



## Hartford Life, Inc. - Group Benefits Division

### Customer Statement

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#### COUNTY OF DANE

Policy Number: 402346G

Experience Unit: 001

Experience Group: COUNTY DANE-EES ELECT STD&LTD

Policy Effective Date: 07/01/2012

Current Policy Status: ACTIVE

Billing System: GIPR

Sales office: CHICAGO

Sales Representative: ROSS HORN

Service Representative: ANN LOKEN

Case Effective Date: 07/01/2012

Current Case Status: ACTIVE

Grace Period: 45 Days

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#### July 01,2014 through July 01,2015 Account Summary

|  | Rating Method | Payments Applied<br>to Period | Estimated Due &<br>Unpaid Payments | Estimated Earned<br>premium | Claims Paid in<br>period |
|--|---------------|-------------------------------|------------------------------------|-----------------------------|--------------------------|
| Long Term Disability - Ability Assurance | NON PAR       | \$347,646.62                  | \$0.00                             | \$347,646.62                | \$95,279.86              |
| Long Term Disability Expenses            |               | \$0.00                        | \$0.00                             | \$0.00                      | \$979.31                 |
| Total:                                   |               | \$347,646.62                  | \$0.00                             | \$347,646.62                | \$96,259.17              |
| Short Term Disability                    | NON PAR       | \$342,264.65                  | \$0.00                             | \$342,264.65                | \$324,112.54             |
| Short Term Disability Expenses           |               | \$0.00                        | \$0.00                             | \$0.00                      | \$6,929.68               |
| Total:                                   |               | \$342,264.65                  | \$0.00                             | \$342,264.65                | \$331,042.22             |
| Grand Total:                             |               | \$689,911.27                  | \$0.00                             | \$689,911.27                | \$427,301.39             |

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## Hartford Life, Inc. - Group Benefits Division

### Customer Statement

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#### COUNTY OF DANE

Policy Number: 402346G

Experience Unit: 002

Experience Group: COUNTY OF DANE - LTD ONLY

Policy Effective Date: 07/01/2012

Current Policy Status: ACTIVE

Billing System: GIPR

Sales office: CHICAGO

Sales Representative: ROSS HORN

Service Representative: ANN LOKEN

Case Effective Date: 07/01/2012

Current Case Status: ACTIVE

Grace Period: 45 Days

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#### July 01,2014 through July 01,2015 Account Summary

|  | Rating Method | Payments Applied<br>to Period | Estimated Due &<br>Unpaid Payments | Estimated Earned<br>premium | Claims Paid in<br>period |
|--|---------------|-------------------------------|------------------------------------|-----------------------------|--------------------------|
| Long Term Disability - Ability Assurance | NON PAR       | \$26,830.34                   | \$0.00                             | \$26,830.34                 | \$0.00                   |
| Total:                                   |               | \$26,830.34                   | \$0.00                             | \$26,830.34                 | \$0.00                   |
| Grand Total:                             |               | \$26,830.34                   | \$0.00                             | \$26,830.34                 | \$0.00                   |

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## Hartford Life, Inc. - Group Benefits Division

### Customer Statement

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#### COUNTY OF DANE

Policy Number: 402346G

Experience Unit: 003

Experience Group: CARPC-EES ELECTING STD&LTD

Policy Effective Date: 07/01/2012

Current Policy Status: ACTIVE

Billing System: GIPR

Sales office: CHICAGO

Sales Representative: ROSS HORN

Service Representative: ANN LOKEN

Case Effective Date: 07/01/2012

Current Case Status: ACTIVE

Grace Period: 45 Days

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#### July 01,2014 through July 01,2015 Account Summary

|  | Rating Method | Payments Applied<br>to Period | Estimated Due &<br>Unpaid Payments | Estimated Earned<br>premium | Claims Paid in<br>period |
|--|---------------|-------------------------------|------------------------------------|-----------------------------|--------------------------|
| Long Term Disability - Ability Assurance | NON PAR       | \$900.90                      | \$0.00                             | \$900.90                    | \$0.00                   |
| Total:                                   |               | \$900.90                      | \$0.00                             | \$900.90                    | \$0.00                   |
| Short Term Disability                    | NON PAR       | \$893.87                      | \$0.00                             | \$893.87                    | \$0.00                   |
| Total:                                   |               | \$893.87                      | \$0.00                             | \$893.87                    | \$0.00                   |
| Grand Total:                             |               | \$1,794.77                    | \$0.00                             | \$1,794.77                  | \$0.00                   |

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## Hartford Life, Inc. - Group Benefits Division

### Customer Statement

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#### COUNTY OF DANE

Policy Number: 402346G

Experience Group: ALL

Policy Effective Date: 07/01/2012

Current Policy Status: ACTIVE

Billing System: GIPR

Sales office: CHICAGO

Sales Representative: ROSS HORN

Service Representative: ANN LOKEN

Case Effective Date: 07/01/2012

Current Case Status: ACTIVE

Grace Period: 45 Days

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#### July 01,2014 through July 01,2015 Account Summary

|  | Rating Method | Payments<br>Applied to Period | Estimated Due &<br>Unpaid Payments | Estimated Earned<br>premium | Claims Paid in<br>period |
|--|---------------|-------------------------------|------------------------------------|-----------------------------|--------------------------|
| Long Term Disability - Ability Assurance | NON PAR       | \$375,377.86                  | \$0.00                             | \$375,377.86                | \$95,279.86              |
| Long Term Disability Expenses            |               | \$0.00                        | \$0.00                             | \$0.00                      | \$979.31                 |
| Total:                                   |               | \$375,377.86                  | \$0.00                             | \$375,377.86                | \$96,259.17              |
| Short Term Disability                    | NON PAR       | \$343,158.52                  | \$0.00                             | \$343,158.52                | \$324,112.54             |
| Short Term Disability Expenses           |               | \$0.00                        | \$0.00                             | \$0.00                      | \$6,929.68               |
| Total:                                   |               | \$343,158.52                  | \$0.00                             | \$343,158.52                | \$331,042.22             |
| Grand Total:                             |               | \$718,536.38                  | \$0.00                             | \$718,536.38                | \$427,301.39             |

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End Of Report



## Hartford Life, Inc. - Group Benefits Division

### Customer Statement

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End of the Report

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