Dependents:

1. Your lawful spouse.
2. Your children including step-children and adopted children and children placed for adoption with You, who are less than 26 years of age.
3. Your children’s children until Your child reaches age 18.
4. Notwithstanding 1, 2 and 3 above, Your adult Dependent children, including step-children and adopted children and children placed for adoption with You, may be covered under this policy if the adult child satisfies all of the following:
 - a. The child is a full-time student, regardless of age; and
 - b. The child was under 26 years of age when he or she was called to federal active duty in the National Guard or in a reserve component of the U.S. armed forces while the child was attending, on a full-time basis, an institution of higher learning; and
 - c. The child re-enrolled as a full-time student within 12 months of returning from active duty.
5. A Dependent child over age 26 who is financially dependent on the Eligible Employee because of physical or mental incapacity that commenced while covered under this policy and prior to the Dependent child reaching age 26, provided a physician’s certificate of disability is submitted within six months following the Dependent child’s 26th birthday. Delta Dental reserves the right to request proof of continued disability from time to time, but not more often than annually after the two-year period immediately following the Dependent child’s attainment of the limiting age.

If a Subscriber or Covered Dependent is activated while in the Reserve or National Guard, coverage terminates at the time of departure for active duty. Subscribers or Covered Dependents of activated Reserve and National Guard personnel may elect continuation of coverage as described under the Continued Coverage (COBRA) section of this Dental Benefit Handbook. Upon return to civilian status, the Eligible Employee or Covered Person will be reinstated on the date he/she returns to work.

Dependents in military service are not covered by Your Group's Contract.

Dependents no longer meeting the above requirements because of divorce or separation from an Eligible Employee, or the end of a child's dependency status may elect to continue coverage. Please see the Continued Coverage (COBRA) section of this Dental Benefit Handbook.

Effective Dates of Coverage. You are covered by Your Group's Contract beginning on the first day the Contract becomes effective or as determined by Your Group's Contract.

Your Eligible Dependents are covered beginning on the first day You become covered under Your Group's Contract if You elect coverage for them. A newborn child is covered at birth and coverage continues for 60 days. If an additional premium is required to cover the newborn child, You must make written request to Delta Dental and pay the required premium within 60 days of the birth. You may, however, request coverage for a newborn child after the 60-day period but within one year of the birth provided, however, that You pay all required past premiums including an interest rate of 5.5%. If You adopt a child, coverage begins on the day the child is adopted, placed for adoption, or on the day of the final order granting adoption, whichever comes first. Changes in enrollment due to birth or adoption must be received by Delta Dental within 60 days of the birth or adoption.

An Eligible Employee who waived coverage because he/she was covered under other insurance may elect coverage to be effective on the first day of the month following the loss of such other coverage. The Eligible Employee must apply for such change in coverage within 30 days of the event causing the loss of the other coverage.

Changes in Coverage. You may change your enrollment in this dental plan if You experience a qualifying event such as a change in marital status, the addition of a qualified Dependent or the loss of coverage through Your spouse's plan. The enrollment change will be effective the first day of the month following the qualifying event. Notification of this enrollment change must be received by Delta Dental within 30 days of the qualifying event.

You may change your enrollment without a qualifying event if You contribute toward your premium and if an Open Enrollment Period is offered by the Group. Elective coverage changes can be considered by Delta Dental only at that time.

Notices. Notice to Your employer or Delta Dental will be considered sufficient if mailed to each party's regular office address. Notices to You, as a Subscriber, will be considered sufficient if mailed to Your last known address or the last known address of Your Group. It is the responsibility of Your Group to notify You regarding changes or termination of Your coverage.

Termination of Coverage. Your coverage and that of Your Covered Dependents will cease on the day You or Your Covered Dependents are no longer eligible or the day Your Group's Contract is terminated.

If You or Your Dependents lose eligibility under the Plan, You or Your Dependents may elect to continue coverage as described in the Continued Coverage (COBRA) section of this Dental Benefit Handbook.

All Benefits cease on the day coverage terminates. A Dental Procedure is provided on the date it is completed. Dental Procedures are considered for Benefits if they are provided during the Contract term and a claim is filed within 15 months after the date it is provided.

Continued Coverage

Under Title X of the Consolidated Omnibus Reconciliation Act of 1985 (COBRA), If You are part of an employer group of more than 20 employees, You (“Qualified Beneficiaries”) are permitted to elect continuation of dental coverage under this Contract upon the occurrence of any of the following “Qualifying Events”:

Subscriber:

1. Termination of employment, voluntary or involuntary, except for reasons of gross misconduct; or
2. Reduction in hours to less than the minimum required to be an Eligible Employee under this Contract.

Covered Dependents:

1. If You are the Subscriber’s spouse:
 - a. Death of Subscriber; or
 - b. Termination of Subscriber’s employment, except for reasons of gross misconduct; or
 - c. Reduction of Subscriber’s hours to fewer than the minimum required for eligibility for coverage under this Contract; or
 - d. Divorce or legal separation from Subscriber; or
 - e. Subscriber’s Medicare entitlement.
2. If You are the Subscriber’s child:
 - a. Child ceases to be a Dependent; or
 - b. Death of Subscriber; or
 - c. Termination of Subscriber’s employment, except for reasons of gross misconduct; or
 - d. Reduction in Subscriber’s hours to less than the minimum required to be eligible as a Subscriber under this Contract; or
 - e. Subscriber becomes entitled to Medicare; or
 - f. Parents become divorced or legally separated.

Your Group must provide notice to You of Your right to elect COBRA continuation coverage.

If Your coverage is terminated due to divorce, legal separation or cessation of eligibility for coverage, You must provide Your Group notice of such event within 60 days of its occurrence.

An election of continuation coverage must be made within 60 days beginning on the later of the date of the Qualifying Event or the date You receive notice of election rights. The COBRA election by You is deemed an election by all others who would lose coverage as a result of the same Qualifying Event unless otherwise specified in the election or the Covered Beneficiary independently elects COBRA continuation coverage.

If election of COBRA continuation coverage is timely, the coverage begins on the date of the Qualifying Event and ends on the earlier of:

1. 18 months after the Subscriber's employment termination or reduction in hours
2. 29 months after the Qualifying Event for (1) a Qualified Beneficiary who is determined to be disabled under the Social Security Act at any time during the first 60 days of COBRA coverage and who notifies the Group of such determination within the first 18 months of COBRA coverage; and for (2) any nondisabled Qualified Beneficiaries with respect to the same Qualifying Event
3. For Qualified Beneficiaries other than the Subscriber, 36 months after the date of the initial Qualifying Event for all other Qualifying Events
4. The date on which the Qualified Beneficiary receiving continuation in coverage fails to make a timely payment of Premium. Delta Dental will not reinstate COBRA continuation coverage once terminated for nonpayment of Premium.
5. The date on which the Group ceases to offer this Contract to any of its employees or members
6. The date on which coverage begins under another group dental plan. However, a person who has elected COBRA continuation coverage and whose new plan contains a pre-existing limitation clause can maintain COBRA continuation coverage until all pre-existing limitations under the new plan are satisfied.
7. The date the Qualified Beneficiary becomes entitled to Medicare benefits

The first Premium must be paid to the Group within 45 days of the election of COBRA continuation coverage. Future Premium payments must be paid by the first day of each month.

Under ERISA Section 602(3), premium for a Qualified Beneficiary will not exceed 102% of the single, family, or other applicable monthly Rate in effect for the group, except that the premium for a Qualified Beneficiary who becomes disabled during the first 60 days of COBRA coverage will be 150% of the single, family, or other applicable monthly Rate in effect for the group during months 19 through 29 of COBRA coverage.

If You have any questions about continued dental coverage, the human resources department at Your company should be able to help You.

Rights of Recovery (Subrogation)

If Benefits are paid on Your behalf under your Group's Contract, Delta Dental is entitled to all rights of recovery You may have against any other person for those expenses to the extent of Delta Dental's payment. Delta Dental can subrogate only if You are fully compensated for all damages, taking into consideration Your comparative negligence. You must sign and deliver to Delta Dental any legal papers relating to the recovery, help exercise these rights and do nothing to harm these rights. If You are fully compensated for all expenses, You must repay Delta Dental to the extent of Delta Dental's claim payments.

Delta Dental's Liability

In no instance is Delta Dental liable for any conduct, including but not limited to tortious conduct, negligence, or wrongful acts or omissions by any person, including but not limited to Subscribers, Providers, hospitals or hospital employees receiving or providing services. In no instance is Delta Dental liable for services of facilities that, for any reason, are unavailable to You.

Grievance Procedures

How to Contest a Claim Denial

Urgent Care Situations:

Method of Notification. Notice of an Urgent Care Grievance will be accepted by Delta Dental if made by You in writing, in person, or by telephone directed to:

Delta Dental of Wisconsin, Inc.
2801 Hoover Road
P.O. Box 828
Stevens Point, WI 54481-0828
800-236-3712

Resolution Process. If the Urgent Care Grievance cannot be resolved through informal discussions, consultations or conferences during the first 48 hours after Delta Dental's receipt of the Urgent Care Grievance, You may appear before Delta Dental's Grievance committee to present written or oral information with the right to ask questions before the Grievance committee.

Time Limitation for Resolution. An Urgent Care Grievance will be resolved, whether informally or by the Grievance committee, within 72 hours of its receipt by Delta Dental.

All Other Grievance Situations Not Including Urgent Care:

Denial of a Claim for Benefits. If a Subscriber or Covered Dependent makes a claim for Benefits under this Contract and the claim is denied in whole or in part, You or Your Provider will receive written notification within 30 days after Delta Dental receives the claim, unless special circumstances require an extension of time for processing. The claims decision will be sent on a form entitled "Explanation of Benefits."

If additional time is necessary for processing a claim for Benefits, Delta Dental will notify You or Your Provider of the extension and the reason it is necessary within the initial 30-day period. If an extension is needed because either You or Your Provider did not submit information necessary to make a Benefits determination, the notice of extension will describe the required information. You or Your Provider will have 45 days from receipt of the notice to provide the specified information.

Appealing a Claim Denial. If You have questions about the denial of Your claim for Benefits, You should contact Delta Dental at 800-236-3712. Because most questions about Benefits can be answered informally, Delta Dental encourages You to first try to resolve any problem by talking with Delta Dental. However, You have the right to file an appeal requesting that Delta Dental formally review the Benefits determination.

To file an appeal, fax Your request to 715-343-7616, or mail Your request to:

Delta Dental of Wisconsin, Inc.
2801 Hoover Road, P.O. Box 828
Stevens Point, WI 54481-0828

To file a Grievance or to appeal a Benefits determination, contact Delta Dental's Benefit Services Department at 800-236-3712, fax Your request to 715-343-7616, or mail Your request to:

Delta Dental of Wisconsin, Inc.
2801 Hoover Road, P.O. Box 828
Stevens Point, WI 54481-0828

You should provide the reasons why You disagree with Delta Dental's Benefits determination and include any documentation You believes supports Your claim. You should include Your name, and the employee's name and employee identification number on all supporting documents.

Resolution Procedure. Delta Dental will acknowledge the Grievance or Benefits determination appeal within 5 days of its receipt by Delta Dental. Delta Dental will attempt to resolve the Grievance or Benefits determination appeal through informal discussions, consultations or conferences. In the event that the Grievance or appeal remains unresolved, You have the right to appear before Delta Dental's Grievance committee to present written or oral information and to question the Grievance committee. The committee shall advise You of the time and place of the meeting at least 7 calendar days before the meeting.

If You do not exhaust the appeal procedures described above, and if You file a lawsuit against the Group's dental plan and/or Delta Dental seeking payment of Benefits, the court may not permit You to go forward with Your lawsuit because You failed to utilize Delta Dental's Grievance/claims appeal procedures. No legal action can be brought against Delta Dental more than 3 years after the date of the Grievance committee's final decision on the review of the Benefits determination.

Time Limitations for Resolution. Delta Dental will attempt to resolve all Grievances within 30 calendar days after receipt by Delta Dental. Delta Dental will inform You of its decision in writing. If the Grievance is denied in whole or in part, the notice will include the following information:

1. The specific reason(s) for the denial of the appeal
2. Reference to the specific Contract provision(s) on which the denial is based
3. A statement that You are entitled to receive, upon request and free of charge, reasonable access to, and copies of, all documents, records, and other information relevant to the claimant's claim
4. A statement describing any voluntary appeal procedures offered by Delta Dental and Your right to obtain information about such procedures, and a statement of the claimant's right to bring a civil action under Section 502(a) of ERISA
5. If an internal processing policy or other similar criterion was relied upon in the denial of the appeal, the notice of such denial also will include either the specific processing policy or a statement that such processing policy was relied upon in denying the appeal and that a copy of that processing policy will be provided free of charge to You upon request
6. If the denial of the appeal was based on a dental necessity, experimental treatment or similar exclusion or limit, the notice of such denial also will include an explanation of the scientific or clinical judgment for the determination, applying the terms of the Contract to Your dental circumstances, or a statement that such explanation will be provided free of charge upon request

If the Grievance cannot be resolved within 30 days from receipt by Delta Dental, Delta Dental will notify You in writing that it intends to extend the period of time for resolution an additional 30 days. The notification will state when resolution may be expected and the reasons for the additional time needed.

All Grievances will be resolved within 60 days from date of receipt by Delta Dental.

Delta Dental's Grievance committee will consist of four persons: a consultant chosen by Delta Dental, a representative of Delta Dental management, Delta Dental's claim administrator, and a policyholder who is not a Delta Dental employee.

You may resolve any grievance through Delta Dental's Grievance procedure outlined above.

Notice of Legal Action

No legal action can be brought against Delta Dental until at least 60 days after proof of loss has been furnished as required by the policy or such proof of loss has been waived, or Delta Dental has denied payment, whichever is earlier. If you have any questions, please contact our office:

Delta Dental of Wisconsin
P.O. Box 828
Stevens Point, WI 54481
800-236-3712 or 715-344-6087

Delta Dental of Wisconsin
P.O. Box 828
Stevens Point, WI 54481
www.deltadentalwi.com
800-236-3712



BR209-1802

DANE COUNTY CENSUS FOR ACTIVE EMPLOYEES

4/21/2021

does not include census for CARPC

*Empty coverage box=no coverage

ORG	DEPT	UNIT_CODE	FTE	GENDER	BIRTH_DATE	ZIP_CODE	PLAN_CODE	COVERAGE
168	1815	ATTORNEYS	1	Male	02/03/1959	53593	DENTAL	SINGLE
168	1815	ATTORNEYS	1	Female	04/20/1957	53590	DENTAL	FAMILY
168	1815	ATTORNEYS	1	Female	09/08/1964	53703	DENTAL	SINGLE
168	1815	ATTORNEYS	1	Female	03/01/1975	53726	DENTAL	FAMILY
168	1815	ATTORNEYS	1	Female	09/05/1965	53719	DENTAL	FAMILY
168	1890	ATTORNEYS	1	Female	06/22/1975	53704	DENTAL	FAMILY
168	1890	ATTORNEYS	1	Female	09/17/1982	53711	DENTAL	FAMILY
168	1890	ATTORNEYS	1	Female	07/11/1989	53562	DENTAL	FAMILY
168	1890	ATTORNEYS	1	Female	06/16/1970	53711	DENTAL	FAMILY
168	1890	ATTORNEYS	1	Female	07/15/1984	53719	DENTAL	FAMILY
168	1890	ATTORNEYS	1	Male	11/04/1966	53716	DENTAL	FAMILY
168	1965	ATTORNEYS	1	Female	04/24/1950	53704	DENTAL	FAMILY
168	1965	ATTORNEYS	1	Female	02/20/1974	53558	DENTAL	FAMILY
168	1965	ATTORNEYS	1	Male	07/29/1962	53066	DENTAL	FAMILY
168	1965	ATTORNEYS	1	Male	05/05/1968	53572	DENTAL	FAMILY
168	1965	ATTORNEYS	1	Female	06/23/1969	53590	DENTAL	FAMILY
168	1965	ATTORNEYS	1	Female	12/09/1967	53188	DENTAL	FAMILY
168	1965	ATTORNEYS	1	Female	08/24/1972	53523	DENTAL	FAMILY
288	2600	ATTORNEYS	1	Male	04/25/1972	53711	DENTAL	SINGLE
288	2600	ATTORNEYS	0.5	Female	02/05/1974	53598		
288	2600	ATTORNEYS	1	Male	05/12/1965	53703	DENTAL	FAMILY
288	2600	ATTORNEYS	1	Male	07/22/1974	53532	DENTAL	FAMILY
288	2600	ATTORNEYS	1	Male	07/13/1966	53703	DENTAL	FAMILY
288	2600	ATTORNEYS	1	Male	04/14/1968	53183	DENTAL	FAMILY
288	2600	ATTORNEYS	1	Male	07/12/1961	53711	DENTAL	FAMILY
288	2600	ATTORNEYS	1	Male	11/15/1974	53558	DENTAL	FAMILY
288	2600	ATTORNEYS	1	Female	11/14/1961	53551	DENTAL	FAMILY
288	2600	ATTORNEYS	1	Male	04/25/1974	53562	DENTAL	FAMILY
024	0165	CITIZEN-MEM	1	Female	09/18/1976	53719		
024	0165	CITIZEN-MEM	1	Female	08/14/1968	53559		
024	0165	CITIZEN-MEM	1	Male	10/20/1949	53711		
024	0165	CITIZEN-MEM	1	Male	01/24/1943	53572		
024	0165	CITIZEN-MEM	1	Male	08/13/1945	53718-9160		
024	0165	CITIZEN-MEM	1	Female	10/10/1941	53597		
024	0165	CITIZEN-MEM	1	Male	09/18/1951	53572		
024	0165	CITIZEN-MEM	1	Male	07/04/1967	53562		
024	0165	CITIZEN-MEM	1	Female	06/28/1952	53590		
024	0165	CITIZEN-MEM	1	Female	01/01/1940	53711		
024	0165	CITIZEN-MEM	1	Female	03/17/1946	53528		
024	0165	CITIZEN-MEM	1	Male	07/10/1966	53704		
024	0165	CITIZEN-MEM	1	Male	08/30/1952	53590		
024	0165	CITIZEN-MEM	1	Female	01/22/1977	53705		
024	0165	CITIZEN-MEM	1	Female	07/06/1953	53716		
024	0165	CITIZEN-MEM	1	Male	11/04/1978	53597		

024	0165	CITIZEN-MEM	1 Female	11/12/1950	53714
024	0165	CITIZEN-MEM	1 Female	02/05/1941	53711
024	0165	CITIZEN-MEM	1 Male	06/26/1946	53703
024	0165	CITIZEN-MEM	1 Male	11/25/1984	53703
024	0165	CITIZEN-MEM	1 Male	01/29/1958	53711
024	0165	CITIZEN-MEM	1 Female	10/29/1987	53715
024	0165	CITIZEN-MEM	1 Male	03/09/1953	77379
024	0165	CITIZEN-MEM	1 Female	10/24/1974	53718
024	0165	CITIZEN-MEM	1 Male	10/02/1998	53703
024	0165	CITIZEN-MEM	1 Male	10/11/1989	53717
024	0165	CITIZEN-MEM	1 Female	10/18/1949	53590
024	0165	CITIZEN-MEM	1 Male	07/29/1943	53562
024	0165	CITIZEN-MEM	1 Male	06/09/1971	53590
024	0165	CITIZEN-MEM	1 Female	09/03/1971	53716
024	0165	CITIZEN-MEM	1 Female	09/24/1973	53705
024	0165	CITIZEN-MEM	1 Female	06/27/1961	53703
024	0165	CITIZEN-MEM	1 Male	10/21/1986	53711
024	0165	CITIZEN-MEM	1 Female	03/24/1987	53593
024	0165	CITIZEN-MEM	1 Male	01/11/1956	53593
024	0165	CITIZEN-MEM	1 Female	04/05/1954	53590
024	0165	CITIZEN-MEM	1 Female	03/29/1961	53719
024	0165	CITIZEN-MEM	1 Male	09/10/1952	53528
024	0165	CITIZEN-MEM	1 Female	05/29/2004	53704
024	0165	CITIZEN-MEM	1 Male	06/08/1943	53711-4711
024	0165	CITIZEN-MEM	1 Female	07/09/1934	53532
024	0165	CITIZEN-MEM	1 Female	02/08/1958	53711
024	0165	CITIZEN-MEM	1 Female	11/03/1960	53703-1617
024	0165	CITIZEN-MEM	1 Female	03/02/1943	53705
024	0165	CITIZEN-MEM	1 Male	07/11/1973	53714
024	0165	CITIZEN-MEM	1 Male	05/12/1991	53575
024	0165	CITIZEN-MEM	1 Female	09/26/1984	53527
024	0165	CITIZEN-MEM	1 Male	11/11/1955	53589
024	0165	CITIZEN-MEM	1 Female	10/24/1943	53597
024	0165	CITIZEN-MEM	1 Male	09/24/1941	53590
024	0165	CITIZEN-MEM	1 Female	08/31/1988	53711
024	0165	CITIZEN-MEM	1 Female	02/27/1965	53713
024	0165	CITIZEN-MEM	1 Female	06/06/1978	53714
024	0165	CITIZEN-MEM	1 Female	10/25/1975	53704
024	0165	CITIZEN-MEM	1 Male	12/21/1943	53558
024	0165	CITIZEN-MEM	1 Female	09/11/1959	53705
024	0165	CITIZEN-MEM	1 Female	10/12/1989	53703
024	0165	CITIZEN-MEM	1 Female	05/05/1965	53704
024	0165	CITIZEN-MEM	1 Female	08/11/1974	53714
024	0165	CITIZEN-MEM	1 Male	07/19/1944	53589
024	0165	CITIZEN-MEM	1 Male	05/29/1959	53562
024	0165	CITIZEN-MEM	1 Male	10/11/1942	53508
024	0165	CITIZEN-MEM	1 Female	09/10/1945	53716
024	0165	CITIZEN-MEM	1 Male	10/25/1954	53711-5004
024	0165	CITIZEN-MEM	1 Female	04/03/1954	53937

024	0165	CITIZEN-MEM	1 Male	12/28/1977	53726		
024	0165	CITIZEN-MEM	1 Male	09/09/1948	53711		
024	0165	CITIZEN-MEM	1 Female	12/22/1941	53705		
024	0165	CITIZEN-MEM	1 Male	01/09/1946	53597		
024	0165	CITIZEN-MEM	1 Male	06/15/1966	53589		
024	0165	CITIZEN-MEM	1 Female	04/06/1948	53711		
024	0165	CITIZEN-MEM	1 Female	07/10/1961	53527		
024	0165	CITIZEN-MEM	1 Male	03/14/1957	53559		
024	0165	CITIZEN-MEM	1 Female	02/16/1942	53711		
024	0165	CITIZEN-MEM	1 Female	02/09/1940	53562		
024	0165	CITIZEN-MEM	1 Female	08/17/1968	53527		
024	0165	CITIZEN-MEM	1 Female	03/24/1942	53705		
024	0165	CITIZEN-MEM	1 Female	07/14/1973	53711		
024	0165	CITIZEN-MEM	1 Male	01/17/1972	53527		
024	0165	CITIZEN-MEM	1 Male	09/10/1946	53597		
024	0165	CITIZEN-MEM	1 Female	08/06/1947	53515		
024	0165	CITIZEN-MEM	1 Female	12/13/1949	53718		
024	0165	CITIZEN-MEM	1 Male	10/23/1965	53711		
024	0165	CITIZEN-MEM	1 Female	09/30/1958	53590		
024	0165	CITIZEN-MEM	1 Male	07/03/1948	53559		
024	0165	CITIZEN-MEM	1 Male	04/23/1962	53523		
024	0165	CITIZEN-MEM	1 Female	08/19/1978	53719		
024	0165	CITIZEN-MEM	1 Female	09/27/1964	53719		
024	0165	CITIZEN-MEM	1 Male	09/01/1946	53562		
024	0165	CITIZEN-MEM	1 Female	10/30/1981	53703		
024	0165	CITIZEN-MEM	1 Male	11/28/1945	53528		
024	0165	CITIZEN-MEM	1 Male	05/14/1964	53508		
515	6039	CITIZEN-MEM	1 Female	07/18/1980	53711		
515	6039	CITIZEN-MEM	1 Female	06/12/1979	53528		
515	6039	CITIZEN-MEM	1 Female	11/11/1964	53960		
515	6039	CITIZEN-MEM	1 Female	06/18/1960	53562		
515	6039	CITIZEN-MEM	1 Female	06/27/1974	53532		
515	6039	CITIZEN-MEM	1 Female	05/31/1970	53704		
515	6039	CITIZEN-MEM	1 Male	06/12/1988	53704		
515	6039	CITIZEN-MEM	1 Female	04/24/1993	53703		
515	6039	CITIZEN-MEM	1 Male	10/06/1966	53593		
515	6039	CITIZEN-MEM	1 Female	05/03/1973	53705		
515	6039	CITIZEN-MEM	1 Female	06/16/1991	53711		
524	6165	CITIZEN-MEM	0 Male	11/13/1965	53562		
524	6165	CITIZEN-MEM	1 Female	10/16/1944	53559		
524	6165	CITIZEN-MEM	0 Male	08/24/1986	53705		
524	6165	CITIZEN-MEM	1 Female	09/28/1922	53703		
524	6165	CITIZEN-MEM	1 Male	12/21/1934	53704		
024	0165	CNTY BDCHAIR	1 Female	03/10/1988	53590	DENTAL	SINGLE
024	0165	CNTY BOARD	1 Female	07/20/1988	53558		
024	0165	CNTY BOARD	1 Female	07/15/1988	53705		
024	0165	CNTY BOARD	1 Female	12/19/1985	53714		
024	0165	CNTY BOARD	1 Male	03/08/1983	53593		
024	0165	CNTY BOARD	1 Female	02/20/1973	53711		

024	0165	CNTY BOARD	1 Male	07/15/1949	53575		
024	0165	CNTY BOARD	1 Female	11/21/1973	53711		
024	0165	CNTY BOARD	1 Male	11/23/1976	53704		
024	0165	CNTY BOARD	1 Male	12/30/1954	53589		
024	0165	CNTY BOARD	1 Female	10/04/1991	53711		
024	0165	CNTY BOARD	1 Female	03/01/1974	53528		
024	0165	CNTY BOARD	1 Male	09/09/1949	53516		
024	0165	CNTY BOARD	1 Female	01/12/1986	53703		
024	0165	CNTY BOARD	1 Male	09/15/1960	53715		
024	0165	CNTY BOARD	1 Male	08/31/1970	53719		
024	0165	CNTY BOARD	1 Female	11/12/1999	53703		
024	0165	CNTY BOARD	1 Female	08/01/1960	53562		
024	0165	CNTY BOARD	1 Male	08/27/1992	53562		
024	0165	CNTY BOARD	1 Male	02/13/1972	53597		
024	0165	CNTY BOARD	1 Female	03/19/1956	53711		
024	0165	CNTY BOARD	1 Male	06/03/1978	53726		
024	0165	CNTY BOARD	1 Female	05/21/1958	53532		
024	0165	CNTY BOARD	1 Female	01/23/1959	53523		
024	0165	CNTY BOARD	1 Male	09/16/1967	53558		
024	0165	CNTY BOARD	1 Male	04/07/1973	53704		
024	0165	CNTY BOARD	1 Male	08/03/1983	53593		
024	0165	CNTY BOARD	1 Male	07/07/1994	53590		
024	0165	CNTY BOARD	1 Female	11/19/1976	53527		
024	0165	CNTY BOARD	1 Male	11/25/1950	53597		
024	0165	CNTY BOARD	1 Female	10/08/1969	53704		
024	0165	CNTY BOARD	1 Male	03/24/1976	53718		
024	0165	CNTY BOARD	1 Female	02/07/1959	53590		
024	0165	CNTY BOARD	1 Female	06/21/1992	53716		
024	0165	CNTY BOARD	1 Female	02/22/1971	53713		
024	0165	CNTY BOARD	1 Male	02/05/1960	53711		
024	0165	CNTY BOARD	1 Female	09/20/1979	53704		
096	1050	JC-705	1 Male	03/18/1951	53566	DENTAL	FAMILY
096	1050	JC-705	1 Male	04/24/1960	53588	DENTAL	FAMILY
096	1050	JC-705	1 Male	03/30/1975	53718	DENTAL	FAMILY
096	1050	JC-705	1 Female	05/05/1960	53593	DENTAL	SINGLE
096	1050	JC-705	1 Male	09/03/1963	53719		
096	1050	JC-705	1 Male	07/05/1971	53719	DENTAL	FAMILY
096	1050	JC-705	1 Male	04/08/1981	53572	DENTAL	FAMILY
096	1135	JC-705	1 Male	07/09/1969	53507	DENTAL	FAMILY
096	1135	JC-705	1 Male	07/20/1964	53544	DENTAL	FAMILY
096	1675	JC-705	1 Male	08/08/1984	53711		
096	1675	JC-705	1 Female	08/18/1989	53536	DENTAL	FAMILY
096	1675	JC-705	1 Female	11/22/1986	53704	DENTAL	FAMILY
096	1675	JC-705	0.8 Male	01/18/1991	53719	DENTAL	FAMILY
096	1675	JC-705	1 Male	05/07/1986	53711	DENTAL	SINGLE
096	1675	JC-705	0.85 Male	02/18/1985	53711	DENTAL	FAMILY
096	1675	JC-705	1 Male	09/17/1966	53705	DENTAL	SINGLE
096	1675	JC-705	1 Male	03/26/1973	53716	DENTAL	SINGLE
096	1675	JC-705	1 Male	06/15/1992	53532	DENTAL	FAMILY

096	1675	JC-705	1 Female	05/28/1963	53711	DENTAL	FAMILY
096	1675	JC-705	1 Female	11/05/1962	53711	DENTAL	SINGLE
096	1675	JC-705	0.6 Male	07/24/1986	53590	DENTAL	FAMILY
096	1675	JC-705	1 Male	03/25/1978	53711	DENTAL	FAMILY
096	1675	JC-705	1 Male	12/28/1965	53711	DENTAL	FAMILY
096	1675	JC-705	1 Male	03/13/1967	53704		
096	1675	JC-705	1 Male	11/03/1955	53717	DENTAL	SINGLE
096	1675	JC-705	1 Male	08/09/1989	53546	DENTAL	FAMILY
096	1675	JC-705	1 Male	05/14/1961	53572	DENTAL	FAMILY
096	1675	JC-705	1 Male	12/01/1990	53704		
096	1675	JC-705	1 Male	11/15/1984	53719	DENTAL	FAMILY
096	1675	JC-705	1 Male	05/12/1977	53704	DENTAL	SINGLE
096	1675	JC-705	1 Male	12/11/1982	53713	DENTAL	FAMILY
510	5580	JC-705	0.2 Female	05/16/1989	53959		
510	5580	JC-705	0.7 Female	10/11/1981	53566	DENTAL	FAMILY
510	5580	JC-705	1 Female	05/11/1963	53714	DENTAL	FAMILY
510	5580	JC-705	0.8 Female	08/26/1996	53713		
510	5580	JC-705	1 Female	08/20/1964	53719	DENTAL	FAMILY
510	5580	JC-705	1 Female	03/11/1972	53593	DENTAL	SINGLE
510	5580	JC-705	1 Female	06/23/1989	53719	DENTAL	FAMILY
510	5580	JC-705	1 Female	10/02/1979	53714	DENTAL	FAMILY
510	5580	JC-705	0.2 Female	02/07/1999	53717		
510	5580	JC-705	1 Female	07/01/1965	53719	DENTAL	SINGLE
510	5580	JC-705	1 Female	05/09/1983	53713	DENTAL	SINGLE
510	5580	JC-705	1 Female	04/11/1967	53572	DENTAL	FAMILY
510	5580	JC-705	1 Female	05/19/1959	53711	DENTAL	FAMILY
510	5580	JC-705	0.6 Female	04/16/1992	53508	DENTAL	SINGLE
510	5580	JC-705	0.7 Male	10/08/1978	53719		
510	5580	JC-705	0.6 Female	05/21/1982	53711	DENTAL	SINGLE
510	5580	JC-705	1 Female	06/04/1965	53711	DENTAL	SINGLE
510	5580	JC-705	1 Female	05/20/1982	53589	DENTAL	FAMILY
510	5580	JC-705	1 Male	06/30/1974	53704	DENTAL	SINGLE
510	5580	JC-705	1 Male	04/13/1964	53714	DENTAL	FAMILY
510	5580	JC-705	1 Female	06/08/1951	53572	DENTAL	FAMILY
510	5580	JC-705	1 Female	04/02/1987	53703	DENTAL	SINGLE
510	5580	JC-705	1 Female	03/08/1973	53507	DENTAL	FAMILY
510	5580	JC-705	1 Female	11/28/1983	53711	DENTAL	FAMILY
510	5580	JC-705	1 Female	11/19/1968	53594	DENTAL	FAMILY
510	5580	JC-705	1 Female	10/09/1959	53570	DENTAL	FAMILY
510	5580	JC-705	1 Female	03/03/1989	53502	DENTAL	SINGLE
510	5580	JC-705	0.2 Female	07/01/1984	53704		
510	5580	JC-705	0.6 Female	09/10/1975	53711	DENTAL	FAMILY
510	5580	JC-705	0.2 Female	11/07/1978	53713		
510	5580	JC-705	1 Female	11/05/1963	53705	DENTAL	FAMILY
510	5580	JC-705	0.6 Female	01/13/1981	53516	DENTAL	FAMILY
510	5580	JC-705	1 Male	07/31/1962	53575	DENTAL	FAMILY
510	5580	JC-705	0.2 Male	06/02/1977	53711		
510	5580	JC-705	1 Female	06/12/1971	53593	DENTAL	SINGLE
510	5580	JC-705	1 Male	08/19/1990	53593	DENTAL	FAMILY

510	5580	JC-705	0.7 Female	12/19/1991	53704		
510	5580	JC-705	0.6 Female	12/04/1983	53572	DENTAL	SINGLE
510	5580	JC-705	1 Male	07/04/1968	53562	DENTAL	FAMILY
510	5580	JC-705	1 Male	05/09/1965	53704	DENTAL	SINGLE
510	5580	JC-705	1 Male	04/15/1956	53719	DENTAL	FAMILY
510	5580	JC-705	0.6 Female	09/24/1992	53562	DENTAL	FAMILY
510	5580	JC-705	1 Female	04/13/1991	53714	DENTAL	SINGLE
510	5580	JC-705	1 Female	05/15/1990	53714	DENTAL	SINGLE
510	5580	JC-705	1 Male	07/01/1962	53717	DENTAL	FAMILY
510	5580	JC-705	1 Female	05/22/1967	53572	DENTAL	FAMILY
510	5580	JC-705	0.8 Female	04/22/1959	53521	DENTAL	FAMILY
510	5580	JC-705	0.2 Female	10/31/1984	53713		
510	5580	JC-705	1 Female	12/31/1981	53598	DENTAL	FAMILY
510	5580	JC-705	1 Female	04/28/1967	53572	DENTAL	SINGLE
510	5580	JC-705	0.6 Female	01/17/1982	53719	DENTAL	FAMILY
510	5580	JC-705	1 Female	09/07/1967	53570		
510	5580	JC-705	0.8 Female	11/15/1991	53502	DENTAL	FAMILY
510	5580	JC-705	1 Male	01/16/1971	53704	DENTAL	FAMILY
510	5580	JC-705	0.6 Female	01/01/1973	53704		
510	5580	JC-705	1 Female	08/08/1989	53566	DENTAL	SINGLE
510	5580	JC-705	0.8 Female	01/14/1978	53713	DENTAL	FAMILY
510	5580	JC-705	0.6 Male	06/10/1970	53714	DENTAL	FAMILY
510	5580	JC-705	1 Female	03/28/1961	53716	DENTAL	FAMILY
510	5580	JC-705	1 Male	10/01/1985	53558	DENTAL	FAMILY
510	5580	JC-705	0.5 Female	10/25/1993	53954		
510	5580	JC-705	1 Female	06/19/1975	53719	DENTAL	FAMILY
510	5580	JC-705	0.2 Male	11/10/1985	53719		
510	5580	JC-705	0.6 Female	05/13/1971	53570		
510	5580	JC-705	0.6 Male	01/05/1978	53719	DENTAL	FAMILY
510	5580	JC-705	0.7 Female	12/18/1996	53718		
510	5580	JC-705	1 Female	05/01/1965	53589	DENTAL	SINGLE
510	5580	JC-705	0.2 Female	07/03/1989	53713		
510	5580	JC-705	1 Female	03/15/1984	53570	DENTAL	FAMILY
510	5580	JC-705	0.8 Female	11/07/1988	53714	DENTAL	FAMILY
510	5580	JC-705	1 Female	08/09/1979	53565	DENTAL	FAMILY
510	5580	JC-705	1 Male	06/30/1987	53575	DENTAL	SINGLE
510	5580	JC-705	0.2 Female	07/08/1971	53590	DENTAL	FAMILY
510	5580	JC-705	1 Female	02/09/1968	53719	DENTAL	FAMILY
510	5580	JC-705	1 Male	09/28/1969	53719	DENTAL	SINGLE
510	5580	JC-705	1 Male	01/06/1987	53589	DENTAL	FAMILY
510	5580	JC-705	1 Female	04/15/1964	53714	DENTAL	FAMILY
510	5580	JC-705	1 Female	07/15/1974	53548	DENTAL	FAMILY
510	5580	JC-705	1 Female	01/16/1959	53560	DENTAL	FAMILY
510	5580	JC-705	0.2 Female	07/06/1979	53719		
510	5580	JC-705	0.7 Male	11/09/1993	53713		
510	5580	JC-705	1 Female	10/03/1984	53711	DENTAL	SINGLE
510	5580	JC-705	0.6 Male	11/29/1989	53711	DENTAL	FAMILY
510	5580	JC-705	0.6 Male	02/07/1991	53549	DENTAL	SINGLE
510	5580	JC-705	0.6 Female	12/07/1972	53565		

510	5580	JC-705	1 Male	07/06/1974	53719	DENTAL	FAMILY
510	5580	JC-705	1 Female	04/14/1960	53508	DENTAL	FAMILY
510	5580	JC-705	0.6 Female	07/13/1966	53543	DENTAL	FAMILY
510	5580	JC-705	0.7 Female	11/27/1969	53713		
510	5580	JC-705	0.6 Female	10/09/1984	53534	DENTAL	FAMILY
510	5580	JC-705	0.2 Female	09/28/1961	53705	DENTAL	FAMILY
510	5580	JC-705	0.6 Female	08/11/1992	53719	DENTAL	FAMILY
510	5580	JC-705	0.6 Female	09/22/1982	53515	DENTAL	FAMILY
510	5580	JC-705	1 Female	11/06/1963	53566	DENTAL	FAMILY
510	5580	JC-705	1 Male	07/21/1959	53590	DENTAL	FAMILY
510	5580	JC-705	0.2 Female	12/12/1981	53705	DENTAL	FAMILY
510	5580	JC-705	1 Male	12/14/1979	53711	DENTAL	FAMILY
510	5580	JC-705	0.6 Female	09/05/1991	53711		
510	5580	JC-705	0.2 Female	06/29/1972	53562		
510	5580	JC-705	1 Male	02/21/1963	53589	DENTAL	SINGLE
510	5580	JC-705	0.6 Female	08/05/1978	53533	DENTAL	SINGLE
510	5580	JC-705	1 Female	02/16/1974	53533	DENTAL	FAMILY
510	5580	JC-705	1 Male	12/21/1979	53716	DENTAL	FAMILY
510	5580	JC-705	0.6 Female	10/25/1989	53523	DENTAL	FAMILY
510	5580	JC-705	1 Female	02/16/1978	53719	DENTAL	FAMILY
510	5580	JC-705	1 Female	04/12/1966	53913	DENTAL	FAMILY
510	5580	JC-705	0.6 Female	08/25/1982	53719	DENTAL	SINGLE
510	5580	JC-705	0.6 Female	04/10/1967	53551	DENTAL	SINGLE
510	5580	JC-705	0.7 Female	12/24/1976	53566	DENTAL	FAMILY
510	5580	JC-705	0.7 Female	07/07/1983	53560	DENTAL	FAMILY
510	5580	JC-705	0.6 Female	06/20/1993	53593	DENTAL	FAMILY
510	5580	JC-705	1 Male	08/27/1957	53711	DENTAL	FAMILY
510	5580	JC-705	0.8 Male	01/01/1971	53704		
510	5580	JC-705	0.2 Female	09/27/1992	53719		
510	5580	JC-705	1 Female	04/25/1983	53575	DENTAL	FAMILY
510	5580	JC-705	0.2 Male	03/28/1982	53719		
510	5580	JC-705	0.2 Male	06/15/1990	53704		
510	5580	JC-705	1 Female	05/23/1979	53719	DENTAL	FAMILY
510	5580	JC-705	0.2 Female	12/12/1983	53572		
510	5580	JC-705	0.6 Female	07/19/1986	53711		
510	5580	JC-705	0.6 Female	03/19/1985	53719	DENTAL	SINGLE
510	5580	JC-705	1 Male	08/19/1973	53566	DENTAL	FAMILY
510	5580	JC-705	0.9 Female	01/17/1969	53719	DENTAL	FAMILY
510	5580	JC-705	1 Female	12/08/1963	53555	DENTAL	FAMILY
510	5580	JC-705	1 Female	07/06/1962	53570	DENTAL	FAMILY
510	5580	JC-705	0.2 Female	10/01/1984	53719		
510	5580	JC-705	0.2 Female	03/10/1966	53719		
510	5580	JC-705	0.6 Female	10/16/1990	53711	DENTAL	SINGLE
024	0165	JC-720	1 Male	11/25/1990	53711	DENTAL	FAMILY
055	0700	JC-720	1 Female	03/29/1998	53713	DENTAL	FAMILY
060	0765	JC-720	1 Female	09/06/1958	53705	DENTAL	SINGLE
060	0765	JC-720	1 Female	02/12/1987	53521	DENTAL	FAMILY
096	0915	JC-720	1 Female	07/12/1962	53719	DENTAL	FAMILY
096	1025	JC-720	1 Female	01/22/1965	53589	DENTAL	FAMILY

096	1050	JC-720	1 Female	12/11/1977	53703	DENTAL	FAMILY
096	1060	JC-720	1 Male	03/16/1984	53529	DENTAL	FAMILY
096	1060	JC-720	1 Male	03/30/1968	53719	DENTAL	SINGLE
096	1060	JC-720	1 Male	01/01/1963	53704	DENTAL	FAMILY
096	1060	JC-720	1 Female	01/01/1986	53719	DENTAL	FAMILY
096	1060	JC-720	1 Male	05/24/1971	53503	DENTAL	FAMILY
096	1060	JC-720	1 Male	11/20/1966	53959	DENTAL	FAMILY
096	1060	JC-720	1 Female	10/23/1969	53704	DENTAL	SINGLE
096	1060	JC-720	1 Female	01/15/1984	53536	DENTAL	FAMILY
096	1060	JC-720	1 Male	06/25/1962	53704	DENTAL	FAMILY
096	1060	JC-720	1 Male	10/31/1961	53590	DENTAL	FAMILY
096	1060	JC-720	1 Female	06/25/1959	53705	DENTAL	FAMILY
096	1060	JC-720	1 Male	07/01/1957	53711	DENTAL	FAMILY
096	1060	JC-720	1 Male	11/20/1970	53529	DENTAL	FAMILY
096	1070	JC-720	1 Female	04/14/1974	53538	DENTAL	FAMILY
096	1080	JC-720	1 Female	01/26/1960	53555	DENTAL	FAMILY
096	1080	JC-720	1 Female	10/08/1967	53704	DENTAL	FAMILY
096	1100	JC-720	1 Female	11/01/1973	53590	DENTAL	FAMILY
096	1110	JC-720	1 Male	12/09/1958	53515	DENTAL	FAMILY
096	1110	JC-720	1 Male	09/30/1955	53960	DENTAL	SINGLE
096	1120	JC-720	1 Male	01/03/1972	53711	DENTAL	FAMILY
096	1120	JC-720	1 Male	01/13/1974	53515	DENTAL	FAMILY
096	1145	JC-720	1 Male	01/27/1966	53536	DENTAL	FAMILY
096	1145	JC-720	1 Male	10/20/1953	53705	DENTAL	FAMILY
096	1145	JC-720	1 Male	04/11/1977	53563		
096	1145	JC-720	1 Male	04/24/1964	53545	DENTAL	FAMILY
096	1145	JC-720	1 Male	07/22/1953	53555	DENTAL	FAMILY
096	1155	JC-720	1 Male	10/09/1952	53705	DENTAL	FAMILY
096	1175	JC-720	1 Male	03/07/1958	53955	DENTAL	FAMILY
096	1230	JC-720	1 Female	07/19/1976	53704	DENTAL	FAMILY
096	1230	JC-720	1 Male	02/22/1985	53575	DENTAL	SINGLE
096	1230	JC-720	1 Female	02/04/1962	53593	DENTAL	SINGLE
096	1365	JC-720	1 Female	01/31/1981	53704	DENTAL	SINGLE
096	1440	JC-720	1 Female	09/10/1964	53704	DENTAL	SINGLE
096	1635	JC-720	1 Female	03/06/1959	53704	DENTAL	FAMILY
096	1640	JC-720	1 Male	06/25/1959	53711	DENTAL	SINGLE
096	1640	JC-720	1 Female	08/01/1956	53704	DENTAL	FAMILY
096	1645	JC-720	0.5 Female	01/11/1965	53716	DENTAL	FAMILY
096	1645	JC-720	0.5 Male	01/03/1962	53717	DENTAL	SINGLE
096	1660	JC-720	1 Male	05/13/1966	53546	DENTAL	FAMILY
096	1660	JC-720	1 Male	06/13/1974	53593	DENTAL	FAMILY
096	1665	JC-720	1 Male	05/11/1982	53590	DENTAL	FAMILY
120	1755	JC-720	1 Female	11/03/1958	53575	DENTAL	SINGLE
120	1755	JC-720	1 Female	09/25/1964	53590	DENTAL	SINGLE
168	1890	JC-720	1 Female	09/23/1990	53711	DENTAL	SINGLE
168	1890	JC-720	1 Female	08/11/1985	53711	DENTAL	FAMILY
168	1890	JC-720	1 Female	02/17/1964	53590	DENTAL	SINGLE
168	1890	JC-720	1 Female	08/07/1974	53536	DENTAL	FAMILY
168	1890	JC-720	1 Female	07/16/1975	53714	DENTAL	SINGLE

168	1965	JC-720	1 Female	11/03/1965	53532	DENTAL	SINGLE
168	1965	JC-720	1 Female	05/26/1984	53590	DENTAL	FAMILY
168	1965	JC-720	1 Female	06/13/1975	53704	DENTAL	FAMILY
168	1965	JC-720	1 Female	02/09/1961	53571	DENTAL	SINGLE
168	1965	JC-720	1 Female	11/30/1969	53559	DENTAL	FAMILY
168	1965	JC-720	1 Female	08/18/1979	53532	DENTAL	FAMILY
168	1965	JC-720	1 Female	04/04/1990	53719	DENTAL	FAMILY
168	1965	JC-720	1 Male	11/29/1964	53032	DENTAL	FAMILY
168	1965	JC-720	1 Female	06/07/1987	53590	DENTAL	FAMILY
168	1965	JC-720	1 Female	11/17/1982	53532	DENTAL	FAMILY
168	1965	JC-720	1 Female	04/09/1978	53714	DENTAL	FAMILY
168	1965	JC-720	1 Female	12/11/1969	53574	DENTAL	FAMILY
168	1965	JC-720	1 Male	04/17/1990	53559	DENTAL	FAMILY
168	1965	JC-720	1 Male	08/01/1979	53527		
168	1965	JC-720	1 Female	05/04/1981	53590	DENTAL	FAMILY
168	1965	JC-720	1 Female	10/12/1965	53527	DENTAL	FAMILY
168	1965	JC-720	1 Female	03/03/1976	53716	DENTAL	FAMILY
168	1965	JC-720	1 Female	08/31/1960	53590	DENTAL	FAMILY
168	1965	JC-720	1 Female	01/31/1981	53563	DENTAL	FAMILY
168	1965	JC-720	1 Male	09/01/1969	53711	DENTAL	FAMILY
168	1965	JC-720	1 Female	07/03/1991	53559	DENTAL	FAMILY
168	1965	JC-720	1 Female	01/23/1978	53714	DENTAL	FAMILY
168	1965	JC-720	1 Female	12/25/1960	53718	DENTAL	FAMILY
168	1965	JC-720	1 Female	03/14/1994	53511	DENTAL	SINGLE
168	1965	JC-720	1 Female	12/20/1977	53527	DENTAL	FAMILY
168	1965	JC-720	1 Female	08/30/1986	53704	DENTAL	FAMILY
168	1965	JC-720	1 Female	03/12/1961	53562	DENTAL	FAMILY
168	1965	JC-720	1 Female	03/12/1996	53704		
168	1965	JC-720	1 Female	02/14/1969	53713	DENTAL	FAMILY
168	1965	JC-720	1 Female	06/10/1988	53119	DENTAL	FAMILY
168	1965	JC-720	1 Female	04/21/1982	53590	DENTAL	SINGLE
168	1965	JC-720	1 Male	11/14/1979	53545	DENTAL	FAMILY
168	1965	JC-720	1 Male	05/26/1987	53590	DENTAL	FAMILY
168	1965	JC-720	1 Female	11/17/1978	53716	DENTAL	FAMILY
168	1965	JC-720	1 Male	01/07/1967	53521	DENTAL	FAMILY
168	1965	JC-720	1 Male	10/20/1974	53956	DENTAL	FAMILY
168	1965	JC-720	1 Female	03/25/1977	53713	DENTAL	FAMILY
168	1965	JC-720	1 Female	11/29/1960	53704	DENTAL	FAMILY
168	1965	JC-720	1 Female	01/30/1961	53589	DENTAL	SINGLE
168	1965	JC-720	1 Female	11/19/1971	53094	DENTAL	FAMILY
180	2040	JC-720	1 Female	05/04/1981	53590	DENTAL	FAMILY
180	2040	JC-720	1 Male	01/26/1971	53713	DENTAL	SINGLE
180	2040	JC-720	1 Female	12/02/1980	53562	DENTAL	FAMILY
180	2040	JC-720	1 Female	10/15/1957	53559	DENTAL	FAMILY
180	2040	JC-720	1 Female	12/21/1968	53548		
180	2040	JC-720	1 Female	06/13/1976	53559	DENTAL	FAMILY
180	2040	JC-720	1 Female	10/01/1985	53705	DENTAL	SINGLE
180	2040	JC-720	0.5 Female	05/03/1971	53714		
180	2040	JC-720	1 Not Specifie	04/05/1957	53714-1129	DENTAL	FAMILY

180	2040	JC-720	1 Female	04/05/1981	53704	DENTAL	FAMILY
180	2040	JC-720	1 Male	12/14/1961	53704	DENTAL	SINGLE
180	2040	JC-720	1 Female	01/05/1971	53590	DENTAL	FAMILY
180	2040	JC-720	1 Female	02/28/1967	53590	DENTAL	FAMILY
288	2580	JC-720	1 Female	10/02/1970	53558	DENTAL	FAMILY
288	2580	JC-720	1 Male	11/21/1979	53590		
288	2580	JC-720	1 Female	09/27/1988	53562	DENTAL	FAMILY
288	2580	JC-720	1 Female	11/03/1964	53711	DENTAL	FAMILY
288	2580	JC-720	1 Female	12/05/1979	53913	DENTAL	SINGLE
288	2580	JC-720	1 Male	08/06/1963	53719	DENTAL	FAMILY
288	2580	JC-720	1 Female	12/23/1960	53597	DENTAL	FAMILY
288	2580	JC-720	0.6 Male	11/25/1955	53711	DENTAL	SINGLE
288	2580	JC-720	1 Female	01/11/1972	53575		
288	2580	JC-720	1 Female	11/13/1982	53578	DENTAL	FAMILY
288	2580	JC-720	1 Female	12/28/1964	53718	DENTAL	SINGLE
288	2580	JC-720	1 Female	07/01/1972	53593	DENTAL	FAMILY
288	2580	JC-720	1 Female	04/12/1982	53549	DENTAL	FAMILY
288	2580	JC-720	1 Female	03/27/1997	53559	DENTAL	FAMILY
288	2580	JC-720	1 Female	04/28/1988	53508	DENTAL	FAMILY
288	2580	JC-720	1 Female	02/18/1966	53558	DENTAL	FAMILY
288	2580	JC-720	1 Male	01/27/1989	53718	DENTAL	SINGLE
288	2580	JC-720	1 Female	05/14/1969	53521	DENTAL	SINGLE
288	2580	JC-720	1 Female	02/11/1991	53551	DENTAL	FAMILY
288	2580	JC-720	1 Male	05/25/1990	53719	DENTAL	FAMILY
288	2580	JC-720	1 Female	04/19/1969	53559	DENTAL	FAMILY
288	2580	JC-720	1 Male	12/19/1985	53713	DENTAL	FAMILY
288	2580	JC-720	1 Female	10/19/1976	53589	DENTAL	FAMILY
288	2580	JC-720	1 Male	01/22/1981	53532	DENTAL	FAMILY
288	2580	JC-720	1 Female	03/16/1990	53590	DENTAL	SINGLE
288	2580	JC-720	1 Female	09/01/1961	53558	DENTAL	SINGLE
288	2580	JC-720	1 Female	06/03/1959	53716	DENTAL	FAMILY
288	2580	JC-720	1 Female	02/18/1963	53562	DENTAL	SINGLE
288	2580	JC-720	1 Female	06/17/1978	53548	DENTAL	FAMILY
288	2580	JC-720	1 Female	10/13/1981	53559	DENTAL	FAMILY
288	2580	JC-720	1 Female	05/06/1968	53536	DENTAL	FAMILY
288	2580	JC-720	1 Female	04/10/1985	53533	DENTAL	FAMILY
288	2580	JC-720	1 Female	06/15/1962	53714	DENTAL	SINGLE
288	2580	JC-720	1 Female	08/14/1980	53718	DENTAL	SINGLE
288	2580	JC-720	1 Male	07/11/1981	53590	DENTAL	SINGLE
288	2580	JC-720	1 Female	04/15/1991	53590	DENTAL	FAMILY
288	2580	JC-720	1 Female	05/13/1995	53955	DENTAL	SINGLE
288	2580	JC-720	1 Female	09/18/1974	53527		
288	2580	JC-720	1 Female	08/22/1980	53704	DENTAL	FAMILY
288	2580	JC-720	1 Female	05/06/1972	53560	DENTAL	FAMILY
288	2580	JC-720	1 Female	04/22/1981	53538	DENTAL	SINGLE
288	2580	JC-720	1 Female	04/01/1964	53562	DENTAL	FAMILY
288	2580	JC-720	1 Female	09/29/1968	53546	DENTAL	SINGLE
288	2580	JC-720	1 Female	02/09/1988	53714	DENTAL	SINGLE
288	2580	JC-720	1 Female	06/14/1982	53593	DENTAL	FAMILY

288	2580	JC-720	1 Female	10/21/1973	53711	DENTAL	FAMILY
288	2580	JC-720	1 Female	07/06/1976	53559	DENTAL	FAMILY
288	2580	JC-720	1 Female	03/16/1982	53575	DENTAL	FAMILY
288	2580	JC-720	1 Female	01/28/1986	53575	DENTAL	FAMILY
288	2580	JC-720	1 Female	10/06/1985	53589		
288	2580	JC-720	1 Female	03/07/1977	53594	DENTAL	FAMILY
288	2580	JC-720	1 Female	02/08/1990	53508	DENTAL	SINGLE
288	2580	JC-720	1 Female	08/10/1960	53594-1104	DENTAL	FAMILY
288	2580	JC-720	1 Female	07/08/1960	53955	DENTAL	FAMILY
288	2580	JC-720	1 Female	05/13/1984	53521	DENTAL	FAMILY
288	2580	JC-720	1 Female	02/22/1988	53954	DENTAL	FAMILY
288	2580	JC-720	1 Female	06/25/1990	53532	DENTAL	FAMILY
288	2580	JC-720	1 Female	01/30/1981	53536	DENTAL	FAMILY
288	2580	JC-720	1 Female	06/24/1969	53504	DENTAL	FAMILY
288	2580	JC-720	1 Female	03/06/1975	53032	DENTAL	FAMILY
288	2580	JC-720	1 Female	10/07/1970	53916	DENTAL	SINGLE
288	2580	JC-720	1 Female	07/21/1967	53555	DENTAL	FAMILY
288	2580	JC-720	1 Female	02/24/1986	53718		
288	2580	JC-720	1 Female	12/17/1972	53534	DENTAL	SINGLE
288	2580	JC-720	1 Female	01/27/1984	53703	DENTAL	FAMILY
288	2600	JC-720	1 Female	08/17/1962	53704-1179	DENTAL	FAMILY
288	2600	JC-720	1 Female	05/24/1965	53038	DENTAL	FAMILY
288	2600	JC-720	1 Female	04/01/1975	53703	DENTAL	SINGLE
288	2600	JC-720	1 Female	05/27/1975	53545	DENTAL	SINGLE
288	2600	JC-720	1 Male	04/24/1983	53719-4458	DENTAL	SINGLE
288	2600	JC-720	1 Female	01/10/1990	53704	DENTAL	FAMILY
288	2600	JC-720	1 Female	02/03/1962	53593	DENTAL	FAMILY
288	2600	JC-720	1 Female	04/01/1980	53532	DENTAL	FAMILY
288	2600	JC-720	1 Female	08/30/1986	53558		
288	2600	JC-720	1 Female	11/17/1960	53508	DENTAL	FAMILY
288	2600	JC-720	1 Female	04/25/1965	53704	DENTAL	FAMILY
288	2600	JC-720	1 Female	08/08/1967	53527	DENTAL	SINGLE
288	2600	JC-720	1 Female	08/03/1991	53714	DENTAL	FAMILY
288	2600	JC-720	1 Female	12/23/1960	53528	DENTAL	SINGLE
288	2600	JC-720	1 Female	09/28/1956	53590	DENTAL	FAMILY
288	2600	JC-720	1 Female	09/30/1979	53523		
288	2715	JC-720	1 Male	03/21/1961	53590	DENTAL	FAMILY
288	2715	JC-720	1 Female	08/21/1968	53590	DENTAL	FAMILY
288	2715	JC-720	1 Female	10/05/1980	53711	DENTAL	SINGLE
316	2865	JC-720	1 Female	07/13/1955	53711	DENTAL	SINGLE
316	2865	JC-720	1 Female	07/09/1957	53534	DENTAL	SINGLE
330	2940	JC-720	1 Female	01/09/1958	53558	DENTAL	FAMILY
330	2940	JC-720	1 Female	04/16/1960	53558	DENTAL	FAMILY
351	3030	JC-720	1 Female	11/01/1983	53562	DENTAL	FAMILY
351	3030	JC-720	1 Female	09/23/1956	53575	DENTAL	FAMILY
351	3030	JC-720	1 Female	12/21/1980	53925	DENTAL	FAMILY
351	3030	JC-720	1 Female	02/11/1992	53523	DENTAL	SINGLE
351	3030	JC-720	1 Female	07/01/1969	53593	DENTAL	FAMILY
351	3030	JC-720	1 Female	07/19/1955	53523	DENTAL	FAMILY

351	3030	JC-720	1 Female	08/04/1979	53703	DENTAL	SINGLE
351	3030	JC-720	1 Female	07/19/1955	53714	DENTAL	SINGLE
351	3030	JC-720	1 Male	02/04/1988	53590	DENTAL	FAMILY
351	3030	JC-720	1 Female	07/18/1986	53590	DENTAL	FAMILY
351	3030	JC-720	1 Female	01/14/1967	53716	DENTAL	FAMILY
351	3030	JC-720	1 Male	08/06/1980	53589	DENTAL	FAMILY
351	3030	JC-720	1 Female	07/26/1982	53523	DENTAL	FAMILY
351	3030	JC-720	1 Female	09/26/1972	53094	DENTAL	FAMILY
351	3030	JC-720	1 Female	03/19/1985	53718	DENTAL	FAMILY
351	3030	JC-720	1 Female	08/05/1985	53714	DENTAL	FAMILY
351	3030	JC-720	1 Female	11/30/1981	53562	DENTAL	FAMILY
351	3030	JC-720	1 Female	08/22/1968	53718	DENTAL	FAMILY
351	3030	JC-720	1 Female	10/14/1993	53562	DENTAL	FAMILY
351	3030	JC-720	1 Female	02/27/1988	53575	DENTAL	FAMILY
351	3030	JC-720	1 Female	10/20/1966	53703	DENTAL	FAMILY
351	3030	JC-720	1 Female	04/24/1958	53705	DENTAL	FAMILY
351	3030	JC-720	1 Female	01/29/1963	53555	DENTAL	FAMILY
351	3030	JC-720	1 Female	12/24/1990	53589	DENTAL	SINGLE
351	3030	JC-720	1 Female	02/11/1978	53593	DENTAL	FAMILY
351	3045	JC-720	1 Female	10/15/1979	53925	DENTAL	FAMILY
351	3045	JC-720	1 Female	01/20/1976	53713-3476	DENTAL	FAMILY
351	3045	JC-720	1 Female	11/10/1975	53531	DENTAL	FAMILY
351	3060	JC-720	1 Female	03/15/1984	53590	DENTAL	FAMILY
351	3060	JC-720	1 Female	11/26/1968	53715	DENTAL	SINGLE
351	3060	JC-720	1 Female	10/05/1964	53508	DENTAL	FAMILY
351	3060	JC-720	0.6 Female	01/18/1973	53718		
351	3060	JC-720	0.4 Female	03/12/1985	53590		
351	3060	JC-720	1 Female	05/30/1951	53536	DENTAL	SINGLE
351	3075	JC-720	1 Female	05/12/1994	53594	DENTAL	FAMILY
372	3165	JC-720	1 Female	08/04/1961	53704	DENTAL	SINGLE
372	3165	JC-720	1 Female	05/10/1984	53719	DENTAL	SINGLE
372	3165	JC-720	1 Female	10/19/1977	53538	DENTAL	SINGLE
372	3165	JC-720	1 Female	07/30/1963	53508	DENTAL	FAMILY
372	3165	JC-720	1 Female	07/11/1966	53523	DENTAL	FAMILY
372	3165	JC-720	1 Female	08/11/1976	53538	DENTAL	FAMILY
372	3165	JC-720	1 Female	01/01/1992	53523		
372	3200	JC-720	1 Male	04/25/1957	53562	DENTAL	FAMILY
372	3255	JC-720	1 Female	05/03/1974	53707	DENTAL	FAMILY
372	3255	JC-720	1 Male	01/09/1980	53719	DENTAL	FAMILY
372	3255	JC-720	1 Female	01/11/1965	53590	DENTAL	FAMILY
372	3255	JC-720	1 Female	12/19/1978	53593	DENTAL	FAMILY
372	3255	JC-720	1 Female	02/21/1996	53718	DENTAL	FAMILY
372	3255	JC-720	0.5 Male	06/27/1951	53705	DENTAL	FAMILY
372	3255	JC-720	1 Male	11/26/1985	53551	DENTAL	FAMILY
372	3255	JC-720	1 Female	06/12/1964	53590	DENTAL	SINGLE
372	3255	JC-720	1 Female	11/18/1962	53502	DENTAL	SINGLE
372	3255	JC-720	1 Female	10/18/1965	53538	DENTAL	FAMILY
372	3255	JC-720	1 Female	02/17/1966	53719	DENTAL	SINGLE
372	3255	JC-720	1 Male	10/01/1966	53589	DENTAL	FAMILY

372	3255	JC-720	1 Male	07/21/1962	53704	DENTAL	FAMILY
372	3255	JC-720	0.5 Male	02/22/1954	53549	DENTAL	FAMILY
372	3255	JC-720	1 Female	06/10/1972	53925	DENTAL	FAMILY
372	3255	JC-720	1 Female	01/23/1959	53558	DENTAL	FAMILY
372	3255	JC-720	1 Female	09/05/1966	53704	DENTAL	SINGLE
372	3255	JC-720	1 Female	11/30/1992	53704	DENTAL	FAMILY
372	3255	JC-720	1 Female	09/07/1962	53714	DENTAL	FAMILY
372	3255	JC-720	1 Female	03/04/1958	53703-3769	DENTAL	SINGLE
372	3255	JC-720	0.5 Male	09/04/1969	53545		
372	3315	JC-720	1 Female	01/12/1978	53558	DENTAL	FAMILY
372	3315	JC-720	1 Male	10/14/1990	54452	DENTAL	SINGLE
372	3315	JC-720	1 Female	02/13/1995	53575	DENTAL	SINGLE
372	3315	JC-720	1 Female	04/25/1978	53704	DENTAL	FAMILY
372	3315	JC-720	1 Male	12/06/1983	53532	DENTAL	FAMILY
372	3315	JC-720	1 Male	06/18/1970	53562	DENTAL	FAMILY
372	3315	JC-720	1 Female	12/01/1970	53589	DENTAL	FAMILY
372	3315	JC-720	1 Female	08/05/1991	53546	DENTAL	FAMILY
372	3315	JC-720	1 Female	09/05/1985	53704	DENTAL	SINGLE
372	3315	JC-720	1 Female	09/30/1978	53562	DENTAL	SINGLE
372	3315	JC-720	1 Male	10/25/1992	53549	DENTAL	SINGLE
372	3315	JC-720	1 Female	02/22/1966	53704	DENTAL	SINGLE
372	3315	JC-720	1 Female	07/05/1967	53590	DENTAL	SINGLE
372	3315	JC-720	1 Male	12/31/1993	53593	DENTAL	SINGLE
372	3315	JC-720	1 Male	01/14/1974	53572	DENTAL	FAMILY
372	3315	JC-720	1 Male	04/25/1983	53575	DENTAL	FAMILY
372	3315	JC-720	1 Female	11/07/1991	53703	DENTAL	SINGLE
372	3315	JC-720	1 Female	09/04/1980	53511	DENTAL	FAMILY
372	3315	JC-720	1 Female	01/30/1961	53911	DENTAL	SINGLE
372	3315	JC-720	1 Male	11/10/1990	53593	DENTAL	SINGLE
372	3315	JC-720	1 Male	02/22/1991	53703	DENTAL	FAMILY
372	3315	JC-720	1 Female	06/03/1977	53597	DENTAL	FAMILY
372	3315	JC-720	1 Female	06/24/1982	53545	DENTAL	FAMILY
372	3315	JC-720	1 Male	09/04/1974	53705	DENTAL	FAMILY
372	3315	JC-720	1 Female	07/21/1971	53521	DENTAL	FAMILY
372	3315	JC-720	1 Male	07/11/1989	53713		
372	3315	JC-720	1 Male	12/29/1987	53507	DENTAL	FAMILY
372	3315	JC-720	1 Female	10/04/1961	53704	DENTAL	FAMILY
372	3315	JC-720	1 Female	06/16/1973	53916	DENTAL	SINGLE
372	3315	JC-720	1 Female	01/18/1979	53559		
372	3315	JC-720	1 Male	07/01/1985	53508	DENTAL	FAMILY
372	3315	JC-720	1 Female	02/17/1959	53575	DENTAL	FAMILY
372	3315	JC-720	1 Female	10/19/1982	53590	DENTAL	SINGLE
372	3315	JC-720	1 Male	06/14/1972	53528	DENTAL	SINGLE
372	3315	JC-720	1 Female	10/30/1989	53930	DENTAL	SINGLE
372	3315	JC-720	1 Male	10/21/1989	54467	DENTAL	FAMILY
372	3315	JC-720	1 Female	04/17/1967	53597	DENTAL	SINGLE
372	3315	JC-720	1 Female	03/12/1966	53718	DENTAL	SINGLE
372	3315	JC-720	1 Male	12/24/1978	53719	DENTAL	FAMILY
372	3315	JC-720	1 Male	04/04/1989	53190	DENTAL	SINGLE

372	3315	JC-720	1 Male	12/20/1984	53589	DENTAL	FAMILY
372	3315	JC-720	1 Male	10/05/1982	53575	DENTAL	FAMILY
372	3315	JC-720	1 Female	01/07/1984	53534	DENTAL	FAMILY
372	3315	JC-720	1 Female	01/10/1974	53718		
372	3315	JC-720	1 Female	12/08/1974	53527	DENTAL	FAMILY
372	3315	JC-720	1 Male	06/17/1982	53521	DENTAL	FAMILY
372	3315	JC-720	1 Female	07/19/1968	53590	DENTAL	FAMILY
372	3315	JC-720	1 Female	09/29/1993	53711	DENTAL	SINGLE
372	3315	JC-720	1 Male	12/18/1967	53503	DENTAL	FAMILY
372	3315	JC-720	1 Male	09/04/1972	53716	DENTAL	FAMILY
372	3390	JC-720	1 Female	11/21/1974	53932	DENTAL	FAMILY
372	3390	JC-720	1 Female	12/22/1973	53538	DENTAL	FAMILY
372	3390	JC-720	0.5 Female	05/15/1962	53590	DENTAL	SINGLE
372	3390	JC-720	1 Female	12/13/1972	53925	DENTAL	FAMILY
372	3390	JC-720	1 Female	03/24/1985	53532	DENTAL	FAMILY
372	3390	JC-720	1 Female	04/07/1994	53711		
372	3390	JC-720	1 Female	12/25/1959	53562	DENTAL	FAMILY
372	3395	JC-720	0.5 Female	07/24/1978	53590		
385	3540	JC-720	1 Male	09/19/1983	53559	DENTAL	FAMILY
385	3540	JC-720	1 Female	10/19/1993	53925		
385	3540	JC-720	1 Male	05/09/1982	53925	DENTAL	FAMILY
385	3540	JC-720	1 Female	12/25/1981	53559	DENTAL	FAMILY
385	3540	JC-720	1 Male	05/22/1977	53590	DENTAL	FAMILY
385	3540	JC-720	1 Female	06/23/1980	53560	DENTAL	FAMILY
385	3540	JC-720	1 Male	05/12/1986	53719	DENTAL	FAMILY
385	3540	JC-720	1 Male	09/06/1986	53711	DENTAL	SINGLE
385	3540	JC-720	1 Female	02/08/1976	53716	DENTAL	FAMILY
385	3540	JC-720	1 Male	03/26/1985	53590	DENTAL	FAMILY
385	3540	JC-720	1 Female	11/19/1985	53538	DENTAL	FAMILY
385	3540	JC-720	1 Male	04/20/1993	53718	DENTAL	SINGLE
385	3540	JC-720	1 Male	03/04/1983	53534	DENTAL	FAMILY
385	3540	JC-720	1 Male	06/26/1962	53560	DENTAL	FAMILY
385	3540	JC-720	1 Female	08/05/1981	53711	DENTAL	FAMILY
385	3540	JC-720	1 Female	01/05/1973	53536	DENTAL	SINGLE
385	3540	JC-720	1 Male	08/06/1984	53531	DENTAL	FAMILY
385	3540	JC-720	1 Female	07/22/1977	53532	DENTAL	FAMILY
385	3540	JC-720	1 Female	07/20/1984	53593	DENTAL	SINGLE
385	3540	JC-720	1 Male	01/18/1980	53523	DENTAL	SINGLE
385	3540	JC-720	1 Female	04/19/1993	53711	DENTAL	SINGLE
385	3540	JC-720	1 Male	05/25/1973	53558	DENTAL	FAMILY
385	3540	JC-720	1 Female	09/10/1982	53716	DENTAL	FAMILY
385	3540	JC-720	1 Male	12/06/1982	53532	DENTAL	FAMILY
385	3540	JC-720	1 Female	07/02/1988	53508	DENTAL	SINGLE
385	3540	JC-720	1 Female	05/19/1980	53534	DENTAL	FAMILY
385	3540	JC-720	1 Female	10/15/1965	53558	DENTAL	FAMILY
385	3540	JC-720	1 Female	10/02/1986	53558	DENTAL	FAMILY
385	3540	JC-720	1 Male	04/14/1976	53590	DENTAL	FAMILY
385	3540	JC-720	1 Female	05/03/1975	53590		
385	3540	JC-720	1 Male	09/10/1983	53719	DENTAL	FAMILY

385	3540	JC-720	1 Female	11/13/1969	53572		
385	3540	JC-720	1 Male	08/31/1996	53718	DENTAL	SINGLE
385	3540	JC-720	1 Female	07/02/1996	53527	DENTAL	SINGLE
385	3540	JC-720	1 Male	04/03/1990	53597	DENTAL	FAMILY
385	3540	JC-720	1 Female	09/01/1987	53532	DENTAL	FAMILY
385	3540	JC-720	1 Female	10/06/1969	53960	DENTAL	SINGLE
385	3540	JC-720	1 Female	09/20/1989	53925	DENTAL	FAMILY
385	3540	JC-720	1 Male	01/27/1991	53590	DENTAL	FAMILY
385	3540	JC-720	1 Male	05/14/1986	53714	DENTAL	SINGLE
385	3540	JC-720	1 Female	06/25/1991	53590	DENTAL	FAMILY
385	3540	JC-720	1 Male	08/11/1968	53590	DENTAL	SINGLE
385	3540	JC-720	1 Male	09/11/1990	53575	DENTAL	SINGLE
385	3540	JC-720	1 Male	12/11/1986	53704	DENTAL	SINGLE
385	3540	JC-720	1 Male	12/12/1982	53701	DENTAL	FAMILY
385	3540	JC-720	1 Male	05/20/1977	53532	DENTAL	FAMILY
385	3540	JC-720	1 Male	09/14/1976	53532	DENTAL	FAMILY
385	3540	JC-720	1 Female	01/26/1971	53559	DENTAL	FAMILY
385	3540	JC-720	1 Male	08/31/1978	53704	DENTAL	FAMILY
385	3540	JC-720	1 Male	04/17/1987	53590	DENTAL	FAMILY
385	3540	JC-720	1 Female	04/22/1976	53711	DENTAL	SINGLE
385	3540	JC-720	1 Male	03/26/1989	53705	DENTAL	SINGLE
385	3540	JC-720	1 Male	12/01/1982	53589	DENTAL	FAMILY
385	3540	JC-720	1 Male	09/29/1980	53714	DENTAL	FAMILY
385	3540	JC-720	1 Female	11/10/1980	53546	DENTAL	FAMILY
385	3540	JC-720	1 Female	12/05/1983	53511	DENTAL	SINGLE
385	3540	JC-720	1 Male	09/18/1982	53716	DENTAL	FAMILY
385	3540	JC-720	1 Male	08/14/1982	53590	DENTAL	FAMILY
385	3540	JC-720	1 Female	12/16/1984	53590	DENTAL	SINGLE
385	3540	JC-720	1 Male	06/13/1985	53704	DENTAL	FAMILY
385	3540	JC-720	1 Female	08/05/1973	53960	DENTAL	FAMILY
385	3540	JC-720	1 Male	01/16/1973	53713	DENTAL	FAMILY
385	3540	JC-720	0.6 Female	03/25/1986	53590	DENTAL	FAMILY
385	3540	JC-720	1 Male	07/15/1986	53590	DENTAL	FAMILY
385	3540	JC-720	1 Male	10/04/1971	53590	DENTAL	FAMILY
385	3540	JC-720	1 Female	09/11/1989	53555	DENTAL	FAMILY
385	3540	JC-720	1 Male	08/06/1981	53590	DENTAL	FAMILY
385	3540	JC-720	1 Male	03/30/1972	53593	DENTAL	FAMILY
396	3615	JC-720	1 Female	03/26/1983	53531	DENTAL	FAMILY
396	3765	JC-720	1 Female	04/13/1997	53590	DENTAL	SINGLE
420	3840	JC-720	1 Female	05/27/1966	53716	DENTAL	FAMILY
420	3840	JC-720	1 Male	07/14/1984	53715	DENTAL	SINGLE
420	3915	JC-720	1 Male	07/20/1986	53711	DENTAL	SINGLE
420	3915	JC-720	1 Female	12/03/1984	53704	DENTAL	FAMILY
420	3915	JC-720	1 Female	04/27/1958	53589	DENTAL	SINGLE
420	3990	JC-720	1 Female	07/20/1962	53714	DENTAL	SINGLE
420	3990	JC-720	0.5 Female	11/02/1966	53713		
420	3990	JC-720	1 Male	09/29/1969	53559	DENTAL	FAMILY
420	3990	JC-720	1 Male	12/31/1962	53523	DENTAL	SINGLE
420	3990	JC-720	1 Male	07/30/1993	53593	DENTAL	SINGLE

420	3990	JC-720	0.5 Female	04/25/1989	53590		
420	3990	JC-720	1 Male	01/22/1965	53555	DENTAL	SINGLE
420	3990	JC-720	1 Female	05/24/1958	53534	DENTAL	FAMILY
420	3990	JC-720	1 Female	05/23/1962	53704	DENTAL	SINGLE
420	3990	JC-720	1 Male	12/05/1977	53925	DENTAL	FAMILY
420	3990	JC-720	1 Male	02/09/1978	53703		
420	3990	JC-720	1 Male	05/22/1974	53593	DENTAL	FAMILY
420	3990	JC-720	1 Male	09/24/1987	53590	DENTAL	FAMILY
420	4065	JC-720	1 Male	11/15/1977	53593	DENTAL	SINGLE
420	4065	JC-720	1 Female	05/07/1970	53704	DENTAL	FAMILY
420	4065	JC-720	0.5 Male	03/20/1987	53704		
420	4065	JC-720	0.5 Male	12/13/1975	53717	DENTAL	FAMILY
420	4065	JC-720	1 Male	02/23/1977	53711	DENTAL	FAMILY
420	4065	JC-720	1 Female	12/01/1984	53713	DENTAL	FAMILY
420	4065	JC-720	1 Male	10/05/1964	53711	DENTAL	FAMILY
420	4065	JC-720	1 Female	04/24/1973	53704	DENTAL	SINGLE
420	4065	JC-720	0.5 Female	02/09/1969	53536	DENTAL	SINGLE
420	4065	JC-720	0.5 Female	05/01/1983	53558		
510	5565	JC-720	1 Female	09/15/1959	53589	DENTAL	FAMILY
510	5565	JC-720	1 Female	06/16/1974	53521	DENTAL	SINGLE
510	5565	JC-720	1 Female	08/12/1957	53570	DENTAL	SINGLE
510	5565	JC-720	1 Female	06/25/1966	53593	DENTAL	FAMILY
510	5565	JC-720	1 Female	12/01/1985	53719	DENTAL	FAMILY
510	5580	JC-720	1 Female	09/23/1963	53572	DENTAL	FAMILY
510	5580	JC-720	1 Female	10/04/1967	53719	DENTAL	SINGLE
510	5580	JC-720	1 Female	08/12/1963	53711	DENTAL	FAMILY
510	5580	JC-720	1 Female	10/17/1979	53574	DENTAL	FAMILY
515	6039	JC-720	1 Female	04/23/1980	53121	DENTAL	SINGLE
515	6039	JC-720	1 Female	04/07/1991	53704	DENTAL	SINGLE
515	6039	JC-720	1 Male	03/04/1993	53718	DENTAL	FAMILY
515	6039	JC-720	1 Female	01/07/1977	53590	DENTAL	FAMILY
515	6039	JC-720	1 Female	03/13/1967	53593	DENTAL	FAMILY
515	6039	JC-720	1 Female	02/06/1976	53575	DENTAL	SINGLE
515	6039	JC-720	1 Male	01/29/1980	53532	DENTAL	SINGLE
515	6039	JC-720	1 Female	02/09/1974	53558	DENTAL	SINGLE
515	6039	JC-720	1 Female	11/18/1962	53955	DENTAL	FAMILY
515	6039	JC-720	1 Female	03/19/1979	53534	DENTAL	FAMILY
515	6039	JC-720	1 Female	06/21/1957	53714	DENTAL	FAMILY
515	6039	JC-720	1 Male	12/13/1959	53714	DENTAL	FAMILY
515	6039	JC-720	1 Female	07/30/1967	53960	DENTAL	SINGLE
515	6039	JC-720	1 Female	07/04/1963	53704	DENTAL	FAMILY
515	6039	JC-720	1 Female	02/23/1969	53532	DENTAL	FAMILY
515	6039	JC-720	1 Male	01/04/1968	53593	DENTAL	FAMILY
515	6039	JC-720	1 Female	11/27/1983	53590	DENTAL	FAMILY
515	6040	JC-720	1 Female	04/30/1980	53718	DENTAL	FAMILY
515	6040	JC-720	1 Male	07/30/1955	53562	DENTAL	FAMILY
515	6040	JC-720	0.5 Female	07/06/1965	53532	DENTAL	FAMILY
515	6040	JC-720	1 Female	08/06/1970	53704	DENTAL	FAMILY
515	6040	JC-720	1 Female	08/13/1968	53704	DENTAL	FAMILY

515	6040	JC-720	1 Female	12/25/1978	53523	DENTAL	FAMILY
515	6041	JC-720	1 Female	04/03/1974	53575	DENTAL	SINGLE
515	6042	JC-720	1 Female	09/25/1954	53704	DENTAL	SINGLE
515	6042	JC-720	1 Female	03/06/1986	53719	DENTAL	FAMILY
515	6042	JC-720	1 Female	07/29/1967	53714	DENTAL	SINGLE
515	6043	JC-720	1 Female	06/22/1967	53960	DENTAL	FAMILY
515	6043	JC-720	0.5 Male	05/11/1948	53562	DENTAL	FAMILY
515	6045	JC-720	1 Female	03/04/1990	53527	DENTAL	FAMILY
515	6045	JC-720	1 Female	09/11/1977	53597	DENTAL	FAMILY
515	6046	JC-720	1 Male	01/07/1979	53704	DENTAL	FAMILY
515	6046	JC-720	1 Female	12/15/1976	53558	DENTAL	FAMILY
515	6046	JC-720	1 Female	08/03/1982	53704	DENTAL	SINGLE
515	6050	JC-720	1 Male	08/27/1968	53597	DENTAL	FAMILY
515	6050	JC-720	1 Male	01/25/1994	53590	DENTAL	SINGLE
515	6050	JC-720	1 Female	07/20/1971	53589	DENTAL	SINGLE
515	6050	JC-720	1 Male	07/02/1993	53711	DENTAL	FAMILY
515	6050	JC-720	1 Female	09/24/1981	53508	DENTAL	FAMILY
515	6050	JC-720	1 Female	01/20/1992	53590	DENTAL	FAMILY
515	6050	JC-720	1 Female	08/28/1955	53960	DENTAL	FAMILY
515	6050	JC-720	1 Male	06/27/1992	53719	DENTAL	SINGLE
515	6050	JC-720	1 Male	03/03/1977	53503	DENTAL	SINGLE
515	6050	JC-720	1 Female	11/07/1989	53527	DENTAL	FAMILY
515	6054	JC-720	1 Female	07/26/1990	53590	DENTAL	SINGLE
515	6054	JC-720	1 Female	11/16/1985	53711	DENTAL	FAMILY
515	6054	JC-720	1 Male	01/10/1992	53511	DENTAL	FAMILY
515	6054	JC-720	1 Male	12/08/1959	53550	DENTAL	SINGLE
515	6054	JC-720	1 Female	09/22/1952	53559	DENTAL	SINGLE
515	6054	JC-720	1 Female	07/19/1967	53713	DENTAL	FAMILY
515	6054	JC-720	1 Female	08/12/1971	53704	DENTAL	FAMILY
515	6054	JC-720	1 Male	11/10/1971	53714	DENTAL	FAMILY
515	6054	JC-720	1 Male	11/14/1957	53719	DENTAL	FAMILY
515	6054	JC-720	1 Female	10/24/1957	53719-5250	DENTAL	SINGLE
515	6054	JC-720	1 Female	11/17/1972	53713	DENTAL	FAMILY
515	6054	JC-720	1 Female	06/03/1986	53551	DENTAL	SINGLE
515	6054	JC-720	1 Female	05/19/1964	53532	DENTAL	FAMILY
515	6054	JC-720	1 Female	06/26/1976	53532	DENTAL	SINGLE
515	6054	JC-720	1 Female	03/27/1963	53597	DENTAL	FAMILY
515	6060	JC-720	1 Female	07/14/1959	53714	DENTAL	SINGLE
515	6060	JC-720	1 Female	09/14/1967	53704	DENTAL	FAMILY
515	6060	JC-720	1 Female	02/18/1964	53704	DENTAL	SINGLE
515	6060	JC-720	1 Female	09/17/1962	53719	DENTAL	SINGLE
515	6060	JC-720	1 Female	12/27/1980	53704	DENTAL	FAMILY
515	6060	JC-720	1 Female	07/02/1973	53527	DENTAL	FAMILY
515	6060	JC-720	1 Female	02/12/1963	53529	DENTAL	FAMILY
515	6060	JC-720	1 Male	06/05/1972	53716	DENTAL	FAMILY
515	6060	JC-720	1 Female	10/05/1963	53964	DENTAL	FAMILY
515	6062	JC-720	1 Female	04/25/1981	53558	DENTAL	FAMILY
515	6062	JC-720	1 Male	07/27/1978	53555	DENTAL	FAMILY
515	6062	JC-720	1 Female	03/08/1983	53545	DENTAL	FAMILY

515	6062	JC-720	1 Female	06/19/1970	53713	DENTAL	FAMILY
515	6062	JC-720	1 Female	06/10/1970	53718	DENTAL	FAMILY
515	6062	JC-720	1 Male	11/05/1984	53716	DENTAL	FAMILY
515	6062	JC-720	1 Female	01/30/1963	53714	DENTAL	FAMILY
515	6062	JC-720	1 Female	03/14/1965	53597	DENTAL	FAMILY
515	6062	JC-720	1 Female	11/11/1975	53716	DENTAL	FAMILY
515	6062	JC-720	1 Male	04/10/1970	53589	DENTAL	FAMILY
515	6062	JC-720	1 Female	12/24/1969	53704	DENTAL	SINGLE
515	6062	JC-720	1 Female	05/22/1978	53562	DENTAL	FAMILY
515	6062	JC-720	1 Female	02/15/1985	53562	DENTAL	FAMILY
515	6062	JC-720	1 Female	10/04/1987	53098	DENTAL	FAMILY
515	6062	JC-720	1 Female	03/20/1986	53562	DENTAL	FAMILY
515	6062	JC-720	1 Female	03/18/1956	53714	DENTAL	SINGLE
515	6062	JC-720	1 Female	12/10/1970	53716	DENTAL	FAMILY
515	6062	JC-720	1 Male	12/08/1976	53704	DENTAL	FAMILY
515	6062	JC-720	1 Female	01/23/1983	53549	DENTAL	FAMILY
515	6062	JC-720	1 Female	03/28/1985	53598	DENTAL	FAMILY
515	6062	JC-720	1 Female	03/14/1962	53528	DENTAL	SINGLE
515	6062	JC-720	1 Female	04/12/1963	53534	DENTAL	SINGLE
515	6062	JC-720	1 Female	03/15/1989	53711	DENTAL	FAMILY
515	6062	JC-720	1 Male	06/17/1990	53716	DENTAL	FAMILY
515	6062	JC-720	1 Female	08/16/1967	53714	DENTAL	FAMILY
515	6062	JC-720	1 Female	09/13/1974	53590	DENTAL	FAMILY
515	6062	JC-720	1 Female	06/11/1979	53704	DENTAL	SINGLE
515	6062	JC-720	1 Male	01/10/1985	53220	DENTAL	FAMILY
515	6062	JC-720	1 Female	09/12/1985	53559	DENTAL	FAMILY
515	6062	JC-720	1 Male	12/22/1978	53590	DENTAL	FAMILY
515	6062	JC-720	1 Male	12/12/1974	53925	DENTAL	FAMILY
515	6062	JC-720	1 Female	04/05/1978	53534	DENTAL	FAMILY
515	6062	JC-720	1 Female	01/07/1960	53532	DENTAL	FAMILY
515	6062	JC-720	1 Female	11/15/1987	53704	DENTAL	SINGLE
515	6062	JC-720	1 Female	04/12/1982	53716	DENTAL	FAMILY
515	6062	JC-720	1 Female	01/12/1973	53704	DENTAL	FAMILY
515	6062	JC-720	1 Female	05/22/1975	53704	DENTAL	FAMILY
515	6062	JC-720	1 Female	12/20/1983	53713	DENTAL	FAMILY
515	6062	JC-720	1 Female	07/01/1971	53718	DENTAL	FAMILY
515	6062	JC-720	1 Female	01/19/1971	53711	DENTAL	FAMILY
515	6062	JC-720	1 Female	11/23/1969	53932	DENTAL	FAMILY
515	6062	JC-720	1 Female	06/04/1984	53719	DENTAL	SINGLE
515	6062	JC-720	1 Female	06/24/1944	53716	DENTAL	SINGLE
515	6062	JC-720	1 Female	11/09/1977	53925	DENTAL	FAMILY
515	6062	JC-720	1 Male	12/10/1970	53590	DENTAL	FAMILY
515	6062	JC-720	1 Female	04/03/1977	54935	DENTAL	SINGLE
515	6062	JC-720	1 Female	07/29/1986	53575-2262	DENTAL	FAMILY
515	6062	JC-720	1 Female	06/02/1971	53558		
515	6062	JC-720	1 Female	01/30/1962	53711	DENTAL	FAMILY
515	6062	JC-720	1 Female	03/03/1988	53718	DENTAL	SINGLE
515	6062	JC-720	1 Female	09/07/1991	53703	DENTAL	SINGLE
515	6062	JC-720	1 Male	05/21/1994	53719	DENTAL	SINGLE

515	6062	JC-720	1 Female	04/20/1989	53718	DENTAL	FAMILY
515	6062	JC-720	1 Female	07/08/1987	53916	DENTAL	FAMILY
515	6062	JC-720	1 Female	06/10/1986	53713	DENTAL	FAMILY
515	6062	JC-720	1 Female	04/04/1974	53716	DENTAL	FAMILY
515	6062	JC-720	1 Female	05/17/1991	53704	DENTAL	SINGLE
515	6062	JC-720	1 Male	01/24/1994	53704	DENTAL	SINGLE
515	6062	JC-720	1 Female	06/03/1966	53593	DENTAL	FAMILY
515	6062	JC-720	1 Female	01/14/1976	53704	DENTAL	SINGLE
515	6062	JC-720	1 Female	02/01/1989	53704	DENTAL	SINGLE
515	6062	JC-720	1 Female	11/03/1970	53575	DENTAL	FAMILY
515	6062	JC-720	1 Female	12/03/1977	53713	DENTAL	FAMILY
515	6062	JC-720	1 Male	06/05/1986	53590	DENTAL	FAMILY
515	6062	JC-720	1 Female	07/05/1979	53563	DENTAL	FAMILY
515	6062	JC-720	1 Male	11/28/1977	53575	DENTAL	FAMILY
515	6062	JC-720	1 Female	10/11/1976	53532	DENTAL	FAMILY
515	6062	JC-720	1 Male	12/19/1983	53704	DENTAL	SINGLE
515	6062	JC-720	1 Female	03/05/1984	53098	DENTAL	FAMILY
515	6062	JC-720	1 Female	12/22/1971	53704	DENTAL	FAMILY
515	6062	JC-720	1 Male	06/16/1982	53716	DENTAL	SINGLE
515	6062	JC-720	1 Female	11/07/1982	53932	DENTAL	FAMILY
515	6062	JC-720	1 Female	06/15/1985	53590	DENTAL	FAMILY
515	6062	JC-720	1 Male	11/28/1982	53704	DENTAL	FAMILY
515	6062	JC-720	1 Male	03/14/1996	53704	DENTAL	FAMILY
515	6062	JC-720	1 Female	11/14/1960	53718	DENTAL	SINGLE
515	6062	JC-720	1 Male	08/31/1982	53527	DENTAL	SINGLE
515	6062	JC-720	1 Male	06/17/1968	53716	DENTAL	FAMILY
515	6062	JC-720	1 Male	10/14/1978	53532		
515	6062	JC-720	1 Male	08/01/1966	53901	DENTAL	FAMILY
515	6062	JC-720	1 Female	05/28/1988	53593	DENTAL	FAMILY
515	6062	JC-720	0.75 Female	05/02/1995	53704	DENTAL	SINGLE
515	6062	JC-720	1 Male	12/30/1965	53704	DENTAL	FAMILY
515	6062	JC-720	1 Female	12/01/1981	53581	DENTAL	FAMILY
515	6062	JC-720	1 Female	06/21/1966	53572	DENTAL	FAMILY
515	6062	JC-720	1 Male	10/19/1984	53590	DENTAL	FAMILY
515	6062	JC-720	1 Female	05/03/1974	53716	DENTAL	FAMILY
515	6062	JC-720	1 Female	08/29/1984	53714	DENTAL	FAMILY
515	6062	JC-720	1 Male	09/02/1963	53704	DENTAL	FAMILY
515	6062	JC-720	1 Male	05/03/1982	53716	DENTAL	FAMILY
515	6062	JC-720	1 Female	12/31/1982	53590	DENTAL	FAMILY
515	6062	JC-720	1 Female	05/16/1983	53532	DENTAL	SINGLE
515	6062	JC-720	1 Male	10/05/1977	53534	DENTAL	FAMILY
515	6062	JC-720	1 Female	09/02/1975	53098	DENTAL	FAMILY
515	6062	JC-720	1 Female	07/03/1977	53716	DENTAL	FAMILY
515	6062	JC-720	1 Not Specifie	07/24/1990	53716	DENTAL	SINGLE
515	6062	JC-720	1 Male	02/21/1983	53704	DENTAL	SINGLE
515	6062	JC-720	1 Female	09/03/1979	53575	DENTAL	FAMILY
515	6062	JC-720	1 Female	01/24/1968	53713	DENTAL	FAMILY
515	6062	JC-720	1 Male	03/15/1974	53558	DENTAL	FAMILY
515	6062	JC-720	1 Male	02/04/1978	53598	DENTAL	FAMILY

515	6062	JC-720	1 Female	06/12/1982	53532	DENTAL	FAMILY
515	6062	JC-720	1 Female	09/12/1981	53704	DENTAL	FAMILY
515	6070	JC-720	1 Female	04/28/1967	53527	DENTAL	SINGLE
515	6070	JC-720	1 Female	03/22/1958	53538	DENTAL	FAMILY
515	6070	JC-720	1 Female	11/11/1979	53572	DENTAL	FAMILY
515	6073	JC-720	1 Male	04/24/1969	53527	DENTAL	FAMILY
520	6130	JC-720	1 Female	10/05/1986	53711	DENTAL	FAMILY
520	6130	JC-720	1 Male	02/27/1973	53714	DENTAL	SINGLE
520	6130	JC-720	1 Male	09/09/1970	53716	DENTAL	SINGLE
520	6130	JC-720	0.8 Female	09/16/1989	53711	DENTAL	FAMILY
520	6130	JC-720	1 Female	07/14/1965	53589	DENTAL	SINGLE
520	6130	JC-720	1 Female	12/10/1962	53559	DENTAL	FAMILY
520	6130	JC-720	1 Female	08/09/1985	53558	DENTAL	FAMILY
520	6130	JC-720	1 Female	06/17/1959	53590	DENTAL	FAMILY
520	6130	JC-720	1 Female	03/25/1998	54932	DENTAL	SINGLE
520	6130	JC-720	1 Not Specified	08/03/1970	53536	DENTAL	SINGLE
520	6130	JC-720	1 Male	02/28/1967	53531	DENTAL	FAMILY
520	6130	JC-720	1 Female	07/15/1991	53589	DENTAL	FAMILY
520	6130	JC-720	1 Female	08/08/1962	53523	DENTAL	SINGLE
520	6130	JC-720	1 Female	03/08/1980	53956	DENTAL	FAMILY
520	6130	JC-720	1 Male	05/14/1987	53714	DENTAL	SINGLE
520	6130	JC-720	1 Female	02/14/1972	53536	DENTAL	FAMILY
520	6130	JC-720	1 Female	05/29/1960	53715	DENTAL	FAMILY
520	6130	JC-720	1 Female	09/08/1967	53719	DENTAL	FAMILY
520	6130	JC-720	1 Female	04/17/1978	53536	DENTAL	FAMILY
520	6130	JC-720	1 Male	02/18/1955	53715	DENTAL	SINGLE
520	6130	JC-720	1 Male	10/02/1992	53538	DENTAL	SINGLE
520	6130	JC-720	1 Female	11/02/1983	53704		
520	6130	JC-720	1 Female	07/22/1982	53534	DENTAL	FAMILY
520	6130	JC-720	1 Female	03/29/1963	53705		
520	6130	JC-720	1 Male	09/16/1955	53704	DENTAL	SINGLE
520	6130	JC-720	0.75 Female	03/25/1959	53704	DENTAL	SINGLE
520	6130	JC-720	1 Female	04/18/1979	53598	DENTAL	FAMILY
520	6130	JC-720	1 Male	03/20/1974	53704	DENTAL	SINGLE
520	6130	JC-720	1 Male	06/02/1964	53575	DENTAL	FAMILY
520	6130	JC-720	1 Female	08/24/1987	53562	DENTAL	FAMILY
520	6130	JC-720	1 Female	10/25/1995	53703		
520	6130	JC-720	1 Female	09/07/1977	53713	DENTAL	FAMILY
520	6130	JC-720	0.5 Female	06/06/1958	53590	DENTAL	FAMILY
520	6130	JC-720	1 Male	06/28/1972	53719	DENTAL	FAMILY
520	6130	JC-720	1 Female	03/15/1976	53590	DENTAL	FAMILY
520	6130	JC-720	0.5 Male	09/09/1967	53558		
520	6130	JC-720	1 Female	03/29/1988	53711	DENTAL	FAMILY
520	6130	JC-720	1 Female	04/01/1988	53527	DENTAL	FAMILY
524	6165	JC-720	1 Female	01/09/1980	53598	DENTAL	FAMILY
524	6165	JC-720	0.5 Male	01/27/1972	53590	DENTAL	FAMILY
524	6165	JC-720	1 Female	03/09/1969	53597		
524	6165	JC-720	1 Female	12/12/1970	53718	DENTAL	FAMILY
524	6165	JC-720	0.5 Female	02/03/1976	53590		

538	6190	JC-720	1 Male	08/13/1962	53704	DENTAL	FAMILY
538	6315	JC-720	1 Female	07/18/1993	53704	DENTAL	SINGLE
538	6315	JC-720	1 Female	06/29/1976	53719	DENTAL	SINGLE
564	6480	JC-720	1 Female	02/14/1962	53714	DENTAL	FAMILY
564	6480	JC-720	1 Female	12/23/1981	53714	DENTAL	FAMILY
564	6585	JC-720	1 Female	12/09/1969	53562	DENTAL	FAMILY
564	6695	JC-720	1 Male	04/05/1961	53711	DENTAL	FAMILY
564	6705	JC-720	1 Male	04/11/1989	53538	DENTAL	FAMILY
612	6915	JC-720	0.8 Male	11/28/1970	53716	DENTAL	FAMILY
612	6915	JC-720	0.75 Female	01/31/1978	53531	DENTAL	FAMILY
612	6915	JC-720	0.8 Male	02/28/1970	53716		
612	6915	JC-720	1 Female	11/14/1953	53562	DENTAL	SINGLE
612	6915	JC-720	0.9 Male	10/21/1972	53562		
612	6915	JC-720	0.8 Female	10/22/1983	53704	DENTAL	FAMILY
648	6990	JC-720	1 Female	08/19/1958	53590	DENTAL	FAMILY
648	6990	JC-720	1 Male	09/29/1985	53713	DENTAL	SINGLE
648	6990	JC-720	1 Female	05/20/1962	53960	DENTAL	FAMILY
648	6990	JC-720	1 Male	05/12/1991	53719	DENTAL	SINGLE
684	7665	JC-720	0.5 Male	07/27/1985	53562		
684	7665	JC-720	1 Male	05/22/1993	53560	DENTAL	SINGLE
696	7730	JC-720	1 Female	04/19/1960	53719	DENTAL	FAMILY
696	7730	JC-720	1 Female	05/07/1992	53590	DENTAL	SINGLE
696	7740	JC-720	1 Male	08/14/1962	53521	DENTAL	FAMILY
696	7740	JC-720	1 Male	11/28/1977	53575	DENTAL	FAMILY
696	7740	JC-720	1 Male	08/23/1968	53577	DENTAL	FAMILY
696	7740	JC-720	1 Male	09/10/1970	53575	DENTAL	FAMILY
696	7740	JC-720	1 Male	11/15/1985	53559	DENTAL	FAMILY
696	7740	JC-720	1 Male	01/08/1980	53589	DENTAL	FAMILY
696	7740	JC-720	1 Male	12/01/1969	53572	DENTAL	FAMILY
696	7740	JC-720	1 Male	12/02/1988	53703	DENTAL	SINGLE
696	7740	JC-720	1 Male	04/15/1965	53597	DENTAL	FAMILY
696	7740	JC-720	1 Male	10/05/1959	53545	DENTAL	SINGLE
696	7740	JC-720	1 Male	05/01/1978	53954	DENTAL	FAMILY
696	7740	JC-720	1 Male	12/27/1972	53583	DENTAL	FAMILY
696	7740	JC-720	1 Male	01/26/1962	53529	DENTAL	FAMILY
696	7740	JC-720	1 Female	05/20/1985	53534	DENTAL	FAMILY
696	7740	JC-720	1 Male	12/13/1998	53713	DENTAL	SINGLE
696	7740	JC-720	1 Male	10/14/1958	53536	DENTAL	FAMILY
696	7740	JC-720	1 Male	11/04/1991	53589	DENTAL	FAMILY
696	7740	JC-720	1 Male	10/11/1979	53515	DENTAL	FAMILY
696	7840	JC-720	1 Male	10/24/1981	53589		
696	7840	JC-720	1 Male	08/03/1964	53718	DENTAL	FAMILY
696	7840	JC-720	1 Male	05/21/1978	53597	DENTAL	FAMILY
720	7890	JC-720	1 Female	08/02/1997	53716		
720	7890	JC-720	1 Male	04/26/1989	53711		
795	8355	JC-720	1 Female	11/19/1976	53716	DENTAL	FAMILY
795	8355	JC-720	1 Female	07/07/1965	53572	DENTAL	FAMILY
795	8355	JC-720	1 Male	01/21/1967	53593	DENTAL	FAMILY
795	8355	JC-720	1 Male	11/18/1991	53589	DENTAL	SINGLE

795	8355	JC-720	1 Female	10/17/1967	53534	DENTAL	FAMILY
795	8675	JC-720	1 Female	01/26/1954	53716	DENTAL	SINGLE
820	8790	JC-720	1 Male	11/15/1953	53590	DENTAL	FAMILY
820	8790	JC-720	1 Male	05/01/1989	53531	DENTAL	FAMILY
820	8790	JC-720	1 Male	03/28/1957	53716	DENTAL	FAMILY
820	8790	JC-720	1 Female	11/30/1976	53098	DENTAL	FAMILY
820	8790	JC-720	1 Female	10/30/1990	53714	DENTAL	FAMILY
820	8790	JC-720	1 Female	08/18/1969	53532	DENTAL	FAMILY
048	0240	JC-CONFIDNT	1 Female	09/26/1984	53593	DENTAL	FAMILY
048	0240	JC-CONFIDNT	1 Female	08/19/1977	53597	DENTAL	FAMILY
168	1890	JC-CONFIDNT	1 Female	07/01/1976	53575	DENTAL	FAMILY
372	3165	JC-CONFIDNT	1 Female	06/28/1965	53562	DENTAL	FAMILY
564	6580	LOCAL-65	1 Male	05/08/1967	53955	DENTAL	FAMILY
564	6585	LOCAL-65	1 Male	11/04/1983	53516	DENTAL	FAMILY
564	6585	LOCAL-65	1 Male	07/01/1972	53955	DENTAL	FAMILY
564	6585	LOCAL-65	1 Male	11/14/1977	53704	DENTAL	FAMILY
564	6585	LOCAL-65	1 Male	07/31/1982	53559	DENTAL	FAMILY
564	6585	LOCAL-65	1 Male	11/04/1965	53718	DENTAL	FAMILY
564	6585	LOCAL-65	1 Male	08/19/1981	53532	DENTAL	FAMILY
564	6585	LOCAL-65	1 Male	02/03/1995	53566	DENTAL	SINGLE
564	6705	LOCAL-65	1 Male	03/23/1990	53551	DENTAL	FAMILY
564	6705	LOCAL-65	1 Male	12/08/1964	53559	DENTAL	FAMILY
564	6705	LOCAL-65	1 Male	09/23/1991	53508	DENTAL	FAMILY
648	7140	LOCAL-65	1 Male	09/18/1979	53714	DENTAL	FAMILY
648	7140	LOCAL-65	1 Male	05/18/1981	54971	DENTAL	FAMILY
648	7140	LOCAL-65	1 Male	07/08/1964	53563-1143	DENTAL	FAMILY
648	7140	LOCAL-65	1 Male	03/28/1972	53575	DENTAL	SINGLE
648	7140	LOCAL-65	1 Male	05/01/1969	53589	DENTAL	FAMILY
648	7140	LOCAL-65	1 Male	02/12/1997	53704		
648	7140	LOCAL-65	1 Male	03/30/1960	53716	DENTAL	FAMILY
648	7140	LOCAL-65	1 Male	04/11/1981	53590	DENTAL	FAMILY
684	7665	LOCAL-65	1 Male	02/22/1971	53574	DENTAL	FAMILY
684	7665	LOCAL-65	1 Female	04/07/1982	53590	DENTAL	SINGLE
684	7665	LOCAL-65	1 Male	09/07/1955	53711	DENTAL	FAMILY
684	7665	LOCAL-65	1 Female	01/28/1990	53711	DENTAL	FAMILY
684	7665	LOCAL-65	1 Male	06/02/1972	53597	DENTAL	FAMILY
684	7665	LOCAL-65	1 Female	04/01/1975	53589	DENTAL	SINGLE
684	7665	LOCAL-65	1 Female	06/19/1986	53703	DENTAL	SINGLE
684	7665	LOCAL-65	1 Female	12/28/1981	53719	DENTAL	SINGLE
684	7665	LOCAL-65	1 Male	05/09/1974	53704	DENTAL	FAMILY
684	7665	LOCAL-65	1 Female	10/28/1992	53718	DENTAL	SINGLE
684	7665	LOCAL-65	1 Female	11/08/1984	53593	DENTAL	SINGLE
684	7665	LOCAL-65	1 Female	12/30/1975	53714	DENTAL	SINGLE
684	7665	LOCAL-65	1 Male	08/28/1992	53704	DENTAL	SINGLE
684	7665	LOCAL-65	1 Male	03/01/1984	53713	DENTAL	SINGLE
684	7665	LOCAL-65	1 Male	03/13/1963	53704	DENTAL	FAMILY
684	7665	LOCAL-65	1 Female	12/21/1987	53715	DENTAL	FAMILY
684	7665	LOCAL-65	1 Male	10/22/1961	53589	DENTAL	FAMILY
684	7665	LOCAL-65	1 Female	11/26/1980	53715	DENTAL	FAMILY

684	7665	LOCAL-65	1 Male	01/20/1984	53704	DENTAL	SINGLE
684	7665	LOCAL-65	1 Male	11/28/1970	53531	DENTAL	FAMILY
684	7665	LOCAL-65	1 Female	06/27/1990	53711	DENTAL	SINGLE
684	7665	LOCAL-65	1 Male	11/29/1987	53583	DENTAL	SINGLE
795	8355	LOCAL-65	1 Male	07/14/1963	53593	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	12/04/1980	53597	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	08/18/1991	53959	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	08/24/1974	53578	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	09/19/1973	53566	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	07/07/1968	53589	DENTAL	SINGLE
795	8355	LOCAL-65	1 Male	03/21/1984	53212	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	01/22/1966	53529	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	10/12/1981	53578	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	07/22/1974	53578	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	12/25/1976	53555	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	06/01/1988	53534	DENTAL	SINGLE
795	8355	LOCAL-65	1 Male	05/31/1987	53704	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	05/06/1982	52525	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	04/24/1971	53517	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	04/30/1994	53582	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	07/14/1976	53594	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	03/06/1985	53520	DENTAL	SINGLE
795	8355	LOCAL-65	1 Male	05/27/1978	53594	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	08/28/1978	53911	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	10/28/1960	53521	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	06/19/1973	53523	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	03/09/1966	53594	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	12/14/1969	53718	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	03/11/1961	53548	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	06/05/1988	53597	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	08/27/1984	53574	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	03/11/1974	53548	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	09/21/1967	53582	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	05/03/1996	53527	DENTAL	SINGLE
795	8355	LOCAL-65	1 Male	05/24/1981	53583	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	01/25/1978	53536	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	02/18/1960	53532	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	09/18/1956	53558	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	01/13/1979	53533	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	01/11/1961	53574	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	04/05/1972	53511	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	02/27/1973	53925	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	01/21/1963	53536	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	03/10/1977	53528	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	06/06/1977	53713	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	11/16/1978	53590	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	11/19/1976	53594	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	12/10/1975	53536	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	07/12/1964	53590	DENTAL	FAMILY

795	8355	LOCAL-65	1 Male	09/17/1977	53578	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	03/27/1967	53589	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	10/24/1969	53521	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	09/24/1979	53528	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	05/27/1963	53550	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	09/13/1974	53558	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	11/13/1975	53594	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	06/02/1974	53578	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	04/25/1991	53538	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	03/03/1966	53532	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	05/12/1995	53555	DENTAL	SINGLE
795	8355	LOCAL-65	1 Male	01/23/1976	53590	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	03/25/1977	53579	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	12/04/1983	53534	DENTAL	SINGLE
795	8355	LOCAL-65	1 Male	05/26/1956	53583	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	02/11/1966	53590	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	06/24/1965	53532	DENTAL	SINGLE
795	8355	LOCAL-65	1 Male	08/06/1972	53536	DENTAL	FAMILY
795	8355	LOCAL-65	1 Female	10/02/1990	53713	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	11/10/1978	53528	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	06/16/1990	53714	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	03/16/1985	53550	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	04/17/1988	53529	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	12/15/1984	53593	DENTAL	SINGLE
795	8355	LOCAL-65	1 Male	06/18/1957	53590	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	04/16/1974	53575	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	12/13/1993	53548	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	07/20/1978	53719	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	06/12/1965	53536	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	09/01/1991	53559	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	12/10/1979	53523	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	12/24/1984	53515	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	08/19/1982	53562	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	03/11/1966	53508	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	01/15/1970	53560	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	02/12/1961	53528	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	06/25/1964	53566	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	02/14/1947	53590	DENTAL	SINGLE
795	8355	LOCAL-65	1 Male	01/08/1981	53589	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	06/26/1968	53536	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	08/03/1964	53532	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	03/11/1980	53098	DENTAL	SINGLE
795	8355	LOCAL-65	1 Male	08/25/1978	53576	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	09/03/1984	53558	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	06/11/1976	53527	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	09/01/1985	53536	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	06/07/1976	53502	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	01/18/1982	53559	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	09/14/1985	53562	DENTAL	FAMILY

795	8355	LOCAL-65	1 Male	12/24/1975	53534	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	08/14/1981	53578	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	05/26/1960	53549	DENTAL	SINGLE
795	8355	LOCAL-65	1 Male	06/13/1975	53704	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	08/10/1966	53545	DENTAL	SINGLE
795	8355	LOCAL-65	1 Male	10/22/1982	53711	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	12/04/1985	53590	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	07/07/1971	53566	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	11/01/1974	53521	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	04/18/1961	53949	DENTAL	SINGLE
795	8355	LOCAL-65	1 Male	05/05/1981	53508	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	06/21/1982	53578	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	01/08/1987	53502	DENTAL	SINGLE
795	8355	LOCAL-65	1 Male	05/04/1977	53925	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	09/22/1969	53523	DENTAL	SINGLE
795	8355	LOCAL-65	1 Female	01/13/1963	53589	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	10/27/1979	53559	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	11/06/1962	53555	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	03/05/1985	53901	DENTAL	FAMILY
795	8355	LOCAL-65	1 Male	06/29/1973	53572	DENTAL	FAMILY
795	8715	LOCAL-65	1 Male	05/12/1969	53517	DENTAL	FAMILY
795	8715	LOCAL-65	1 Male	01/18/1961	53718	DENTAL	FAMILY
820	8865	LOCAL-65	1 Male	08/15/1985	53590	DENTAL	FAMILY
820	8865	LOCAL-65	1 Male	05/04/1963	53704	DENTAL	SINGLE
820	8865	LOCAL-65	1 Male	08/21/1984	53589	DENTAL	FAMILY
820	8865	LOCAL-65	1 Male	06/02/1963	53558	DENTAL	FAMILY
820	8865	LOCAL-65	1 Male	10/03/1981	53916	DENTAL	SINGLE
820	8865	LOCAL-65	1 Male	10/01/1969	53562	DENTAL	FAMILY
820	8865	LOCAL-65	1 Male	05/23/1985	53960	DENTAL	FAMILY
820	8865	LOCAL-65	1 Male	08/07/1970	53508	DENTAL	FAMILY
820	8865	LOCAL-65	1 Male	07/17/1973	54628	DENTAL	SINGLE
820	8865	LOCAL-65	1 Male	12/08/1966	53572	DENTAL	FAMILY
820	8865	LOCAL-65	1 Male	02/09/1990	53960	DENTAL	FAMILY
820	8940	LOCAL-65	1 Female	09/07/1984	53713	DENTAL	FAMILY
820	8940	LOCAL-65	1 Male	08/05/1979	53562		
820	8940	LOCAL-65	1 Female	01/18/1993	53598	DENTAL	SINGLE
820	8940	LOCAL-65	1 Female	09/29/1968	53558	DENTAL	FAMILY
820	8940	LOCAL-65	1 Male	04/04/1961	53532	DENTAL	FAMILY
820	8940	LOCAL-65	1 Male	01/20/1963	53913	DENTAL	FAMILY
820	8940	LOCAL-65	1 Male	02/01/1963	53704	DENTAL	SINGLE
820	8940	LOCAL-65	1 Male	11/16/1965	53716	DENTAL	FAMILY
820	8940	LOCAL-65	1 Male	04/03/1956	53704	DENTAL	FAMILY
820	8940	LOCAL-65	1 Male	01/09/1961	53590	DENTAL	FAMILY
820	8940	LOCAL-65	1 Male	07/11/1958	53597	DENTAL	FAMILY
820	8940	LOCAL-65	1 Female	01/20/1969	53704	DENTAL	FAMILY
820	8940	LOCAL-65	1 Male	02/17/1996	53704		
820	8940	LOCAL-65	1 Male	06/20/1991	53536	DENTAL	SINGLE
820	8940	LOCAL-65	1 Male	11/08/1983	53597	DENTAL	FAMILY
820	8940	LOCAL-65	1 Male	12/06/1970	53704	DENTAL	FAMILY

820	8940	LOCAL-65	1 Male	08/06/1976	53714	DENTAL	FAMILY
820	8940	LOCAL-65	1 Male	02/12/1969	53538	DENTAL	FAMILY
820	8940	LOCAL-65	1 Female	08/28/1968	61080	DENTAL	SINGLE
820	8940	LOCAL-65	1 Male	06/03/1972	53714	DENTAL	SINGLE
820	8940	LOCAL-65	1 Male	11/08/1962	53955	DENTAL	SINGLE
820	8940	LOCAL-65	1 Male	07/20/1978	53598	DENTAL	FAMILY
820	8940	LOCAL-65	1 Male	11/21/1980	53703	DENTAL	SINGLE
820	8940	LOCAL-65	1 Male	12/15/1969	53711	DENTAL	FAMILY
820	8940	LOCAL-65	1 Male	03/05/1979	53719	DENTAL	FAMILY
820	8940	LOCAL-65	1 Male	03/23/1964	53583	DENTAL	FAMILY
820	9015	LOCAL-65	1 Male	11/15/1955	53575	DENTAL	FAMILY
820	9015	LOCAL-65	0.5 Female	08/15/1984	53704		
820	9015	LOCAL-65	1 Female	10/03/1966	53954	DENTAL	FAMILY
820	9015	LOCAL-65	1 Male	03/09/1987	53558	DENTAL	SINGLE
820	9015	LOCAL-65	0.5 Female	06/26/1997	53714	DENTAL	SINGLE
820	9015	LOCAL-65	0.5 Female	09/16/1963	53716	DENTAL	SINGLE
820	9015	LOCAL-65	1 Female	09/06/1966	53955	DENTAL	FAMILY
820	9015	LOCAL-65	1 Female	11/17/1962	53590	DENTAL	FAMILY
820	9015	LOCAL-65	0.5 Male	04/27/1969	53714		
820	9015	LOCAL-65	0.5 Male	11/12/1997	53960		
168	1890	LTE-ATTYS	1 Female	03/29/1990	53711		
096	1060	LTE-JC-705	1 Male	06/13/1982	53713		
096	1675	LTE-JC-705	1 Female	03/01/1987	53705		
510	5580	LTE-JC-705	1 Male	05/15/1973	53711		
510	5580	LTE-JC-705	1 Female	03/18/1981	53717		
024	0165	LTE-JC-720	1 Female	09/24/1998	53703		
024	0165	LTE-JC-720	1 Female	02/06/1969	53713		
024	0165	LTE-JC-720	1 Other	08/17/1998	80246		
060	0765	LTE-JC-720	1 Female	11/21/1981	53719		
060	0765	LTE-JC-720	1 Female	06/27/1985	53714		
096	1025	LTE-JC-720	1 Female	10/28/1948	53949		
096	1025	LTE-JC-720	1 Male	05/12/1999	53718		
096	1060	LTE-JC-720	1 Female	10/24/1964	53703		
096	1060	LTE-JC-720	1 Female	08/14/1964	53959		
096	1060	LTE-JC-720	1 Male	02/07/1997	53704		
096	1060	LTE-JC-720	1 Female	05/12/1963	53718		
096	1060	LTE-JC-720	1 Male	01/01/1983	53705		
096	1060	LTE-JC-720	1 Female	10/28/1968	53705		
096	1060	LTE-JC-720	1 Male	07/07/1997	53716		
096	1145	LTE-JC-720	1 Male	05/04/1990	53590		
096	1440	LTE-JC-720	1 Female	08/03/1997	53211		
096	1660	LTE-JC-720	1 Female	03/16/1975	53704		
168	1890	LTE-JC-720	1 Male	12/29/2000	53717		
168	1890	LTE-JC-720	1 Female	07/21/1948	53704		
168	1890	LTE-JC-720	1 Male	03/29/1964	53711		
168	1965	LTE-JC-720	1 Female	10/05/1956	53572		
168	1965	LTE-JC-720	1 Female	04/04/1952	53532		
288	2580	LTE-JC-720	1 Female	08/08/1964	53925		
288	2580	LTE-JC-720	1 Female	06/14/1956	53711		

316	2865	LTE-JC-720	1 Female	09/26/1943	53713
316	2865	LTE-JC-720	1 Not Specifie	12/24/1979	53703
330	2940	LTE-JC-720	1 Male	12/26/1963	53536
330	2940	LTE-JC-720	1 Male	08/15/1948	53558
330	2940	LTE-JC-720	1 Male	10/27/1989	53575
330	2940	LTE-JC-720	1 Male	02/02/1959	53523
330	2940	LTE-JC-720	1 Male	04/27/1956	53558
330	2940	LTE-JC-720	1 Female	12/05/1965	53925
330	2940	LTE-JC-720	1 Male	11/15/1954	53704
330	2940	LTE-JC-720	1 Male	08/29/1955	53534
351	3030	LTE-JC-720	1 Female	10/30/1950	53716
351	3030	LTE-JC-720	1 Female	05/29/1950	53716
351	3030	LTE-JC-720	1 Female	09/08/1962	53704
351	3030	LTE-JC-720	1 Male	09/02/1955	53711
351	3030	LTE-JC-720	1 Female	01/26/1959	53527
351	3030	LTE-JC-720	1 Female	06/12/1957	53716
351	3030	LTE-JC-720	1 Female	03/25/1948	53597
351	3030	LTE-JC-720	1 Female	09/15/1952	53575
351	3060	LTE-JC-720	1 Female	04/16/1991	53711
372	3255	LTE-JC-720	1 Male	08/31/1999	53558
372	3255	LTE-JC-720	1 Male	07/28/1981	53558
372	3255	LTE-JC-720	1 Female	11/02/1954	53714
372	3255	LTE-JC-720	1 Female	07/08/1960	53718
372	3255	LTE-JC-720	1 Female	08/24/1961	53532
372	3390	LTE-JC-720	1 Female	09/03/1952	53527
372	3390	LTE-JC-720	1 Male	10/10/1991	53132
372	3390	LTE-JC-720	1 Male	08/26/1988	53027
372	3390	LTE-JC-720	1 Male	06/01/1982	53559
372	3390	LTE-JC-720	1 Male	08/06/1986	53572
372	3390	LTE-JC-720	1 Female	06/03/1963	53716
372	3390	LTE-JC-720	1 Male	04/03/1981	53590
372	3390	LTE-JC-720	1 Male	12/03/1968	53066
372	3390	LTE-JC-720	1 Female	08/12/1953	53714
372	3390	LTE-JC-720	1 Female	05/20/1952	53558
372	3390	LTE-JC-720	1 Female	07/08/1983	53575
372	3390	LTE-JC-720	1 Male	10/05/1990	53221
385	3540	LTE-JC-720	1 Male	03/26/1986	53594
420	3990	LTE-JC-720	1 Male	09/09/1959	53570
420	3990	LTE-JC-720	1 Male	11/10/1986	53713
420	3990	LTE-JC-720	1 Male	02/07/1999	53703
420	3990	LTE-JC-720	1 Male	10/22/1992	53716
420	3990	LTE-JC-720	1 Female	03/05/1967	53713
420	3990	LTE-JC-720	1 Female	10/08/1965	53718
420	3990	LTE-JC-720	1 Female	02/29/1988	53593
420	4065	LTE-JC-720	1 Male	09/24/1986	53704
420	4065	LTE-JC-720	1 Female	04/15/1985	53719
420	4065	LTE-JC-720	1 Male	08/13/1983	53583
420	4065	LTE-JC-720	1 Female	10/31/1981	53545
420	4065	LTE-JC-720	1 Male	03/19/1972	53716

420	4065	LTE-JC-720	1 Female	08/14/1992	53718
420	4065	LTE-JC-720	1 Male	07/10/1997	53713
420	4065	LTE-JC-720	1 Female	01/11/1997	53719
420	4065	LTE-JC-720	1 Female	07/07/1986	53714
420	4065	LTE-JC-720	1 Male	02/24/1987	53562
420	4065	LTE-JC-720	1 Male	02/10/1967	52537
510	5565	LTE-JC-720	1 Female	01/15/1977	52172
510	5565	LTE-JC-720	1 Male	11/15/1960	53711
510	5565	LTE-JC-720	1 Female	03/30/1956	53590
515	6031	LTE-JC-720	1 Female	06/19/1989	53703
515	6031	LTE-JC-720	1 Female	12/15/1992	53704
515	6031	LTE-JC-720	1 Female	02/01/1986	53717
515	6031	LTE-JC-720	1 Female	02/11/1954	53704
515	6031	LTE-JC-720	1 Female	06/30/1993	53558
515	6031	LTE-JC-720	1 Female	01/13/1954	53704
515	6039	LTE-JC-720	1 Female	08/20/1970	53704
515	6039	LTE-JC-720	1 Female	09/22/1945	53528
515	6050	LTE-JC-720	1 Female	12/27/1977	53718
515	6054	LTE-JC-720	1 Female	10/26/1997	53726
515	6070	LTE-JC-720	1 Female	09/04/1996	53593
515	6072	LTE-JC-720	1 Female	12/29/1973	53590
515	6072	LTE-JC-720	1 Female	08/17/1979	53562
515	6072	LTE-JC-720	1 Female	12/01/1976	53562
515	6072	LTE-JC-720	1 Male	06/16/1970	53711
515	6080	LTE-JC-720	1 Female	07/28/1982	53590
520	6130	LTE-JC-720	1 Female	03/27/1990	53704
520	6130	LTE-JC-720	1 Male	02/14/1987	53703
520	6130	LTE-JC-720	1 Female	04/28/1996	53711
520	6130	LTE-JC-720	1 Female	03/12/1997	53726
520	6130	LTE-JC-720	1 Female	04/15/2001	53715
520	6130	LTE-JC-720	1 Female	08/21/1999	53711
520	6130	LTE-JC-720	1 Female	09/07/1974	53704
520	6130	LTE-JC-720	1 Female	07/21/1999	53559
520	6130	LTE-JC-720	1 Female	01/18/1956	53711
520	6130	LTE-JC-720	1 Female	06/25/1965	53527
520	6130	LTE-JC-720	1 Male	12/06/1979	53704
520	6130	LTE-JC-720	1 Male	12/10/1969	53711
520	6130	LTE-JC-720	1 Female	02/19/1956	53590
520	6130	LTE-JC-720	1 Female	07/28/1952	53593
520	6130	LTE-JC-720	1 Male	12/22/1987	53916
520	6130	LTE-JC-720	1 Female	05/26/1988	53703
520	6130	LTE-JC-720	1 Male	02/10/1991	53534
520	6130	LTE-JC-720	1 Female	11/20/1979	53597
520	6130	LTE-JC-720	1 Male	10/18/2002	53590
520	6130	LTE-JC-720	1 Male	07/15/1960	53593
520	6130	LTE-JC-720	1 Female	12/01/1998	34233
520	6130	LTE-JC-720	1 Female	08/27/1956	53705
520	6130	LTE-JC-720	1 Female	12/08/1968	53552
520	6130	LTE-JC-720	1 Female	12/30/1985	53566

520	6130	LTE-JC-720	1 Female	03/14/1950	53705
520	6130	LTE-JC-720	1 Male	04/25/1956	53711
520	6130	LTE-JC-720	1 Female	07/05/1984	53593
520	6130	LTE-JC-720	1 Female	11/17/1964	53726
520	6130	LTE-JC-720	1 Female	04/25/1991	53719
520	6130	LTE-JC-720	1 Female	11/20/1992	53562
520	6130	LTE-JC-720	1 Female	04/10/1978	53590
520	6130	LTE-JC-720	1 Female	11/28/1960	55118
520	6130	LTE-JC-720	1 Male	04/08/1980	53703
520	6130	LTE-JC-720	1 Male	02/14/1977	53589
520	6130	LTE-JC-720	1 Female	07/16/1997	53092
520	6130	LTE-JC-720	1 Female	06/25/1965	53713
520	6130	LTE-JC-720	1 Male	06/02/1976	53562
520	6130	LTE-JC-720	1 Female	11/08/1952	53711
520	6130	LTE-JC-720	1 Female	03/10/1950	53711
520	6130	LTE-JC-720	1 Male	10/10/1962	53590
520	6130	LTE-JC-720	1 Female	05/12/1998	53578
520	6130	LTE-JC-720	1 Female	04/27/1965	53597
520	6130	LTE-JC-720	1 Other	01/24/1994	53562
520	6130	LTE-JC-720	1 Female	12/28/1966	53717
520	6130	LTE-JC-720	1 Female	08/24/1978	53703
520	6130	LTE-JC-720	1 Female	08/14/1957	52003
520	6130	LTE-JC-720	1 Male	10/29/1991	53531
520	6130	LTE-JC-720	1 Male	01/18/1980	53718
520	6130	LTE-JC-720	1 Female	03/23/1974	53703
520	6130	LTE-JC-720	1 Female	10/12/1983	53711
520	6130	LTE-JC-720	1 Female	06/30/1998	53715
520	6130	LTE-JC-720	1 Female	09/25/1956	53714
520	6130	LTE-JC-720	1 Female	02/26/1982	53711
520	6130	LTE-JC-720	1 Male	07/31/1981	53558
520	6130	LTE-JC-720	1 Female	06/23/1981	53589
520	6130	LTE-JC-720	1 Male	10/14/1983	53532
520	6130	LTE-JC-720	1 Male	03/06/1992	53704
520	6130	LTE-JC-720	1 Female	02/26/1954	53715
520	6130	LTE-JC-720	1 Male	11/04/1985	53704
520	6130	LTE-JC-720	1 Female	12/02/1970	53589
520	6130	LTE-JC-720	1 Female	02/03/1977	53555
520	6130	LTE-JC-720	1 Female	07/10/2001	53593
520	6130	LTE-JC-720	1 Male	07/21/1998	53719
520	6130	LTE-JC-720	1 Male	07/21/1998	53719
520	6130	LTE-JC-720	1 Male	08/24/1999	53726
520	6130	LTE-JC-720	1 Female	06/26/1972	53597
520	6130	LTE-JC-720	1 Female	12/08/1965	53719
520	6130	LTE-JC-720	1 Female	09/25/1977	53562
520	6130	LTE-JC-720	1 Male	04/05/1968	53562
520	6130	LTE-JC-720	1 Female	09/30/1991	53711
520	6130	LTE-JC-720	1 Male	02/16/1985	53717
520	6130	LTE-JC-720	1 Female	09/30/1996	53562
520	6130	LTE-JC-720	1 Female	02/18/1986	53718

520	6130	LTE-JC-720	1 Female	07/07/1990	53711
520	6130	LTE-JC-720	1 Female	02/10/1957	53704
520	6130	LTE-JC-720	1 Female	03/01/1978	53563
520	6130	LTE-JC-720	1 Female	11/06/1960	53504
520	6130	LTE-JC-720	1 Female	04/15/1951	53562
520	6130	LTE-JC-720	1 Female	11/04/1998	53703
520	6130	LTE-JC-720	1 Male	04/26/1979	53713
520	6130	LTE-JC-720	1 Male	06/25/1953	53593
520	6130	LTE-JC-720	1 Female	12/17/1989	53713
520	6130	LTE-JC-720	1 Female	06/18/1958	53575
520	6130	LTE-JC-720	1 Female	06/01/1976	53590
520	6130	LTE-JC-720	1 Female	02/12/1991	53719
520	6130	LTE-JC-720	1 Female	03/11/1970	53704
520	6130	LTE-JC-720	1 Female	07/16/1951	53719
520	6130	LTE-JC-720	1 Female	12/21/1997	53532
520	6130	LTE-JC-720	1 Female	02/11/1978	53711
520	6130	LTE-JC-720	1 Female	02/08/1944	53593
524	6165	LTE-JC-720	1 Female	08/03/1990	53076
538	6190	LTE-JC-720	1 Female	10/27/1995	53718
564	6480	LTE-JC-720	1 Female	07/20/1995	53703
564	6480	LTE-JC-720	1 Male	04/27/1999	53189
564	6480	LTE-JC-720	1 Male	10/31/1998	53715
564	6585	LTE-JC-720	1 Female	04/16/1961	53559
564	6695	LTE-JC-720	1 Male	11/25/1963	53527
564	6695	LTE-JC-720	1 Male	08/19/1958	53536
564	6695	LTE-JC-720	1 Male	06/20/1962	53598
612	6915	LTE-JC-720	1 Female	12/02/1996	53711
612	6915	LTE-JC-720	1 Male	05/02/1992	53532
612	6915	LTE-JC-720	1 Female	08/04/1970	53711
612	6915	LTE-JC-720	1 Female	03/29/1969	53711
612	6915	LTE-JC-720	1 Female	12/11/1992	53916
648	6990	LTE-JC-720	1 Female	03/19/1958	53590
684	7665	LTE-JC-720	1 Male	05/11/1991	53704
684	7665	LTE-JC-720	1 Male	01/10/1998	54729
684	7665	LTE-JC-720	1 Female	04/30/1953	53714
684	7665	LTE-JC-720	1 Female	10/20/1992	53715
684	7665	LTE-JC-720	1 Female	07/06/1996	53562
684	7665	LTE-JC-720	1 Female	06/23/1999	53589
684	7665	LTE-JC-720	1 Female	01/09/2000	53705
684	7665	LTE-JC-720	1 Female	12/22/1997	53703
684	7665	LTE-JC-720	1 Female	08/21/1997	53551
684	7665	LTE-JC-720	1 Female	06/08/2000	53711
696	7730	LTE-JC-720	1 Female	05/29/2000	53711
696	7730	LTE-JC-720	1 Female	07/26/1959	53532
696	7740	LTE-JC-720	1 Female	12/13/1977	53916
696	7740	LTE-JC-720	1 Female	09/21/1966	53716
696	7740	LTE-JC-720	1 Male	06/17/1995	53703
696	7740	LTE-JC-720	1 Male	11/16/1948	53515
696	7740	LTE-JC-720	1 Male	03/02/1995	53714

696	7740	LTE-JC-720	1 Male	02/22/1943	53528
696	7740	LTE-JC-720	1 Male	06/15/1994	53590
696	7740	LTE-JC-720	1 Female	03/22/2001	53714
696	7740	LTE-JC-720	1 Male	08/30/1944	53704-2133
696	7740	LTE-JC-720	1 Male	06/28/1992	53515
696	7740	LTE-JC-720	1 Male	08/30/1957	53593
696	7740	LTE-JC-720	1 Male	11/10/2001	53716
696	7740	LTE-JC-720	1 Female	10/21/1997	53517
696	7740	LTE-JC-720	1 Female	01/27/1998	53703
696	7740	LTE-JC-720	1 Male	06/11/1986	53536
696	7740	LTE-JC-720	1 Male	04/28/1999	53719
696	7740	LTE-JC-720	1 Male	04/25/2001	53528
696	7740	LTE-JC-720	1 Male	05/03/2000	53589
696	7740	LTE-JC-720	1 Female	09/21/1948	53593
696	7740	LTE-JC-720	1 Male	03/29/1962	53590
696	7740	LTE-JC-720	1 Female	04/11/1996	53704
696	7740	LTE-JC-720	1 Male	03/14/1995	53597
696	7740	LTE-JC-720	1 Female	04/24/1995	53711
696	7740	LTE-JC-720	1 Male	09/16/1997	53575
696	7740	LTE-JC-720	1 Male	10/29/1999	53558
696	7740	LTE-JC-720	1 Male	02/25/1943	53705
696	7740	LTE-JC-720	1 Male	10/24/1988	53703
696	7740	LTE-JC-720	1 Male	06/21/1990	53715
696	7740	LTE-JC-720	1 Male	03/10/1977	53575
696	7740	LTE-JC-720	1 Male	02/08/1996	53705
696	7740	LTE-JC-720	1 Male	06/21/1963	53590
696	7740	LTE-JC-720	1 Female	02/16/2001	53715
696	7740	LTE-JC-720	1 Female	04/18/1998	53703
696	7740	LTE-JC-720	1 Male	04/26/1948	53704
696	7740	LTE-JC-720	1 Female	01/18/1999	53536
696	7740	LTE-JC-720	1 Male	11/19/1947	53593
696	7745	LTE-JC-720	1 Female	05/03/1973	53523
696	7745	LTE-JC-720	1 Male	04/13/1977	53558
696	7745	LTE-JC-720	1 Female	05/07/1994	53714
696	7745	LTE-JC-720	1 Male	12/17/1983	53716
696	7840	LTE-JC-720	1 Male	04/06/1964	53714
696	7840	LTE-JC-720	1 Male	12/27/1998	53531
696	7840	LTE-JC-720	1 Female	03/20/1989	53534
696	7840	LTE-JC-720	1 Male	03/30/2001	53527
696	7840	LTE-JC-720	1 Male	06/18/1959	53563
696	7840	LTE-JC-720	1 Male	12/28/1999	53598
696	7840	LTE-JC-720	1 Male	10/04/1958	53901
696	7840	LTE-JC-720	1 Male	03/16/1990	53523
696	7840	LTE-JC-720	1 Male	11/29/1999	53531
696	7840	LTE-JC-720	1 Male	02/12/1947	54449
696	7840	LTE-JC-720	1 Male	04/24/1998	53523
696	7840	LTE-JC-720	1 Male	11/20/1986	53523
696	7840	LTE-JC-720	1 Male	04/30/1952	53954
696	7840	LTE-JC-720	1 Male	12/31/1968	53704

696	7840	LTE-JC-720	1 Male	03/25/2000	53532
696	7840	LTE-JC-720	1 Male	09/15/1998	55947
696	7840	LTE-JC-720	1 Female	05/21/1986	53575
696	7840	LTE-JC-720	1 Male	03/23/1999	53531
696	7840	LTE-JC-720	1 Female	08/12/1998	53011
696	7840	LTE-JC-720	1 Female	07/30/1999	53575
696	7840	LTE-JC-720	1 Female	03/20/1996	53589
696	7840	LTE-JC-720	1 Male	09/22/1999	53726
696	7840	LTE-JC-720	1 Male	09/03/1946	53705
696	7840	LTE-JC-720	1 Female	05/01/1945	53704
696	7840	LTE-JC-720	1 Male	12/16/1950	53704
696	7840	LTE-JC-720	1 Female	11/15/1997	53590
720	7890	LTE-JC-720	1 Female	01/25/1998	53715
795	8675	LTE-JC-720	1 Male	11/08/1997	53715
564	6585	LTE-LOCAL-65	1 Male	01/11/1955	54457
564	6585	LTE-LOCAL-65	1 Male	05/28/1961	53572
684	7665	LTE-LOCAL-65	1 Female	07/03/1999	53534
684	7665	LTE-LOCAL-65	1 Female	12/13/1974	53558
684	7665	LTE-LOCAL-65	1 Female	06/02/1996	53527
684	7665	LTE-LOCAL-65	1 Female	05/13/1962	53711
684	7665	LTE-LOCAL-65	1 Female	11/26/1997	53715
684	7665	LTE-LOCAL-65	1 Female	08/09/1999	53154
684	7665	LTE-LOCAL-65	1 Female	05/11/1962	53558
684	7665	LTE-LOCAL-65	1 Female	10/27/1997	53558
684	7665	LTE-LOCAL-65	1 Female	04/21/1997	67846
684	7665	LTE-LOCAL-65	1 Female	05/27/1994	53705
684	7665	LTE-LOCAL-65	1 Female	01/23/1986	97210
795	8715	LTE-LOCAL-65	1 Male	04/09/1960	53711
515	6071	LTE-MGR	1 Female	02/20/2001	53715
515	6071	LTE-MGR	1 Female	11/30/2000	53716
515	6071	LTE-MGR	1 Female	12/24/1999	53726
515	6071	LTE-MGR	1 Male	10/13/2000	53717
515	6071	LTE-MGR	1 Female	01/10/1998	53715
515	6071	LTE-MGR	1 Female	09/13/1997	53521
515	6071	LTE-MGR	1 Female	01/25/1997	53705
515	6071	LTE-MGR	1 Female	05/18/1999	53703
515	6071	LTE-MGR	1 Female	01/09/1998	53726
515	6071	LTE-MGR	1 Female	01/23/2000	53715
515	6071	LTE-MGR	1 Male	10/12/1994	53705-3733
515	6071	LTE-MGR	1 Male	12/14/1998	53703
515	6071	LTE-MGR	1 Female	09/29/2000	53705
515	6071	LTE-MGR	1 Female	09/02/1997	53713
515	6071	LTE-MGR	1 Female	04/05/1998	53406
515	6071	LTE-MGR	1 Female	08/29/1958	53713
515	6071	LTE-MGR	1 Male	06/18/1999	53508
515	6071	LTE-MGR	1 Other	02/09/1997	53704
515	6071	LTE-MGR	1 Female	11/14/1997	53562
515	6071	LTE-MGR	1 Female	05/27/2000	53711
515	6071	LTE-MGR	1 Female	01/23/1998	53715

515	6071	LTE-MGR	1 Male	05/28/1996	53705
515	6071	LTE-MGR	1 Female	09/13/1997	53534
515	6071	LTE-MGR	1 Female	11/04/2000	10457
515	6071	LTE-MGR	1 Female	10/13/1998	53713
515	6071	LTE-MGR	1 Female	03/02/1998	53703
520	6130	LTE-MGR	1 Female	09/16/1975	53711
520	6130	LTE-MGR	1 Female	07/18/1982	53562
520	6130	LTE-MGR	1 Female	11/25/1965	53575
820	8790	LTE-MGR	1 Male	11/21/1994	53555
024	0165	LTE-PROF-REP	1 Female	09/07/1996	53705
024	0165	LTE-PROF-REP	1 Female	12/17/1995	53715
048	0615	LTE-PROF-REP	1 Female	12/11/1998	53715
096	0915	LTE-PROF-REP	1 Male	01/02/1947	53717
096	1440	LTE-PROF-REP	1 Male	12/25/1965	53597
096	1440	LTE-PROF-REP	1 Female	08/01/1955	53590
096	1440	LTE-PROF-REP	1 Male	07/27/1997	53572
330	2940	LTE-PROF-REP	1 Female	12/03/1994	53960
330	2940	LTE-PROF-REP	1 Female	01/13/1997	53562
330	2940	LTE-PROF-REP	1 Male	11/16/1990	53590
330	2940	LTE-PROF-REP	1 Male	04/12/1985	53536
330	2940	LTE-PROF-REP	1 Female	02/27/1986	53572
330	2940	LTE-PROF-REP	1 Female	08/24/1965	10308
330	2940	LTE-PROF-REP	1 Female	06/26/1996	53559
330	2940	LTE-PROF-REP	1 Female	08/12/1995	53589
330	2940	LTE-PROF-REP	1 Female	07/14/1973	53546
330	2940	LTE-PROF-REP	1 Female	08/29/1966	53590
351	3065	LTE-PROF-REP	1 Female	11/23/1945	53711
372	3315	LTE-PROF-REP	1 Female	07/12/1965	53716
385	3540	LTE-PROF-REP	1 Male	08/16/1961	53532
385	3540	LTE-PROF-REP	1 Male	04/16/1961	53581
385	3540	LTE-PROF-REP	1 Male	06/20/1961	53704
396	3765	LTE-PROF-REP	1 Female	08/20/1974	53597
396	3765	LTE-PROF-REP	1 Female	07/20/1971	53528
396	3765	LTE-PROF-REP	1 Female	12/16/1972	53521
396	3765	LTE-PROF-REP	1 Female	06/29/1971	53532
396	3765	LTE-PROF-REP	1 Male	02/25/1988	53528
396	3765	LTE-PROF-REP	1 Female	09/22/1971	53527
396	3765	LTE-PROF-REP	1 Male	11/19/1985	53515
396	3765	LTE-PROF-REP	1 Male	08/20/1966	53718
396	3765	LTE-PROF-REP	1 Male	08/27/1973	53531
515	6039	LTE-PROF-REP	1 Male	03/03/1952	53704
520	6130	LTE-PROF-REP	1 Female	05/28/1991	53703
520	6130	LTE-PROF-REP	1 Female	02/16/1973	53593
520	6130	LTE-PROF-REP	1 Female	02/09/1975	53705
520	6130	LTE-PROF-REP	1 Female	04/10/1998	53705
520	6130	LTE-PROF-REP	1 Female	09/02/1992	53562
520	6130	LTE-PROF-REP	1 Female	06/29/1992	53705
520	6130	LTE-PROF-REP	1 Female	09/03/1987	53233
520	6130	LTE-PROF-REP	1 Female	01/22/1995	53045

520	6130	LTE-PROF-REP	1 Female	12/27/1962	53711
520	6130	LTE-PROF-REP	1 Female	09/19/1984	54501
552	6390	LTE-PROF-REP	1 Female	09/26/1957	53704
696	7740	LTE-PROF-REP	1 Female	02/25/1996	53703
696	7740	LTE-PROF-REP	1 Male	12/02/1975	53705
696	7740	LTE-PROF-REP	1 Female	07/24/1994	53703
696	7740	LTE-PROF-REP	1 Male	07/11/1961	53705
696	7740	LTE-PROF-REP	1 Male	12/27/1982	53560
696	7745	LTE-PROF-REP	1 Male	03/27/1985	53714
096	1025	LTE-SPECIAL	1 Female	01/26/1962	53705
096	1060	LTE-SPECIAL	1 Female	09/26/1966	53716
096	1060	LTE-SPECIAL	1 Male	05/31/1979	53705
096	1060	LTE-SPECIAL	1 Female	03/18/1967	53704
096	1060	LTE-SPECIAL	1 Female	02/23/1964	53711
096	1060	LTE-SPECIAL	1 Male	01/08/1993	53711
096	1060	LTE-SPECIAL	1 Male	09/19/1985	53719
096	1060	LTE-SPECIAL	1 Male	05/31/1991	53711
096	1060	LTE-SPECIAL	1 Male	08/08/1962	53714
096	1060	LTE-SPECIAL	1 Male	06/15/1965	53704
096	1060	LTE-SPECIAL	1 Male	06/20/1965	53716
096	1060	LTE-SPECIAL	1 Female	11/12/1962	53703
096	1060	LTE-SPECIAL	1 Female	10/01/1965	53705
096	1060	LTE-SPECIAL	1 Male	03/24/1967	53716
096	1060	LTE-SPECIAL	1 Male	11/18/1991	53711
096	1060	LTE-SPECIAL	1 Female	06/16/1963	53705
096	1060	LTE-SPECIAL	1 Female	12/06/1958	53704
096	1060	LTE-SPECIAL	1 Female	08/07/1988	53705
096	1060	LTE-SPECIAL	1 Female	04/27/1958	53716
096	1060	LTE-SPECIAL	1 Male	03/14/1966	53705
096	1060	LTE-SPECIAL	1 Male	11/12/1994	53713
096	1070	LTE-SPECIAL	1 Male	07/19/1945	53703
096	1675	LTE-SPECIAL	1 Male	11/15/1992	53711
372	3255	LTE-SPECIAL	1 Male	10/17/1969	53713
515	6040	LTE-SPECIAL	1 Male	11/04/1966	53704
515	6040	LTE-SPECIAL	1 Male	05/21/1964	53711
515	6042	LTE-SPECIAL	1 Male	11/10/1997	53718
515	6042	LTE-SPECIAL	1 Female	06/03/1992	53713
515	6050	LTE-SPECIAL	1 Female	05/07/1967	53562
820	8940	LTE-SPECIAL	1 Female	10/16/1997	53562
820	8940	LTE-SPECIAL	1 Male	05/29/1998	53527
288	2735	LTE-STAFF-ATTY	1 Male	08/07/1985	53719
288	2735	LTE-STAFF-ATTY	1 Female	08/09/1995	53705
288	2735	LTE-STAFF-ATTY	1 Male	05/17/1990	53704
288	2735	LTE-STAFF-ATTY	1 Male	02/02/1995	53228
288	2735	LTE-STAFF-ATTY	1 Male	06/14/1988	53705
288	2735	LTE-STAFF-ATTY	1 Male	08/16/1995	53704
351	3060	LTE-SW-2634	1 Female	11/06/1995	53703
420	3840	LTE-SW-2634	1 Male	03/04/1990	53589
420	3840	LTE-SW-2634	1 Male	12/13/1996	53186

420	3840	LTE-SW-2634	1 Male	09/30/1985	53718		
420	3840	LTE-SW-2634	1 Female	07/28/1984	53716		
420	3840	LTE-SW-2634	1 Male	09/13/1998	53726		
420	3840	LTE-SW-2634	1 Female	01/07/1997	53705		
515	6040	LTE-SW-2634	1 Female	09/05/1962	53704		
515	6054	LTE-SW-2634	1 Female	03/04/1958	53532		
515	6072	LTE-SW-2634	1 Female	01/16/1962	53536		
515	6072	LTE-SW-2634	1 Female	09/19/1948	53589		
515	6072	LTE-SW-2634	1 Female	08/02/1974	53562		
510	5580	LTE-UPQHC-119	1 Female	08/23/1961	53716		
510	6120	LTE-UPQHC-119	1 Female	08/31/1991	53716		
510	6120	LTE-UPQHC-119	1 Female	09/08/1987	53217		
510	6120	LTE-UPQHC-119	1 Female	04/11/1996	54401		
520	6130	LTE-UPQHC-119	1 Female	12/19/1974	53711		
520	6130	LTE-UPQHC-119	1 Female	01/29/1948	53713		
372	3255	LTE-WPPA-NON	1 Male	05/27/1947	53532		
372	3255	LTE-WPPA-NON	1 Male	10/18/1977	53701		
720	7890	MGR-AGENTS	1 Female	10/13/1961	53718	DENTAL	FAMILY
048	0390	MGR-CONTRAC	1 Female	05/20/1971	53593	DENTAL	FAMILY
055	0700	MGR-CONTRAC	1 Male	11/14/1973	53716	DENTAL	FAMILY
096	0915	MGR-CONTRAC	1 Male	11/15/1962	53593	DENTAL	FAMILY
168	1815	MGR-CONTRAC	1 Female	02/16/1949	53705	DENTAL	FAMILY
330	2940	MGR-CONTRAC	1 Other	09/09/1985	53704	DENTAL	SINGLE
330	2940	MGR-CONTRAC	1 Female	03/19/1975	53711	DENTAL	SINGLE
330	2940	MGR-CONTRAC	1 Male	05/26/1971	53716	DENTAL	FAMILY
385	3540	MGR-CONTRAC	1 Male	01/27/1973	53714	DENTAL	FAMILY
396	3615	MGR-CONTRAC	1 Male	10/21/1953	53717	DENTAL	FAMILY
420	3840	MGR-CONTRAC	1 Male	03/14/1964	53502	DENTAL	SINGLE
515	6039	MGR-CONTRAC	1 Female	02/08/1972	53572	DENTAL	FAMILY
520	6130	MGR-CONTRAC	1 Female	05/25/1976	53705	DENTAL	FAMILY
524	6165	MGR-CONTRAC	1 Male	05/13/1970	53575	DENTAL	FAMILY
538	6190	MGR-CONTRAC	1 Male	06/07/1968	53714	DENTAL	FAMILY
564	6480	MGR-CONTRAC	1 Male	09/12/1982	53562	DENTAL	FAMILY
612	6915	MGR-CONTRAC	1 Female	10/14/1968	53590	DENTAL	FAMILY
648	6990	MGR-CONTRAC	1 Male	02/12/1976	53593	DENTAL	FAMILY
684	7665	MGR-CONTRAC	1 Female	04/14/1970	53719	DENTAL	FAMILY
696	7730	MGR-CONTRAC	1 Female	11/08/1977	53714		
795	8355	MGR-CONTRAC	1 Male	05/02/1964	53558	DENTAL	FAMILY
820	8790	MGR-CONTRAC	1 Female	11/23/1961	53590	DENTAL	FAMILY
820	8790	MGR-CONTRAC	1 Male	06/19/1968	53532	DENTAL	FAMILY
048	0240	MGR-ELECTED	1 Male	10/24/1960	53718	DENTAL	FAMILY
060	0765	MGR-ELECTED	1 Male	04/29/1969	53703	DENTAL	FAMILY
120	1755	MGR-ELECTED	1 Male	02/12/1979	53711	DENTAL	SINGLE
180	2040	MGR-ELECTED	1 Female	09/12/1960	53704	DENTAL	FAMILY
288	2580	MGR-ELECTED	1 Male	03/13/1963	53705	DENTAL	FAMILY
372	3165	MGR-ELECTED	1 Male	05/04/1959	53717	DENTAL	FAMILY
024	0165	MGR-PROF	1 Female	07/11/1962	53711	DENTAL	FAMILY
024	0165	MGR-PROF	1 Female	06/29/1985	53714	DENTAL	FAMILY
024	0165	MGR-PROF	1 Female	04/23/1968	53705	DENTAL	FAMILY

024	0165	MGR-PROF	1 Female	01/07/1978	53719	DENTAL	FAMILY
024	0165	MGR-PROF	1 Female	03/18/1961	53705	DENTAL	FAMILY
048	0240	MGR-PROF	1 Male	04/22/1965	53717	DENTAL	FAMILY
048	0240	MGR-PROF	1 Male	12/17/1968	53590	DENTAL	FAMILY
048	0240	MGR-PROF	1 Female	06/06/1995	53705	DENTAL	SINGLE
048	0240	MGR-PROF	1 Male	12/21/1976	53508	DENTAL	FAMILY
048	0430	MGR-PROF	1 Female	04/15/1965	53705	DENTAL	FAMILY
048	0615	MGR-PROF	1 Male	01/02/1959	53703-1721	DENTAL	FAMILY
055	0700	MGR-PROF	1 Female	09/11/1968	53704	DENTAL	FAMILY
055	0700	MGR-PROF	1 Female	05/17/1965	53718	DENTAL	SINGLE
060	0765	MGR-PROF	1 Female	06/01/1970	53575	DENTAL	FAMILY
096	0915	MGR-PROF	1 Male	02/08/1984	53719	DENTAL	FAMILY
096	0915	MGR-PROF	1 Female	10/25/1970	53960	DENTAL	FAMILY
096	0915	MGR-PROF	1 Male	07/23/1966	53593	DENTAL	FAMILY
096	0915	MGR-PROF	1 Male	11/30/1954	53703	DENTAL	FAMILY
096	1025	MGR-PROF	1 Male	06/14/1962	53703	DENTAL	FAMILY
096	1025	MGR-PROF	1 Male	10/31/1975	53590		
096	1060	MGR-PROF	1 Female	09/16/1975	53718		
096	1230	MGR-PROF	1 Female	06/25/1959	53911	DENTAL	FAMILY
096	1230	MGR-PROF	1 Male	10/15/1962	53714	DENTAL	FAMILY
096	1230	MGR-PROF	1 Female	07/14/1973	53717	DENTAL	SINGLE
096	1230	MGR-PROF	1 Male	07/25/1969	53572	DENTAL	FAMILY
096	1230	MGR-PROF	1 Female	05/24/1985	53593	DENTAL	FAMILY
096	1365	MGR-PROF	1 Female	10/07/1963	53562	DENTAL	FAMILY
096	1365	MGR-PROF	1 Female	08/03/1970	53548	DENTAL	FAMILY
096	1440	MGR-PROF	1 Male	11/18/1961	53703	DENTAL	FAMILY
096	1440	MGR-PROF	1 Male	09/23/1982	53532	DENTAL	FAMILY
096	1440	MGR-PROF	1 Male	06/26/1948	53590	DENTAL	FAMILY
096	1440	MGR-PROF	1 Male	06/14/1986	53532	DENTAL	FAMILY
096	1675	MGR-PROF	1 Female	02/25/1987	53717	DENTAL	SINGLE
096	1675	MGR-PROF	1 Male	04/26/1963	53562	DENTAL	SINGLE
096	1675	MGR-PROF	1 Male	11/07/1967	53572	DENTAL	SINGLE
120	1755	MGR-PROF	1 Female	10/08/1962	53711	DENTAL	SINGLE
168	1815	MGR-PROF	1 Male	09/16/1952	53704	DENTAL	FAMILY
168	1815	MGR-PROF	1 Male	07/26/1975	53705	DENTAL	FAMILY
168	1815	MGR-PROF	1 Female	08/03/1971	53590	DENTAL	FAMILY
168	1890	MGR-PROF	1 Female	11/15/1966	53719	DENTAL	FAMILY
168	1965	MGR-PROF	1 Female	11/19/1966	53504	DENTAL	SINGLE
168	1965	MGR-PROF	1 Female	06/24/1964	53572	DENTAL	FAMILY
168	1965	MGR-PROF	1 Female	02/14/1974	53574	DENTAL	FAMILY
168	1965	MGR-PROF	1 Female	10/18/1983	53711	DENTAL	FAMILY
180	2040	MGR-PROF	1 Female	04/05/1962	53597	DENTAL	FAMILY
288	2580	MGR-PROF	1 Female	02/24/1971	53532	DENTAL	FAMILY
288	2580	MGR-PROF	1 Female	01/27/1960	53704	DENTAL	FAMILY
288	2580	MGR-PROF	1 Female	03/06/1973	53597	DENTAL	FAMILY
288	2580	MGR-PROF	1 Female	04/21/1961	53532	DENTAL	SINGLE
288	2600	MGR-PROF	1 Male	02/07/1958	53575	DENTAL	FAMILY
288	2600	MGR-PROF	1 Female	01/05/1974	53590	DENTAL	FAMILY
316	2865	MGR-PROF	1 Female	11/20/1965	53704	DENTAL	FAMILY

330	2940	MGR-PROF	1 Female	04/27/1964	53562	DENTAL	SINGLE
330	2940	MGR-PROF	1 Female	07/24/1977	53598	DENTAL	FAMILY
330	2940	MGR-PROF	1 Male	05/20/1961	53534	DENTAL	FAMILY
351	3030	MGR-PROF	1 Female	06/03/1969	53583	DENTAL	FAMILY
351	3030	MGR-PROF	1 Female	06/23/1967	53527	DENTAL	FAMILY
351	3045	MGR-PROF	1 Female	12/18/1979	53703	DENTAL	FAMILY
351	3060	MGR-PROF	1 Female	05/11/1970	53589	DENTAL	FAMILY
351	3060	MGR-PROF	1 Female	05/08/1968	53563	DENTAL	FAMILY
351	3065	MGR-PROF	1 Female	06/25/1960	53711	DENTAL	SINGLE
351	3075	MGR-PROF	1 Male	05/18/1969	53190	DENTAL	FAMILY
372	3165	MGR-PROF	1 Male	07/31/1970	53593	DENTAL	FAMILY
372	3165	MGR-PROF	1 Male	10/31/1972	53558	DENTAL	FAMILY
372	3165	MGR-PROF	1 Female	07/18/1972	53718		
372	3255	MGR-PROF	1 Female	01/08/1982	53590	DENTAL	SINGLE
372	3255	MGR-PROF	1 Male	04/29/1968	53593	DENTAL	FAMILY
372	3315	MGR-PROF	1 Female	01/02/1973	53559	DENTAL	FAMILY
372	3315	MGR-PROF	1 Female	10/22/1977	53718	DENTAL	SINGLE
372	3315	MGR-PROF	1 Male	10/29/1971	53551	DENTAL	FAMILY
372	3390	MGR-PROF	1 Female	02/28/1965	53593	DENTAL	FAMILY
372	3390	MGR-PROF	1 Female	04/06/1963	53531	DENTAL	FAMILY
385	3540	MGR-PROF	1 Female	08/30/1969	53529		
385	3540	MGR-PROF	1 Female	07/16/1965	53574	DENTAL	FAMILY
385	3540	MGR-PROF	1 Female	05/21/1985	53572	DENTAL	SINGLE
385	3540	MGR-PROF	1 Male	03/14/1974	53536	DENTAL	FAMILY
385	3540	MGR-PROF	1 Male	07/27/1968	53704	DENTAL	SINGLE
385	3540	MGR-PROF	1 Male	06/18/1968	53572	DENTAL	FAMILY
385	3540	MGR-PROF	1 Female	07/19/1968	53563	DENTAL	FAMILY
385	3540	MGR-PROF	1 Male	06/16/1964	53716	DENTAL	FAMILY
385	3540	MGR-PROF	1 Male	07/09/1966	53562-3264	DENTAL	FAMILY
385	3540	MGR-PROF	1 Female	04/17/1992	53589	DENTAL	SINGLE
385	3540	MGR-PROF	1 Female	03/15/1983	53527	DENTAL	SINGLE
385	3540	MGR-PROF	1 Male	03/20/1960	53508	DENTAL	FAMILY
396	3615	MGR-PROF	1 Female	03/11/1977	53597	DENTAL	FAMILY
396	3690	MGR-PROF	1 Female	07/26/1971	53589	DENTAL	SINGLE
420	3840	MGR-PROF	1 Female	12/08/1963	53713	DENTAL	FAMILY
420	3990	MGR-PROF	1 Male	08/30/1972	53717	DENTAL	SINGLE
510	5565	MGR-PROF	1 Male	09/18/1967	53593	DENTAL	FAMILY
510	5565	MGR-PROF	1 Female	07/28/1972	53574	DENTAL	FAMILY
510	5565	MGR-PROF	1 Female	01/27/1970	53719	DENTAL	FAMILY
510	5565	MGR-PROF	1 Female	05/26/1964	53590	DENTAL	FAMILY
510	5580	MGR-PROF	1 Female	11/03/1961	53719	DENTAL	SINGLE
510	5580	MGR-PROF	1 Female	06/25/1965	53508	DENTAL	FAMILY
510	5580	MGR-PROF	1 Female	05/31/1977	53593	DENTAL	FAMILY
510	5580	MGR-PROF	1 Female	07/12/1973	53566	DENTAL	FAMILY
510	5580	MGR-PROF	1 Male	08/19/1976	53575	DENTAL	FAMILY
510	5580	MGR-PROF	1 Female	06/05/1986	53516	DENTAL	FAMILY
510	5580	MGR-PROF	1 Female	02/13/1975	53717	DENTAL	FAMILY
515	6039	MGR-PROF	1 Female	11/24/1982	53901	DENTAL	FAMILY
515	6039	MGR-PROF	1 Female	03/19/1981	53590	DENTAL	SINGLE

515	6039	MGR-PROF	1 Female	04/20/1980	53704	DENTAL	FAMILY
515	6039	MGR-PROF	1 Female	12/22/1968	53597	DENTAL	FAMILY
515	6039	MGR-PROF	1 Female	06/18/1974	53704	DENTAL	SINGLE
515	6039	MGR-PROF	1 Male	02/05/1974	53590	DENTAL	FAMILY
515	6039	MGR-PROF	1 Male	11/22/1984	53704	DENTAL	FAMILY
515	6039	MGR-PROF	1 Female	05/28/1958	53590	DENTAL	SINGLE
515	6039	MGR-PROF	1 Female	10/29/1961	53704	DENTAL	FAMILY
515	6039	MGR-PROF	1 Female	02/27/1972	53590	DENTAL	FAMILY
515	6039	MGR-PROF	1 Female	12/03/1986	53590	DENTAL	SINGLE
515	6039	MGR-PROF	1 Female	12/09/1977	53527	DENTAL	FAMILY
515	6040	MGR-PROF	1 Female	06/04/1957	53590	DENTAL	FAMILY
515	6040	MGR-PROF	1 Female	06/10/1961	53717	DENTAL	FAMILY
515	6040	MGR-PROF	1 Male	07/13/1966	53536	DENTAL	FAMILY
515	6040	MGR-PROF	1 Female	08/16/1969	53704	DENTAL	FAMILY
515	6040	MGR-PROF	1 Female	07/09/1955	53718	DENTAL	SINGLE
515	6040	MGR-PROF	1 Female	04/24/1978	53704	DENTAL	FAMILY
515	6041	MGR-PROF	1 Female	09/08/1962	53703	DENTAL	FAMILY
515	6042	MGR-PROF	1 Female	07/28/1984	53527	DENTAL	FAMILY
515	6042	MGR-PROF	1 Male	09/14/1968	53704	DENTAL	FAMILY
515	6042	MGR-PROF	1 Female	08/30/1972	53549	DENTAL	FAMILY
515	6042	MGR-PROF	1 Male	11/14/1964	53575	DENTAL	FAMILY
515	6042	MGR-PROF	1 Female	06/04/1969	53704	DENTAL	FAMILY
515	6043	MGR-PROF	1 Female	02/19/1969	53562	DENTAL	FAMILY
515	6043	MGR-PROF	1 Female	06/09/1962	53590	DENTAL	SINGLE
515	6044	MGR-PROF	1 Male	03/01/1971	53551	DENTAL	FAMILY
515	6044	MGR-PROF	1 Female	01/09/1977	53716	DENTAL	FAMILY
515	6045	MGR-PROF	1 Female	07/18/1976	53711	DENTAL	FAMILY
515	6045	MGR-PROF	1 Female	08/17/1972	53715	DENTAL	FAMILY
515	6045	MGR-PROF	1 Female	11/18/1967	53532	DENTAL	SINGLE
515	6046	MGR-PROF	1 Female	07/17/1979	53558	DENTAL	SINGLE
515	6046	MGR-PROF	1 Female	06/20/1977	53590	DENTAL	FAMILY
515	6046	MGR-PROF	1 Male	09/04/1959	53528	DENTAL	FAMILY
515	6048	MGR-PROF	1 Female	09/14/1958	53593	DENTAL	SINGLE
515	6050	MGR-PROF	1 Female	06/27/1960	53711	DENTAL	FAMILY
515	6050	MGR-PROF	1 Male	11/29/1965	53590	DENTAL	FAMILY
515	6050	MGR-PROF	1 Male	08/04/1968	53562	DENTAL	FAMILY
515	6050	MGR-PROF	1 Female	07/20/1960	53704	DENTAL	FAMILY
515	6050	MGR-PROF	1 Female	02/05/1963	53507	DENTAL	FAMILY
515	6050	MGR-PROF	1 Female	09/23/1963	53704	DENTAL	FAMILY
515	6053	MGR-PROF	1 Female	08/28/1970	53704	DENTAL	SINGLE
515	6053	MGR-PROF	1 Female	12/29/1973	53515	DENTAL	FAMILY
515	6053	MGR-PROF	1 Female	09/09/1982	53718	DENTAL	SINGLE
515	6053	MGR-PROF	1 Female	06/25/1964	53562	DENTAL	FAMILY
515	6053	MGR-PROF	1 Female	08/17/1971	53597	DENTAL	SINGLE
515	6053	MGR-PROF	1 Female	01/06/1962	53716	DENTAL	FAMILY
515	6054	MGR-PROF	1 Female	02/07/1983	53716	DENTAL	FAMILY
515	6054	MGR-PROF	1 Female	06/06/1972	53718	DENTAL	FAMILY
515	6054	MGR-PROF	1 Female	04/02/1984	53711	DENTAL	FAMILY
515	6054	MGR-PROF	1 Female	01/11/1984	53533	DENTAL	FAMILY

515	6054	MGR-PROF	1 Female	06/18/1974	53704	DENTAL	FAMILY
515	6054	MGR-PROF	1 Female	01/18/1975	53716	DENTAL	FAMILY
515	6054	MGR-PROF	1 Female	04/16/1963	53508	DENTAL	FAMILY
515	6054	MGR-PROF	1 Female	10/28/1962	53718	DENTAL	SINGLE
515	6054	MGR-PROF	1 Female	05/11/1964	53714	DENTAL	FAMILY
515	6060	MGR-PROF	1 Female	09/22/1982	53545	DENTAL	FAMILY
515	6060	MGR-PROF	1 Male	09/16/1956	53711	DENTAL	FAMILY
515	6062	MGR-PROF	1 Female	07/04/1968	53559	DENTAL	FAMILY
515	6062	MGR-PROF	1 Male	04/14/1976	53704	DENTAL	FAMILY
515	6062	MGR-PROF	1 Male	09/11/1970	53719	DENTAL	SINGLE
515	6062	MGR-PROF	1 Female	05/17/1964	53527	DENTAL	FAMILY
515	6062	MGR-PROF	1 Female	08/05/1976	53527	DENTAL	FAMILY
515	6062	MGR-PROF	1 Female	03/01/1967	53579-9786	DENTAL	FAMILY
515	6062	MGR-PROF	1 Female	04/25/1967	53718	DENTAL	FAMILY
515	6062	MGR-PROF	1 Female	05/26/1970	53559-0241	DENTAL	FAMILY
515	6062	MGR-PROF	1 Male	12/07/1963	53955	DENTAL	FAMILY
515	6062	MGR-PROF	0.75 Female	12/30/1968	53713	DENTAL	FAMILY
515	6062	MGR-PROF	1 Female	09/01/1972	53590	DENTAL	FAMILY
515	6070	MGR-PROF	1 Female	06/24/1961	53704	DENTAL	FAMILY
515	6070	MGR-PROF	1 Male	07/06/1957	53704		
515	6070	MGR-PROF	1 Female	03/19/1984	53532	DENTAL	FAMILY
515	6070	MGR-PROF	1 Female	04/27/1965	53558	DENTAL	FAMILY
515	6072	MGR-PROF	1 Male	02/27/1976	53711	DENTAL	FAMILY
515	6072	MGR-PROF	0.8 Female	08/09/1969	53703	DENTAL	FAMILY
515	6072	MGR-PROF	1 Female	04/26/1965	53714	DENTAL	FAMILY
515	6073	MGR-PROF	1 Female	04/06/1961	53593	DENTAL	FAMILY
515	6074	MGR-PROF	1 Female	08/13/1975	53704	DENTAL	FAMILY
515	6080	MGR-PROF	1 Female	05/14/1981	53562	DENTAL	FAMILY
520	6130	MGR-PROF	1 Female	02/11/1985	53704	DENTAL	SINGLE
520	6130	MGR-PROF	1 Female	01/19/1988	53703	DENTAL	SINGLE
520	6130	MGR-PROF	1 Female	10/05/1966	53590	DENTAL	SINGLE
520	6130	MGR-PROF	1 Female	03/28/1984	53705	DENTAL	FAMILY
520	6130	MGR-PROF	1 Male	12/19/1969	53714	DENTAL	FAMILY
520	6130	MGR-PROF	1 Female	02/18/1988	53711	DENTAL	FAMILY
520	6130	MGR-PROF	1 Female	05/15/1978	53590	DENTAL	FAMILY
520	6130	MGR-PROF	1 Female	10/07/1974	53562	DENTAL	FAMILY
520	6130	MGR-PROF	1 Female	11/20/1964	53715	DENTAL	SINGLE
520	6130	MGR-PROF	1 Female	12/02/1982	53593	DENTAL	FAMILY
520	6130	MGR-PROF	1 Female	01/19/1981	53562	DENTAL	FAMILY
520	6130	MGR-PROF	1 Male	12/13/1983	53705	DENTAL	FAMILY
520	6130	MGR-PROF	1 Female	08/04/1983	53593	DENTAL	FAMILY
520	6130	MGR-PROF	1 Female	09/22/1992	53718	DENTAL	SINGLE
520	6130	MGR-PROF	1 Male	01/17/1972	53704	DENTAL	FAMILY
520	6130	MGR-PROF	1 Male	07/05/1966	53704	DENTAL	FAMILY
520	6130	MGR-PROF	1 Female	06/26/1990	53711	DENTAL	FAMILY
538	6190	MGR-PROF	1 Male	02/07/1976	53558	DENTAL	FAMILY
538	6315	MGR-PROF	1 Male	12/23/1965	53705	DENTAL	FAMILY
564	6480	MGR-PROF	1 Female	07/12/1988	53521	DENTAL	FAMILY
564	6585	MGR-PROF	1 Male	01/13/1974	53558	DENTAL	FAMILY

564	6695	MGR-PROF	1 Male	10/27/1980	53572	DENTAL	FAMILY
612	6915	MGR-PROF	1 Female	08/29/1965	53718	DENTAL	FAMILY
648	6990	MGR-PROF	1 Male	05/13/1966	53590	DENTAL	FAMILY
648	6990	MGR-PROF	1 Female	04/07/1982	53703	DENTAL	FAMILY
648	6990	MGR-PROF	1 Male	09/27/1963	53718	DENTAL	FAMILY
648	6990	MGR-PROF	1 Female	05/15/1992	53703		
684	7665	MGR-PROF	1 Male	08/27/1973	53590	DENTAL	FAMILY
684	7665	MGR-PROF	1 Female	03/05/1976	53711	DENTAL	FAMILY
684	7665	MGR-PROF	1 Female	08/24/1980	53575	DENTAL	FAMILY
684	7665	MGR-PROF	1 Male	08/03/1979	53704	DENTAL	FAMILY
684	7665	MGR-PROF	1 Female	12/30/1970	53718	DENTAL	SINGLE
684	7665	MGR-PROF	1 Female	07/02/1981	53703	DENTAL	SINGLE
684	7665	MGR-PROF	1 Female	04/30/1976	53711	DENTAL	SINGLE
696	7730	MGR-PROF	1 Male	05/11/1984	53598	DENTAL	FAMILY
696	7730	MGR-PROF	1 Male	02/18/1983	53703	DENTAL	FAMILY
696	7740	MGR-PROF	1 Male	05/17/1966	53951-9782	DENTAL	FAMILY
696	7740	MGR-PROF	1 Male	01/27/1964	53589	DENTAL	FAMILY
696	7740	MGR-PROF	1 Male	07/28/1974	53597	DENTAL	FAMILY
696	7740	MGR-PROF	1 Female	05/02/1985	53590	DENTAL	FAMILY
696	7745	MGR-PROF	1 Female	04/23/1992	53558	DENTAL	FAMILY
696	7810	MGR-PROF	1 Male	04/11/1974	53593	DENTAL	SINGLE
696	7810	MGR-PROF	1 Female	12/16/1976	53718	DENTAL	FAMILY
696	7840	MGR-PROF	1 Male	07/21/1955	53523	DENTAL	SINGLE
720	7890	MGR-PROF	1 Female	02/16/1972	53713	DENTAL	FAMILY
795	8355	MGR-PROF	1 Male	07/01/1967	53704	DENTAL	FAMILY
795	8355	MGR-PROF	1 Male	11/24/1959	53575	DENTAL	FAMILY
795	8355	MGR-PROF	1 Female	07/26/1963	53502	DENTAL	FAMILY
795	8355	MGR-PROF	1 Male	06/22/1968	53575	DENTAL	FAMILY
795	8355	MGR-PROF	1 Male	11/12/1978	53955	DENTAL	SINGLE
795	8355	MGR-PROF	1 Female	03/30/1965	53575	DENTAL	FAMILY
795	8355	MGR-PROF	1 Male	04/11/1958	53713	DENTAL	FAMILY
795	8355	MGR-PROF	1 Male	03/02/1965	53593	DENTAL	FAMILY
795	8355	MGR-PROF	1 Male	10/21/1967	53716	DENTAL	FAMILY
795	8355	MGR-PROF	1 Male	03/10/1965	53508	DENTAL	FAMILY
795	8355	MGR-PROF	1 Male	02/11/1976	53527	DENTAL	FAMILY
795	8675	MGR-PROF	1 Male	07/05/1970	53558	DENTAL	FAMILY
820	8790	MGR-PROF	1 Female	09/19/1968	53716	DENTAL	SINGLE
820	8790	MGR-PROF	1 Male	04/12/1959	53925	DENTAL	FAMILY
820	8790	MGR-PROF	1 Male	03/02/1961	53555	DENTAL	FAMILY
820	8790	MGR-PROF	1 Male	09/23/1989	53704	DENTAL	SINGLE
820	8790	MGR-PROF	1 Male	02/26/1955	53593	DENTAL	FAMILY
820	8865	MGR-PROF	1 Male	06/06/1964	53558	DENTAL	FAMILY
820	8865	MGR-PROF	1 Male	04/15/1967	53598	DENTAL	FAMILY
820	8940	MGR-PROF	1 Male	12/11/1965	53589	DENTAL	FAMILY
820	9015	MGR-PROF	1 Male	07/28/1988	53718	DENTAL	SINGLE
820	9090	MGR-PROF	1 Male	08/08/1996	53590	DENTAL	SINGLE
820	9090	MGR-PROF	1 Male	03/06/1981	53704	DENTAL	SINGLE
820	9090	MGR-PROF	1 Male	09/01/1995	53578	DENTAL	FAMILY
820	9090	MGR-PROF	1 Male	01/17/1983	53594	DENTAL	FAMILY

820	9090	MGR-PROF	1 Male	01/05/1993	53718	DENTAL	FAMILY
820	9090	MGR-PROF	1 Male	07/15/1985	53555	DENTAL	SINGLE
820	9090	MGR-PROF	1 Male	07/02/1984	53534	DENTAL	FAMILY
820	9090	MGR-PROF	1 Male	05/26/1984	53532		
024	0165	PROF-REP	1 Female	11/13/1986	53719	DENTAL	SINGLE
055	0700	PROF-REP	0.5 Female	12/19/1982	53527		
055	0700	PROF-REP	1 Male	09/04/1965	53704	DENTAL	FAMILY
055	0700	PROF-REP	1 Male	07/24/1983	53711	DENTAL	SINGLE
060	0765	PROF-REP	1 Female	06/20/1985	53538	DENTAL	FAMILY
096	0915	PROF-REP	1 Male	06/02/1963	53523	DENTAL	FAMILY
096	1230	PROF-REP	1 Male	11/11/1968	53538	DENTAL	FAMILY
096	1230	PROF-REP	1 Male	12/12/1957	53713	DENTAL	SINGLE
096	1230	PROF-REP	1 Female	08/01/1965	53704	DENTAL	SINGLE
096	1365	PROF-REP	1 Female	11/27/1962	53503	DENTAL	FAMILY
096	1365	PROF-REP	1 Female	06/19/1954	53597	DENTAL	FAMILY
096	1365	PROF-REP	1 Male	06/02/1995	53511	DENTAL	SINGLE
096	1365	PROF-REP	1 Female	01/29/1962	53536	DENTAL	SINGLE
096	1365	PROF-REP	1 Female	07/19/1991	53563	DENTAL	FAMILY
096	1440	PROF-REP	1 Male	11/17/1973	53528	DENTAL	FAMILY
096	1440	PROF-REP	1 Male	11/09/1962	53532	DENTAL	FAMILY
096	1440	PROF-REP	1 Male	05/14/1958	53719	DENTAL	FAMILY
096	1440	PROF-REP	1 Male	04/21/1993	53703	DENTAL	SINGLE
096	1440	PROF-REP	1 Not Specifie	04/13/1964	53719	DENTAL	FAMILY
096	1440	PROF-REP	1 Male	09/28/1972	53590	DENTAL	FAMILY
096	1440	PROF-REP	1 Male	08/20/1962	53597	DENTAL	FAMILY
096	1440	PROF-REP	1 Male	12/15/1975	53224	DENTAL	FAMILY
096	1440	PROF-REP	1 Not Specifie	03/17/1988	53716	DENTAL	SINGLE
096	1440	PROF-REP	1 Male	03/09/1965	53590	DENTAL	SINGLE
096	1440	PROF-REP	1 Male	12/25/1979	53532	DENTAL	FAMILY
096	1440	PROF-REP	1 Female	11/29/1985	53719	DENTAL	SINGLE
096	1440	PROF-REP	1 Female	08/30/1962	53590	DENTAL	FAMILY
096	1440	PROF-REP	1 Male	11/04/1983	53527	DENTAL	FAMILY
096	1440	PROF-REP	1 Male	07/31/1984	53714	DENTAL	SINGLE
096	1440	PROF-REP	1 Male	02/21/1976	53716	DENTAL	FAMILY
096	1440	PROF-REP	1 Male	05/15/1989	54902	DENTAL	FAMILY
096	1440	PROF-REP	1 Male	06/10/1958	53713-3363	DENTAL	SINGLE
096	1440	PROF-REP	1 Male	08/25/1980	53562	DENTAL	SINGLE
096	1440	PROF-REP	1 Male	04/20/1958	53559	DENTAL	FAMILY
096	1440	PROF-REP	1 Male	05/27/1957	53590	DENTAL	FAMILY
096	1440	PROF-REP	1 Male	02/26/1988	53559		
096	1440	PROF-REP	1 Male	10/24/1960	53572	DENTAL	FAMILY
096	1440	PROF-REP	1 Male	11/22/1993	53590	DENTAL	SINGLE
096	1440	PROF-REP	1 Male	11/08/1967	53536	DENTAL	FAMILY
096	1440	PROF-REP	1 Female	11/26/1979	53714	DENTAL	FAMILY
096	1440	PROF-REP	1 Male	06/29/1993	53713	DENTAL	SINGLE
096	1440	PROF-REP	1 Male	10/12/1983	53593		
096	1440	PROF-REP	1 Male	07/05/1982	53711	DENTAL	FAMILY
096	1440	PROF-REP	1 Male	07/12/1974	53590		
096	1440	PROF-REP	1 Male	04/03/1981	53545	DENTAL	FAMILY

096	1440	PROF-REP	1 Male	03/05/1978	53597	DENTAL	FAMILY
096	1440	PROF-REP	1 Male	12/15/1975	53597	DENTAL	FAMILY
096	1440	PROF-REP	1 Male	12/19/1997	53704	DENTAL	SINGLE
096	1440	PROF-REP	1 Male	04/18/1980	53520	DENTAL	FAMILY
096	1440	PROF-REP	1 Male	07/16/1990	53955	DENTAL	FAMILY
096	1440	PROF-REP	1 Male	09/14/1979	53507	DENTAL	FAMILY
096	1440	PROF-REP	1 Male	04/14/1994	53704	DENTAL	SINGLE
096	1590	PROF-REP	1 Female	12/16/1973	53558	DENTAL	SINGLE
096	1590	PROF-REP	1 Male	04/17/1987	53575	DENTAL	FAMILY
096	1590	PROF-REP	1 Female	01/16/1976	53590	DENTAL	FAMILY
288	2580	PROF-REP	1 Male	11/19/1969	53545	DENTAL	FAMILY
330	2940	PROF-REP	1 Female	09/28/1978	53716	DENTAL	FAMILY
330	2940	PROF-REP	1 Female	12/31/1985	53711	DENTAL	SINGLE
330	2940	PROF-REP	1 Female	02/24/1993	53593	DENTAL	FAMILY
330	2940	PROF-REP	1 Female	02/04/1992	53718	DENTAL	SINGLE
330	2940	PROF-REP	1 Female	02/27/1979	53589	DENTAL	FAMILY
330	2940	PROF-REP	1 Male	04/15/1994	53589	DENTAL	SINGLE
330	2940	PROF-REP	1 Female	09/22/1974	53589	DENTAL	FAMILY
330	2940	PROF-REP	1 Female	12/12/1990	53718	DENTAL	SINGLE
330	2940	PROF-REP	1 Female	03/20/1985	53531	DENTAL	FAMILY
330	2940	PROF-REP	1 Male	12/22/1984	53590	DENTAL	FAMILY
330	2940	PROF-REP	1 Female	07/31/1979	53559	DENTAL	FAMILY
372	3165	PROF-REP	1 Female	02/14/1956	53703	DENTAL	SINGLE
372	3165	PROF-REP	1 Female	03/04/1971	53713	DENTAL	FAMILY
372	3255	PROF-REP	1 Female	04/30/1971	53516	DENTAL	FAMILY
372	3255	PROF-REP	1 Female	04/30/1981	53516	DENTAL	FAMILY
372	3255	PROF-REP	1 Female	12/07/1970	53718	DENTAL	FAMILY
372	3315	PROF-REP	1 Female	03/31/1975	53536		
372	3315	PROF-REP	1 Female	01/22/1983	53589	DENTAL	FAMILY
372	3315	PROF-REP	1 Female	08/12/1970	53508	DENTAL	SINGLE
372	3315	PROF-REP	0.5 Female	04/14/1970	53593	DENTAL	FAMILY
372	3315	PROF-REP	1 Female	02/08/1960	53590	DENTAL	FAMILY
372	3315	PROF-REP	1 Female	02/12/1970	53716	DENTAL	FAMILY
372	3315	PROF-REP	1 Female	06/09/1974	53590	DENTAL	FAMILY
372	3315	PROF-REP	1 Female	07/24/1982	53714	DENTAL	FAMILY
372	3390	PROF-REP	1 Not Specified	09/16/1982	53704	DENTAL	SINGLE
385	3540	PROF-REP	1 Male	04/21/1959	53597	DENTAL	SINGLE
385	3540	PROF-REP	1 Male	07/22/1965	53559		
385	3540	PROF-REP	1 Male	05/21/1985	53558	DENTAL	FAMILY
385	3540	PROF-REP	1 Male	05/05/1981	53558	DENTAL	FAMILY
385	3560	PROF-REP	1 Male	04/26/1972	53597	DENTAL	FAMILY
396	3615	PROF-REP	1 Male	06/10/1964	53597	DENTAL	FAMILY
396	3615	PROF-REP	1 Male	04/10/1967	53711	DENTAL	FAMILY
396	3765	PROF-REP	1 Male	01/28/1994	53508	DENTAL	FAMILY
515	6039	PROF-REP	1 Male	11/18/1985	53562	DENTAL	FAMILY
515	6039	PROF-REP	1 Male	09/26/1981	53597	DENTAL	FAMILY
515	6039	PROF-REP	1 Female	04/01/1968	53951	DENTAL	FAMILY
515	6039	PROF-REP	1 Male	11/11/1978	53714	DENTAL	SINGLE
515	6039	PROF-REP	1 Female	04/09/1975	53716	DENTAL	FAMILY

515	6039	PROF-REP	1 Male	01/21/1981	53575	DENTAL	FAMILY
515	6039	PROF-REP	1 Female	09/10/1982	53704	DENTAL	FAMILY
515	6039	PROF-REP	1 Female	04/15/1984	53714	DENTAL	SINGLE
515	6039	PROF-REP	1 Male	04/21/1995	53121	DENTAL	SINGLE
515	6039	PROF-REP	1 Female	04/22/1987	53711	DENTAL	SINGLE
515	6039	PROF-REP	1 Male	08/08/1969	53597	DENTAL	FAMILY
515	6039	PROF-REP	1 Female	08/13/1961	53532	DENTAL	FAMILY
515	6041	PROF-REP	1 Female	07/05/1973	53558	DENTAL	FAMILY
515	6041	PROF-REP	1 Female	10/11/1959	53711	DENTAL	FAMILY
515	6041	PROF-REP	1 Female	06/11/1984	53965	DENTAL	FAMILY
515	6041	PROF-REP	1 Male	05/10/1979	53711	DENTAL	FAMILY
515	6042	PROF-REP	1 Female	09/13/1984	53718	DENTAL	FAMILY
515	6042	PROF-REP	1 Female	06/07/1978	53715	DENTAL	FAMILY
515	6042	PROF-REP	1 Female	10/29/1970	53716	DENTAL	FAMILY
515	6042	PROF-REP	1 Female	12/16/1976	53925	DENTAL	FAMILY
515	6042	PROF-REP	1 Female	11/30/1981	53960	DENTAL	SINGLE
515	6042	PROF-REP	1 Female	09/08/1961	53704	DENTAL	FAMILY
515	6042	PROF-REP	1 Female	02/03/1979	53562	DENTAL	FAMILY
515	6042	PROF-REP	1 Female	02/04/1973	53704	DENTAL	FAMILY
515	6042	PROF-REP	1 Female	07/03/1985	53714	DENTAL	SINGLE
515	6042	PROF-REP	1 Female	07/08/1969	53704	DENTAL	SINGLE
515	6042	PROF-REP	1 Female	12/16/1981	53590	DENTAL	FAMILY
515	6042	PROF-REP	1 Female	11/05/1988	53583	DENTAL	SINGLE
515	6042	PROF-REP	1 Female	08/25/1981	53575	DENTAL	FAMILY
515	6042	PROF-REP	1 Female	02/09/1988	53590	DENTAL	FAMILY
515	6042	PROF-REP	1 Female	06/01/1988	53559	DENTAL	FAMILY
515	6042	PROF-REP	1 Female	02/28/1985	53916	DENTAL	FAMILY
515	6042	PROF-REP	1 Female	07/24/1981	53562	DENTAL	FAMILY
515	6042	PROF-REP	1 Female	11/22/1988	53711	DENTAL	SINGLE
515	6042	PROF-REP	1 Female	01/18/1978	53711	DENTAL	FAMILY
515	6042	PROF-REP	1 Female	02/12/1977	53589	DENTAL	FAMILY
515	6042	PROF-REP	1 Male	01/26/1967	53704	DENTAL	FAMILY
515	6042	PROF-REP	1 Female	05/31/1978	53590	DENTAL	FAMILY
515	6042	PROF-REP	1 Female	04/03/1964	53916	DENTAL	FAMILY
515	6042	PROF-REP	1 Male	05/24/1967	53551	DENTAL	FAMILY
515	6042	PROF-REP	1 Female	11/28/1978	53534	DENTAL	FAMILY
515	6042	PROF-REP	1 Female	09/22/1982	53589	DENTAL	SINGLE
515	6042	PROF-REP	1 Female	08/27/1977	53714	DENTAL	FAMILY
515	6042	PROF-REP	1 Male	04/10/1976	53716	DENTAL	FAMILY
515	6042	PROF-REP	1 Female	08/09/1991	53508	DENTAL	SINGLE
515	6042	PROF-REP	1 Female	11/18/1977	53572	DENTAL	FAMILY
515	6042	PROF-REP	1 Female	06/06/1973	53704	DENTAL	FAMILY
515	6042	PROF-REP	1 Female	09/09/1987	53562	DENTAL	FAMILY
515	6042	PROF-REP	1 Female	10/16/1966	53718	DENTAL	SINGLE
515	6042	PROF-REP	1 Female	01/07/1985	53718	DENTAL	FAMILY
515	6042	PROF-REP	1 Female	04/27/1981	53562	DENTAL	FAMILY
515	6042	PROF-REP	1 Male	10/20/1963	53704	DENTAL	SINGLE
515	6043	PROF-REP	1 Female	05/17/1969	53711	DENTAL	FAMILY
515	6045	PROF-REP	1 Female	09/22/1987	53589	DENTAL	FAMILY

515	6046	PROF-REP	1 Female	06/13/1968	53955	DENTAL	FAMILY
515	6046	PROF-REP	1 Female	07/16/1988	53925	DENTAL	FAMILY
515	6048	PROF-REP	1 Male	08/06/1959	53562	DENTAL	FAMILY
515	6048	PROF-REP	1 Female	02/28/1975	53716	DENTAL	FAMILY
515	6050	PROF-REP	1 Not Specifie	01/24/1965	53714-1230	DENTAL	SINGLE
515	6062	PROF-REP	1 Male	05/19/1983	53718		
515	6070	PROF-REP	1 Male	12/14/1968	53704	DENTAL	SINGLE
515	6071	PROF-REP	1 Female	11/23/1989	53713	DENTAL	SINGLE
515	6080	PROF-REP	1 Female	07/21/1991	53532	DENTAL	FAMILY
515	6080	PROF-REP	1 Male	04/03/1986	53555	DENTAL	SINGLE
515	6080	PROF-REP	1 Male	02/25/1971	53590	DENTAL	FAMILY
515	6080	PROF-REP	1 Female	03/03/1979	53704	DENTAL	FAMILY
520	6130	PROF-REP	1 Female	02/13/1970	53589	DENTAL	FAMILY
520	6130	PROF-REP	1 Male	04/07/1973	53705	DENTAL	FAMILY
520	6130	PROF-REP	1 Female	01/14/1962	53527	DENTAL	FAMILY
520	6130	PROF-REP	1 Female	04/01/1984	53527	DENTAL	FAMILY
520	6130	PROF-REP	1 Female	02/18/1980	53531	DENTAL	FAMILY
520	6130	PROF-REP	1 Male	10/06/1986	53715	DENTAL	SINGLE
520	6130	PROF-REP	1 Female	08/25/1992	53590	DENTAL	SINGLE
520	6130	PROF-REP	1 Female	11/19/1966	53715	DENTAL	FAMILY
520	6130	PROF-REP	1 Female	06/21/1983	53716	DENTAL	FAMILY
520	6130	PROF-REP	1 Female	02/20/1974	53911	DENTAL	FAMILY
520	6130	PROF-REP	1 Male	06/21/1974	53583	DENTAL	FAMILY
520	6130	PROF-REP	1 Female	06/20/1985	53704	DENTAL	FAMILY
520	6130	PROF-REP	0.85 Female	03/01/1968	53711	DENTAL	FAMILY
520	6130	PROF-REP	1 Female	07/21/1989	53593		
520	6130	PROF-REP	1 Female	11/30/1962	53705	DENTAL	FAMILY
520	6130	PROF-REP	1 Female	01/08/1982	53716	DENTAL	FAMILY
520	6130	PROF-REP	1 Female	01/30/1964	53704	DENTAL	FAMILY
520	6130	PROF-REP	1 Female	07/12/1985	53704	DENTAL	FAMILY
520	6130	PROF-REP	1 Female	01/21/1989	53955	DENTAL	FAMILY
520	6130	PROF-REP	1 Female	09/29/1990	53703	DENTAL	SINGLE
520	6130	PROF-REP	1 Male	01/17/1984	53590	DENTAL	FAMILY
520	6130	PROF-REP	1 Male	05/22/1985	53704	DENTAL	SINGLE
520	6130	PROF-REP	1 Female	09/23/1966	53714	DENTAL	FAMILY
520	6130	PROF-REP	1 Male	09/19/1967	53590	DENTAL	SINGLE
520	6130	PROF-REP	1 Male	02/18/1983	53590	DENTAL	FAMILY
520	6130	PROF-REP	1 Female	12/04/1977	53546	DENTAL	FAMILY
520	6130	PROF-REP	1 Male	09/01/1986	53719	DENTAL	SINGLE
520	6130	PROF-REP	1 Female	02/15/1977	53711	DENTAL	FAMILY
520	6130	PROF-REP	1 Male	06/21/1985	53597	DENTAL	FAMILY
520	6130	PROF-REP	1 Male	04/06/1972	53597	DENTAL	FAMILY
520	6130	PROF-REP	1 Female	10/22/1992	53704	DENTAL	FAMILY
520	6130	PROF-REP	1 Female	09/29/1980	53716	DENTAL	FAMILY
520	6130	PROF-REP	1 Male	10/16/1980	53901	DENTAL	FAMILY
520	6130	PROF-REP	1 Male	08/31/1959	53551	DENTAL	SINGLE
520	6130	PROF-REP	1 Female	12/25/1987	53704	DENTAL	FAMILY
520	6130	PROF-REP	1 Female	03/02/1974	53558	DENTAL	FAMILY
520	6130	PROF-REP	1 Female	12/19/1976	53562	DENTAL	FAMILY

520	6130	PROF-REP	1 Male	08/07/1986	53590	DENTAL	FAMILY
520	6130	PROF-REP	1 Female	09/23/1981	53718	DENTAL	SINGLE
520	6130	PROF-REP	1 Male	01/01/1971	53575	DENTAL	FAMILY
520	6130	PROF-REP	1 Female	04/15/1990	53704	DENTAL	FAMILY
520	6130	PROF-REP	1 Female	11/27/1971	53719	DENTAL	FAMILY
520	6130	PROF-REP	1 Male	08/07/1960	53532	DENTAL	FAMILY
520	6130	PROF-REP	1 Female	11/15/1992	53598	DENTAL	SINGLE
520	6130	PROF-REP	1 Female	05/01/1965	53597	DENTAL	FAMILY
520	6130	PROF-REP	1 Female	04/24/1980	60085	DENTAL	FAMILY
520	6130	PROF-REP	1 Male	03/29/1978	53597	DENTAL	FAMILY
520	6130	PROF-REP	1 Female	05/01/1967	54652	DENTAL	FAMILY
520	6130	PROF-REP	1 Female	05/08/1993	53703	DENTAL	SINGLE
520	6130	PROF-REP	1 Male	10/11/1980	53713	DENTAL	FAMILY
520	6130	PROF-REP	0.75 Female	04/15/1966	53714		
520	6130	PROF-REP	1 Female	06/03/1964	53719	DENTAL	FAMILY
520	6130	PROF-REP	1 Male	07/23/1974	53558	DENTAL	FAMILY
520	6130	PROF-REP	1 Female	05/08/1987	53704	DENTAL	FAMILY
520	6130	PROF-REP	1 Female	07/06/1988	53718	DENTAL	SINGLE
520	6130	PROF-REP	1 Male	09/19/1961	53714	DENTAL	FAMILY
520	6130	PROF-REP	1 Female	03/17/1992	53563	DENTAL	FAMILY
520	6130	PROF-REP	1 Female	09/19/1982	53719	DENTAL	SINGLE
538	6190	PROF-REP	1 Male	02/06/1966	53590	DENTAL	SINGLE
538	6190	PROF-REP	1 Male	08/05/1975	53593	DENTAL	FAMILY
538	6190	PROF-REP	1 Male	04/09/1975	53711	DENTAL	FAMILY
538	6190	PROF-REP	1 Female	01/06/1970	53559	DENTAL	FAMILY
538	6205	PROF-REP	1 Male	01/09/1970	53705	DENTAL	FAMILY
538	6205	PROF-REP	1 Female	02/09/1969	53726	DENTAL	FAMILY
538	6205	PROF-REP	1 Male	11/18/1968	53527	DENTAL	FAMILY
538	6205	PROF-REP	1 Female	03/27/1964	53704	DENTAL	SINGLE
538	6205	PROF-REP	1 Male	10/10/1965	53714	DENTAL	FAMILY
538	6315	PROF-REP	1 Male	10/10/1974	53590	DENTAL	FAMILY
538	6315	PROF-REP	1 Male	10/17/1983	53562	DENTAL	SINGLE
538	6315	PROF-REP	1 Female	09/14/1976	53719	DENTAL	SINGLE
538	6315	PROF-REP	1 Male	03/18/1958	53714	DENTAL	FAMILY
538	6315	PROF-REP	1 Male	10/04/1963	53704	DENTAL	FAMILY
538	6315	PROF-REP	1 Male	12/14/1967	53508	DENTAL	FAMILY
552	6390	PROF-REP	1 Male	07/17/1967	53018	DENTAL	FAMILY
552	6390	PROF-REP	1 Male	12/29/1967	53588	DENTAL	FAMILY
552	6390	PROF-REP	1 Male	09/08/1970	53527	DENTAL	FAMILY
564	6480	PROF-REP	1 Female	09/24/1992	53575	DENTAL	FAMILY
564	6480	PROF-REP	1 Male	06/21/1971	53589	DENTAL	FAMILY
564	6705	PROF-REP	1 Male	09/05/1976	53523	DENTAL	FAMILY
648	7140	PROF-REP	1 Male	07/08/1985	53704	DENTAL	FAMILY
684	7665	PROF-REP	1 Female	03/12/1994	53713	DENTAL	FAMILY
684	7665	PROF-REP	1 Female	02/05/1979	53719	DENTAL	FAMILY
684	7665	PROF-REP	1 Female	10/14/1984	53711	DENTAL	FAMILY
696	7730	PROF-REP	1 Male	01/18/1974	53711	DENTAL	FAMILY
696	7730	PROF-REP	1 Not Specifie	02/27/1967	53560	DENTAL	FAMILY
696	7730	PROF-REP	1 Female	11/10/1967	53588	DENTAL	FAMILY

696	7730	PROF-REP	1 Female	07/02/1984	53714	DENTAL	FAMILY
696	7730	PROF-REP	1 Female	07/21/1971	53523	DENTAL	FAMILY
696	7730	PROF-REP	1 Male	11/19/1989	53718	DENTAL	FAMILY
696	7740	PROF-REP	1 Male	02/21/1983	53558	DENTAL	FAMILY
696	7740	PROF-REP	1 Male	02/18/1986	53598	DENTAL	FAMILY
696	7740	PROF-REP	1 Male	11/16/1983	53515	DENTAL	FAMILY
696	7740	PROF-REP	1 Male	02/28/1982	53704	DENTAL	FAMILY
696	7740	PROF-REP	1 Male	03/20/1973	53931	DENTAL	FAMILY
696	7740	PROF-REP	1 Female	10/16/1976	53704	DENTAL	FAMILY
696	7750	PROF-REP	0.6 Female	06/17/1977	53717		
696	7750	PROF-REP	1 Female	03/16/1992	53562	DENTAL	FAMILY
696	7750	PROF-REP	1 Not Specifie	11/02/1979	53711	DENTAL	FAMILY
696	7750	PROF-REP	1 Male	05/09/1987	53704	DENTAL	FAMILY
696	7750	PROF-REP	1 Male	11/15/1959	53711	DENTAL	FAMILY
696	7750	PROF-REP	1 Female	02/04/1977	53575	DENTAL	FAMILY
696	7750	PROF-REP	1 Female	12/13/1977	53960	DENTAL	SINGLE
696	7750	PROF-REP	1 Male	06/01/1981	53532	DENTAL	FAMILY
696	7810	PROF-REP	1 Male	06/04/1960	53719	DENTAL	SINGLE
696	7810	PROF-REP	1 Male	12/24/1980	53549	DENTAL	FAMILY
696	7810	PROF-REP	1 Not Specifie	12/03/1965	53515	DENTAL	FAMILY
696	7810	PROF-REP	1 Male	12/20/1980	53590	DENTAL	FAMILY
696	7810	PROF-REP	1 Female	06/07/1963	53714	DENTAL	SINGLE
696	7810	PROF-REP	1 Female	12/16/1979	53714	DENTAL	FAMILY
696	7810	PROF-REP	1 Female	12/06/1987	53575	DENTAL	FAMILY
696	7810	PROF-REP	1 Male	08/11/1964	53704	DENTAL	FAMILY
696	7810	PROF-REP	1 Female	12/06/1983	53572	DENTAL	FAMILY
720	7890	PROF-REP	1 Female	09/21/1976	53511	DENTAL	SINGLE
795	8355	PROF-REP	1 Female	10/17/1970	53593	DENTAL	SINGLE
795	8675	PROF-REP	1 Male	10/31/1959	53705	DENTAL	FAMILY
795	8675	PROF-REP	1 Male	02/26/1981	53589	DENTAL	FAMILY
795	8675	PROF-REP	1 Male	10/03/1969	53589	DENTAL	FAMILY
795	8675	PROF-REP	1 Male	09/18/1950	53711	DENTAL	FAMILY
820	8790	PROF-REP	1 Male	11/04/1958	53704	DENTAL	FAMILY
820	8790	PROF-REP	1 Male	01/24/1977	53925		
820	9090	PROF-REP	1 Male	09/09/1974	53594	DENTAL	FAMILY
288	2580	SW-2634	0.5 Female	08/14/1985	53546		
288	2715	SW-2634	1 Female	08/31/1964	53718	DENTAL	FAMILY
288	2715	SW-2634	1 Male	10/20/1981	53704	DENTAL	SINGLE
288	2715	SW-2634	1 Female	08/05/1984	53534	DENTAL	FAMILY
288	2715	SW-2634	1 Male	12/07/1994	53589	DENTAL	FAMILY
288	2715	SW-2634	0.5 Female	08/27/1988	53565	DENTAL	FAMILY
288	2730	SW-2634	1 Female	12/21/1968	53562	DENTAL	SINGLE
316	2865	SW-2634	1 Female	09/25/1989	53718	DENTAL	FAMILY
316	2865	SW-2634	1 Female	10/14/1987	53716	DENTAL	SINGLE
316	2865	SW-2634	1 Female	10/14/1962	53705	DENTAL	FAMILY
316	2865	SW-2634	1 Female	11/21/1963	53703	DENTAL	SINGLE
316	2865	SW-2634	1 Female	05/19/1965	53704	DENTAL	FAMILY
316	2865	SW-2634	1 Female	12/17/1963	53716	DENTAL	FAMILY
316	2865	SW-2634	1 Female	05/23/1978	53531	DENTAL	FAMILY

316	2865	SW-2634	1 Female	04/20/1985	53719	DENTAL	SINGLE
351	3060	SW-2634	1 Female	07/04/1985	53704	DENTAL	SINGLE
351	3060	SW-2634	1 Female	08/11/1987	53527	DENTAL	FAMILY
351	3060	SW-2634	1 Female	08/14/1975	53558	DENTAL	FAMILY
351	3060	SW-2634	1 Male	06/10/1993	53563	DENTAL	SINGLE
351	3060	SW-2634	1 Female	09/19/1962	53588	DENTAL	FAMILY
351	3060	SW-2634	1 Female	06/17/1968	53716	DENTAL	SINGLE
351	3060	SW-2634	1 Female	07/07/1967	53716	DENTAL	SINGLE
351	3060	SW-2634	1 Female	06/22/1984	53719	DENTAL	SINGLE
351	3060	SW-2634	1 Female	12/07/1991	53703	DENTAL	SINGLE
351	3060	SW-2634	1 Female	05/24/1969	53716	DENTAL	SINGLE
351	3060	SW-2634	1 Female	06/06/1982	53575	DENTAL	FAMILY
351	3060	SW-2634	1 Female	07/29/1956	53502	DENTAL	FAMILY
351	3060	SW-2634	1 Female	03/19/1962	53714	DENTAL	FAMILY
351	3065	SW-2634	0.5 Female	02/19/1975	53575	DENTAL	FAMILY
351	3065	SW-2634	1 Female	06/19/1977	48823	DENTAL	SINGLE
351	3065	SW-2634	0.7 Female	09/13/1956	53955	DENTAL	FAMILY
351	3065	SW-2634	0.7 Female	06/03/1975	53716	DENTAL	FAMILY
351	3075	SW-2634	1 Female	05/26/1964	53705	DENTAL	FAMILY
351	3075	SW-2634	1 Female	11/06/1977	53558	DENTAL	FAMILY
351	3075	SW-2634	1 Female	12/25/1995	53704	DENTAL	SINGLE
351	3075	SW-2634	1 Female	07/14/1975	53590	DENTAL	FAMILY
351	3075	SW-2634	1 Male	03/17/1974	53597	DENTAL	FAMILY
351	3075	SW-2634	1 Female	04/26/1990	53562	DENTAL	FAMILY
351	3075	SW-2634	1 Male	06/03/1947	53704	DENTAL	FAMILY
351	3075	SW-2634	1 Female	05/14/1971	53575	DENTAL	FAMILY
372	3315	SW-2634	1 Female	01/31/1992	53527	DENTAL	FAMILY
372	3315	SW-2634	1 Female	07/23/1994	53545	DENTAL	SINGLE
372	3315	SW-2634	1 Female	11/30/1987	53575	DENTAL	FAMILY
372	3315	SW-2634	0.5 Female	07/04/1987	53562	DENTAL	SINGLE
420	3840	SW-2634	1 Male	05/16/1980	53718	DENTAL	FAMILY
420	3840	SW-2634	0.5 Female	12/29/1986	53098	DENTAL	FAMILY
420	3840	SW-2634	0.8 Male	04/01/1972	53719	DENTAL	SINGLE
420	3840	SW-2634	1 Female	01/24/1956	53703	DENTAL	SINGLE
420	3840	SW-2634	0.5 Female	06/15/1996	53704	DENTAL	SINGLE
420	3840	SW-2634	1 Male	02/18/1981	53714	DENTAL	SINGLE
420	4065	SW-2634	1 Female	01/29/1962	53536	DENTAL	FAMILY
510	5580	SW-2634	1 Female	04/01/1966	53593	DENTAL	FAMILY
510	5580	SW-2634	1 Male	10/28/1964	53533	DENTAL	FAMILY
510	5580	SW-2634	1 Female	02/26/1967	53704	DENTAL	SINGLE
510	5580	SW-2634	1 Female	02/24/1993	53818	DENTAL	FAMILY
510	5580	SW-2634	1 Female	08/27/1994	53558	DENTAL	SINGLE
510	5580	SW-2634	1 Female	05/19/1992	53593	DENTAL	SINGLE
510	5580	SW-2634	1 Male	07/09/1987	53589	DENTAL	SINGLE
510	5580	SW-2634	1 Female	05/31/1995	53562	DENTAL	SINGLE
510	5580	SW-2634	1 Female	03/11/1971	53562	DENTAL	FAMILY
515	6043	SW-2634	1 Female	12/28/1988	53583	DENTAL	FAMILY
515	6043	SW-2634	1 Female	03/31/1984	53718	DENTAL	FAMILY
515	6043	SW-2634	1 Female	07/29/1969	53559	DENTAL	FAMILY

515	6043	SW-2634	1 Female	02/05/1970	53704	DENTAL	FAMILY
515	6043	SW-2634	1 Female	08/14/1974	53705	DENTAL	FAMILY
515	6043	SW-2634	1 Female	10/30/1958	53716	DENTAL	FAMILY
515	6043	SW-2634	1 Female	04/04/1961	53597	DENTAL	FAMILY
515	6043	SW-2634	1 Male	03/15/1964	53703	DENTAL	FAMILY
515	6043	SW-2634	1 Female	08/03/1961	53714	DENTAL	SINGLE
515	6043	SW-2634	1 Female	01/21/1967	53562	DENTAL	FAMILY
515	6043	SW-2634	1 Female	12/22/1968	53718	DENTAL	FAMILY
515	6043	SW-2634	1 Female	11/20/1975	53523	DENTAL	FAMILY
515	6043	SW-2634	0.5 Female	02/06/1962	53528		
515	6044	SW-2634	1 Female	06/02/1987	53532	DENTAL	FAMILY
515	6044	SW-2634	0.6 Male	04/03/1977	53705	DENTAL	FAMILY
515	6044	SW-2634	1 Female	10/01/1987	53590	DENTAL	SINGLE
515	6044	SW-2634	0.8 Female	01/25/1966	53716	DENTAL	FAMILY
515	6044	SW-2634	1 Female	08/04/1981	53716	DENTAL	FAMILY
515	6044	SW-2634	1 Female	01/24/1981	53704	DENTAL	FAMILY
515	6044	SW-2634	1 Female	10/06/1967	53704	DENTAL	SINGLE
515	6044	SW-2634	1 Female	07/25/1984	53555	DENTAL	FAMILY
515	6044	SW-2634	1 Female	11/20/1986	53597	DENTAL	FAMILY
515	6044	SW-2634	1 Male	11/13/1964	53715	DENTAL	FAMILY
515	6044	SW-2634	1 Female	06/04/1978	53719	DENTAL	SINGLE
515	6044	SW-2634	1 Female	06/30/1966	53597		
515	6044	SW-2634	1 Female	12/21/1961	53703	DENTAL	SINGLE
515	6045	SW-2634	1 Male	02/02/1994	53703	DENTAL	FAMILY
515	6045	SW-2634	1 Female	12/01/1988	53718	DENTAL	FAMILY
515	6045	SW-2634	1 Female	11/10/1976	53555	DENTAL	SINGLE
515	6045	SW-2634	1 Female	06/07/1989	53704	DENTAL	FAMILY
515	6045	SW-2634	1 Female	05/22/1991	53714	DENTAL	SINGLE
515	6045	SW-2634	1 Female	07/11/1991	53704	DENTAL	SINGLE
515	6045	SW-2634	1 Female	12/07/1979	53716	DENTAL	FAMILY
515	6045	SW-2634	1 Female	11/16/1992	53704	DENTAL	SINGLE
515	6045	SW-2634	1 Female	06/15/1983	53715	DENTAL	FAMILY
515	6045	SW-2634	1 Female	12/27/1960	53560	DENTAL	SINGLE
515	6045	SW-2634	1 Female	03/02/1961	53713	DENTAL	SINGLE
515	6045	SW-2634	1 Female	02/06/1976	53711	DENTAL	FAMILY
515	6045	SW-2634	1 Female	01/08/1982	53716		
515	6045	SW-2634	1 Female	09/17/1969	53536	DENTAL	FAMILY
515	6045	SW-2634	1 Female	09/27/1991	53704	DENTAL	SINGLE
515	6046	SW-2634	1 Female	03/01/1982	53704		
515	6046	SW-2634	1 Female	07/16/1987	53593	DENTAL	FAMILY
515	6046	SW-2634	1 Female	09/20/1962	53704	DENTAL	SINGLE
515	6046	SW-2634	1 Female	07/03/1974	53711	DENTAL	FAMILY
515	6046	SW-2634	1 Female	04/13/1978	53562	DENTAL	FAMILY
515	6046	SW-2634	1 Female	07/22/1991	53704	DENTAL	FAMILY
515	6046	SW-2634	1 Male	09/09/1992	53714	DENTAL	FAMILY
515	6046	SW-2634	1 Female	11/10/1966	53716	DENTAL	FAMILY
515	6046	SW-2634	1 Male	12/08/1993	53704	DENTAL	SINGLE
515	6046	SW-2634	1 Female	07/17/1966	53704	DENTAL	FAMILY
515	6053	SW-2634	1 Female	03/27/1978	53574	DENTAL	FAMILY

515	6053	SW-2634	1 Female	03/26/1991	53711	DENTAL	FAMILY
515	6053	SW-2634	1 Male	09/28/1990	53704	DENTAL	SINGLE
515	6053	SW-2634	1 Female	10/16/1991	53704	DENTAL	SINGLE
515	6053	SW-2634	1 Female	05/04/1963	53593	DENTAL	FAMILY
515	6053	SW-2634	1 Female	03/19/1998	53925		
515	6053	SW-2634	1 Female	07/28/1976	53704	DENTAL	SINGLE
515	6053	SW-2634	1 Male	06/24/1969	53711	DENTAL	SINGLE
515	6053	SW-2634	1 Male	03/04/1965	53704	DENTAL	FAMILY
515	6053	SW-2634	1 Female	10/26/1981	53590	DENTAL	FAMILY
515	6053	SW-2634	1 Female	11/30/1996	53711	DENTAL	SINGLE
515	6053	SW-2634	1 Female	12/27/1984	53562	DENTAL	SINGLE
515	6053	SW-2634	1 Male	01/28/1969	53704	DENTAL	FAMILY
515	6053	SW-2634	1 Male	11/20/1973	53713	DENTAL	FAMILY
515	6053	SW-2634	1 Female	11/23/1971	53704	DENTAL	SINGLE
515	6053	SW-2634	0.5 Female	07/07/1975	53572	DENTAL	FAMILY
515	6053	SW-2634	1 Female	09/06/1972	53714	DENTAL	FAMILY
515	6053	SW-2634	1 Female	06/12/1992	53523	DENTAL	SINGLE
515	6053	SW-2634	1 Male	10/29/1978	53562	DENTAL	FAMILY
515	6053	SW-2634	1 Female	09/21/1974	53704	DENTAL	FAMILY
515	6053	SW-2634	1 Female	11/12/1979	53713	DENTAL	FAMILY
515	6053	SW-2634	1 Female	07/02/1970	53545	DENTAL	FAMILY
515	6053	SW-2634	1 Male	09/08/1963	53590	DENTAL	FAMILY
515	6053	SW-2634	1 Male	02/26/1992	53705	DENTAL	SINGLE
515	6053	SW-2634	1 Male	10/07/1972	53711-6920	DENTAL	FAMILY
515	6053	SW-2634	1 Male	09/24/1968	53593	DENTAL	FAMILY
515	6053	SW-2634	1 Male	01/02/1975	53718	DENTAL	FAMILY
515	6053	SW-2634	1 Male	06/23/1963	53574	DENTAL	FAMILY
515	6053	SW-2634	1 Female	08/18/1989	53718	DENTAL	FAMILY
515	6053	SW-2634	1 Male	07/09/1977	53704	DENTAL	FAMILY
515	6053	SW-2634	1 Male	11/07/1982	53704		
515	6053	SW-2634	1 Female	08/23/1961	53711	DENTAL	SINGLE
515	6053	SW-2634	1 Male	08/18/1967	53713	DENTAL	FAMILY
515	6053	SW-2634	1 Female	10/02/1992	53718	DENTAL	SINGLE
515	6053	SW-2634	1 Male	09/06/1963	53521	DENTAL	FAMILY
515	6053	SW-2634	1 Female	02/14/1969	53719-4602	DENTAL	FAMILY
515	6053	SW-2634	1 Female	04/15/1988	53718	DENTAL	FAMILY
515	6053	SW-2634	1 Female	07/27/1978	53532	DENTAL	FAMILY
515	6053	SW-2634	1 Male	02/21/1966	53575	DENTAL	FAMILY
515	6053	SW-2634	1 Male	06/05/1984	53575	DENTAL	FAMILY
515	6053	SW-2634	1 Female	09/19/1991	53718	DENTAL	SINGLE
515	6053	SW-2634	1 Female	06/23/1959	53597	DENTAL	FAMILY
515	6053	SW-2634	1 Female	03/06/1967	53704	DENTAL	FAMILY
515	6053	SW-2634	1 Female	06/23/1987	53714	DENTAL	SINGLE
515	6053	SW-2634	1 Male	10/20/1967	53711	DENTAL	FAMILY
515	6053	SW-2634	1 Female	07/28/1982	53589		
515	6054	SW-2634	1 Female	11/19/1970	53532	DENTAL	FAMILY
515	6054	SW-2634	1 Female	12/23/1965	53719	DENTAL	SINGLE
515	6054	SW-2634	1 Female	09/01/1986	53593	DENTAL	FAMILY
515	6054	SW-2634	1 Female	09/01/1989	53534	DENTAL	FAMILY

515	6054	SW-2634	1 Female	08/07/1997	53713	DENTAL	SINGLE
515	6054	SW-2634	1 Female	09/15/1986	53705	DENTAL	FAMILY
515	6054	SW-2634	1 Female	12/13/1996	53718	DENTAL	SINGLE
515	6054	SW-2634	1 Female	09/23/1979	53532	DENTAL	FAMILY
515	6054	SW-2634	1 Female	02/21/1997	53718	DENTAL	SINGLE
515	6054	SW-2634	1 Female	06/21/1991	53717	DENTAL	FAMILY
515	6054	SW-2634	1 Female	10/07/1991	53703	DENTAL	SINGLE
515	6054	SW-2634	1 Female	12/13/1974	53572	DENTAL	FAMILY
515	6054	SW-2634	1 Female	01/10/1960	53716	DENTAL	FAMILY
515	6054	SW-2634	1 Female	09/18/1995	53597	DENTAL	SINGLE
515	6054	SW-2634	1 Female	07/13/1981	53714	DENTAL	FAMILY
515	6054	SW-2634	1 Female	07/05/1958	53718	DENTAL	SINGLE
515	6054	SW-2634	1 Female	01/22/1991	53718-2999	DENTAL	FAMILY
515	6054	SW-2634	1 Female	12/09/1988	53545	DENTAL	SINGLE
515	6054	SW-2634	1 Female	09/30/1997	53719	DENTAL	SINGLE
515	6054	SW-2634	0.5 Female	11/21/1981	53562	DENTAL	FAMILY
515	6054	SW-2634	1 Female	10/23/1969	53718	DENTAL	SINGLE
515	6054	SW-2634	1 Female	09/08/1976	53714	DENTAL	FAMILY
515	6054	SW-2634	1 Female	04/15/1990	53711	DENTAL	FAMILY
515	6054	SW-2634	1 Female	08/20/1986	53714	DENTAL	SINGLE
515	6054	SW-2634	1 Female	07/17/1971	53593	DENTAL	FAMILY
515	6054	SW-2634	1 Female	10/11/1995	53703		
515	6054	SW-2634	1 Female	07/09/1981	53575	DENTAL	FAMILY
515	6054	SW-2634	1 Female	10/10/1982	53574	DENTAL	FAMILY
515	6054	SW-2634	1 Female	11/25/1968	53704	DENTAL	FAMILY
515	6054	SW-2634	1 Female	02/03/1992	53704	DENTAL	SINGLE
515	6054	SW-2634	1 Female	11/04/1994	53593	DENTAL	FAMILY
515	6054	SW-2634	1 Female	02/15/1996	53713	DENTAL	SINGLE
515	6054	SW-2634	1 Female	10/02/1973	53593	DENTAL	FAMILY
515	6054	SW-2634	1 Female	07/15/1985	53704	DENTAL	FAMILY
515	6054	SW-2634	1 Female	09/20/1987	53704	DENTAL	FAMILY
515	6054	SW-2634	1 Female	06/05/1983	53558-8445	DENTAL	FAMILY
515	6054	SW-2634	1 Male	05/22/1991	53559	DENTAL	SINGLE
515	6054	SW-2634	1 Female	04/07/1994	53572	DENTAL	FAMILY
515	6054	SW-2634	1 Female	05/09/1996	53703	DENTAL	SINGLE
515	6054	SW-2634	1 Female	10/05/1976	53718	DENTAL	SINGLE
515	6054	SW-2634	1 Female	08/27/1991	53534	DENTAL	SINGLE
515	6054	SW-2634	1 Female	01/29/1964	53711	DENTAL	FAMILY
515	6054	SW-2634	1 Female	11/06/1982	53704	DENTAL	FAMILY
515	6054	SW-2634	1 Female	08/16/1988	53558	DENTAL	FAMILY
515	6054	SW-2634	1 Female	08/03/1994	53718	DENTAL	SINGLE
515	6054	SW-2634	1 Female	08/23/1981	53719	DENTAL	FAMILY
515	6054	SW-2634	1 Female	02/07/1991	53719	DENTAL	SINGLE
515	6054	SW-2634	1 Female	01/02/1975	53593	DENTAL	FAMILY
515	6054	SW-2634	1 Female	02/23/1988	53555	DENTAL	FAMILY
515	6054	SW-2634	0.5 Female	05/18/1995	53704	DENTAL	SINGLE
515	6054	SW-2634	1 Female	09/05/1970	53704	DENTAL	FAMILY
515	6054	SW-2634	1 Female	11/28/1977	53558	DENTAL	FAMILY
515	6054	SW-2634	0.5 Female	05/21/1965	53716		

515	6054	SW-2634	1 Female	06/07/1994	53704	DENTAL	SINGLE
515	6054	SW-2634	1 Female	04/12/1974	53716	DENTAL	FAMILY
515	6054	SW-2634	1 Female	06/06/1989	53718	DENTAL	SINGLE
515	6054	SW-2634	1 Female	06/21/1990	53719	DENTAL	FAMILY
515	6054	SW-2634	1 Female	08/22/1992	53717	DENTAL	SINGLE
515	6054	SW-2634	1 Female	12/27/1990	53551	DENTAL	SINGLE
515	6072	SW-2634	1 Male	08/09/1966	53705	DENTAL	FAMILY
515	6072	SW-2634	1 Female	03/28/1987	53703	DENTAL	FAMILY
515	6072	SW-2634	1 Female	07/10/1962	53593	DENTAL	FAMILY
515	6072	SW-2634	1 Male	11/04/1975	53711	DENTAL	FAMILY
515	6072	SW-2634	1 Female	11/08/1970	53558		
515	6072	SW-2634	1 Female	06/17/1970	53704	DENTAL	FAMILY
515	6072	SW-2634	1 Male	01/10/1974	53589	DENTAL	FAMILY
515	6072	SW-2634	1 Female	01/12/1972	53536	DENTAL	FAMILY
515	6072	SW-2634	1 Female	03/02/1973	53713	DENTAL	FAMILY
515	6072	SW-2634	1 Female	06/01/1979	53704	DENTAL	FAMILY
515	6072	SW-2634	1 Female	06/02/1970	53589	DENTAL	FAMILY
515	6072	SW-2634	1 Female	11/14/1971	53704	DENTAL	FAMILY
515	6072	SW-2634	1 Male	07/15/1952	53711	DENTAL	SINGLE
515	6072	SW-2634	1 Female	03/11/1965	53704	DENTAL	FAMILY
515	6072	SW-2634	1 Female	08/20/1964	53719	DENTAL	SINGLE
515	6072	SW-2634	1 Female	01/12/1979	53714	DENTAL	FAMILY
515	6072	SW-2634	1 Female	11/08/1965	53589	DENTAL	FAMILY
515	6072	SW-2634	1 Female	10/24/1994	53719	DENTAL	SINGLE
515	6072	SW-2634	1 Female	11/18/1963	53597	DENTAL	SINGLE
515	6073	SW-2634	1 Female	09/07/1960	53551	DENTAL	SINGLE
515	6073	SW-2634	1 Female	01/25/1963	53527	DENTAL	FAMILY
515	6073	SW-2634	1 Female	10/17/1959	53703	DENTAL	FAMILY
515	6073	SW-2634	1 Female	02/17/1973	53528	DENTAL	FAMILY
515	6073	SW-2634	1 Female	11/09/1971	53528	DENTAL	FAMILY
515	6073	SW-2634	0.75 Female	03/06/1974	53532	DENTAL	FAMILY
515	6073	SW-2634	1 Female	07/25/1975	53532	DENTAL	FAMILY
515	6073	SW-2634	1 Female	03/16/1973	53562	DENTAL	FAMILY
515	6073	SW-2634	0.5 Female	02/28/1983	53704	DENTAL	FAMILY
515	6073	SW-2634	1 Female	10/29/1965	53715	DENTAL	FAMILY
515	6073	SW-2634	1 Female	03/26/1969	53534	DENTAL	FAMILY
515	6073	SW-2634	1 Female	11/10/1965	53523	DENTAL	FAMILY
515	6074	SW-2634	1 Female	05/28/1983	53704	DENTAL	FAMILY
515	6074	SW-2634	1 Female	09/19/1967	53711	DENTAL	FAMILY
515	6074	SW-2634	1 Male	02/26/1984	53704	DENTAL	FAMILY
515	6074	SW-2634	1 Female	02/21/1979	53558	DENTAL	FAMILY
515	6074	SW-2634	1 Female	12/22/1965	53589	DENTAL	FAMILY
515	6074	SW-2634	1 Female	05/11/1976	53558	DENTAL	FAMILY
515	6074	SW-2634	1 Female	05/12/1983	53590	DENTAL	FAMILY
515	6074	SW-2634	1 Female	11/24/1965	53597	DENTAL	FAMILY
515	6074	SW-2634	1 Female	12/05/1967	53925-9779	DENTAL	FAMILY
515	6074	SW-2634	1 Female	01/06/1974	53590	DENTAL	FAMILY
515	6074	SW-2634	1 Female	10/13/1991	53590	DENTAL	SINGLE
096	1050	TRADES	1 Male	08/29/1976	53551		

096	1145	TRADES	1 Male	04/17/1973	53704	DENTAL	FAMILY
096	1145	TRADES	1 Male	01/15/1978	53597	DENTAL	FAMILY
096	1145	TRADES	1 Male	11/21/1970	53704	DENTAL	SINGLE
096	1145	TRADES	1 Male	09/06/1973	53081	DENTAL	FAMILY
096	1145	TRADES	1 Male	12/27/1960	53534	DENTAL	FAMILY
096	1145	TRADES	1 Male	05/29/1980	53704	DENTAL	SINGLE
648	7140	TRADES	1 Male	02/24/1964	53537	DENTAL	FAMILY
820	8940	TRADES	1 Male	11/18/1974	53589	DENTAL	FAMILY
820	8940	TRADES	1 Male	12/02/1977	53555	DENTAL	SINGLE
820	8940	TRADES	1 Male	10/19/1962	53517	DENTAL	FAMILY
820	8940	TRADES	1 Male	06/06/1978	53940	DENTAL	FAMILY
820	9090	TRADES	1 Male	09/13/1972	53094	DENTAL	FAMILY
820	9090	TRADES	1 Male	11/08/1975	53718	DENTAL	FAMILY
510	5580	UPQHC-1199	1 Female	05/01/1975	53719	DENTAL	FAMILY
510	5580	UPQHC-1199	1 Female	09/27/1974	53719		
510	5580	UPQHC-1199	1 Female	07/02/1968	53588	DENTAL	FAMILY
510	5580	UPQHC-1199	0.2 Female	11/27/1997	54729		
510	5580	UPQHC-1199	0.2 Female	04/06/1988	53719		
510	5580	UPQHC-1199	0.2 Female	05/20/1984	53593		
510	5580	UPQHC-1199	0.2 Female	09/15/1976	53562		
510	5580	UPQHC-1199	0.9 Female	09/22/1981	53719	DENTAL	FAMILY
510	5580	UPQHC-1199	1 Female	11/13/1958	53575		
510	5580	UPQHC-1199	0.2 Female	08/25/1989	53590		
510	5580	UPQHC-1199	1 Female	11/29/1978	53593	DENTAL	FAMILY
510	5580	UPQHC-1199	0.2 Male	12/30/1988	53593		
510	5580	UPQHC-1199	0.2 Female	08/11/1960	54555		
510	5580	UPQHC-1199	0.7 Female	02/07/1987	53533	DENTAL	FAMILY
510	5580	UPQHC-1199	0.6 Female	10/27/1977	53719		
510	5580	UPQHC-1199	0.2 Female	04/21/1988	53719		
510	5580	UPQHC-1199	1 Female	05/06/1976	53572	DENTAL	FAMILY
510	5580	UPQHC-1199	1 Female	03/10/1962	53719	DENTAL	FAMILY
510	5580	UPQHC-1199	1 Female	03/08/1968	53821	DENTAL	FAMILY
510	5580	UPQHC-1199	0.8 Female	10/12/1975	53744	DENTAL	SINGLE
510	5580	UPQHC-1199	1 Female	12/08/1964	53705	DENTAL	FAMILY
510	5580	UPQHC-1199	0.6 Female	01/30/1988	53589		
510	5580	UPQHC-1199	1 Female	12/10/1979	53717	DENTAL	FAMILY
510	5580	UPQHC-1199	1 Female	01/26/1980	53593	DENTAL	SINGLE
510	5580	UPQHC-1199	0.3 Female	05/07/1986	53719		
510	5580	UPQHC-1199	1 Female	07/11/1980	53719	DENTAL	FAMILY
510	5580	UPQHC-1199	1 Female	04/08/1983	53719	DENTAL	FAMILY
510	5580	UPQHC-1199	1 Male	01/27/1990	53719	DENTAL	SINGLE
510	5580	UPQHC-1199	0.2 Male	05/15/1982	53719		
510	5580	UPQHC-1199	0.6 Female	05/28/1960	53714	DENTAL	SINGLE
510	5580	UPQHC-1199	1 Male	04/04/1971	53713	DENTAL	SINGLE
510	5580	UPQHC-1199	0.6 Male	12/19/1981	53566	DENTAL	FAMILY
510	5580	UPQHC-1199	1 Male	04/29/1985	53719	DENTAL	FAMILY
510	5580	UPQHC-1199	0.6 Female	08/21/1967	53705	DENTAL	FAMILY
520	6130	UPQHC-1199	1 Male	02/03/1973	53719	DENTAL	SINGLE
520	6130	UPQHC-1199	1 Female	03/28/1991	53711	DENTAL	FAMILY

520	6130	UPQHC-1199	1 Female	11/18/1988	53703	DENTAL	SINGLE
520	6130	UPQHC-1199	1 Female	03/25/1969	53598	DENTAL	FAMILY
520	6130	UPQHC-1199	1 Female	10/16/1977	53704	DENTAL	SINGLE
520	6130	UPQHC-1199	1 Female	12/25/1957	53534	DENTAL	FAMILY
520	6130	UPQHC-1199	1 Female	03/04/1971	53713	DENTAL	FAMILY
520	6130	UPQHC-1199	1 Female	10/11/1992	53572	DENTAL	FAMILY
520	6130	UPQHC-1199	1 Female	10/07/1986	53532	DENTAL	FAMILY
520	6130	UPQHC-1199	1 Female	10/02/1965	53916	DENTAL	FAMILY
520	6130	UPQHC-1199	1 Female	04/23/1968	53705	DENTAL	FAMILY
520	6130	UPQHC-1199	1 Female	07/28/1992	53711	DENTAL	FAMILY
520	6130	UPQHC-1199	1 Female	01/10/1970	53704	DENTAL	FAMILY
520	6130	UPQHC-1199	1 Female	05/08/1989	53590	DENTAL	FAMILY
520	6130	UPQHC-1199	1 Female	06/13/1964	53704	DENTAL	FAMILY
520	6130	UPQHC-1199	1 Female	08/15/1973	53562	DENTAL	FAMILY
520	6130	UPQHC-1199	1 Female	10/04/1983	53704	DENTAL	FAMILY
520	6130	UPQHC-1199	1 Female	03/22/1985	53717	DENTAL	SINGLE
520	6130	UPQHC-1199	0.75 Female	12/12/1957	53705	DENTAL	FAMILY
520	6130	UPQHC-1199	1 Female	10/01/1979	53704	DENTAL	FAMILY
520	6130	UPQHC-1199	1 Female	05/25/1961	53955	DENTAL	FAMILY
520	6130	UPQHC-1199	1 Female	12/07/1975	53704	DENTAL	FAMILY
520	6130	UPQHC-1199	1 Male	02/11/1976	53714	DENTAL	FAMILY
520	6130	UPQHC-1199	1 Male	08/02/1995	53711	DENTAL	FAMILY
520	6130	UPQHC-1199	1 Male	07/24/1992	53711	DENTAL	SINGLE
520	6130	UPQHC-1199	1 Female	03/17/1980	53516	DENTAL	FAMILY
520	6130	UPQHC-1199	1 Female	05/06/1995	53575	DENTAL	SINGLE
520	6130	UPQHC-1199	1 Female	01/04/1977	53536	DENTAL	FAMILY
520	6130	UPQHC-1199	1 Female	04/24/1989	53593	DENTAL	FAMILY
520	6130	UPQHC-1199	0.8 Female	12/20/1959	53704		
520	6130	UPQHC-1199	1 Female	04/15/1970	53955	DENTAL	FAMILY
520	6130	UPQHC-1199	1 Female	09/23/1971	53717	DENTAL	FAMILY
520	6130	UPQHC-1199	1 Female	11/14/1987	53714	DENTAL	FAMILY
520	6130	UPQHC-1199	1 Female	06/24/1981	53562	DENTAL	FAMILY
520	6130	UPQHC-1199	1 Male	02/27/1989	53704	DENTAL	SINGLE
351	3030	WPPA-NONSUP'	1 Male	05/06/1982	53954	DENTAL	FAMILY
351	3030	WPPA-NONSUP'	1 Male	08/12/1969	53536	DENTAL	FAMILY
372	3165	WPPA-NONSUP'	1 Male	05/31/1979	53955	DENTAL	FAMILY
372	3165	WPPA-NONSUP'	1 Male	10/22/1984	53590	DENTAL	FAMILY
372	3165	WPPA-NONSUP'	1 Male	05/28/1994	53590	DENTAL	SINGLE
372	3165	WPPA-NONSUP'	1 Male	02/12/1993	53572	DENTAL	FAMILY
372	3165	WPPA-NONSUP'	1 Male	08/05/1977	53590	DENTAL	FAMILY
372	3165	WPPA-NONSUP'	1 Female	12/04/1987	53559	DENTAL	SINGLE
372	3165	WPPA-NONSUP'	1 Male	05/06/1977	53597	DENTAL	SINGLE
372	3165	WPPA-NONSUP'	1 Male	09/04/1979	53532	DENTAL	FAMILY
372	3165	WPPA-NONSUP'	1 Female	06/05/1968	53523	DENTAL	FAMILY
372	3165	WPPA-NONSUP'	1 Male	09/25/1990	53590	DENTAL	FAMILY
372	3165	WPPA-NONSUP'	1 Female	11/18/1993	53714	DENTAL	SINGLE
372	3165	WPPA-NONSUP'	1 Male	09/09/1992	53719	DENTAL	SINGLE
372	3165	WPPA-NONSUP'	1 Female	06/10/1981	53590	DENTAL	FAMILY
372	3165	WPPA-NONSUP'	1 Female	08/26/1993	53704	DENTAL	SINGLE

372	3165	WPPA-NONSUP'	1 Female	03/19/1992	53955	DENTAL	SINGLE
372	3165	WPPA-NONSUP'	1 Male	10/17/1992	53507	DENTAL	SINGLE
372	3165	WPPA-NONSUP'	1 Male	05/15/1989	53527	DENTAL	SINGLE
372	3255	WPPA-NONSUP'	1 Male	08/20/1987	53546	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Male	09/20/1971	53589	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Male	11/05/1970	53532	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Male	03/28/1970	53502	DENTAL	SINGLE
372	3255	WPPA-NONSUP'	1 Male	08/24/1970	53593	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Male	12/27/1966	53575	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Male	02/21/1967	53589	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Male	02/03/1973	53532	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Female	09/12/1975	53532	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Male	04/12/1969	53590	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Male	05/07/1969	53551	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Male	07/27/1978	53590	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Female	05/28/1966	53575	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Female	10/26/1978	53527	DENTAL	SINGLE
372	3255	WPPA-NONSUP'	1 Female	10/04/1976	53578	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Male	11/29/1968	53521	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Female	05/23/1968	53719	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Male	06/08/1971	53536	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Male	04/16/1972	53562	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Female	06/30/1970	53597		
372	3255	WPPA-NONSUP'	1 Male	03/15/1970	53718	DENTAL	SINGLE
372	3255	WPPA-NONSUP'	1 Male	07/17/1980	53590	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Male	08/24/1972	53711	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Male	10/20/1983	53532	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Male	03/01/1970	53590	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Male	05/18/1962	53714	DENTAL	SINGLE
372	3255	WPPA-NONSUP'	1 Male	11/21/1969	53532	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Female	01/03/1973	53704	DENTAL	SINGLE
372	3255	WPPA-NONSUP'	1 Male	04/19/1971	53954	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Male	06/28/1983	53532	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Female	01/09/1980	53508	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Male	04/26/1968	53711	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Female	07/10/1973	53527	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Male	06/03/1985	53527	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Male	01/31/1967	53719	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Male	09/06/1984	53590	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Female	06/19/1969	53704	DENTAL	SINGLE
372	3255	WPPA-NONSUP'	1 Male	12/01/1969	53561	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Female	06/30/1970	53590		
372	3255	WPPA-NONSUP'	1 Male	04/13/1970	53590	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Male	05/09/1972	53590	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Male	11/12/1970	53718	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Male	10/03/1973	53527	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Female	10/26/1974	53719	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Male	02/20/1976	53575	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Male	09/09/1971	53572	DENTAL	FAMILY

372	3255	WPPA-NONSUP'	1 Male	03/25/1969	53593	DENTAL	SINGLE
372	3255	WPPA-NONSUP'	1 Male	11/05/1971	53955	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Male	09/19/1971	53718		
372	3255	WPPA-NONSUP'	1 Male	10/25/1983	53521	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Male	05/30/1972	53590	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Male	03/21/1967	53558	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Male	01/16/1969	53590	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Male	05/21/1979	53548	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Male	03/22/1972	53590	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Male	10/01/1969	53594	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Male	12/04/1968	53718	DENTAL	SINGLE
372	3255	WPPA-NONSUP'	1 Male	04/22/1969	53901	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Male	06/23/1970	53590	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Male	07/11/1972	53523	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Male	10/17/1982	53528	DENTAL	FAMILY
372	3255	WPPA-NONSUP'	1 Male	07/14/1969	53913	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	03/23/1962	53590	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Female	06/05/1969	53714	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Female	03/10/1972	53502	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	05/13/1994	53558	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Female	11/29/1993	53094	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	10/05/1984	53589	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	04/05/1995	53593	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Female	07/20/1995	53598	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	04/07/1992	53719	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	03/01/1993	53711	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Female	02/01/1994	53925	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	07/24/1973	53511	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	10/22/1969	53590	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	03/29/1992	53593	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Female	04/22/1996	53545	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	10/07/1992	53572	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	12/28/1995	53551	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	09/27/1966	53521	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	10/25/1973	53590	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	07/03/1967	53555	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	09/22/1996	53558	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Female	03/19/1981	53593	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	01/18/1993	53559	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	06/14/1991	53536	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	07/29/1995	53508	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	11/18/1980	53576	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	10/09/1970	53704	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Female	09/26/1981	53549	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	01/23/1970	53523	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	01/26/1993	53517	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	09/01/1995	53590	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	10/31/1991	53589	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	02/08/1990	53532	DENTAL	SINGLE

372	3315	WPPA-NONSUP'	1 Male	05/07/1980	53532	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	12/30/1976	53959	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	12/21/1990	53532	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	07/05/1991	53590	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	07/06/1994	53719	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	12/11/1968	53718	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Female	02/24/1971	53551	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	10/04/1986	53527	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Female	12/28/1981	53532	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	01/18/1992	53532	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	07/11/1990	53527	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Female	02/24/1972	53707	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	05/25/1996	53593		
372	3315	WPPA-NONSUP'	1 Male	11/04/1994	53916	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	07/02/1993	53590	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	04/09/1968	53578	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	04/09/1968	53575	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Female	05/08/1982	53551	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	11/25/1967	53711	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Female	07/27/1996	53958	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	08/06/1988	53718		
372	3315	WPPA-NONSUP'	1 Male	04/01/1976	53563	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	03/05/1984	53589	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	10/13/1984	53563	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	06/17/1995	53546	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Female	10/13/1987	53538	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	10/12/1969	53546	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	07/08/1996	53590	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	02/11/1994	53590	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	10/03/1992	53593	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Female	09/15/1981	53916	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	06/01/1983	53558	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	07/08/1984	53532	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	09/19/1996	53562	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	04/04/1986	52003	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	10/17/1995	53593	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Female	11/30/1996	53597	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	04/16/1979	53597	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	03/01/1983	53511		
372	3315	WPPA-NONSUP'	1 Male	07/16/1985	53704	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	09/27/1982	53590	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Female	10/04/1995	53716	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	09/21/1976	53704	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	03/22/1985	53594	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Female	01/11/1994	53593	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	05/17/1991	53583	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	04/02/1988	53704	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	05/17/1975	53578	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	09/30/1992	53546	DENTAL	SINGLE

372	3315	WPPA-NONSUP'	1 Male	12/28/1988	53901	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	01/30/1983	53593	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	06/14/1994	53532	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	01/21/1994	53503	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Female	01/14/1992	53590	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	02/02/1993	53508	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	12/30/1972	53932	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	09/14/1988	53590	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	08/21/1977	53593	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	07/11/1970	53527	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	06/21/1969	53531	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Female	10/05/1985	53718	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	02/15/1999	53558		
372	3315	WPPA-NONSUP'	1 Male	02/26/1998	53704		
372	3315	WPPA-NONSUP'	1 Male	07/29/1981	53969	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	03/20/1974	53911	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	11/03/1997	53711	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	08/02/1987	53575	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	10/11/1973	53532	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	02/05/1981	53955	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Female	11/11/1974	53955		
372	3315	WPPA-NONSUP'	1 Male	07/19/1989	53598	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	04/04/1985	53590	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	09/05/1978	53718	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	11/03/1983	53590	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	10/25/1995	53590	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	05/03/1995	53718	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	02/03/1989	53704		
372	3315	WPPA-NONSUP'	1 Male	10/24/1974	53559	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Female	10/29/1995	53560	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	06/03/1998	53703		
372	3315	WPPA-NONSUP'	1 Male	07/01/1992	53719	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	07/06/1988	53916	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	04/09/1981	53598	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	07/26/1974	53955	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	12/22/1993	53589	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	10/13/1985	53137	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	12/30/1992	53717	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	10/21/1996	53562	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	01/07/1996	53528	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	03/29/1994	53711	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	07/14/1974	53714	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Female	06/17/1978	53713	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Female	10/03/1976	53589	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	01/07/1996	53545	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	11/22/1992	53051		
372	3315	WPPA-NONSUP'	1 Male	11/08/1992	53597	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	07/27/1993	53582	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	11/07/1995	53590	DENTAL	SINGLE

372	3315	WPPA-NONSUP'	1 Male	11/15/1991	53711	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	10/06/1978	53536	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	12/14/1993	53590	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Female	07/19/1986	53532	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	11/15/1975	53038	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	09/05/1997	53527	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	09/07/1988	53560	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	11/02/1984	53572	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	10/06/1986	53718	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	06/19/1987	53718	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	01/19/1998	53590	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Female	10/05/1970	53536	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	05/15/1983	53946	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	12/09/1987	53562	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Female	03/22/1996	53718	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	07/14/1980	53578	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Female	04/06/1965	53527	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	02/18/1992	53590	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	02/20/1997	53719	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Female	04/25/1987	53558	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	01/21/1993	53538	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	11/29/1984	53589	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	08/08/1967	53704	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	10/12/1992	53527		
372	3315	WPPA-NONSUP'	1 Female	12/29/1992	53718	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	05/09/1983	53790	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	04/15/1985	53532	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	08/09/1982	53532	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	03/02/1992	53534	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	01/19/1998	53705	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	08/11/1995	53916	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	03/02/1995	53590	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	08/04/1992	53527	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	10/09/1971	53546	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	08/12/1973	53590	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	07/28/1993	53719	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Female	12/23/1990	53590	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	08/14/1986	53716	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	07/27/1997	53189	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	11/05/1983	53222	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	08/14/1992	53718	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	12/04/1974	53532	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	11/29/1988	53590	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	10/12/1974	53590	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	01/26/1996	53705	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	04/27/1990	53523	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Female	05/24/1993	53713	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Female	12/22/1995	53590	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	09/05/1990	60115		

372	3315	WPPA-NONSUP'	1 Male	11/22/1991	53532	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Female	06/13/1991	53559	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	01/10/1982	53523	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	01/07/1975	53719	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	04/04/1980	53589	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Female	06/11/1994	53546	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Female	12/05/1975	53704	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	07/08/1994	53719	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	08/12/1981	53590	DENTAL	FAMILY
372	3315	WPPA-NONSUP'	1 Male	07/24/1998	53711	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	05/31/1996	53718	DENTAL	SINGLE
372	3315	WPPA-NONSUP'	1 Male	01/07/1990	53589	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Female	04/25/1982	53590	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	05/03/1976	53597	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Female	12/02/1990	53578	DENTAL	SINGLE
372	3390	WPPA-NONSUP'	1 Male	12/05/1974	53711	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	12/13/1971	53719	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	11/15/1973	53575	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Female	08/03/1978	53705	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	03/28/1983	53520	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Female	11/29/1984	53590		
372	3390	WPPA-NONSUP'	1 Male	07/30/1975	53593	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	10/04/1970	53549	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	02/24/1966	53559	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	03/26/1977	53534	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	04/30/1982	53546	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Female	08/23/1970	53558	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Female	07/24/1991	53593		
372	3390	WPPA-NONSUP'	1 Female	06/28/1989	53531	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	05/02/1992	53589	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	02/22/1981	53534	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Female	06/19/1986	53590		
372	3390	WPPA-NONSUP'	1 Male	07/30/1983	53597	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	07/19/1970	53590	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Female	06/02/1991	53955	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	09/06/1970	53575	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	03/14/1975	53532	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Female	07/02/1972	53562	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	07/01/1970	53532	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Female	08/02/1984	53560	DENTAL	SINGLE
372	3390	WPPA-NONSUP'	1 Male	08/23/1985	53545	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	11/10/1993	53593	DENTAL	SINGLE
372	3390	WPPA-NONSUP'	1 Female	06/16/1976	53718	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	06/17/1978	53590	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	08/27/1972	53534	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	09/29/1975	53593	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Female	11/05/1979	53572	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Female	09/11/1976	53558	DENTAL	SINGLE
372	3390	WPPA-NONSUP'	1 Male	11/19/1988	53575	DENTAL	SINGLE

372	3390	WPPA-NONSUP'	1 Female	10/19/1988	53523	DENTAL	SINGLE
372	3390	WPPA-NONSUP'	1 Male	10/19/1992	53717	DENTAL	SINGLE
372	3390	WPPA-NONSUP'	1 Male	12/23/1978	53590	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Female	01/24/1982	53590		
372	3390	WPPA-NONSUP'	1 Female	10/08/1990	61103	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	12/30/1976	53583	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	09/25/1991	53593	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	05/10/1971	53572	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	04/22/1986	53590	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	06/24/1976	53597	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	12/30/1972	53575	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	07/12/1987	53562	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	12/10/1977	53532		
372	3390	WPPA-NONSUP'	1 Female	09/19/1988	53590	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	05/28/1984	53529	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Female	08/31/1967	53714	DENTAL	SINGLE
372	3390	WPPA-NONSUP'	1 Male	03/10/1970	53527	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	04/20/1976	53560	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	05/29/1975	53536	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	05/21/1977	53590	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Female	03/22/1979	53534	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	07/25/1993	53597	DENTAL	SINGLE
372	3390	WPPA-NONSUP'	1 Male	12/12/1970	53590	DENTAL	SINGLE
372	3390	WPPA-NONSUP'	1 Male	09/24/1971	53590	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	10/14/1990	53559	DENTAL	SINGLE
372	3390	WPPA-NONSUP'	1 Male	08/08/1980	53563	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Female	09/03/1969	53527	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	10/08/1969	53716	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	12/08/1983	53559	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	09/21/1974	53590	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	09/29/1981	53704	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Female	06/18/1978	53590	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	03/27/1977	53597	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	05/21/1979	53718	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	02/28/1968	53955	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	04/01/1974	53718	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	02/10/1978	53714	DENTAL	SINGLE
372	3390	WPPA-NONSUP'	1 Male	08/17/1968	53508	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	07/18/1970	53538	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Female	01/12/1986	53538		
372	3390	WPPA-NONSUP'	1 Male	08/24/1971	53527	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Female	03/17/1976	53590	DENTAL	SINGLE
372	3390	WPPA-NONSUP'	1 Male	01/20/1969	53589	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	01/17/1967	53589	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	09/09/1974	53705		
372	3390	WPPA-NONSUP'	1 Female	11/24/1970	53590	DENTAL	SINGLE
372	3390	WPPA-NONSUP'	1 Male	07/17/1979	53590	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	04/10/1983	53589	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	12/15/1976	53527	DENTAL	SINGLE

372	3390	WPPA-NONSUP'	1 Male	03/31/1979	53563	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Female	05/23/1966	53516	DENTAL	SINGLE
372	3390	WPPA-NONSUP'	1 Male	07/08/1973	53574	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	04/13/1982	53527	DENTAL	SINGLE
372	3390	WPPA-NONSUP'	1 Female	03/05/1986	53913	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	09/18/1975	53590	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	04/03/1977	53598	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	12/14/1979	53593	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	12/17/1970	53555	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	09/16/1979	53527	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	11/13/1980	53593	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	12/30/1975	53521	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Female	02/28/1977	53718	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	01/21/1991	53718	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	05/14/1985	53551	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	04/11/1992	53593	DENTAL	SINGLE
372	3390	WPPA-NONSUP'	1 Male	09/28/1986	53704	DENTAL	SINGLE
372	3390	WPPA-NONSUP'	1 Male	08/20/1970	53555	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	10/05/1978	53711	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Female	12/24/1990	53532	DENTAL	SINGLE
372	3390	WPPA-NONSUP'	1 Male	06/30/1982	53508	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	11/26/1968	53590	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	05/21/1979	53563	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	05/26/1971	53719	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	03/16/1984	53527	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Female	10/03/1971	53546	DENTAL	SINGLE
372	3390	WPPA-NONSUP'	1 Male	10/11/1966	53546	DENTAL	SINGLE
372	3390	WPPA-NONSUP'	1 Female	03/01/1971	53570	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	01/13/1974	53597	DENTAL	FAMILY
372	3390	WPPA-NONSUP'	1 Male	09/29/1984	53703	DENTAL	SINGLE
372	3390	WPPA-NONSUP'	1 Female	01/25/1970	53590	DENTAL	SINGLE
372	3390	WPPA-NONSUP'	1 Male	01/29/1974	53558	DENTAL	SINGLE
372	3390	WPPA-NONSUP'	1 Male	02/16/1972	53719	DENTAL	FAMILY
372	3395	WPPA-NONSUP'	1 Male	09/29/1968	53718	DENTAL	FAMILY
372	3395	WPPA-NONSUP'	1 Male	07/08/1979	53534	DENTAL	FAMILY
372	3395	WPPA-NONSUP'	1 Male	06/11/1970	53532	DENTAL	FAMILY
372	3395	WPPA-NONSUP'	1 Male	01/12/1978	53575	DENTAL	FAMILY
372	3165	WPPA-SUPV	1 Male	07/12/1986	53532	DENTAL	FAMILY
372	3165	WPPA-SUPV	1 Male	10/04/1964	53597	DENTAL	FAMILY
372	3165	WPPA-SUPV	1 Male	10/30/1974	53590	DENTAL	FAMILY
372	3165	WPPA-SUPV	1 Male	12/01/1970	53527	DENTAL	FAMILY
372	3165	WPPA-SUPV	1 Male	09/30/1980	53532	DENTAL	FAMILY
372	3165	WPPA-SUPV	1 Female	11/11/1972	53718	DENTAL	FAMILY
372	3165	WPPA-SUPV	1 Female	02/01/1980	53718	DENTAL	FAMILY
372	3255	WPPA-SUPV	1 Male	07/07/1970	53527	DENTAL	FAMILY
372	3255	WPPA-SUPV	1 Male	11/14/1972	53558	DENTAL	FAMILY
372	3255	WPPA-SUPV	1 Male	02/04/1971	53590	DENTAL	FAMILY
372	3255	WPPA-SUPV	1 Male	05/16/1970	53718	DENTAL	FAMILY
372	3255	WPPA-SUPV	1 Male	11/05/1970	53558	DENTAL	FAMILY

372	3315	WPPA-SUPV	1 Male	06/07/1974	53529	DENTAL	FAMILY
372	3315	WPPA-SUPV	1 Male	01/14/1975	53536	DENTAL	FAMILY
372	3315	WPPA-SUPV	1 Not Specifie	05/07/1983	53529	DENTAL	FAMILY
372	3315	WPPA-SUPV	1 Male	06/17/1974	53593	DENTAL	FAMILY
372	3315	WPPA-SUPV	1 Male	09/04/1990	53551	DENTAL	FAMILY
372	3315	WPPA-SUPV	1 Male	10/27/1988	53713	DENTAL	SINGLE
372	3315	WPPA-SUPV	1 Male	09/06/1973	53575	DENTAL	FAMILY
372	3315	WPPA-SUPV	1 Male	02/28/1964	53911	DENTAL	FAMILY
372	3315	WPPA-SUPV	1 Male	03/31/1978	53559	DENTAL	FAMILY
372	3315	WPPA-SUPV	1 Male	02/15/1977	53532	DENTAL	FAMILY
372	3315	WPPA-SUPV	1 Male	05/10/1973	53590	DENTAL	FAMILY
372	3315	WPPA-SUPV	1 Male	11/21/1974	53038	DENTAL	SINGLE
372	3315	WPPA-SUPV	1 Female	10/18/1980	53545	DENTAL	FAMILY
372	3315	WPPA-SUPV	1 Male	01/06/1971	53538	DENTAL	FAMILY
372	3315	WPPA-SUPV	1 Female	10/31/1976	53913	DENTAL	FAMILY
372	3315	WPPA-SUPV	1 Male	02/15/1972	53593	DENTAL	FAMILY
372	3315	WPPA-SUPV	1 Female	03/03/1973	53527	DENTAL	FAMILY
372	3315	WPPA-SUPV	1 Male	09/26/1981	53718	DENTAL	FAMILY
372	3315	WPPA-SUPV	1 Male	04/23/1971	53718		
372	3390	WPPA-SUPV	1 Female	04/19/1972	53590	DENTAL	FAMILY
372	3390	WPPA-SUPV	1 Female	03/09/1970	53527		
372	3390	WPPA-SUPV	1 Male	04/20/1981	53597	DENTAL	FAMILY
372	3390	WPPA-SUPV	1 Male	01/06/1990	53575	DENTAL	FAMILY
372	3390	WPPA-SUPV	1 Female	08/21/1983	53590	DENTAL	FAMILY
372	3390	WPPA-SUPV	1 Male	07/11/1974	53527	DENTAL	FAMILY
372	3390	WPPA-SUPV	1 Male	03/25/1971	53548	DENTAL	FAMILY
372	3390	WPPA-SUPV	1 Male	10/25/1968	53546	DENTAL	FAMILY
372	3390	WPPA-SUPV	1 Male	08/21/1979	53575	DENTAL	FAMILY
372	3390	WPPA-SUPV	1 Male	06/19/1971	53925	DENTAL	FAMILY
372	3390	WPPA-SUPV	1 Male	04/15/1977	53528	DENTAL	FAMILY
372	3390	WPPA-SUPV	1 Male	07/22/1974	53590	DENTAL	FAMILY
372	3390	WPPA-SUPV	1 Male	10/28/1966	53590	DENTAL	FAMILY
372	3390	WPPA-SUPV	1 Male	08/05/1975	53590	DENTAL	FAMILY
372	3390	WPPA-SUPV	1 Not Specifie	09/30/1977	53575	DENTAL	FAMILY

Retiree Census-Dane County Dental

202=Direct Bill (quarterly) s=single
 203= Surviving Spouse (quarterly) p=single+ spouse
 204= Precision Direct Bill (monthly)

Relationship	Birthdate	Gender	Major Group Number	Sub Group Number	Coverage Type	Five-Digit Zip Code	Effective Date
	1 07/16/1955	F	7805		204 P	53590	3/1/2017
	2 11/23/1954	M	7805		204 P	53590	3/1/2017
	1 12/11/1955	F	7805		204 P	53558	3/1/2018
	1 11/24/1951	F	7805		204 P	53711	8/1/2018
	1 06/27/1966	M	7805		204 F	53719	9/1/2019
	1 07/05/1957	F	7805		204 S	53521	2/3/2018
	1 10/07/1949	F	7805		204 S	53527	1/19/2017
	1 09/12/1959	F	7805		204 K	53704	2/1/2021
	1 10/10/1953	F	7805		204 S	53502	8/1/2012
	1 08/25/1959	F	7805		204 S	53714	4/1/2020
	1 10/26/1935	F	7805		202 S	53716	1/1/2006
	1 12/18/1956	F	7805		204 P	53704	5/1/2018
	1 10/28/1948		7805		204 S	53949	10/1/2017
	1 09/10/1963	F	7805		204 F	53536	4/1/2021
	1 01/31/1958	F	7805		204 P	53559	6/1/2018
	1 09/12/1968	F	7805		204 S	53597	12/1/2020
	1 01/01/1950	F	7805		204 S	53718	3/1/2016
	1 05/22/1960	F	7805		204 P	53589	6/1/2021
	2 03/30/1957	M	7805		204 P	53589	6/1/2021
	1 08/03/1957	F	7805		204 S	86327	10/1/2014
	1 10/03/1927	F	7805		202 S	53223	1/1/2006
	1 07/30/1937	M	7805		202 S	53560	1/1/2006
	1 11/10/1934	M	7805		202 S	53575	1/1/2006
	1 06/24/1935	M	7805		202 S	53716	1/1/2006

1	11/21/1929	M	7805	202 S	53572	1/1/2006
1	02/05/1920	F	7805	202 S	53705	1/1/2006
1	04/19/1932	F	7805	202 S	53719	1/1/2006
1	07/07/1922	F	7805	202 S	53593	1/1/2006
1	11/15/1928	F	7805	202 S	53597	1/1/2006
1	07/19/1931	F	7805	202 S	53704	1/1/2006
1	01/29/1932	F	7805	202 S	53719	1/1/2006
1	06/07/1934	F	7805	202 S	53578	1/1/2006
1	02/01/1933	M	7805	202 S	53589	5/1/2012
1	02/26/1935	M	7805	202 S	53532	1/1/2021
1	04/17/1935	F	7805	203 S	53714	1/1/2007
1	08/05/1943	M	7805	202 P	53704	1/1/2007
1	08/01/1927	F	7805	202 S	53590	1/1/2006
1	01/05/1928	M	7805	202 P	53517	1/1/2007
1	08/18/1929	M	7805	202 S	53704	12/1/2019
1	03/09/1931	F	7805	202 S	53590	1/1/2008
1	06/23/1937	F	7805	203 S	53703	8/1/2006
1	12/17/1933	M	7805	202 S	53711	1/1/2006
1	04/19/1926	F	7805	203 S	53704	10/1/2009
1	03/06/1942	F	7805	203 S	53704	3/1/2009
1	06/11/1940	F	7805	204 S	53711	10/1/2008
1	12/13/1950	M	7805	204 S	53597	10/24/2015
1	11/14/1946	F	7805	204 P	86336	2/1/2013
1	06/28/1947	M	7805	202 S	53562	1/1/2006
1	02/27/1942	M	7805	204 P	53716	10/1/2008
1	01/11/1948	M	7805	204 S	53558	10/1/2008
1	10/30/1950	F	7805	204 P	53716	10/1/2008
1	01/14/1931	F	7805	202 P	53711	4/1/2006
1	08/30/1962	M	7805	204 F	54547	10/1/2018
1	11/11/1961	M	7805	204 S	53589	4/1/2017
1	08/09/1932	F	7805	202 S	53711	1/1/2011
1	02/01/1936	F	7805	202 S	53571	7/1/2012
1	06/14/1943	M	7805	204 P	53532	4/1/2015
1	05/26/1935	M	7805	202 P	53597	4/1/2006

1 02/10/1950	M	7805	204 S	53960	10/1/2008
1 09/24/1946	F	7805	204 P	53955	3/1/2009
1 10/30/1958	F	7805	204 P	50458	3/1/2014
1 01/01/1950	F	7805	204 S	53575	10/1/2014
1 12/03/1948	F	7805	204 S	53713	6/1/2018
1 11/26/1944	F	7805	204 S	53590	10/1/2008
1 05/16/1965	M	7805	204 S	53711	7/1/2019
1 05/05/1945	F	7805	202 S	53575	11/1/2013
1 10/31/1950	F	7805	204 S	53562	1/1/2013
1 06/09/1954	F	7805	204 S	53714	9/1/2009
1 07/12/1956	F	7805	204 P	53597	2/1/2013
1 12/30/1946	M	7805	204 P	53570	9/1/2009
1 03/18/1948	F	7805	202 S	54626	10/1/2008
1 10/10/1941	F	7805	204 P	53597	10/1/2008
1 08/22/1956	F	7805	204 S	53559	5/1/2016
1 09/19/1958	F	7805	204 P	53713	12/1/2020
1 08/07/1942	M	7805	202 S	53593	11/1/2006
1 02/12/1951	F	7805	204 P	53718	1/1/2019
1 10/29/1951	F	7805	204 P	53705	3/1/2017
1 01/06/1938	M	7805	202 S	53593	1/1/2006
1 02/17/1952	F	7805	204 S	53527	3/8/2015
1 01/12/1953	F	7805	204 S	53562	2/1/2014
1 11/13/1950	M	7805	204 P	53590	6/1/2018
1 05/19/1958	F	7805	202 S	53593	6/1/2008
1 12/28/1959	M	7805	204 P	53593	10/1/2017
1 10/14/1954	M	7805	204 P	53532	3/1/2020
1 01/31/1944	M	7805	202 P	53593	1/1/2007
1 05/22/1954	M	7805	204 P	53713	6/1/2015
1 10/08/1958	F	7805	204 S	53960	9/1/2020
1 12/10/1946	F	7805	204 S	53715	9/1/2011
1 07/15/1949	M	7805	204 S	53575	9/1/2011
1 06/13/1959	M	7805	204 P	53714	8/1/2014
1 07/22/1952	M	7805	204 S	53590	2/1/2010
1 08/15/1946	F	7805	204 P	53558	4/1/2012

1 09/26/1956	F	7805	204 P	85351	12/1/2011
1 08/29/1941	F	7805	202 P	53704	3/1/2008
1 10/17/1965	F	7805	204 S	53711	2/1/2021
1 07/23/1946	F	7805	204 P	53590	3/1/2012
1 09/16/1939	M	7805	204 P	53711	10/1/2008
1 04/30/1955	F	7805	204 P	53562	6/1/2014
1 10/03/1953	F	7805	204 P	53546	6/1/2018
1 10/27/1951	F	7805	204 S	53704	2/1/2012
1 05/29/1945	F	7805	204 S	53597	8/1/2014
1 09/14/1963	F	7805	204 S	53598	3/1/2021
1 09/20/1950	F	7805	204 P	53516	3/1/2014
1 09/10/1942	F	7805	202 S	85614	7/1/2012
1 10/17/1953	F	7805	204 P	53581	2/1/2017
1 04/07/1937	F	7805	202 S	53508	1/1/2006
1 03/11/1945	F	7805	204 S	34994	10/1/2008
1 06/03/1956	M	7805	204 P	94571	2/1/2016
1 10/20/1950	M	7805	204 P	53523	2/1/2013
1 08/29/1934	F	7805	202 S	53711	1/1/2006
1 08/15/1953	M	7805	204 P	53560	4/1/2021
1 08/10/1939	F	7805	202 P	53597	4/1/2006
1 06/13/1954	F	7805	204 S	53711	3/1/2017
1 11/04/1951	F	7805	204 S	53704	3/1/2017
1 01/29/1950	M	7805	204 P	53590	11/1/2012
1 04/16/1941	F	7805	202 S	53711	5/1/2008
1 11/02/1952	F	7805	204 S	53704	2/1/2016
1 03/13/1951	F	7805	204 P	53711	1/1/2017
1 12/08/1952	M	7805	204 S	53704	2/1/2016
1 09/08/1936	F	7805	204 P	53711	6/1/2018
1 03/04/1937	F	7805	204 S	53718	1/1/2013
1 07/02/1950	F	7805	204 P	53574	4/1/2014
1 08/23/1955	M	7805	204 S	54420	9/1/2009
1 05/17/1959	F	7805	204 P	53562	7/1/2014
1 06/14/1942	M	7805	204 S	53558	10/1/2008
1 04/17/1951	M	7805	204 P	53925	6/1/2013

1 07/14/1953	F	7805	204 S	53703	2/1/2015
1 01/19/1939	M	7805	202 P	53597	4/1/2006
1 07/09/1946	M	7805	204 P	53711	1/1/2012
1 08/15/1957	F	7805	204 P	53597	3/1/2020
1 11/03/1963	F	7805	204 S	53716	2/1/2019
1 08/16/1952	M	7805	204 S	53563	10/1/2015
1 06/30/1945	M	7805	204 P	53704	2/1/2010
1 06/03/1937	M	7805	202 P	53562	5/1/2007
1 05/01/1952	M	7805	204 P	53923	7/1/2016
1 11/18/1952	M	7805	204 S	53515	5/1/2018
1 05/25/1950	F	7805	204 S	53701	10/1/2008
1 02/24/1940	F	7805	204 S	54913	2/1/2010
1 03/22/1957	F	7805	204 S	53515	3/1/2016
1 08/17/1953	M	7805	204 P	53719	9/1/2017
1 01/07/1957	F	7805	202 F	53705	1/1/2007
1 12/06/1947	M	7805	204 S	53515	10/1/2008
1 01/03/1943	F	7805	204 P	53711	10/1/2008
1 10/18/1939	F	7805	202 S	53593	6/1/2007
1 06/17/1961	M	7805	204 P	53528	9/1/2020
1 12/04/1957	F	7805	204 P	53711	8/1/2019
1 12/12/1955	F	7805	204 S	53711	3/1/2018
1 12/14/1957	F	7805	204 S	53965	8/1/2014
1 07/01/1960	F	7805	204 S	53572	4/1/2021
1 07/14/1937	F	7805	202 S	53901	1/1/2006
1 02/17/1948	F	7805	204 P	53593	2/1/2012
1 06/17/1947	M	7805	204 P	53528	7/8/2013
1 01/16/1959	M	7805	204 P	53954	3/1/2016
1 09/07/1940	F	7805	204 S	53593	7/1/2011
1 05/27/1958	F	7805	204 P	53589	3/1/2021
1 12/15/1947	M	7805	204 S	53597	6/1/2014
1 07/30/1961	F	7805	202 S	53575	1/1/2006
1 01/23/1939	M	7805	202 S	53585	1/1/2006
1 03/26/1951	F	7805	204 P	55088	10/1/2008
1 11/24/1953	F	7805	204 S	53578	4/25/2020

1	12/01/1945	M	7805	202 S	53533	4/1/2016
1	08/10/1949	M	7805	204 S	53705	6/1/2013
1	09/10/1949	M	7805	204 S	53574	1/1/2011
1	10/22/1954	M	7805	204 P	53593	11/1/2015
1	11/09/1946	M	7805	204 S	53593	2/1/2010
1	01/02/1941	F	7805	202 S	53711	3/1/2009
1	09/17/1943	F	7805	202 S	53716	11/1/2006
1	02/14/1951	M	7805	204 F	54467	2/1/2009
1	05/30/1949	F	7805	204 S	53718	1/1/2012
1	11/14/1947	M	7805	204 S	53558	5/1/2010
1	12/27/1951	M	7805	204 P	53562	2/1/2013
1	09/26/1946	M	7805	204 S	53711	2/1/2009
1	09/07/1963	M	7805	204 F	53718	11/1/2017
1	12/22/1944	M	7805	204 S	53545	10/1/2008
1	07/10/1936	F	7805	202 S	53717	6/1/2008
1	07/18/1944	F	7805	202 S	33903	1/1/2006
1	02/18/1947	F	7805	204 S	53575	10/1/2008
1	05/05/1949	F	7805	204 P	53593	10/1/2008
1	02/13/1954	M	7805	204 S	53714	4/1/2010
1	02/13/1948	M	7805	204 P	53527	2/1/2014
1	02/10/1930	F	7805	202 S	53714	1/1/2006
1	06/03/1947	F	7805	204 P	53711	1/1/2019
1	01/03/1943	M	7805	202 P	53713	1/1/2008
1	12/01/1948	F	7805	202 S	53517	11/1/2019
1	01/09/1958	F	7805	204 S	53598	11/1/2020
1	03/22/1929	M	7805	202 S	53704	8/1/2020
1	01/22/1964	M	7805	204 F	53589	10/1/2018
1	07/05/1948	M	7805	204 P	53703	6/1/2017
1	12/30/1943	F	7805	202 S	80524	1/1/2006
1	04/06/1950	M	7805	204 S	53589	12/1/2010
1	11/12/1949	F	7805	204 P	53589	3/1/2015
1	12/27/1958	M	7805	204 P	53716	1/1/2021
1	11/29/1953	F	7805	204 S	53528	12/1/2014
1	09/03/1958	F	7805	204 S	53933	3/1/2020

1	09/20/1953	F	7805	204 P	53562	3/1/2014
1	07/19/1950	F	7805	204 S	53590	3/1/2009
1	12/10/1944	M	7805	204 S	53590	2/1/2011
1	01/09/1955	M	7805	204 S	53716	11/1/2017
1	09/12/1948	M	7805	204 P	53714	10/1/2011
1	10/12/1957	F	7805	202 S	53718	3/1/2007
1	04/09/1938	F	7805	202 S	53590	1/1/2006
1	09/13/1932	F	7805	202 S	53711	4/1/2008
1	01/26/1946	M	7805	204 P	53704	10/1/2008
1	08/19/1954	F	7805	204 S	53562	5/12/2013
1	01/26/1963	M	7805	204 P	89027	9/1/2018
1	02/26/1936	M	7805	202 S	53529	11/1/2014
1	03/22/1956	M	7805	204 S	53705	4/1/2018
1	10/05/1944	M	7805	204 S	53717	2/1/2012
1	08/10/1950	F	7805	204 P	53716	8/1/2013
1	12/13/1957	M	7805	204 P	53593	11/1/2020
1	03/03/1944	F	7805	202 S	53719	1/1/2006
1	03/25/1959	M	7805	204 P	53593	5/1/2020
1	04/25/1950	F	7805	204 P	53523	3/1/2013
1	01/15/1954	F	7805	204 P	53716	3/1/2020
1	02/11/1947	M	7805	204 S	53590	12/1/2009
1	07/13/1952	M	7805	204 P	53527	2/1/2011
1	07/20/1941	M	7805	202 P	53711	4/1/2006
1	01/09/1949	F	7805	202 P	53559	6/1/2007
1	10/05/1956	F	7805	204 S	53572	3/1/2015
1	07/18/1953	F	7805	204 S	53589	2/28/2020
1	12/21/1937	F	7805	202 P	53589	1/1/2009
1	08/16/1950	M	7805	202 P	53719	7/1/2007
1	09/24/1953	F	7805	204 S	53532	7/1/2015
1	04/27/1943	F	7805	204 S	53538	10/1/2008
1	05/11/1966	M	7805	204 F	53593	3/1/2021
1	10/01/1948	M	7805	204 P	53946	2/1/2010
1	04/03/1934	F	7805	202 S	53597	1/1/2006
1	09/20/1941	M	7805	202 P	53589	4/1/2006

1 03/04/1947	F	7805	202 S	53714	1/1/2019
1 09/25/1943	M	7805	202 P	53589	10/1/2012
1 10/02/1955	F	7805	204 P	53704	8/1/2016
1 02/28/1951	F	7805	204 S	53704	2/1/2010
1 02/21/1941	F	7805	204 S	53719	2/1/2011
1 09/04/1948	F	7805	204 S	53714	11/1/2013
1 03/04/1967	M	7805	204 P	53711	1/1/2021
1 08/24/1943	F	7805	202 S	53575	9/1/2007
1 09/02/1947	F	7805	204 P	53911	3/1/2010
1 01/26/1955	M	7805	204 S	32163	10/1/2008
1 08/19/1953	F	7805	204 P	53593	12/28/2013
1 09/20/1936	F	7805	202 S	60542	1/1/2006
1 02/16/1957	F	7805	204 P	53562	1/1/2014
1 05/21/1960	F	7805	204 P	53590	8/1/2018
1 10/14/1940	F	7805	202 S	61019	8/1/2008
1 11/05/1937	F	7805	202 S	53593	1/1/2006
1 03/31/1954	M	7805	204 S	53933	2/1/2012
1 06/15/1941	F	7805	202 P	78572	4/1/2006
1 03/29/1962	M	7805	204 S	53590	5/1/2017
1 10/09/1959	F	7805	204 S	53558	12/1/2014
1 01/05/1967	F	7805	204 S	53590	3/1/2020
1 12/09/1951	F	7805	204 P	53562	5/1/2015
1 04/27/1958	M	7805	204 F	53574	6/1/2013
1 09/14/1957	M	7805	204 P	34609	8/1/2016
1 01/24/1956	F	7805	204 S	53965	4/1/2018
1 05/20/1952	M	7805	204 S	53714	12/1/2014
1 09/23/1957	M	7805	204 P	53573	2/1/2013
1 11/21/1956	M	7805	204 P	53930	3/1/2019
1 11/21/1950	M	7805	204 P	53593	4/1/2013
1 09/14/1960	M	7805	204 F	53572	2/1/2021
1 05/27/1947	M	7805	204 S	53532	10/1/2008
1 09/22/1949	F	7805	204 P	53704	3/1/2014
1 03/13/1962	M	7805	204 P	54868	10/1/2013
1 08/14/1943	F	7805	204 S	53704	12/13/2017

1 02/19/1952	F	7805	202 P	54568	4/1/2008
1 12/28/1945	M	7805	204 P	53705	3/1/2011
1 10/14/1946	M	7805	204 S	53583	1/1/2021
1 03/28/1949	F	7805	204 S	53593	3/1/2015
1 02/28/1947	F	7805	204 S	53726	10/1/2008
1 09/20/1930	F	7805	202 S	53704	1/1/2006
1 12/27/1944	M	7805	204 P	53705	10/1/2008
1 07/10/1960	F	7805	204 S	53575	8/1/2012
1 12/26/1959	F	7805	204 S	53507	10/1/2012
1 05/30/1948	M	7805	204 P	53558	1/1/2016
1 11/18/1938	F	7805	204 S	53562	6/1/2012
1 03/02/1943	F	7805	204 S	53714	10/1/2008
1 07/17/1954	F	7805	204 S	53575	9/1/2016
1 09/08/1938	F	7805	202 F	53589	1/1/2010
1 09/26/1955	F	7805	204 S	95219	4/1/2012
1 04/09/1943	M	7805	202 P	53562	1/1/2007
1 01/11/1940	M	7805	202 S	53704	11/1/2008
1 08/17/1935	F	7805	202 S	33905	3/1/2010
1 07/28/1953	F	7805	204 S	53704	7/1/2015
1 12/24/1946	F	7805	204 P	53704	10/1/2008
1 10/05/1948	F	7805	204 P	53561	9/1/2011
1 08/04/1959	F	7805	204 P	53704	12/1/2020
1 11/09/1947	F	7805	204 S	53559	10/1/2008
1 12/16/1945	M	7805	204 S	53528	11/1/2014
1 12/19/1955	M	7805	204 P	53711	7/1/2018
1 03/27/1949	M	7805	204 S	53711	10/1/2008
1 04/30/1952	M	7805	204 S	53954	1/1/2020
1 10/07/1950	M	7805	204 S	53704	9/16/2016
1 12/15/1957	F	7805	204 F	53717	12/1/2015
1 01/27/1949	F	7805	204 S	53716	3/1/2018
1 07/10/1946	F	7805	204 S	53562	10/1/2008
1 09/08/1962	F	7805	204 F	53704	4/1/2019
1 10/08/1953	M	7805	204 P	53590	6/1/2019
1 10/27/1953	F	7805	204 P	53704	3/1/2016

1	11/29/1941	F	7805	202 S	53704	1/1/2006
1	06/18/1948	M	7805	204 S	53562	10/1/2008
1	08/04/1963	M	7805	204 P	53949	3/1/2017
1	06/23/1962	M	7805	204 P	53589	10/1/2020
1	06/24/1952	M	7805	204 P	53532	3/1/2016
1	05/24/1941	M	7805	204 S	53716	7/1/2016
1	11/04/1951	M	7805	204 P	53508	3/1/2010
1	10/12/1947	M	7805	202 S	53719	8/1/2011
1	01/13/1961	M	7805	204 S	53704	2/1/2019
1	01/09/1950	F	7805	204 P	53559	3/1/2012
1	11/04/1939	M	7805	202 S	53559	1/1/2006
1	01/14/1946	M	7805	202 S	53593	6/1/2018
1	01/06/1945	M	7805	202 P	53558	11/1/2007
1	05/29/1934	F	7805	202 S	55127	1/1/2006
1	03/25/1942	F	7805	204 S	53716	10/1/2008
1	03/30/1947	F	7805	202 P	53704	1/1/2007
1	12/30/1939	F	7805	202 S	53555	6/1/2014
1	10/13/1951	M	7805	204 P	53719	6/1/2017
1	08/17/1944	M	7805	204 P	53590	8/1/2009
1	06/25/1950	F	7805	204 P	53704	11/1/2017
1	09/16/1949	M	7805	204 P	53531	2/1/2010
1	07/24/1964	F	7805	204 F	53562	7/1/2018
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1	08/03/1947	F	7805	204 P	53562	6/1/2014
1	03/17/1952	M	7805	204 P	53536	10/1/2008
1	02/21/1946	F	7805	202 S	53913	9/1/2006
1	11/29/1959	F	7805	204 S	53575	3/1/2020
1	01/28/1951	F	7805	204 S	53704	1/1/2015
1	07/12/1961	F	7805	204 P	53589	4/1/2017
1	08/11/1938	M	7805	202 P	53534	4/1/2006
1	12/07/1944	F	7805	202 P	53590	6/1/2006
1	05/04/1957	M	7805	204 S	53704	3/1/2019
1	05/14/1946	F	7805	204 S	53705	12/1/2010
1	07/22/1940	F	7805	204 S	53534	12/1/2010

1	12/04/1931	M	7805	202 S	53562	8/1/2020
1	06/14/1956	F	7805	204 S	53711	5/1/2012
1	04/25/1938	F	7805	202 S	53714	1/1/2006
1	10/11/1960	M	7805	204 P	53528	4/1/2020
1	02/05/1958	M	7805	204 F	53572	10/1/2014
1	05/16/1940	F	7805	204 S	53716	2/1/2013
1	02/19/1948	M	7805	204 S	53711	6/1/2018
1	05/20/1950	M	7805	204 S	53704	2/1/2011
1	04/01/1948	M	7805	202 P	53590	12/1/2007
1	08/31/1939	M	7805	204 S	53532	8/1/2012
1	10/09/1951	M	7805	204 P	53572	10/1/2008
1	08/22/1948	F	7805	204 S	53711	4/1/2015
1	04/02/1941	F	7805	202 S	53575	4/1/2009
1	11/26/1961	F	7805	204 S	53718	8/1/2014
1	05/06/1958	F	7805	204 S	53704	6/1/2020
1	08/30/1928	F	7805	202 S	53718	1/1/2006
1	04/05/1948	F	7805	204 S	53704	7/1/2014
1	07/17/1956	F	7805	204 F	53593	1/1/2012
1	09/17/1937	F	7805	204 S	53714	10/1/2008
1	06/17/1950	F	7805	202 P	53716	4/1/2006
1	12/31/1957	M	7805	204 S	53560	2/1/2016
1	03/31/1940	F	7805	202 S	53589	7/1/2016
1	09/27/1939	M	7805	202 P	53590	4/1/2006
1	02/15/1953	F	7805	204 S	53590	4/1/2013
1	02/13/1953	M	7805	204 S	53713	2/1/2013
1	06/29/1946	F	7805	202 S	53593	6/1/2007
1	02/01/1954	F	7805	204 P	95687	10/1/2017
1	04/15/1953	F	7805	204 P	53718	9/1/2017
1	08/09/1946	M	7805	204 P	53704	7/1/2014
1	02/24/1950	M	7805	204 S	53528	4/1/2017
1	08/09/1953	F	7805	204 S	53704	2/1/2010
1	10/13/1954	M	7805	204 P	53593	1/1/2020
1	01/19/1941	F	7805	204 S	53716	10/1/2008
1	08/10/1951	M	7805	204 S	53555	2/1/2014

1	10/20/1956	F	7805	204 P	53711	5/1/2018
1	04/17/1953	M	7805	204 S	53716	10/1/2008
1	01/31/1955	F	7805	204 P	53716	6/1/2013
1	01/31/1939	F	7805	202 S	53718	8/1/2009
1	11/09/1949	M	7805	204 S	53558	9/25/2020
1	02/01/1960	F	7805	204 P	32955	4/1/2010
1	09/04/1940	F	7805	204 S	53718	2/1/2010
1	11/12/1938	F	7805	202 S	53714	4/1/2017
1	09/26/1936	F	7805	202 S	53704	1/1/2006
1	01/26/1967	M	7805	204 F	53517	6/1/2020
1	12/28/1939	M	7805	202 P	53715	4/1/2006
1	04/10/1948	F	7805	204 S	53711	10/1/2008
1	10/27/1945	M	7805	202 P	53572	6/1/2018
1	10/02/1946	F	7805	204 S	53532	4/1/2015
1	07/21/1943	F	7805	204 S	53575	5/1/2009
1	12/23/1947	M	7805	204 S	53704	5/1/2013
1	03/26/1941	M	7805	204 S	34104	10/1/2008
1	07/08/1939	F	7805	202 S	53532	1/1/2006
1	11/09/1946	F	7805	204 P	53562	12/1/2010
1	01/10/1956	F	7805	204 P	53532	12/1/2020
1	08/02/1949	F	7805	204 P	53589	10/1/2012
1	05/17/1964	M	7805	204 S	53521	2/1/2015
1	02/13/1964	M	7805	204 S	53949	5/1/2021
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1	01/26/1940	F	7805	202 S	53589	1/1/2006
1	08/28/1947	M	7805	204 P	53716	1/1/2012
1	06/13/1944	F	7805	202 S	53704	1/1/2006
1	05/31/1935	M	7805	202 P	53711	4/1/2006
1	04/21/1952	F	7805	204 S	53559	11/1/2009
1	01/16/1946	F	7805	204 S	53538	4/1/2009
1	07/12/1953	M	7805	204 S	53719	5/1/2011
1	08/07/1949	M	7805	204 P	53713	1/1/2018
1	01/13/1940	M	7805	202 P	53558	4/1/2006
1	05/11/1950	M	7805	202 P	53916	7/1/2007

1 01/19/1947	M	7805	204 P	53523	2/1/2009
1 01/18/1961	F	7805	204 P	53589	4/1/2015
1 07/28/1954	F	7805	204 P	53711	9/1/2009
1 03/16/1948	F	7805	204 P	53704	3/1/2013
1 04/03/1941	F	7805	202 S	53508	1/1/2006
1 04/01/1931	M	7805	202 S	53562	1/1/2006
1 01/10/1955	F	7805	204 P	53558	7/1/2015
1 05/18/1966	M	7805	204 S	53574	1/31/2021
1 11/13/1933	M	7805	202 P	53583	4/1/2006
1 07/25/1955	F	7805	204 S	53507	4/1/2017
1 08/17/1948	F	7805	204 P	53575	11/1/2009
1 05/25/1950	M	7805	204 S	53561	6/1/2018
1 01/25/1947	M	7805	204 P	53597	6/1/2015
1 10/04/1949	F	7805	204 F	53705	4/1/2015
1 05/05/1952	M	7805	204 P	53589	9/1/2015
1 04/05/1947	M	7805	204 P	53718	10/1/2008
1 10/07/1949	M	7805	204 P	53546	7/1/2013
1 03/02/1956	F	7805	204 P	53590	2/1/2015
1 11/03/1958	M	7805	204 P	53704	2/1/2012
1 02/11/1962	M	7805	204 S	53572	6/1/2020
1 12/31/1953	F	7805	204 S	53590	3/1/2020
1 12/07/1943	F	7805	204 S	53711	6/1/2018
1 01/29/1948	F	7805	204 S	53713	8/1/2018
1 05/06/1942	F	7805	202 S	53953	1/1/2006
1 08/10/1952	M	7805	204 P	53704	2/1/2013
1 12/08/1954	F	7805	204 P	53523	3/1/2018
1 12/05/1937	M	7805	204 P	53711	3/1/2014
1 01/25/1951	M	7805	204 P	53559	5/1/2010
1 08/08/1952	M	7805	204 P	53562	6/1/2018
1 02/15/1947	F	7805	204 P	53597	5/1/2014
1 09/13/1939	M	7805	202 S	53545	1/1/2006
1 05/01/1949	M	7805	202 P	53531	4/1/2006
1 08/31/1959	M	7805	204 S	53572	4/1/2021
1 11/29/1949	F	7805	204 P	53575	1/1/2012

1 05/13/1959	M	7805	204 S	53589	8/1/2015
1 04/09/1947	M	7805	202 P	53538	10/1/2006
1 08/20/1955	F	7805	204 S	53517	6/25/2018
1 03/26/1952	F	7805	204 S	53704	5/1/2010
1 06/04/1940	F	7805	202 S	53546	11/1/2007
1 11/27/1950	F	7805	204 S	53589	12/1/2010
1 05/19/1943	M	7805	204 P	33707	10/1/2008
1 05/18/1960	M	7805	204 P	53039	8/1/2019
1 07/23/1948	F	7805	204 P	53704	2/1/2015
1 07/23/1956	F	7805	204 S	53713	2/1/2013
1 08/15/1954	M	7805	204 S	53578	6/1/2014
1 06/23/1952	M	7805	204 P	53572	8/1/2012
1 09/08/1946	M	7805	204 S	53572	10/1/2008
1 09/26/1955	F	7805	204 S	53714	2/1/2021
1 05/08/1956	M	7805	204 P	53711	3/1/2019
1 08/09/1948	M	7805	204 S	53597	10/1/2008
1 10/25/1954	F	7805	204 S	53581	6/19/2018
1 04/25/1945	M	7805	202 P	53593	1/1/2007
1 03/20/1957	F	7805	204 S	53704	3/1/2017
1 12/12/1950	M	7805	204 S	53589	10/1/2008
1 06/20/1944	F	7805	204 S	53528	8/1/2010
1 01/25/1957	F	7805	204 S	53925	7/1/2012
1 02/05/1961	M	7805	204 P	53575	4/1/2021
1 06/24/1947	M	7805	204 P	53590	7/1/2014
1 06/24/1965	M	7805	204 P	53532	10/1/2018
1 10/22/1961	M	7805	204 S	53711	3/1/2017
1 01/07/1943	M	7805	204 P	53572	2/1/2010
1 08/06/1941	F	7805	202 S	53717	1/1/2006
1 02/08/1953	F	7805	204 S	53532	6/1/2019
1 04/15/1964	F	7805	204 P	53528	6/1/2019
1 04/20/1940	M	7805	202 S	53562	7/1/2015
1 04/18/1944	F	7805	202 P	53711	11/1/2006
1 02/23/1968	F	7805	204 P	53716	5/1/2021
1 12/01/1948	F	7805	204 S	53726	2/1/2012

1 08/06/1938	M	7805	202 S	53597	4/1/2007
1 03/19/1942	F	7805	202 P	53597	4/1/2006
1 01/13/1956	F	7805	204 S	53504	12/1/2018
1 11/09/1949	M	7805	204 P	53517	2/1/2009
1 11/30/1944	F	7805	202 S	34465	4/1/2008
1 03/08/1957	M	7805	204 P	53532	3/1/2020
1 11/18/1945	M	7805	202 P	53711	8/1/2008
1 03/10/1952	M	7805	204 P	53716	1/1/2016
1 01/25/1957	M	7805	204 P	53704	1/1/2017
1 10/26/1936	F	7805	202 S	53711	1/1/2006
1 07/27/1943	M	7805	202 P	53726	4/1/2008
1 08/23/1950	M	7805	204 S	53715	10/1/2013
1 12/04/1953	F	7805	204 S	53572	2/1/2020
1 07/31/1940	F	7805	202 S	53572	1/1/2007
1 04/30/1953	F	7805	204 S	53532	1/1/2016
1 11/09/1962	M	7805	204 P	53590	6/4/2016
1 10/30/1947	F	7805	202 S	53716	5/1/2008
1 07/21/1939	F	7805	202 S	54981	1/1/2006
1 03/08/1944	M	7805	202 P	53713	11/1/2006
1 10/06/1959	M	7805	204 P	53590	1/1/2021
1 12/14/1955	F	7805	204 K	53558	6/1/2019
1 07/11/1948	M	7805	204 S	53704	12/1/2018
1 06/21/1940	M	7805	202 P	53589	4/1/2006
1 03/18/1958	F	7805	204 P	53575	10/1/2018
1 05/30/1934	F	7805	202 S	53711	10/1/2019
1 02/05/1952	F	7805	204 S	53081	11/1/2016
1 10/27/1966	M	7805	204 F	53711	11/1/2019
1 10/15/1961	F	7805	204 P	53719	12/1/2016
1 07/31/1953	M	7805	204 P	53562	2/1/2019
1 09/21/1962	F	7805	204 S	53508	7/1/2019
1 09/15/1953	F	7805	204 S	53704	10/1/2018
1 12/25/1957	F	7805	204 P	53532	8/1/2017
1 07/28/1957	M	7805	204 P	53532	4/1/2019
1 06/20/1961	M	7805	204 F	53718	12/1/2017

1 04/28/1963	F	7805	204 S	85122	12/1/2020
1 05/20/1953	M	7805	204 S	85387	7/1/2015
1 11/29/1952	M	7805	204 P	53523	6/1/2017
1 06/20/1951	M	7805	204 S	53716	2/1/2009
1 10/20/1934	F	7805	202 S	34231	1/1/2006
1 08/11/1933	F	7805	202 S	53713	12/1/2008
1 03/27/1939	F	7805	202 S	53593	1/1/2006
1 09/11/1949	F	7805	204 S	53704	12/1/2009
1 11/28/1961	M	7805	204 P	85390	3/1/2012
1 11/02/1950	F	7805	204 S	53515	5/1/2012
1 09/06/1935	F	7805	202 S	53711	7/1/2020
1 09/19/1960	M	7805	204 P	53590	3/1/2016
1 10/23/1954	F	7805	204 P	53594	10/1/2018
1 12/22/1948	M	7805	204 P	53593	10/1/2008
1 08/02/1949	F	7805	202 S	53719	4/1/2008
1 05/15/1960	M	7805	204 S	53719	12/1/2020
1 01/26/1957	M	7805	204 P	53704	6/1/2018
1 05/02/1947	F	7805	204 S	53590	3/1/2014
1 04/25/1964	M	7805	204 F	53559	12/1/2018
1 12/13/1957	M	7805	204 S	53563	2/1/2013
1 01/09/1949	F	7805	204 P	53704	7/1/2015
1 07/12/1958	F	7805	204 S	53716	12/1/2020
1 09/22/1945	F	7805	204 S	53528	10/1/2008
1 05/06/1942	M	7805	202 S	53536	9/1/2015
1 09/03/1954	F	7805	204 S	53521	10/1/2014
1 03/04/1936	F	7805	204 S	53718	5/1/2012
1 08/29/1955	M	7805	204 S	53534	11/1/2008
1 11/09/1938	F	7805	204 P	53711	10/1/2008
1 08/12/1947	F	7805	202 S	53597	4/1/2020
1 07/22/1951	F	7805	204 P	54942	10/1/2008
1 01/13/1954	F	7805	204 F	53704	1/1/2019
1 08/25/1958	F	7805	204 P	53575	3/1/2019
1 05/12/1948	F	7805	204 S	53711	4/1/2015
1 11/02/1962	F	7805	204 F	53532	3/1/2016

1 05/01/1952	F	7805	204 P	53716	3/1/2018
1 07/02/1943	F	7805	204 S	53933	2/1/2010
1 07/31/1945	F	7805	204 P	53715	2/1/2013
1 05/19/1946	M	7805	204 S	53955	6/1/2010
1 12/15/1953	M	7805	204 P	53094	10/1/2012
1 11/08/1947	F	7805	204 S	53562	8/1/2014
1 08/19/1961	F	7805	204 P	53531	2/1/2017
1 01/21/1942	M	7805	202 P	53575	4/1/2006
1 01/31/1950	M	7805	204 S	53534	6/1/2009
1 01/15/1964	F	7805	204 S	53718	3/1/2021
1 02/24/1945	M	7805	204 S	54482	2/1/2014
1 02/10/1954	F	7805	204 S	53523	7/1/2013
1 02/13/1954	F	7805	204 K	53704	4/1/2012
1 06/09/1954	F	7805	204 P	53597	3/1/2018
1 03/23/1948	F	7805	204 S	53703	11/1/2010
1 10/07/1952	M	7805	204 P	53713	5/1/2014
1 01/08/1950	F	7805	204 S	54452	2/1/2010
1 09/10/1945	M	7805	204 S	53589	2/1/2010
1 09/24/1955	M	7805	204 P	53916	11/1/2018
1 11/16/1949	F	7805	202 S	53589	1/1/2006
1 07/31/1941	F	7805	202 S	53551	4/1/2016
1 02/19/1961	M	7805	204 F	53516	4/1/2014
1 06/27/1946	F	7805	204 S	53593	10/1/2008
1 10/28/1936	F	7805	202 S	53574	10/1/2015
1 02/17/1950	M	7805	204 P	53590	3/1/2010
1 01/22/1933	F	7805	202 S	77375	1/1/2006
1 03/02/1941	M	7805	202 P	53597	12/1/2015
1 04/30/1933	F	7805	202 S	53714	1/1/2006
1 09/09/1924	F	7805	203 S	53590	1/1/2007
1 01/08/1940	F	7805	203 S	53714	6/1/2006
1 12/03/1923	M	7805	203 S	53572	3/1/2015
1 01/08/1927	F	7805	203 S	53593	1/1/2007
1 09/14/1918	F	7805	202 S	53562	1/1/2006
1 07/21/1926	F	7805	203 S	53716	11/1/2009

1	02/05/1927	M	7805	202 P	53597	4/1/2006
1	03/24/1953	M	7805	202 S	53901	4/1/2014
1	01/31/1937	F	7805	203 S	53562	4/1/2007
1	12/25/1942	M	7805	204 S	53716	1/1/2013
1	08/20/1936	F	7805	203 S	53597	1/1/2007
1	12/22/1926	M	7805	203 S	32771	1/1/2007
1	04/28/1951	M	7805	202 S	53562	1/1/2006
1	05/28/1941	F	7805	202 S	53527	1/1/2012
1	02/14/1927	M	7805	202 S	53521	6/1/2008
2	06/05/1950	M	7805	204 P	53911	3/1/2010
2	02/03/1953	M	7805	204 P	53955	3/1/2009
1	10/05/1952	M	7805	204 P	53716	5/1/2017
2	07/02/1937	M	7805	204 P	53718	1/1/2019
1	01/21/1959	F	7805	204 P	53715	3/1/2019
1	07/09/1961	F	7805	204 S	53704	10/1/2020
2	04/14/1957	F	7805	204 P	53039	8/1/2019
2	11/16/1953	M	7805	204 P	53523	3/1/2018
2	07/23/1958	M	7805	204 P	53590	8/1/2018
2	10/07/1947	F	7805	204 P	53528	7/8/2013
1	09/14/1935	M	7805	202 P	53716	4/1/2006
2	03/22/1940	F	7805	202 P	53716	4/1/2006
2	06/19/1954	M	7805	204 P	53716	3/1/2020
2	07/28/1951	F	7805	204 P	53704	10/1/2008
2	09/10/1952	M	7805	204 P	53593	10/1/2008
2	09/03/1958	F	7805	204 P	53593	11/1/2015
2	05/30/1941	F	7805	202 P	53597	4/1/2006
2	12/28/1935	M	7805	204 P	53711	6/1/2018
2	03/09/1949	F	7805	204 P	53558	1/1/2016
2	11/01/1952	M	7805	204 P	53546	6/1/2018
2	02/14/1939	F	7805	202 P	53597	4/1/2006
2	06/25/1953	M	7805	204 P	53704	3/1/2016
2	10/27/1960	M	7805	204 P	53575	10/1/2018
2	08/20/1944	M	7805	204 P	53562	7/1/2014
2	07/22/1963	F	7805	204 P	53589	10/1/2020

2 07/03/1950	F	7805	204 P	53527	2/1/2014
2 12/08/1949	M	7805	204 P	53711	10/1/2008
2 05/19/1948	F	7805	202 P	53713	1/1/2008
2 04/22/1943	M	7805	204 P	53558	4/1/2012
2 08/04/1944	F	7805	202 P	53558	11/1/2007
2 07/22/1952	M	7805	204 P	53711	5/1/2018
2 03/15/1951	M	7805	204 P	53562	6/1/2014
1 05/15/1939	F	7805	203 S	53597	1/1/2007
2 11/14/1951	F	7805	204 P	53593	10/1/2008
1 07/19/1944	M	7805	204 P	53589	3/1/2009
2 04/09/1946	F	7805	204 P	53589	3/1/2009
2 08/15/1947	M	7805	204 P	53561	9/1/2011
2 04/19/1942	F	7805	202 P	53711	4/1/2006
2 10/01/1948	F	7805	204 P	53711	1/1/2012
2 08/04/1941	F	7805	202 P	53715	4/1/2006
2 03/06/1956	F	7805	204 P	53711	7/1/2018
2 12/16/1963	F	7805	204 F	53572	2/1/2021
2 01/01/1949	M	7805	204 P	53716	6/1/2013
2 05/31/1958	F	7805	204 P	53532	4/1/2019
2 09/29/1955	M	7805	204 P	53597	3/1/2020
2 07/15/1946	F	7805	204 P	53590	3/1/2010
2 04/28/1951	M	7805	204 P	53575	3/1/2019
2 08/09/1941	M	7805	202 P	53597	4/1/2006
2 02/21/1960	F	7805	204 P	34609	8/1/2016
2 04/28/1958	M	7805	204 P	53589	3/1/2021
2 08/16/1954	M	7805	204 P	50458	3/1/2014
2 08/20/1951	M	7805	204 P	53589	3/1/2015
2 09/10/1958	F	7805	204 P	53590	3/1/2016
2 12/13/1951	F	7805	204 P	53589	9/1/2015
2 11/20/1951	M	7805	204 P	53581	2/1/2017
2 03/20/1944	F	7805	204 P	53590	8/1/2009
2 02/04/1951	F	7805	204 P	53523	2/1/2013
2 02/14/1946	M	7805	204 P	53597	10/1/2008
2 03/20/1947	F	7805	202 P	53590	4/1/2006

1	01/18/1951	F	7805	204 S	53916	8/1/2016
2	02/13/1944	F	7805	204 P	53705	3/1/2011
2	03/11/1948	M	7805	204 P	85351	12/1/2011
2	08/31/1950	F	7805	204 P	53559	5/1/2010
2	09/02/1943	F	7805	202 P	53726	4/1/2008
2	01/15/1957	F	7805	204 P	53590	6/1/2019
2	02/19/1948	M	7805	204 P	53559	3/1/2012
2	09/12/1944	M	7805	204 P	53715	2/1/2013
2	06/17/1940	M	7805	202 P	78572	4/1/2006
2	11/03/1949	F	7805	202 P	53590	12/1/2007
4	04/29/1989	F	7805	204 F	53572	10/1/2014
2	07/15/1940	F	7805	202 P	53597	4/1/2006
2	08/01/1940	F	7805	202 P	53562	5/1/2007
2	10/04/1958	F	7805	204 P	53532	3/1/2020
2	01/20/1948	F	7805	204 P	53714	10/1/2011
2	06/12/1957	F	7805	204 P	53716	1/1/2016
2	12/28/1952	M	7805	204 P	53589	4/1/2015
2	09/15/1946	F	7805	202 P	53593	1/1/2007
2	11/26/1941	F	7805	204 P	53711	10/1/2008
2	01/26/1956	M	7805	204 P	53558	3/1/2018
2	05/20/1948	F	7805	204 P	53532	4/1/2015
2	11/05/1960	F	7805	204 P	53930	3/1/2019
1	11/02/1965	M	7805	204 S	53704	10/1/2020
1	06/05/1963	M	7805	204 S	54177	11/1/2016
2	09/13/1954	F	7805	204 P	53704	7/1/2014
2	03/03/1958	F	7805	204 P	53925	6/1/2013
2	11/07/1949	M	7805	202 P	54568	4/1/2008
2	01/09/1963	F	7805	204 F	53516	4/1/2014
2	08/11/1956	F	7805	204 P	53719	9/1/2017
2	10/09/1963	F	7805	204 P	89027	9/1/2018
2	06/13/1960	F	7805	204 F	53572	10/1/2014
2	11/28/1942	M	7805	202 P	53559	6/1/2007
2	01/25/1954	F	7805	204 P	53562	2/1/2013
2	10/10/1950	F	7805	202 P	53713	11/1/2006

2	07/27/1951	M	7805	204 P	53516	3/1/2014
2	03/28/1955	M	7805	204 P	53562	1/1/2014
2	04/20/1949	M	7805	204 P	53705	3/1/2017
2	02/17/1951	M	7805	202 P	53531	4/1/2006
2	08/01/1956	F	7805	204 P	53916	11/1/2018
2	03/16/1952	F	7805	204 P	53704	2/1/2013
1	09/01/1956	F	7805	204 S	53719	7/1/2018
1	07/30/1941	F	7805	204 S	53590	2/1/2010
2	07/17/1960	F	7805	204 P	53593	10/1/2017
2	04/27/1949	F	7805	202 P	53916	7/1/2007
2	10/28/1953	F	7805	204 P	53508	3/1/2010
2	09/30/1944	F	7805	202 P	53589	4/1/2006
2	04/27/1950	F	7805	204 P	53590	11/1/2012
2	12/31/1937	M	7805	202 P	53597	4/1/2006
2	10/30/1968	F	7805	204 F	53559	12/1/2018
2	10/31/1951	F	7805	204 P	53562	6/1/2018
2	05/19/1954	F	7805	204 F	54467	2/1/2009
2	11/01/1924	M	7805	202 P	53711	4/1/2006
2	01/31/1953	F	7805	204 P	53713	1/1/2018
2	12/24/1948	M	7805	204 P	53575	1/1/2012
2	12/27/1935	M	7805	204 P	53711	10/1/2008
2	12/17/1956	F	7805	204 P	53593	1/1/2020
2	04/01/1942	F	7805	204 P	53711	3/1/2014
2	02/09/1948	M	7805	204 P	53593	12/28/2013
2	07/09/1946	M	7805	202 P	53704	1/1/2007
2	08/26/1949	M	7805	204 P	53562	5/1/2015
1	06/29/1948	F	7805	204 P	53719	3/1/2017
2	10/08/1948	M	7805	204 P	53719	3/1/2017
1	09/11/1944	F	7805	202 S	53536	6/1/2008
2	01/18/1964	F	7805	204 P	53593	11/1/2020
1	05/08/1946	F	7805	204 S	33928	7/1/2020
2	07/11/1958	M	7805	204 P	53532	12/1/2020
2	02/13/1957	F	7805	204 P	53562	2/1/2019
2	06/03/1954	F	7805	204 P	53923	7/1/2016

2 06/01/1950	F	7805	204 P	53716	1/1/2012
2 07/09/1951	F	7805	204 P	53590	6/1/2018
2 01/26/1946	F	7805	202 P	53711	8/1/2008
2 06/05/1943	F	7805	204 P	53572	2/1/2010
2 08/23/1947	F	7805	202 P	53711	4/1/2006
2 09/29/1939	M	7805	202 P	53704	3/1/2008
2 05/04/1961	F	7805	204 P	85390	3/1/2012
2 08/28/1948	F	7805	204 P	94571	2/1/2016
2 09/08/1952	F	7805	204 P	53718	10/1/2008
2 11/11/1946	F	7805	204 P	53705	10/1/2008
2 04/01/1967	F	7805	204 F	53589	10/1/2018
2 11/20/1952	F	7805	204 P	53719	6/1/2017
2 01/19/1947	F	7805	204 P	53523	2/1/2009
2 06/27/1961	F	7805	204 F	53718	12/1/2017
2 03/12/1962	F	7805	204 P	53716	1/1/2021
2 01/12/1948	F	7805	204 P	53703	6/1/2017
2 05/05/1962	F	7805	204 P	53573	2/1/2013
2 05/06/1946	F	7805	204 P	33707	10/1/2008
2 01/06/1951	F	7805	204 P	53523	6/1/2017
2 03/25/1968	F	7805	204 F	53517	6/1/2020
1 08/02/1955	F	7805	204 P	76522	8/19/2019
1 04/09/1964	M	7805	204 F	53597	11/1/2020
2 10/16/1964	F	7805	204 F	53597	11/1/2020
1 07/18/1957	F	7805	202 S	53550	9/1/2007
2 07/31/1961	M	7805	204 F	53704	4/1/2019
2 03/29/1955	F	7805	204 P	53546	7/1/2013
2 01/18/1939	F	7805	204 P	53517	2/1/2009
2 03/22/1952	F	7805	204 P	53590	7/1/2014
2 08/25/1943	F	7805	204 P	53716	10/1/2008
2 11/22/1947	M	7805	204 P	53574	4/1/2014
1 10/11/1944	F	7805	204 S	53716	1/1/2015
2 03/15/1949	F	7805	204 P	53589	3/1/2011
2 03/13/1956	M	7805	204 P	53590	2/1/2015
2 06/18/1955	M	7805	204 P	53597	3/1/2018

2	06/14/1947	M	7805	204 P	53562	6/1/2014
2	05/16/1945	M	7805	204 P	53575	11/1/2009
2	03/16/1954	F	7805	204 P	53711	3/1/2019
2	11/19/1945	M	7805	204 P	54942	10/1/2008
2	06/08/1950	M	7805	204 P	53716	8/1/2013
1	04/29/1965	M	7805	204 F	53571	4/1/2021
2	01/31/1947	M	7805	204 F	53705	4/1/2015
2	03/02/1945	F	7805	202 P	53558	4/1/2006
1	06/03/1961	F	7805	204 F	53521	2/1/2021
2	12/11/1962	M	7805	204 F	53521	2/1/2021
2	12/24/1950	M	7805	204 P	53711	1/1/2017
2	10/22/1954	M	7805	204 P	53711	9/1/2009
2	02/20/1959	M	7805	204 P	53558	7/1/2015
2	01/07/1952	F	7805	204 P	53532	3/1/2016
1	11/01/1963	M	7805	204 S	53590	3/1/2017
1	02/08/1959	F	7805	204 S	53714	12/1/2018
2	01/19/1962	F	7805	204 P	53590	1/1/2021
2	10/27/1946	M	7805	204 P	53704	3/1/2013
2	10/27/1947	F	7805	204 P	53531	2/1/2010
2	04/24/1942	F	7805	202 P	53575	4/1/2006
2	01/01/1946	M	7805	204 P	86336	2/1/2013
1	10/12/1947	F	7805	204 P	53558	12/1/2011
2	11/12/1945	M	7805	204 P	53558	12/1/2011
2	10/28/1951	M	7805	204 P	53589	4/1/2017
2	03/14/1942	M	7805	202 F	53589	1/1/2010
2	03/16/1943	M	7805	204 P	53704	7/1/2015
2	02/25/1956	F	7805	204 P	53704	6/1/2018
2	09/01/1962	F	7805	204 P	53704	2/1/2012
1	04/09/1967	M	7805	204 S	53536	10/1/2020
1	10/15/1949	F	7805	204 P	53711	6/1/2014
2	05/13/1950	M	7805	204 P	53711	6/1/2014
1	06/05/1959	M	7805	204 F	53538	3/1/2018
2	12/31/1962	F	7805	204 F	53538	3/1/2018
2	11/21/1940	F	7805	202 P	53589	4/1/2006

2	06/20/1946	M	7805	204 P	53590	3/1/2012
1	09/25/1951	M	7805	204 P	53716	7/1/2014
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1	03/01/1948	M	7805	204 S	53711	11/1/2013
1	01/08/1949	F	7805	204 S	53590	3/1/2014
2	04/13/1960	M	7805	204 P	53531	2/1/2017
2	02/02/1958	F	7805	204 P	53704	1/1/2017
2	11/07/1951	M	7805	204 P	95687	10/1/2017
2	06/14/1948	F	7805	204 P	53946	2/1/2010
2	11/18/1966	F	7805	204 P	53532	10/1/2018
2	05/12/1946	M	7805	204 P	53716	10/1/2008
1	10/27/1944	F	7805	203 S	53593	1/1/2007
1	08/21/1951	M	7805	204 S	53575	12/1/2015
2	07/29/1950	M	7805	204 P	53716	3/1/2018
2	08/08/1955	M	7805	204 F	53593	1/1/2012
1	09/15/1967	M	7805	204 F	53558	2/1/2021
1	07/06/1962	M	7805	204 P	53960	1/1/2019
2	01/27/1962	F	7805	204 P	53960	1/1/2019
2	10/28/1961	F	7805	204 P	54868	10/1/2013
1	04/01/1944	F	7805	204 S	53570	8/1/2010
1	09/30/1953	F	7805	204 S	53704	2/1/2019
2	07/01/1946	F	7805	202 P	53593	1/1/2007
2	10/24/1950	M	7805	204 P	53704	10/1/2008
2	01/23/1940	F	7805	202 P	53534	4/1/2006
1	07/25/1947	M	7805	204 S	53156	9/4/2020
1	03/07/1947	F	7805	204 S	53532	2/1/2015
1	11/27/1957	M	7805	204 S	34219	1/1/2013
1	05/18/1949	F	7805	204 S	53714	8/1/2012
1	10/08/1960	F	7805	204 P	53575	3/1/2021
2	06/24/1958	M	7805	204 P	53575	3/1/2021
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1	02/06/1937	M	7805	202 S	32080	1/1/2006
2	03/28/1947	F	7805	204 P	53704	2/1/2010
2	06/11/1956	M	7805	204 P	53523	3/1/2013

2	02/18/1955	F	7805	204 P	53572	8/1/2012
1	01/27/1964	F	7805	204 S	54913	4/1/2019
2	05/26/1953	M	7805	204 F	53717	12/1/2015
2	01/27/1946	M	7805	204 P	53704	2/1/2015
2	05/30/1955	M	7805	204 P	53704	8/1/2016
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1	05/19/1954	M	7805	204 P	53593	1/1/2014
2	12/05/1957	F	7805	204 P	53593	1/1/2014
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2	03/07/1946	F	7805	204 P	53705	9/1/2011
2	02/01/1962	F	7805	204 P	53593	4/1/2013
1	07/03/1952	F	7805	204 S	53704	9/1/2016
1	03/12/1955	M	7805	204 P	53704	10/1/2019
2	01/25/1965	F	7805	204 P	53704	10/1/2019
2	07/07/1955	M	7805	204 P	53711	8/1/2018
1	04/24/1958	F	7805	204 S	53704	7/1/2018
1	06/27/1929	F	7805	203 S	53718	6/1/2011
4	07/18/1995	M	7805	204 F	54467	2/1/2009
1	09/01/1961	F	7805	204 P	53558	1/1/2021
1	08/23/1961	M	7805	204 F	53705	3/1/2021
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2	05/19/1968	F	7805	204 F	53571	4/1/2021
2	12/21/1951	F	7805	202 P	53538	10/1/2006
1	09/03/1966	M	7805	204 P	53593	2/1/2021
1	12/29/1960	F	7805	204 P	53523	8/1/2016
2	10/13/1946	M	7805	204 P	53593	2/1/2012
2	02/18/1955	F	7805	204 P	53713	6/1/2015
1	06/28/1948	M	7805	204 S	53713	1/1/2012
1	05/06/1946	F	7805	204 S	53711	9/1/2015
6	12/17/1995	F	7805	204 F	53538	3/1/2018
2	04/28/1948	F	7805	202 P	53562	1/1/2007
1	08/29/1936	F	7805	203 S	53590	1/1/2007
1	02/08/1934	F	7805	202 S	53714	1/1/2006
1	04/21/1955	M	7805	204 P	53575	3/1/2020

2	09/14/1956	F	7805	204 P	53575	3/1/2020
1	11/30/1957	M	7805	204 S	53714	2/1/2021
1	05/23/1954	M	7805	204 P	53507	8/1/2017
2	11/26/1954	F	7805	204 P	53507	8/1/2017
1	10/20/1946	M	7805	204 S	54548	10/1/2008
1	10/30/1943	F	7805	203 S	53714	10/1/2014
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2	10/20/1958	F	7805	204 P	53530	3/1/2020
1	01/12/1948	F	7805	204 S	56347	3/1/2015
1	02/22/1971	F	7805	204 F	53713	5/1/2015
1	10/13/1938	F	7805	202 S	53716	1/1/2006
2	02/23/1961	F	7805	204 P	53593	5/1/2020
2	10/17/1951	M	7805	204 P	53718	9/1/2017
1	01/23/1959	F	7805	204 P	53714	7/1/2020
4	05/27/1996	M	7805	204 F	53572	2/1/2021
3	12/25/1995	M	7805	204 K	53704	2/1/2021
2	03/27/1939	M	7805	204 P	53711	1/1/2019
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1	10/12/1953	F	7805	204 S	53536	7/1/2016
1	06/27/1948	F	7805	202 P	53704	4/1/2006
2	04/26/1944	M	7805	202 P	53704	4/1/2006
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3	10/03/1996	F	7805	204 F	53704	4/1/2019
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2	10/20/1943	M	7805	202 P	53590	6/1/2006
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1	08/09/1948	F	7805	204 S	53704	10/1/2014
1	11/12/1957	F	7805	204 S	53716	10/1/2019
1	03/10/1955	M	7805	204 F	53713	3/1/2018
2	05/27/1959	F	7805	204 F	53713	3/1/2018

1	08/15/1958	F	7805	204 S	53704	6/1/2016
1	10/18/1947	F	7805	204 S	53713	8/1/2011
1	05/30/1938	F	7805	202 S	53705	1/1/2006
1	11/24/1948	M	7805	204 P	53718	2/1/2015
2	07/09/1947	F	7805	204 P	53718	2/1/2015
3	01/21/1996	F	7805	204 F	53704	1/1/2019
2	07/25/1946	M	7805	204 P	53562	12/1/2010
4	01/17/1997	M	7805	204 F	53705	3/1/2021
1	05/04/1952	F	7805	204 S	67834	11/1/2011
1	02/14/1963	M	7805	204 S	53575	5/1/2020
2	03/18/1948	F	7805	202 P	53719	7/1/2007
1	04/17/1942	F	7805	204 S	53715	7/1/2010
5	01/06/1992	F	7805	204 F	53593	1/1/2012
2	10/02/1960	M	7805	204 F	53536	4/1/2021
1	02/10/1954	F	7805	204 P	53704	12/1/2017
2	01/09/1953	M	7805	204 P	53704	12/1/2017
4	05/15/1997	M	7805	204 F	53718	12/1/2017
1	07/15/1942	F	7805	204 P	53590	2/1/2012
1	10/14/1960	M	7805	204 P	53704	3/1/2021
1	01/28/1936	F	7805	202 S	53578	5/1/2008
2	02/16/1953	M	7805	204 P	53713	12/1/2020
1	12/20/1954	F	7805	204 S	53704	9/1/2020
2	10/07/1957	F	7805	204 P	53532	3/1/2020
1	03/30/1941	F	7805	203 S	53527	1/1/2007
6	08/06/1997	M	7805	204 F	53705	4/1/2015
1	11/17/1947	M	7805	204 S	53531	5/1/2015
7	08/27/1997	F	7805	204 F	53713	3/1/2018
1	03/02/1950	F	7805	204 S	53538	5/1/2016
1	11/16/1966	M	7805	204 F	53575	2/1/2021
2	05/11/1963	F	7805	204 F	53575	2/1/2021
3	10/18/1997	M	7805	204 F	53575	2/1/2021
3	12/02/1997	M	7805	204 F	53597	11/1/2020
3	10/18/1996	F	7805	202 F	53705	1/1/2007
1	10/07/1951	F	7805	204 S	53711	7/1/2018

1	10/27/1950	F	7805	204 P	53948	9/1/2012
2	11/23/1951	M	7805	204 P	53948	9/1/2012
1	06/04/1972	F	7805	203 S	53593	6/1/2008
1	07/05/1950	M	7805	204 F	53703	8/1/2012
2	03/09/1944	M	7805	202 P	53716	4/1/2006
2	02/19/1969	F	7805	204 F	53718	11/1/2017
1	03/13/1953	M	7805	204 P	53704	3/1/2020
1	05/18/1950	M	7805	204 F	53716	7/1/2014
2	08/09/1954	F	7805	204 F	53716	7/1/2014
4	10/11/1986	F	7805	204 F	53716	7/1/2014
1	05/01/1945	M	7805	204 P	54456	4/1/2011
2	10/12/1947	F	7805	204 P	54456	4/1/2011
1	08/10/1955	M	7805	204 S	53558	7/1/2018
1	05/24/1952	M	7805	204 P	85755	2/1/2019
2	11/18/1954	M	7805	204 P	53532	8/1/2017
2	05/05/1952	F	7805	204 P	53572	10/1/2008
1	07/25/1960	M	7805	204 P	53955	5/1/2021
2	06/20/1961	F	7805	204 P	53955	5/1/2021
1	01/19/1947	F	7805	204 S	53713	3/1/2017
1	04/03/1957	M	7805	204 P	53589	6/1/2020
2	12/01/1956	F	7805	204 P	53589	6/1/2020
1	10/31/1946	F	7805	204 P	80525	5/1/2009
2	10/08/1944	M	7805	204 P	80525	5/1/2009
1	10/16/1961	M	7805	204 P	53913	2/14/2019
1	07/08/1965	F	7805	204 P	53925	3/1/2021
1	08/18/1947	F	7805	203 S	53705	7/1/2014
5	09/13/1998	F	7805	204 F	53572	2/1/2021
1	11/18/1938	F	7805	203 S	53711	1/1/2007
3	09/21/1998	F	7805	204 F	53571	4/1/2021
1	10/02/1958	M	7805	204 P	53528	3/1/2019
2	03/09/1959	F	7805	204 P	53528	3/1/2019
2	05/26/1946	M	7805	204 P	53704	11/1/2017
4	09/24/1998	F	7805	204 F	53536	4/1/2021
1	03/02/1943	F	7805	204 S	53705	10/1/2008

1	06/22/1960	M	7805	204 S	53536	2/1/2021
1	06/26/1958	M	7805	204 P	53711	9/1/2020
2	06/07/1963	F	7805	204 P	53711	9/1/2020
1	02/19/1956	M	7805	204 S	53711	3/1/2020
1	11/14/1962	F	7805	204 P	53705	3/1/2019
2	08/02/1967	F	7805	204 F	53558	2/1/2021
4	10/30/1995	F	7805	204 F	53558	2/1/2021
1	07/08/1941	F	7805	203 S	53575	4/1/2016
1	05/03/1941	F	7805	204 S	53713	3/1/2014
4	03/15/1999	F	7805	204 F	53517	6/1/2020
1	10/25/1950	F	7805	204 S	53716	6/1/2020
1	08/20/1948	F	7805	204 S	53532	11/1/2014
2	10/10/1961	F	7805	204 P	53590	6/4/2016
2	12/16/1950	M	7805	204 F	53562	7/1/2018
1	01/05/1963	F	7805	204 P	53578	3/1/2018
2	07/15/1954	F	7805	202 P	53572	6/1/2018
4	10/24/1995	M	7805	204 K	53558	6/1/2019
2	12/12/1968	F	7805	204 P	53575	4/1/2021
4	07/18/1997	M	7805	204 F	53717	12/1/2015
5	12/24/1997	M	7805	204 K	53558	6/1/2019
1	06/20/1962	M	7805	204 S	53094	1/31/2021
5	08/31/1999	M	7805	204 F	53558	2/1/2021
1	09/08/1955	F	7805	204 S	30017	9/1/2012
3	10/20/1999	M	7805	204 F	53562	7/1/2018
1	03/10/1954	F	7805	204 P	53719	10/1/2017
1	05/26/1957	M	7805	204 P	53716	3/1/2020
2	10/20/1955	F	7805	204 P	53716	7/1/2014
1	12/22/1961	F	7805	204 P	53704	9/1/2020
2	04/25/1959	M	7805	204 P	53704	9/1/2020
2	02/02/1946	M	7805	204 P	53711	8/1/2019
5	10/16/1999	M	7805	204 F	53589	10/1/2018
1	07/20/1965	F	7805	204 F	53960	4/1/2017
1	01/27/1962	F	7805	204 P	53714	4/1/2021
2	02/21/1961	F	7805	204 P	53716	3/1/2020

2	06/22/1945	M	7805	204 P	32955	4/1/2010
1	11/14/1950	F	7805	204 S	53955	10/1/2010
2	08/27/1966	F	7805	204 F	53719	9/1/2019
3	01/07/2000	F	7805	204 F	53719	9/1/2019
1	01/08/1938	F	7805	203 S	53532	8/1/2008
1	12/24/1939	F	7805	204 S	53562	6/1/2010
2	09/14/1951	M	7805	204 P	53559	6/1/2018
1	05/27/1958	F	7805	204 S	53590	7/1/2017
1	01/01/1949	F	7805	204 S	29229	11/24/2020
1	07/28/1974	F	7805	204 S	53704	3/1/2020
4	04/12/2000	F	7805	204 F	53571	4/1/2021
3	04/29/2000	F	7805	204 F	53559	12/1/2018
1	12/18/1956	F	7805	204 S	53559	7/1/2017
4	04/29/2000	F	7805	204 F	53597	11/1/2020
1	07/12/1946	F	7805	204 S	53575	10/1/2010
1	01/20/1952	F	7805	204 S	53718	4/1/2018
2	10/12/1970	F	7805	204 F	53574	6/1/2013
1	05/13/1964	F	7805	204 P	53593	7/1/2019
2	05/08/1964	M	7805	204 P	53593	7/1/2019
4	06/27/2000	M	7805	204 F	53704	4/1/2019
1	09/28/1949	F	7805	202 P	53719	11/1/2015
1	07/06/1953	F	7805	204 S	53705	11/1/2017
1	07/20/1959	F	7805	204 S	53711	3/1/2020
1	09/25/1946	F	7805	204 S	53711	10/1/2012
2	01/03/1968	F	7805	204 P	53593	2/1/2021
1	07/21/1945	F	7805	203 S	53589	3/11/2012
2	12/29/1971	F	7805	204 F	53593	3/1/2021
1	05/25/1960	F	7805	203 S	53717	4/1/2010
1	03/19/1948	F	7805	204 S	34104	2/1/2010
3	12/25/1999	F	7805	204 K	53704	4/1/2012
3	11/08/2000	M	7805	204 F	53574	6/1/2013
1	10/17/1955	M	7805	204 P	53550	11/1/2009
2	12/03/1955	F	7805	204 P	53550	11/1/2009
1	09/12/1953	F	7805	204 P	53563	2/1/2011

2	07/10/1940	M	7805	204 P	53563	2/1/2011
1	02/14/1941	M	7805	203 S	53531	1/1/2007
1	02/16/1948	M	7805	202 S	53546	4/1/2010
1	07/29/1957	M	7805	204 P	53558	7/1/2020
2	04/06/1957	F	7805	204 P	53558	7/1/2020
1	12/02/1953	F	7805	204 P	53593	4/1/2019
2	04/08/1953	M	7805	204 P	53593	4/1/2019
1	01/07/1944	F	7805	202 P	53575	4/1/2008
2	05/30/1944	M	7805	202 P	53575	4/1/2008
1	10/17/1956	M	7805	204 P	53559	3/1/2019
2	09/17/1959	F	7805	204 P	53559	3/1/2019
1	12/14/1948	F	7805	204 S	53590	11/1/2015
1	09/02/1948	F	7805	204 S	53713	6/1/2019
1	01/08/1964	M	7805	204 P	53598	3/1/2019
2	06/22/1962	F	7805	204 P	53598	3/1/2019
2	11/22/1951	F	7805	204 P	53527	2/1/2011
1	04/21/1956	F	7805	204 S	53532	8/1/2014
1	07/16/1955	F	7805	204 S	53545	3/1/2015
1	10/03/1938	F	7805	202 S	78641	1/1/2006
2	11/13/1952	F	7805	204 F	53703	8/1/2012
1	12/22/1953	F	7805	204 P	53531	9/1/2018
2	04/01/1949	M	7805	204 P	53531	9/1/2018
1	06/02/1941	M	7805	204 P	53004	12/1/2011
2	08/31/1941	F	7805	204 P	53004	12/1/2011
1	05/19/1952	F	7805	204 S	53719	10/1/2018
1	06/25/1951	F	7805	204 P	53704	8/1/2015
2	08/10/1953		7805	204 P	53704	8/1/2015
1	01/28/1955	F	7805	204 S	53711	8/19/2020
1	03/27/1952	F	7805	204 S	53711	9/1/2018
1	05/13/1965	M	7805	204 S	53574	5/1/2020
1	08/06/1956	F	7805	204 S	53532	7/1/2014
1	09/10/1953	M	7805	204 P	53115	9/1/2014
2	06/14/1956	F	7805	204 P	53115	9/1/2014
1	04/20/1951	F	7805	204 S	53704	6/1/2019

2	01/05/1947	M	7805	204 P	53597	2/1/2013
2	05/30/1961	M	7805	204 P	53714	7/1/2020
1	01/15/1953	M	7805	204 S	53704	3/1/2019
1	01/30/1953	F	7805	204 S	53590	3/1/2017
2	10/28/1958	M	7805	204 P	53558	1/1/2021
3	04/23/2002	M	7805	204 F	53718	11/1/2017
1	07/27/1947	M	7805	204 P	53589	9/1/2014
2	09/20/1948	F	7805	204 P	53589	9/1/2014
2	05/09/1955	F	7805	204 P	53704	3/1/2021
1	04/27/1951	F	7805	204 S	53705	3/1/2015
2	10/22/1944	M	7805	202 P	53719	11/1/2015
3	08/22/2002	F	7805	204 F	53593	3/1/2021
2	03/14/1971	M	7805	204 F	53713	5/1/2015
4	10/10/2002	F	7805	204 F	53719	9/1/2019
1	07/07/1944	F	7805	204 S	53558	10/1/2008
6	10/12/2002	F	7805	204 F	53558	2/1/2021
2	03/19/1957	M	7805	204 P	53719	10/1/2017
1	05/27/1940	M	7805	203 S	53575	1/1/2007
2	05/20/1951	M	7805	202 P	53711	11/1/2006
1	05/09/1944	M	7805	204 P	53597	10/1/2008
2	01/17/1948	F	7805	204 P	53597	10/1/2008
1	08/21/1951	M	7805	204 P	53719	9/1/2013
2	02/11/1952	F	7805	204 P	53719	9/1/2013
1	07/01/1954	F	7805	204 S	53590	2/1/2012
1	05/07/1953	M	7805	204 P	34652	3/1/2015
2	01/25/1957	F	7805	204 P	34652	3/1/2015
1	06/24/1957	M	7805	204 F	53536	9/1/2020
2	02/17/1963	F	7805	204 F	53536	9/1/2020
5	06/27/2000	F	7805	204 F	53536	9/1/2020
2	04/17/1951	M	7805	204 P	53590	2/1/2012
4	09/30/1998	F	7805	204 F	54547	10/1/2018
4	04/09/2003	M	7805	204 F	53575	2/1/2021
2	11/14/1947	F	7805	204 P	53570	9/1/2009
1	07/17/1949	F	7805	204 S	53705	4/1/2009

1	02/13/1949	F	7805	204 S	53704	5/1/2014
1	07/01/1954	M	7805	204 S	53711	9/1/2019
1	09/09/1948	M	7805	204 S	53704	8/1/2015
5	08/03/2003	M	7805	204 F	53517	6/1/2020
1	11/16/1950	F	7805	204 S	53589	11/1/2014
5	06/09/1995	M	7805	204 F	53516	4/1/2014
6	02/21/1998	F	7805	204 F	53516	4/1/2014
4	10/04/1998	F	7805	204 F	53704	1/1/2019
2	03/18/1955	M	7805	204 P	53528	6/1/2019
1	10/30/1962	F	7805	204 F	53711	1/1/2018
2	05/08/1957	M	7805	204 F	53711	1/1/2018
4	03/30/2000	F	7805	204 F	53711	1/1/2018
2	08/21/1942	M	7805	204 P	53597	5/1/2014
1	12/25/1943	M	7805	204 S	53711	10/1/2019
1	05/18/1951	F	7805	204 P	53716	8/1/2017
2	01/30/1948	M	7805	204 P	53716	8/1/2017
1	08/05/1953	M	7805	204 P	53705	6/1/2011
2	12/22/1941	F	7805	204 P	53705	6/1/2011
1	10/27/1956	F	7805	204 S	53532	3/1/2012
1	01/13/1954	F	7805	204 S	53590	9/1/2012
1	02/04/1954	F	7805	204 S	53534	3/1/2015
2	10/02/1964	F	7805	204 F	53711	11/1/2019
3	03/12/2002	F	7805	204 F	53711	11/1/2019
2	09/01/1945	F	7805	204 P	85755	2/1/2019
1	01/01/1944	F	7805	203 S	53598	5/4/2016
1	03/17/1948	F	7805	203 S	53562	4/13/2014
1	10/06/1951	F	7805	204 P	53575	2/1/2014
2	02/08/1949	M	7805	204 P	53575	2/1/2014
3	04/01/2004	F	7805	204 F	53960	4/1/2017
1	02/13/1972	M	7805	202 S	53701	6/1/2012
1	01/17/1951	F	7805	204 P	53558	5/1/2017
2	01/25/1950	M	7805	204 P	53558	5/1/2017
4	07/01/2004	M	7805	204 F	53562	7/1/2018
2	03/03/1965	M	7805	204 P	53705	3/1/2019

2	09/19/1958	F	7805	204 P	53528	4/1/2020
1	03/03/1952	M	7805	204 P	53811	6/1/2016
2	11/24/1952	F	7805	204 P	53811	6/1/2016
2	11/20/1954	F	7805	204 P	53704	3/1/2020
2	10/26/1960	F	7805	204 P	53714	8/1/2014
1	05/11/1955	F	7805	204 P	53575	9/1/2014
2	08/14/1945	M	7805	204 P	53575	9/1/2014
2	01/30/1966	F	7805	204 P	53949	3/1/2017
2	09/28/1953	M	7805	204 P	53714	4/1/2021
1	01/10/1953	F	7805	204 S	53593	3/1/2015
1	09/19/1948	F	7805	204 P	53589	8/1/2015
1	12/02/1948	F	7805	204 P	53527	8/1/2011
1	02/10/1959	F	7805	204 S	53589	2/1/2021
1	01/21/1950	F	7805	204 S	85353	11/1/2011
2	08/01/1944	F	7805	204 P	53716	5/1/2017
2	11/29/1950	M	7805	204 P	55088	10/1/2008
1	07/01/1961	F	7805	204 F	53593	9/1/2020
2	07/14/1957	M	7805	204 F	53593	9/1/2020
3	07/28/1997	F	7805	204 F	53593	9/1/2020
4	08/13/1994	M	7805	204 F	53593	9/1/2020
2	06/27/1953	F	7805	204 P	53713	5/1/2014
2	06/09/1958	F	7805	204 P	53704	3/1/2014
2	01/24/1944	F	7805	202 P	53704	1/1/2007
2	05/14/1930	F	7805	202 P	53517	1/1/2007
2	08/09/1958	F	7805	204 P	53094	10/1/2012
4	01/07/2007	M	7805	204 F	53593	3/1/2021
2	06/06/1948	F	7805	202 F	53705	1/1/2007
2	07/21/1965	F	7805	204 P	53597	6/1/2015
2	05/30/1943	F	7805	204 P	76522	8/19/2019
1	08/13/1965	F	7805	204 F	53716	5/1/2021
2	03/04/1963	M	7805	204 F	53716	5/1/2021
4	03/29/1997	M	7805	204 F	53716	5/1/2021
1	12/21/1952	F	7805	204 S	53566	10/1/2017
2	07/01/1966	F	7805	204 P	53711	1/1/2021

1	03/20/1954	F	7805	204 P	53532	5/1/2020
2	08/12/1954	M	7805	204 P	53532	5/1/2020
2	07/27/1952	F	7805	204 P	53536	10/1/2008
1	06/28/1944	F	7805	203 S	53532	6/1/2012
2	03/12/1962	M	7805	204 P	53925	3/1/2021
2	06/25/1957	M	7805	204 P	53704	12/1/2020
1	06/24/1951	F	7805	204 S	53716	9/1/2013
1	10/22/1954	F	7805	204 P	85750	6/1/2016
2	11/29/1952	M	7805	204 P	85750	6/1/2016
1	03/10/1950	F	7805	204 S	53711	2/1/2017
1	02/21/1948	F	7805	204 S	53719	5/1/2020
1	02/13/1936	M	7805	203 S	53705	6/1/2008
1	06/06/1947	F	7805	204 P	53589	5/1/2015
2	06/24/1947	M	7805	204 P	53589	5/1/2015
1	02/11/1956		7805	204 S	53704	5/1/2017
1	12/14/1953	F	7805	204 P	53705	1/1/2020
1	12/25/1945	F	7805	204 S	53714	2/1/2013
2	07/04/1951	M	7805	204 P	53562	3/1/2014
1	02/01/1957	M	7805	204 S	53960	4/1/2018
2	07/31/1951	F	7805	202 P	53589	1/1/2009
1	04/15/1951		7805	204 S	53711	6/1/2018
1	07/29/1949	M	7805	204 P	53516	8/1/2014
2	07/03/1950	F	7805	204 P	53516	8/1/2014
1	08/09/1956	F	7805	204 S	53597	5/1/2018
1	12/03/1950	F	7805	204 S	53705	9/1/2016
2	10/25/1960	F	7805	204 P	53560	4/1/2021
2	04/11/1950	F	7805	204 P	53594	10/1/2018
2	08/31/1951	M	7805	204 P	53715	3/1/2019
1	08/14/1954	F	7805	204 S	53589	2/1/2018
2	01/16/1950	M	7805	204 P	53589	8/1/2015
3	11/16/2004	M	7805	202 F	53589	1/1/2010
2	03/11/1955	M	7805	204 P	53527	8/1/2011
2	10/05/1957	M	7805	204 P	53523	8/1/2016
2	01/03/1955	M	7805	204 P	53578	3/1/2018

1	12/06/1951		7805	204 P	53716	4/1/2018
2	01/12/1951		7805	204 P	53716	4/1/2018
7	06/24/1996	F	7805	204 F	53516	4/1/2014
1	09/10/1947	F	7805	203 S	53704	1/27/2011
7	06/02/2010	F	7805	204 F	53713	5/1/2015
1	04/12/1955	M	7805	204 P	53704	6/1/2016
2	07/08/1946	M	7805	204 P	53704	6/1/2016
1	03/25/1968	F	7805	204 F	53713	5/1/2017
4	10/13/1997	M	7805	204 F	53713	5/1/2017
1	03/26/1951	F	7805	204 P	53704	3/1/2020
2	03/25/1951	M	7805	204 P	53704	3/1/2020
1	05/28/1948	M	7805	204 P	53523	4/1/2014
2	06/16/1955	F	7805	204 P	53523	4/1/2014
2	11/15/1955	M	7805	204 P	53719	12/1/2016
2	10/09/1940	F	7805	202 P	53589	10/1/2012
1	02/24/1959	M	7805	204 P	53532	8/1/2018
1	12/06/1949	M	7805	204 P	53572	2/1/2013
2	06/23/1952	F	7805	204 P	53572	2/1/2013
1	11/20/1946	F	7805	204 S	53716	2/1/2013
2	02/25/1959	F	7805	204 P	53954	3/1/2016
2	03/29/1957	F	7805	204 P	53532	8/1/2018
1	12/15/1953	F	7805	204 S	53711	4/1/2016
1	09/13/1956	F	7805	203 S	53559	5/29/2014
1	01/04/1942	F	7805	203 S	85383	4/1/2015
2	04/20/1963	M	7805	204 F	53532	3/1/2016
5	01/01/1999	M	7805	204 F	53532	3/1/2016
2	09/19/1941	F	7805	202 P	53597	12/1/2015
1	01/11/1944	F	7805	203 S	53714	10/5/2016
2	11/28/1951	M	7805	204 P	53705	1/1/2020
1	03/27/1954		7805	204 P	53711	2/1/2019
2	09/30/1954	M	7805	204 P	53711	2/1/2019
1	02/27/1948	F	7805	203 S	53575	1/1/2017
2	03/05/1971	F	7805	204 P	53704	5/1/2018
2	11/02/1968		7805	204 P	53716	5/1/2021

1	04/06/1941	F	7805	203 S	53950	5/1/2018
1	01/30/1953	F	7805	203 S	53597	3/1/2018
1	06/18/1949	F	7805	202 S	53563	5/1/2018
1	02/19/1933	F	7805	203 S	53714	7/1/2018
1	09/11/1943	F	7805	203 S	53711	11/1/2018
2	06/28/1958	F	7805	204 P	53913	2/14/2019
1	10/06/1958	F	7805	204 P	53094	3/1/2020
2	05/06/1954	M	7805	204 P	53094	3/1/2020
1	03/16/1957	F	7805	203 S	53711	4/1/2020
2	06/13/1962	F	7805	204 P	53528	9/1/2020
1	02/04/1948	F	7805	203 S	53718	7/16/2020
1	07/26/1942	M	7805	202 S	53716	1/1/2020
1	12/04/1950	M	7805	203 S	53572	10/1/2020
1	06/16/1944	M	7805	203 S	53711	2/1/2021
1	11/07/1946	F	7805	203 S	53597	1/21/2021

COUNTY OF DANE

00704 * All Groups *

Delta Dental of Wisconsin Plan Management Report

Reporting Period from 4/1/2019 to 3/31/2021

Executive Summary

Highlights of your group's experience from April 2020 through March 2021.

- 46.5% of paid claims were concentrated in preventive and diagnostic procedure categories.
- The average claim payment was \$202.17, compared to your previous year's average of \$199.94.
- The utilization rate, which measures the average number of claims filed annually was 4.40 per subscriber, compared to your previous year's average of 5.22. Per member, the utilization rate was 1.83 compared to 2.17 in the previous year.
- The average age of your group was 38.7, compared to Delta Dental's average of 35.6.
- 99.1% of the procedures were performed by Delta Dental's network dentists.
- Savings due to Delta Dental's cost management tools (reduction to maximum plan allowance, consultant review, optional procedures and eligibility verification, etc.) were 29.3% of billed charges.
- The number of patients using the plan was 5,469 representing 72.4% of all members. In the prior period the numbers were 6,060 and 81.2%.
- 2.4% of members met or exceeded their annual maximum benefit during the most recently completed benefit accumulation period.

COUNTY OF DANE
00704 * All Groups *



Monthly Activity

A summary of your monthly enrollment and claims.

Month	Number of Claims	Paid Claims	Total Employees	Employees Only	Employees w/Family
Apr 2019	1,323	\$271,363	3,073	1,069	1,700
May 2019	1,655	\$343,093	3,078	1,071	1,705
Jun 2019	1,223	\$256,942	3,096	1,083	1,708
Jul 2019	1,480	\$284,306	3,104	1,087	1,711
Aug 2019	1,238	\$239,884	3,111	1,093	1,711
Sep 2019	1,243	\$223,269	3,116	1,091	1,717
Oct 2019	1,532	\$293,497	3,108	1,077	1,723
Nov 2019	1,308	\$252,503	3,107	1,073	1,729
Dec 2019	1,272	\$254,967	3,108	1,072	1,732
Jan 2020	1,414	\$288,462	3,111	1,073	1,737
Feb 2020	1,318	\$281,300	3,116	1,072	1,743
Mar 2020	1,204	\$251,462	3,127	1,080	1,739
Apr 2020	279	\$62,798	3,138	1,085	1,748
May 2020	369	\$68,697	3,135	1,094	1,736
Jun 2020	1,077	\$211,277	3,153	1,106	1,741
Jul 2020	1,592	\$294,233	3,144	1,102	1,735
Aug 2020	1,337	\$257,064	3,135	1,099	1,732
Sep 2020	1,471	\$283,806	3,140	1,098	1,736
Oct 2020	1,152	\$249,124	3,151	1,107	1,741
Nov 2020	982	\$199,079	3,148	1,101	1,744
Dec 2020	1,320	\$266,241	3,141	1,103	1,733
Jan 2021	1,273	\$260,466	3,144	1,106	1,736
Feb 2021	1,266	\$263,589	3,148	1,109	1,738
Mar 2021	1,707	\$378,622	3,150	1,106	1,739

COUNTY OF DANE
00704 * All Groups *



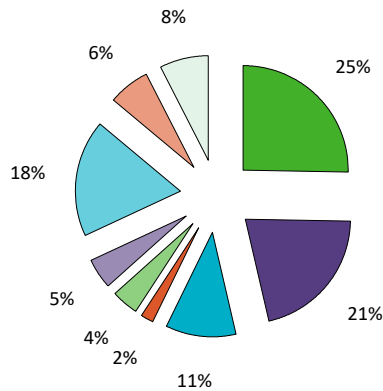
Claims by Coverage Category

Coverage Category	April 2020 - March 2021					Percent Change From Prior				
	Members Covered	Procedures Billed	Procedures PMPM	Amount Paid	Amt. Paid PMPM	Members Covered	Procedures Billed	Procedures PMPM	Amount Paid	Amt. Paid PMPM
Diagnostic		16,590	0.183	\$706,476	\$7.80		-10.3%	-11.4%	-11.3%	-12.4%
Preventive		11,705	0.129	\$592,431	\$6.54		-8.0%	-9.1%	-16.6%	-17.7%
Routine Fillings		3,161	0.035	\$303,458	\$3.35		-13.9%	-15.0%	-15.5%	-16.6%
Oral Surgery		773	0.009	\$51,579	\$0.57		-9.8%	-10.9%	-4.4%	-5.6%
Endodontics		248	0.003	\$115,688	\$1.28		-19.0%	-20.0%	-21.5%	-22.5%
Periodontics		1,218	0.013	\$134,777	\$1.49		-25.3%	-26.3%	-25.0%	-26.0%
Crowns/Onlays		1,123	0.012	\$500,391	\$5.52		-12.7%	-13.8%	-12.0%	-13.1%
Bridges/Dentures		366	0.004	\$179,543	\$1.98		-23.3%	-24.2%	-26.2%	-27.1%
Orthodontics		1,586	0.017	\$210,653	\$2.32		13.4%	11.9%	15.8%	14.3%
Total	7,552	36,770	0.406	\$2,794,996	\$30.84	1.3%	-10.0%	-11.1%	-13.8%	-14.8%

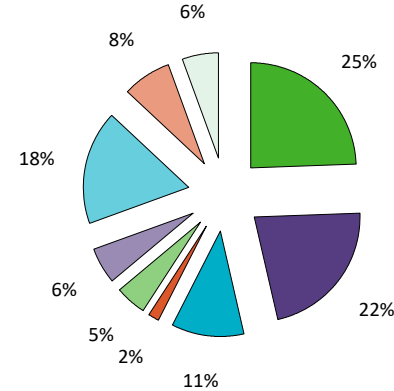
PMPM - Per Member Per Month

NM - Not meaningful. Used when group has no data in a specific area.

Amount Paid April 2020 - March 2021



Amount Paid April 2019 - March 2020

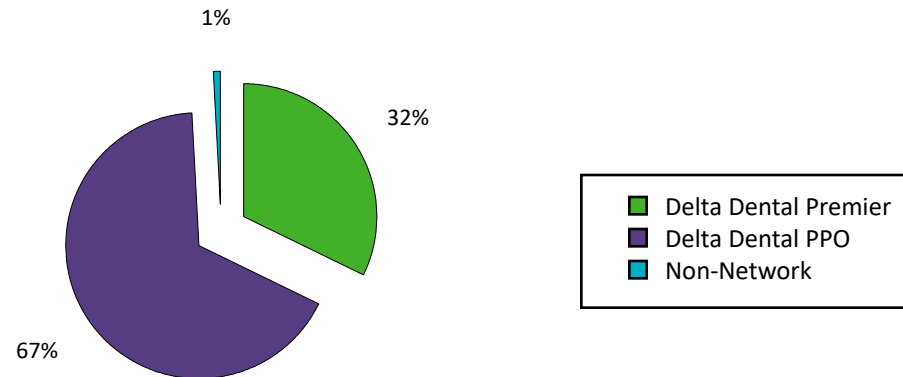


Dentist Selection Patterns

Distribution of claim payments by Delta Dental network vs. non-network dentists.

April 2020 - March 2021		
Delta Dental Network	Number of Claims	Claim Payments
Delta Dental Premier	4,558	\$896,767
Delta Dental PPO	9,148	\$1,877,103
Non-Network	124	\$21,125
Total	13,830	\$2,794,996

**Claim Payments by Period
April 2020 - March 2021**



COUNTY OF DANE
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Delta Dental PPO Usage & Savings

Your savings for the period April 2020 through March 2021 resulting from utilization of Delta Dental PPO dentists.

	Preventive & Diagnostic	Basic	Major	Total
Number of procedures by Delta Dental PPO dentists	18,818	3,697	979	23,494
Delta Dental PPO share of total procedures	70.2%	71.3%	67.5%	70.3%
Submitted amount by Delta Dental PPO dentists	\$1,435,205	\$1,181,135	\$999,753	\$3,616,093
Approved amount for Delta Dental PPO dentists	\$1,022,904	\$912,186	\$763,095	\$2,698,184
Estimated Delta Dental PPO Savings	28.7%	22.8%	23.7%	25.4%

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Delta Dental Premier Usage & Savings

Your savings for the period April 2020 through March 2021 resulting from utilization of Delta Dental Premier dentists.

	Preventive & Diagnostic	Basic	Major	Total
Number of procedures by Delta Dental Premier dentists	7,195	1,328	439	8,962
Delta Dental Premier share of total procedures	27.4%	26.1%	30.6%	27.4%
Submitted amount by Delta Dental Premier dentists	\$546,251	\$325,969	\$411,584	\$1,283,804
Approved amount for Delta Dental Premier dentists	\$412,700	\$247,946	\$327,583	\$988,228
Estimated Delta Dental Premier Savings	24.4%	23.9%	20.4%	23.0%

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04/22/2021

Cost Management Savings

	April 2020-March 2021		April 2019-March 2020	
Billed Charges	\$	5,557,362	\$	6,315,355
Paid Claims	\$	2,794,996	\$	3,241,050
Predetermination Savings	\$	85,607	\$	181,138
Cost Management Savings	Dollars Saved	% of Billed Charges	Dollars Saved	% of Billed Charges
Delta Dental PPO Dentist Savings	\$ 895,658	16.1%	\$ 925,747	14.7%
Delta Dental Premier Dentist Savings	\$ 288,002	5.2%	\$ 350,796	5.6%
Non-Network Dentist Savings	\$ 8,917	0.2%	\$ 7,066	0.1%
Consultant Review	\$ 48,290	0.9%	\$ 67,821	1.1%
Non-Billable Procedures	\$ 79,273	1.4%	\$ 75,511	1.2%
Elective Care	\$ 9,315	0.2%	\$ 10,324	0.2%
Eligibility Verification	\$ 14,985	0.3%	\$ 13,288	0.2%
Coordination of Benefits	\$ 285,824	5.1%	\$ 342,652	5.4%
Subtotal	\$ 1,630,264	29.3%	\$ 1,793,205	28.4%
Cost Management Savings per employee per month	\$ 43.21		\$ 48.13	
Plan Design Savings				
Non-Covered Procedures	\$ 390,670	7.0%	\$ 470,071	7.4%
Deductible Savings	\$ 57,750	1.0%	\$ 65,272	1.0%
Coinurance Savings	\$ 421,320	7.6%	\$ 444,772	7.0%
Plan Maximum Savings	\$ 139,189	2.5%	\$ 156,349	2.5%
Subtotal	\$ 1,008,929	18.2%	\$ 1,136,464	18.0%
Total Savings	\$ 2,639,193	47.5%	\$ 2,929,669	46.4%
Claims Adjustments	\$ 123,173	2.2%	\$ 144,637	2.3%
Net Savings	\$ 2,762,366	49.7%	\$ 3,074,306	48.7%

COUNTY OF DANE
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Cost Management Savings

Definitions of Savings Categories

Predetermination Savings: Reflects the difference between the amount charged and the amount allowed. Paid claims may be included in any of the saving categories listed below, depending on what treatment was actually rendered.

Cost Management Savings

Delta Dental PPO Dentist Savings: Reduction of submitted fees to reflect the Delta Dental PPO Dentist's fee schedule as set by Delta Dental. The balance is not charged to the patient.

Delta Dental Premier Dentist Savings: Reduction of submitted fees to reflect the Delta Dental Premier Dentist's maximum plan allowance. The balance is not charged to the patient.

Non-Network Dentist: Reduction of submitted fees to the maximum plan allowance.

Consultant Review: Determinations made by Delta Dental's dental consultants regarding the appropriateness of a proposed service.

Non-Billable Procedures: Procedures not charged to the patient or the group by a Delta Dental Network Dentist, such as unbundling of charges and work covered under Delta Dental's treatment guarantees.

Elective Care: Payment allowance made by Delta Dental for the most cost-effective, acceptable alternative dental procedure (e.g., a silver filling allowance toward a tooth-colored filling on a molar).

Eligibility Verification: Delta Dental's careful attention, monitoring and maintenance of subscriber and group eligibility records.

Coordination of Benefits: Delta Dental's special attention to properly applying coordination of benefits (COB) policies, regardless of claim size.

Plan Design Savings

Non-Covered Procedures: Procedures excluded or limited by the Plan that are charged to the patient.

Deductible Savings: A specified dollar amount paid by the patient before benefit payment/coinsurance is applied.

Coinsurance Savings: The patient's share of payment of allowable fees for covered benefits.

Plan Maximum Savings: The dollar amount which exceeds a patient's maximum allowable benefits for a specified period.

Claim Adjustments: The net result of adjustments made to claims processed in a prior period. There may be additional savings reflected in the adjusted claim action or there may be a reversal of the claim savings originally shown.

COUNTY OF DANE
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COUNTY OF DANE

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Delta Dental of Wisconsin Plan Management Report

Reporting Period from 4/1/2019 to 3/31/2021

Executive Summary

Highlights of your group's experience from April 2020 through March 2021.

- 48.4% of paid claims were concentrated in preventive and diagnostic procedure categories.
- The average claim payment was \$197.54, compared to your previous year's average of \$195.09.
- The utilization rate, which measures the average number of claims filed annually was 4.79 per subscriber, compared to your previous year's average of 5.60. Per member, the utilization rate was 1.76 compared to 2.06 in the previous year.
- The average age of your group was 33.0, compared to Delta Dental's average of 35.6.
- 99.2% of the procedures were performed by Delta Dental's network dentists.
- Savings due to Delta Dental's cost management tools (reduction to maximum plan allowance, consultant review, optional procedures and eligibility verification, etc.) were 29.2% of billed charges.
- The number of patients using the plan was 4,483 representing 71.0% of all members. In the prior period the numbers were 4,953 and 79.7%.
- 1.9% of members met or exceeded their annual maximum benefit during the most recently completed benefit accumulation period.

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Monthly Activity

A summary of your monthly enrollment and claims.

Month	Number of Claims	Paid Claims	Total Employees	Employees Only	Employees w/Family
Apr 2019	1,034	\$205,926	2,251	610	1,641
May 2019	1,277	\$253,438	2,260	614	1,646
Jun 2019	923	\$188,513	2,272	622	1,650
Jul 2019	1,176	\$218,409	2,277	624	1,653
Aug 2019	1,002	\$191,854	2,284	628	1,656
Sep 2019	992	\$172,286	2,291	629	1,662
Oct 2019	1,197	\$229,550	2,281	612	1,669
Nov 2019	1,021	\$191,763	2,284	610	1,674
Dec 2019	1,008	\$208,814	2,287	610	1,677
Jan 2020	1,127	\$227,541	2,299	614	1,685
Feb 2020	1,045	\$210,338	2,307	615	1,692
Mar 2020	984	\$196,035	2,301	612	1,689
Apr 2020	242	\$51,362	2,312	615	1,697
May 2020	308	\$56,904	2,311	622	1,689
Jun 2020	872	\$166,678	2,325	632	1,693
Jul 2020	1,239	\$222,177	2,314	628	1,686
Aug 2020	1,078	\$200,466	2,308	625	1,683
Sep 2020	1,191	\$228,832	2,309	623	1,686
Oct 2020	900	\$192,308	2,321	628	1,693
Nov 2020	752	\$152,016	2,320	624	1,696
Dec 2020	1,051	\$215,286	2,307	621	1,686
Jan 2021	1,033	\$196,781	2,321	630	1,691
Feb 2021	1,042	\$211,527	2,314	625	1,689
Mar 2021	1,390	\$297,930	2,312	624	1,688

COUNTY OF DANE
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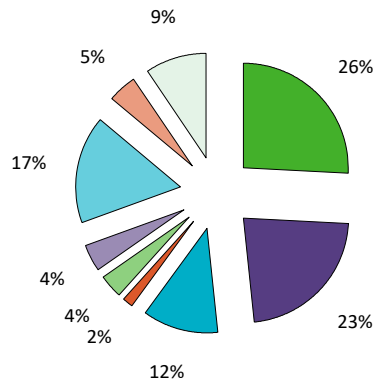
Claims by Coverage Category

Coverage Category	April 2020 - March 2021					Percent Change From Prior				
	Members Covered	Procedures Billed	Procedures PMPM	Amount Paid	Amt. Paid PMPM	Members Covered	Procedures Billed	Procedures PMPM	Amount Paid	Amt. Paid PMPM
Diagnostic		13,227	0.175	\$567,421	\$7.49		-9.9%	-11.3%	-10.7%	-12.1%
Preventive		9,929	0.131	\$493,707	\$6.52		-8.1%	-9.6%	-16.3%	-17.6%
Routine Fillings		2,703	0.036	\$256,069	\$3.38		-11.9%	-13.3%	-14.4%	-15.8%
Oral Surgery		613	0.008	\$35,467	\$0.47		-14.0%	-15.4%	-13.6%	-15.0%
Endodontics		177	0.002	\$80,946	\$1.07		-24.0%	-25.3%	-23.9%	-25.1%
Periodontics		763	0.010	\$87,656	\$1.16		-26.2%	-27.4%	-24.1%	-25.3%
Crowns/Onlays		810	0.011	\$364,063	\$4.81		-7.4%	-8.9%	-7.5%	-9.0%
Bridges/Dentures		186	0.002	\$102,521	\$1.35		-27.6%	-28.8%	-25.5%	-26.7%
Orthodontics		1,549	0.020	\$204,418	\$2.70		14.9%	13.1%	16.0%	14.1%
Total	6,312	29,957	0.396	\$2,192,267	\$28.94	1.6%	-9.3%	-10.7%	-12.1%	-13.5%

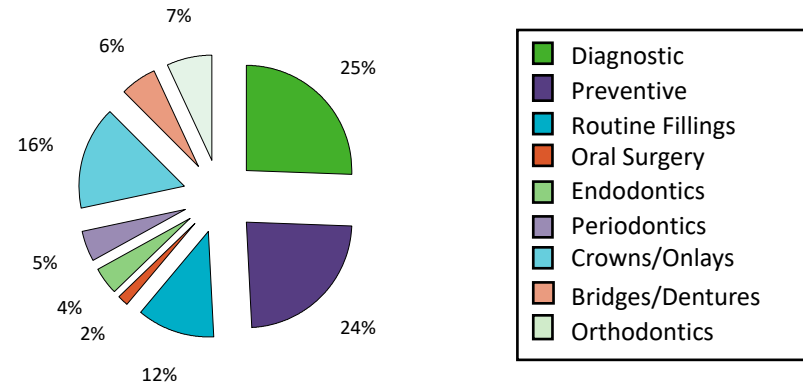
PMPM - Per Member Per Month

NM - Not meaningful. Used when group has no data in a specific area.

Amount Paid April 2020 - March 2021



Amount Paid April 2019 - March 2020

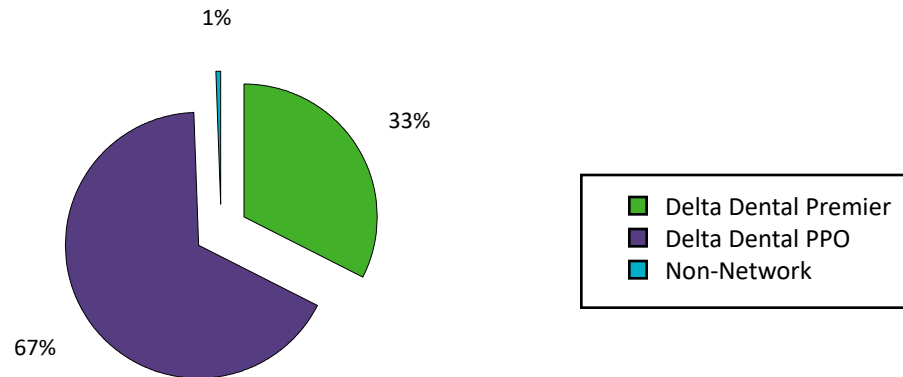


Dentist Selection Patterns

Distribution of claim payments by Delta Dental network vs. non-network dentists.

April 2020 - March 2021		
Delta Dental Network	Number of Claims	Claim Payments
Delta Dental Premier	3,681	\$713,530
Delta Dental PPO	7,335	\$1,464,231
Non-Network	87	\$14,505
Total	11,103	\$2,192,267

Claim Payments by Period
April 2020 - March 2021



Delta Dental PPO Usage & Savings

Your savings for the period April 2020 through March 2021 resulting from utilization of Delta Dental PPO dentists.

	Preventive & Diagnostic	Basic	Major	Total
Number of procedures by Delta Dental PPO dentists	15,562	2,952	646	19,160
Delta Dental PPO share of total procedures	71.1%	72.4%	66.7%	71.2%
Submitted amount by Delta Dental PPO dentists	\$1,178,416	\$951,620	\$656,614	\$2,786,650
Approved amount for Delta Dental PPO dentists	\$843,451	\$745,058	\$503,114	\$2,091,623
Estimated Delta Dental PPO Savings	28.4%	21.7%	23.4%	24.9%

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Delta Dental Premier Usage & Savings

Your savings for the period April 2020 through March 2021 resulting from utilization of Delta Dental Premier dentists.

	Preventive & Diagnostic	Basic	Major	Total
Number of procedures by Delta Dental Premier dentists	5,687	999	304	6,990
Delta Dental Premier share of total procedures	26.5%	25.0%	31.6%	26.5%
Submitted amount by Delta Dental Premier dentists	\$432,478	\$243,367	\$285,214	\$961,060
Approved amount for Delta Dental Premier dentists	\$326,054	\$185,010	\$227,559	\$738,623
Estimated Delta Dental Premier Savings	24.6%	24.0%	20.2%	23.1%

COUNTY OF DANE
00704



04/22/2021

Cost Management Savings

	April 2020-March 2021		April 2019-March 2020	
Billed Charges	\$	4,345,690	\$	4,854,554
Paid Claims	\$	2,192,267	\$	2,494,467
Predetermination Savings	\$	74,080	\$	93,555
Cost Management Savings	Dollars Saved	% of Billed Charges	Dollars Saved	% of Billed Charges
Delta Dental PPO Dentist Savings	\$ 677,615	15.6%	\$ 702,276	14.5%
Delta Dental Premier Dentist Savings	\$ 216,467	5.0%	\$ 259,716	5.3%
Non-Network Dentist Savings	\$ 6,525	0.2%	\$ 4,836	0.1%
Consultant Review	\$ 22,926	0.5%	\$ 27,845	0.6%
Non-Billable Procedures	\$ 59,961	1.4%	\$ 58,853	1.2%
Elective Care	\$ 6,932	0.2%	\$ 6,657	0.1%
Eligibility Verification	\$ 12,444	0.3%	\$ 12,188	0.3%
Coordination of Benefits	\$ 265,978	6.1%	\$ 327,856	6.8%
Subtotal	\$ 1,268,848	29.2%	\$ 1,400,227	28.8%
Cost Management Savings per employee per month	\$ 45.67		\$ 51.11	
Plan Design Savings				
Non-Covered Procedures	\$ 339,941	7.8%	\$ 404,907	8.3%
Deductible Savings	\$ 44,600	1.0%	\$ 50,697	1.0%
Coinsurance Savings	\$ 307,985	7.1%	\$ 289,988	6.0%
Plan Maximum Savings	\$ 89,737	2.1%	\$ 88,258	1.8%
Subtotal	\$ 782,263	18.0%	\$ 833,850	17.2%
Total Savings	\$ 2,051,111	47.2%	\$ 2,234,077	46.0%
Claims Adjustments	\$ 102,313	2.4%	\$ 126,009	2.6%
Net Savings	\$ 2,153,424	49.6%	\$ 2,360,086	48.6%

COUNTY OF DANE
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Cost Management Savings

Definitions of Savings Categories

Predetermination Savings: Reflects the difference between the amount charged and the amount allowed. Paid claims may be included in any of the saving categories listed below, depending on what treatment was actually rendered.

Cost Management Savings

Delta Dental PPO Dentist Savings: Reduction of submitted fees to reflect the Delta Dental PPO Dentist's fee schedule as set by Delta Dental. The balance is not charged to the patient.

Delta Dental Premier Dentist Savings: Reduction of submitted fees to reflect the Delta Dental Premier Dentist's maximum plan allowance. The balance is not charged to the patient.

Non-Network Dentist: Reduction of submitted fees to the maximum plan allowance.

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Coinsurance Savings: The patient's share of payment of allowable fees for covered benefits.

Plan Maximum Savings: The dollar amount which exceeds a patient's maximum allowable benefits for a specified period.

Claim Adjustments: The net result of adjustments made to claims processed in a prior period. There may be additional savings reflected in the adjusted claim action or there may be a reversal of the claim savings originally shown.

COUNTY OF DANE
00704



COUNTY OF DANE

05012

Delta Dental of Wisconsin Plan Management Report

Reporting Period from 4/1/2019 to 3/31/2021

Executive Summary

Highlights of your group's experience from April 2020 through March 2021.

- 46.3% of paid claims were concentrated in preventive and diagnostic procedure categories.
- The average claim payment was \$234.68, compared to your previous year's average of \$219.59.
- The utilization rate, which measures the average number of claims filed annually was 4.44 per subscriber, compared to your previous year's average of 5.92. Per member, the utilization rate was 1.94 compared to 2.32 in the previous year.
- The average age of your group was 34.0, compared to Delta Dental's average of 35.6.
- 100.0% of the procedures were performed by Delta Dental's network dentists.
- Savings due to Delta Dental's cost management tools (reduction to maximum plan allowance, consultant review, optional procedures and eligibility verification, etc.) were 30.4% of billed charges.
- The number of patients using the plan was 45 representing 91.6% of all members. In the prior period the numbers were 46 and 75.6%.
- 0.0% of members met or exceeded their annual maximum benefit during the most recently completed benefit accumulation period.

COUNTY OF DANE
05012



Monthly Activity

A summary of your monthly enrollment and claims.

Month	Number of Claims	Paid Claims	Total Employees	Employees Only	Employees w/Family
Apr 2019	6	\$1,477	24	5	19
May 2019	14	\$5,075	24	5	19
Jun 2019	15	\$3,438	25	6	19
Jul 2019	17	\$2,661	25	6	19
Aug 2019	13	\$3,485	25	7	18
Sep 2019	5	\$580	24	7	17
Oct 2019	12	\$2,357	24	7	17
Nov 2019	11	\$2,428	24	7	17
Dec 2019	9	\$1,537	24	7	17
Jan 2020	16	\$3,066	24	7	17
Feb 2020	16	\$3,727	22	6	16
Mar 2020	7	\$1,131	21	6	15
Apr 2020	4	\$1,744	22	6	16
May 2020	1	\$67	19	6	13
Jun 2020	5	\$975	21	8	13
Jul 2020	16	\$3,033	21	8	13
Aug 2020	8	\$2,060	21	8	13
Sep 2020	6	\$1,402	21	8	13
Oct 2020	10	\$1,541	20	8	12
Nov 2020	7	\$1,542	21	9	12
Dec 2020	5	\$829	22	10	12
Jan 2021	10	\$2,665	23	10	13
Feb 2021	12	\$2,560	23	10	13
Mar 2021	11	\$3,876	23	10	13

COUNTY OF DANE
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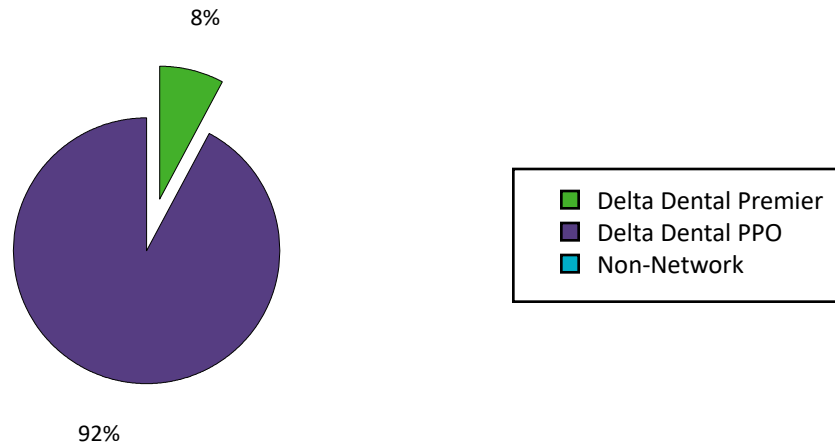


Dentist Selection Patterns

Distribution of claim payments by Delta Dental network vs. non-network dentists.

April 2020 - March 2021		
Delta Dental Network	Number of Claims	Claim Payments
Delta Dental Premier	10	\$1,746
Delta Dental PPO	85	\$20,549
Non-Network	0	\$0
Total	95	\$22,295

Claim Payments by Period
April 2020 - March 2021



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Delta Dental PPO Usage & Savings

Your savings for the period April 2020 through March 2021 resulting from utilization of Delta Dental PPO dentists.

	Preventive & Diagnostic	Basic	Major	Total
Number of procedures by Delta Dental PPO dentists	199	49	4	252
Delta Dental PPO share of total procedures	92.1%	92.5%	100.0%	92.3%
Submitted amount by Delta Dental PPO dentists	\$15,432	\$20,193	\$3,931	\$39,556
Approved amount for Delta Dental PPO dentists	\$11,339	\$14,214	\$3,145	\$28,698
Estimated Delta Dental PPO Savings	26.5%	29.6%	20.0%	27.4%

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Delta Dental Premier Usage & Savings

Your savings for the period April 2020 through March 2021 resulting from utilization of Delta Dental Premier dentists.

	Preventive & Diagnostic	Basic	Major	Total
Number of procedures by Delta Dental Premier dentists	15	4	0	19
Delta Dental Premier share of total procedures	7.0%	7.5%	0.0%	7.0%
Submitted amount by Delta Dental Premier dentists	\$1,174	\$1,131	\$0	\$2,305
Approved amount for Delta Dental Premier dentists	\$854	\$759	\$0	\$1,613
Estimated Delta Dental Premier Savings	27.3%	32.9%	0.0%	30.0%

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04/22/2021

Cost Management Savings

	April 2020-March 2021		April 2019-March 2020	
Billed Charges	\$	45,608	\$	56,076
Paid Claims	\$	22,295	\$	30,962
Predetermination Savings	\$	0	\$	0
Cost Management Savings	Dollars Saved	% of Billed Charges	Dollars Saved	% of Billed Charges
Delta Dental PPO Dentist Savings	\$ 10,858	23.8%	\$ 13,732	24.5%
Delta Dental Premier Dentist Savings	\$ 692	1.5%	\$ 1,997	3.6%
Non-Network Dentist Savings	\$ 0	0.0%	\$ 0	0.0%
Consultant Review	\$ 678	1.5%	\$ 0	0.0%
Non-Billable Procedures	\$ 452	1.0%	\$ 217	0.4%
Elective Care	\$ 27	0.1%	\$ 0	0.0%
Eligibility Verification	\$ 1,062	2.3%	\$ 0	0.0%
Coordination of Benefits	\$ 98	0.2%	\$ 0	0.0%
Subtotal	\$ 13,867	30.4%	\$ 15,946	28.4%
Cost Management Savings per employee per month	\$ 55.03		\$ 55.76	
Plan Design Savings				
Non-Covered Procedures	\$ 4,207	9.2%	\$ 678	1.2%
Deductible Savings	\$ 425	0.9%	\$ 675	1.2%
Coinsurance Savings	\$ 4,311	9.5%	\$ 5,901	10.5%
Plan Maximum Savings	\$ 378	0.8%	\$ 1,558	2.8%
Subtotal	\$ 9,321	20.4%	\$ 8,812	15.7%
Total Savings	\$ 23,188	50.8%	\$ 24,758	44.2%
Claims Adjustments	\$ 125	0.3%	\$ 356	0.6%
Net Savings	\$ 23,313	51.1%	\$ 25,114	44.8%

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Cost Management Savings

Definitions of Savings Categories

Predetermination Savings: Reflects the difference between the amount charged and the amount allowed. Paid claims may be included in any of the saving categories listed below, depending on what treatment was actually rendered.

Cost Management Savings

Delta Dental PPO Dentist Savings: Reduction of submitted fees to reflect the Delta Dental PPO Dentist's fee schedule as set by Delta Dental. The balance is not charged to the patient.

Delta Dental Premier Dentist Savings: Reduction of submitted fees to reflect the Delta Dental Premier Dentist's maximum plan allowance. The balance is not charged to the patient.

Non-Network Dentist: Reduction of submitted fees to the maximum plan allowance.

Consultant Review: Determinations made by Delta Dental's dental consultants regarding the appropriateness of a proposed service.

Non-Billable Procedures: Procedures not charged to the patient or the group by a Delta Dental Network Dentist, such as unbundling of charges and work covered under Delta Dental's treatment guarantees.

Elective Care: Payment allowance made by Delta Dental for the most cost-effective, acceptable alternative dental procedure (e.g., a silver filling allowance toward a tooth-colored filling on a molar).

Eligibility Verification: Delta Dental's careful attention, monitoring and maintenance of subscriber and group eligibility records.

Coordination of Benefits: Delta Dental's special attention to properly applying coordination of benefits (COB) policies, regardless of claim size.

Plan Design Savings

Non-Covered Procedures: Procedures excluded or limited by the Plan that are charged to the patient.

Deductible Savings: A specified dollar amount paid by the patient before benefit payment/coinsurance is applied.

Coinsurance Savings: The patient's share of payment of allowable fees for covered benefits.

Plan Maximum Savings: The dollar amount which exceeds a patient's maximum allowable benefits for a specified period.

Claim Adjustments: The net result of adjustments made to claims processed in a prior period. There may be additional savings reflected in the adjusted claim action or there may be a reversal of the claim savings originally shown.

COUNTY OF DANE
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COUNTY OF DANE

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Delta Dental of Wisconsin Plan Management Report

Reporting Period from 4/1/2019 to 3/31/2021

Executive Summary

Highlights of your group's experience from April 2020 through March 2021.

- 39.2% of paid claims were concentrated in preventive and diagnostic procedure categories.
- The average claim payment was \$220.53, compared to your previous year's average of \$217.98.
- The utilization rate, which measures the average number of claims filed annually was 3.26 per subscriber, compared to your previous year's average of 4.11. Per member, the utilization rate was 2.21 compared to 2.77 in the previous year.
- The average age of your group was 68.7, compared to Delta Dental's average of 35.6.
- 99.0% of the procedures were performed by Delta Dental's network dentists.
- Savings due to Delta Dental's cost management tools (reduction to maximum plan allowance, consultant review, optional procedures and eligibility verification, etc.) were 29.8% of billed charges.
- The number of patients using the plan was 971 representing 81.4% of all members. In the prior period the numbers were 1,082 and 91.2%.
- 5.4% of members met or exceeded their annual maximum benefit during the most recently completed benefit accumulation period.

COUNTY OF DANE
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Monthly Activity

A summary of your monthly enrollment and claims.

Month	Number of Claims	Paid Claims	Total Employees	Employees Only	Employees w/Spouse	Employees w/Children	Employees w/Family
Apr 2019	283	\$63,960	798	454	302	2	40
May 2019	364	\$84,581	794	452	300	2	40
Jun 2019	285	\$64,992	799	455	302	3	39
Jul 2019	287	\$63,236	802	457	303	3	39
Aug 2019	223	\$44,545	802	458	304	3	37
Sep 2019	246	\$50,403	801	455	305	3	38
Oct 2019	323	\$61,590	803	458	305	3	37
Nov 2019	276	\$58,312	799	456	302	3	38
Dec 2019	255	\$44,615	797	455	301	3	38
Jan 2020	271	\$57,855	788	452	298	3	35
Feb 2020	257	\$67,235	787	451	298	3	35
Mar 2020	213	\$54,297	805	462	305	3	35
Apr 2020	33	\$9,692	804	464	302	3	35
May 2020	60	\$11,726	805	466	302	3	34
Jun 2020	200	\$43,624	807	466	303	3	35
Jul 2020	337	\$69,023	809	466	304	3	36
Aug 2020	251	\$54,538	806	466	301	3	36
Sep 2020	274	\$53,572	810	467	303	3	37
Oct 2020	242	\$55,275	810	471	301	2	36
Nov 2020	223	\$45,521	807	468	301	2	36
Dec 2020	264	\$50,126	812	472	303	2	35
Jan 2021	230	\$61,020	800	466	300	2	32
Feb 2021	212	\$49,503	811	474	298	3	36
Mar 2021	306	\$76,816	815	472	302	3	38

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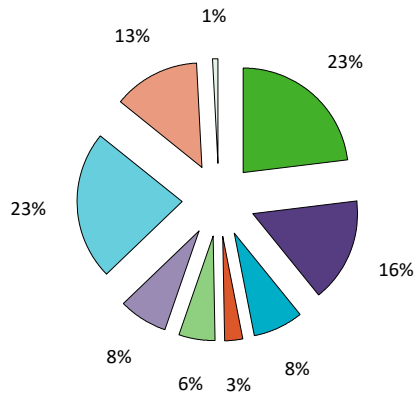
Claims by Coverage Category

Coverage Category	April 2020 - March 2021					Percent Change From Prior				
	Members Covered	Procedures Billed	Procedures PMPM	Amount Paid	Amt. Paid PMPM	Members Covered	Procedures Billed	Procedures PMPM	Amount Paid	Amt. Paid PMPM
Diagnostic		3,242	0.227	\$133,502	\$9.33		-11.1%	-11.5%	-13.1%	-13.6%
Preventive		1,673	0.117	\$93,953	\$6.57		-7.9%	-8.4%	-18.6%	-19.1%
Routine Fillings		438	0.031	\$45,262	\$3.16		-20.9%	-21.4%	-16.3%	-16.8%
Oral Surgery		155	0.011	\$15,548	\$1.09		8.4%	7.8%	21.2%	20.5%
Endodontics		61	0.004	\$32,442	\$2.27		-12.9%	-13.3%	-16.7%	-17.1%
Periodontics		433	0.030	\$43,836	\$3.06		-24.0%	-24.4%	-28.1%	-28.5%
Crowns/Onlays		309	0.022	\$133,894	\$9.36		-23.7%	-24.1%	-22.1%	-22.5%
Bridges/Dentures		180	0.013	\$77,022	\$5.38		-17.4%	-17.9%	-25.8%	-26.2%
Orthodontics		33	0.002	\$4,975	\$0.35		-15.4%	-15.8%	21.8%	21.1%
Total	1,193	6,524	0.456	\$580,435	\$40.54	0.6%	-12.6%	-13.1%	-18.9%	-19.4%

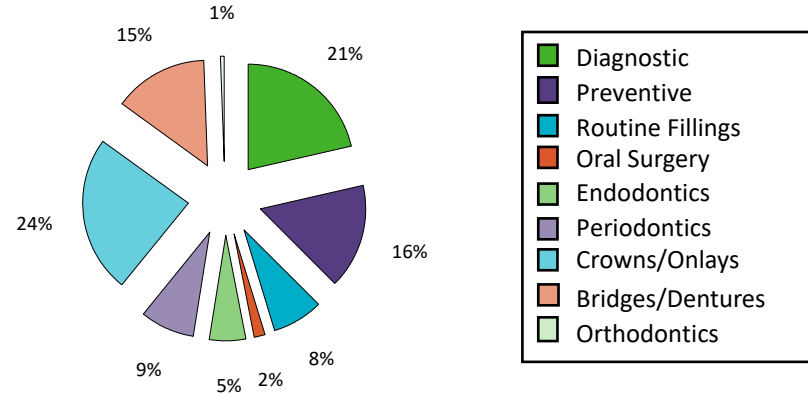
PMPM - Per Member Per Month

NM - Not meaningful. Used when group has no data in a specific area.

Amount Paid April 2020 - March 2021



Amount Paid April 2019 - March 2020

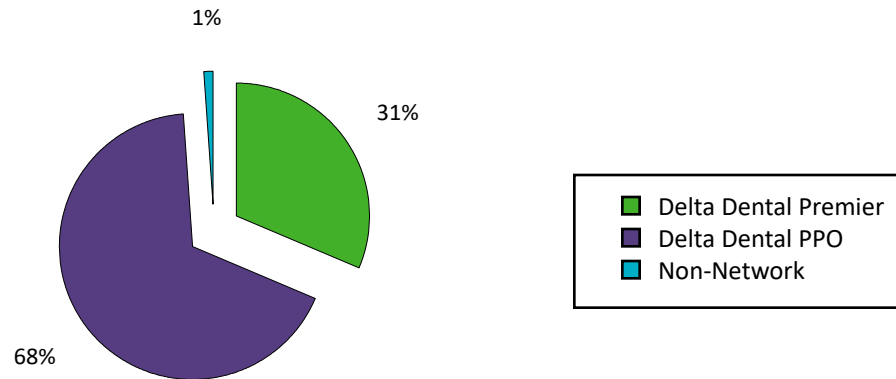


Dentist Selection Patterns

Distribution of claim payments by Delta Dental network vs. non-network dentists.

April 2020 - March 2021		
Delta Dental Network	Number of Claims	Claim Payments
Delta Dental Premier	867	\$181,491
Delta Dental PPO	1,728	\$392,324
Non-Network	37	\$6,620
Total	2,632	\$580,435

Claim Payments by Period
April 2020 - March 2021



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Delta Dental PPO Usage & Savings

Your savings for the period April 2020 through March 2021 resulting from utilization of Delta Dental PPO dentists.

	Preventive & Diagnostic	Basic	Major	Total
Number of procedures by Delta Dental PPO dentists	3,057	696	329	4,082
Delta Dental PPO share of total procedures	65.1%	66.3%	68.8%	65.6%
Submitted amount by Delta Dental PPO dentists	\$241,357	\$209,322	\$339,208	\$789,887
Approved amount for Delta Dental PPO dentists	\$168,114	\$152,914	\$256,836	\$577,864
Estimated Delta Dental PPO Savings	30.3%	26.9%	24.3%	26.8%

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Delta Dental Premier Usage & Savings

Your savings for the period April 2020 through March 2021 resulting from utilization of Delta Dental Premier dentists.

	Preventive & Diagnostic	Basic	Major	Total
Number of procedures by Delta Dental Premier dentists	1,493	325	135	1,953
Delta Dental Premier share of total procedures	32.5%	31.4%	28.8%	32.0%
Submitted amount by Delta Dental Premier dentists	\$112,599	\$81,470	\$126,370	\$320,439
Approved amount for Delta Dental Premier dentists	\$85,792	\$62,177	\$100,024	\$247,992
Estimated Delta Dental Premier Savings	23.8%	23.7%	20.8%	22.6%

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04/22/2021

Cost Management Savings

	April 2020-March 2021		April 2019-March 2020	
Billed Charges	\$	1,166,065	\$	1,404,725
Paid Claims	\$	580,435	\$	715,620
Predetermination Savings	\$	11,527	\$	87,583
Cost Management Savings	Dollars Saved	% of Billed Charges	Dollars Saved	% of Billed Charges
Delta Dental PPO Dentist Savings	\$ 207,185	17.8%	\$ 209,739	14.9%
Delta Dental Premier Dentist Savings	\$ 70,843	6.1%	\$ 89,083	6.3%
Non-Network Dentist Savings	\$ 2,392	0.2%	\$ 2,230	0.2%
Consultant Review	\$ 24,686	2.1%	\$ 39,976	2.8%
Non-Billable Procedures	\$ 18,860	1.6%	\$ 16,441	1.2%
Elective Care	\$ 2,356	0.2%	\$ 3,667	0.3%
Eligibility Verification	\$ 1,479	0.1%	\$ 1,100	0.1%
Coordination of Benefits	\$ 19,749	1.7%	\$ 14,796	1.1%
Subtotal	\$ 347,550	29.8%	\$ 377,032	26.8%
Cost Management Savings per employee per month	\$ 35.84		\$ 39.38	
Plan Design Savings				
Non-Covered Procedures	\$ 46,522	4.0%	\$ 64,486	4.6%
Deductible Savings	\$ 12,725	1.1%	\$ 13,900	1.0%
Coinsurance Savings	\$ 109,024	9.3%	\$ 148,882	10.6%
Plan Maximum Savings	\$ 49,074	4.2%	\$ 66,533	4.7%
Subtotal	\$ 217,345	18.6%	\$ 293,801	20.9%
Total Savings	\$ 564,895	48.4%	\$ 670,833	47.8%
Claims Adjustments	\$ 20,735	1.8%	\$ 18,272	1.3%
Net Savings	\$ 585,630	50.2%	\$ 689,105	49.1%

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Cost Management Savings

Definitions of Savings Categories

Predetermination Savings: Reflects the difference between the amount charged and the amount allowed. Paid claims may be included in any of the saving categories listed below, depending on what treatment was actually rendered.

Cost Management Savings

Delta Dental PPO Dentist Savings: Reduction of submitted fees to reflect the Delta Dental PPO Dentist's fee schedule as set by Delta Dental. The balance is not charged to the patient.

Delta Dental Premier Dentist Savings: Reduction of submitted fees to reflect the Delta Dental Premier Dentist's maximum plan allowance. The balance is not charged to the patient.

Non-Network Dentist: Reduction of submitted fees to the maximum plan allowance.

Consultant Review: Determinations made by Delta Dental's dental consultants regarding the appropriateness of a proposed service.

Non-Billable Procedures: Procedures not charged to the patient or the group by a Delta Dental Network Dentist, such as unbundling of charges and work covered under Delta Dental's treatment guarantees.

Elective Care: Payment allowance made by Delta Dental for the most cost-effective, acceptable alternative dental procedure (e.g., a silver filling allowance toward a tooth-colored filling on a molar).

Eligibility Verification: Delta Dental's careful attention, monitoring and maintenance of subscriber and group eligibility records.

Coordination of Benefits: Delta Dental's special attention to properly applying coordination of benefits (COB) policies, regardless of claim size.

Plan Design Savings

Non-Covered Procedures: Procedures excluded or limited by the Plan that are charged to the patient.

Deductible Savings: A specified dollar amount paid by the patient before benefit payment/coinsurance is applied.

Coinsurance Savings: The patient's share of payment of allowable fees for covered benefits.

Plan Maximum Savings: The dollar amount which exceeds a patient's maximum allowable benefits for a specified period.

Claim Adjustments: The net result of adjustments made to claims processed in a prior period. There may be additional savings reflected in the adjusted claim action or there may be a reversal of the claim savings originally shown.

COUNTY OF DANE
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**Capital Area Regional Planning Commission
Dental RFP Census Response
As of 05/10/21**

ORG	DEPT	UNIT_CODE	FTE	GENDER	BIRTH_DATE	ZIP_CODE	PLAN_COD	COVERAGE
CARPC	CARPC	CARPC	1	Male	01/07/1988	53593	DENTAL	FAMILY
CARPC	CARPC	CARPC	1	Female	11/15/1987	53705	DENTAL	SINGLE
CARPC	CARPC	CARPC	Retired	Female	10/27/1953	53713	DENTAL	SINGLE
CARPC	CARPC	CARPC	1	Male	11/15/1981	53551	DENTAL	FAMILY
CARPC	CARPC	CARPC	Retired	Male	05/12/1956	97070	DENTAL	FAMILY
CARPC	CARPC	CARPC	1	Male	02/18/1984	53714	DENTAL	FAMILY
CARPC	CARPC	CARPC	1	Male	05/04/1966	53704	DENTAL	FAMILY
CARPC	CARPC	CARPC	1	Female	06/03/1988	53532	DENTAL	FAMILY
CARPC	CARPC	CARPC	1	Female	03/09/1964	53719	DENTAL	SINGLE
CARPC	CARPC	CARPC	1	Male	11/03/1958	53703	DENTAL	FAMILY