2027
EMPLOYEE REWARDS

BENEFITS GUIDE
FOR HOURLY EMPLOYEES
PAID WEEKLY

KENT® WORLDWIDE

WELCOME

Welcome to *KENT WORLDWIDE*™ Benefits!

Congratulations on your benefits-eligible position at ***KENT WORLDWIDE***. We are excited to share a wide variety of benefits offered to you and your eligible dependents. As you review this guide you will find our benefits program provides choice, flexibility and affordability to meet your personal needs.

Please review this guide carefully and complete your enrollment elections within the designated time frame. If you need assistance, contact the HR Benefits Team at (563) 264-4444. Visit the Intranet to learn more about ***KENT WORLDWIDE***'s benefits under the "Working at KENT WW" section.

Employee Value Proposition

Organization

- **Family**
- **Values**
- **Diversified**
- **Reputable**
- **Sustainable**

People

- **Teamwork**
- **Talented**
- **Committed**
- **Leaders**
- **Resilient**

Culture

- **Opportunities**
- **Stability**
- **Purposeful**
- **Safe**
- **Resourceful**

Rewards

- **Shared**
- **Recognition**
- **Compensation**
- **Benefits**
- **Appreciation**

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ELIGIBILITY & DEPENDENTS

When Coverage Begins

For hourly new hires, benefits begin on day 30 of employment.

When Coverage Ends

Benefit coverages end on the last day of employment, or last day of being in a benefit-eligible employment status.

Eligibility

You are eligible for benefits if you are a regular full-time or part-time employee scheduled to work on average 20 hours or more per week.

If elected, your dependents are also eligible for medical, dental, vision, and life insurance coverage. Eligible dependents include:

- Your legal spouse
- Your legal child(ren): includes your natural, adopted or foster child(ren), stepchild(ren), or any child whom you have legal custody.
  They are eligible:
  - Up to age 26.
  - If fully disabled, provided he/she became fully disabled before age 26 and was covered by the plan.

Dependent Verification of Eligibility Documentation	
EVENT	**DOCUMENTATION NEEDED**
Spouse*	Marriage Certificate
Child*	Birth Certificate OR guardianship award
Disabled child	Birth Certificate AND a Social Security Disability Award

*A joint Federal tax return (current or most recent) identifying dependent names and social security number is also acceptable.

Dependent Verification of Eligibility

When you first enroll, or if you change coverage mid-year due to a qualifying event, you are required to provide documentation substantiating the eligibility of your dependent(s) within 30 days of the change or enrollment.

Documentation can be sent to sherri.conaway@kentww.com.

HOW TO ENROLL

Annual Enrollment

Employees are encouraged to review benefits during the annual enrollment period in October for benefits effective January 1 of the following year. Prior to enrolling, open enrollment information is accessible via mailing to homes, the Intranet, on-site meetings at ***KENT WORLDWIDE*** worksite locations, or virtual trainings.

New Hires

You may enroll online during your first 60 days of employment. Because benefits are effective on day 30, enrolling after day 30 may result in catch-up premiums or delayed receipt of insurance cards being mailed to your home.

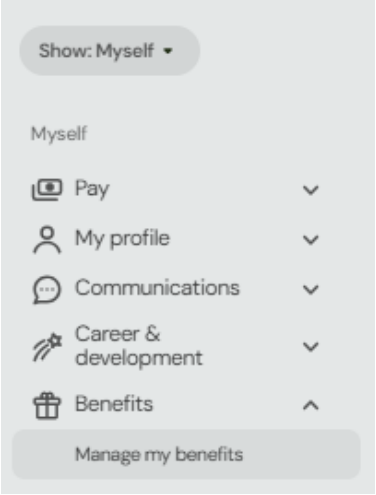
Qualifying Event

The IRS provides strict regulations on changes to pre-tax elections during the plan year. If you experience a qualifying event, you are permitted to make a change within 30 days of the event. If you do not complete your change request within 30 days, you will not be able to make changes to your elections until the next open enrollment period. Common qualifying events include:

- Marriage, divorce or annulment
- Birth of a child
- Placement of a foster child, or child for adoption with you, or assumption of legal guardianship of a child
- Change in your spouse's or dependent's employment status that affects benefits eligibility, including change of employment status for you, your spouse or your dependent
- You or your dependent becomes eligible or loses eligibility for Medicare or Medicaid
- The death of your spouse or dependent
- Court ordered coverage of your child, allowing you to add or drop the child's coverage
- Loss of eligibility for a dependent

Steps to Enrolling Online

1. Log into UKG https://kentcorp-dl.ultipro.com
2. Go to Manage My Benefits.
3. Once in Benefits portal, select Benefits drop down, then select process and follow steps.
4. Once elections are made, select review and confirm.
5. You will receive a confirmation message.
6. You have the option to save, print or email yourself a confirmation statement.



MEDICAL

New for 2027 Virtual One to One Health Care & Text Care

We offer three medical plan options. Our medical plans are self-insured, meaning, ***KENT WORLDWIDE*** pays medical claims directly as the insurer. ***KENT WORLDWIDE*** contracts with Wellmark, our third-party administrator. Through this arrangement, Wellmark provides the provider network, fee schedule, insurance cards, and processes claims.

Three Medical Plan Options:

Nationwide HDHP

Iowa HDHP

Classic PPO Plan

Preventive care is covered 100% in all three health plans.

What is preventive care?

Preventive care is the medical care you receive to help prevent disease before it happens. It can include age-appropriate or diagnostic testing, lifestyle changes, vaccines and early disease detection, and support in preventing future health or behavioral conditions.

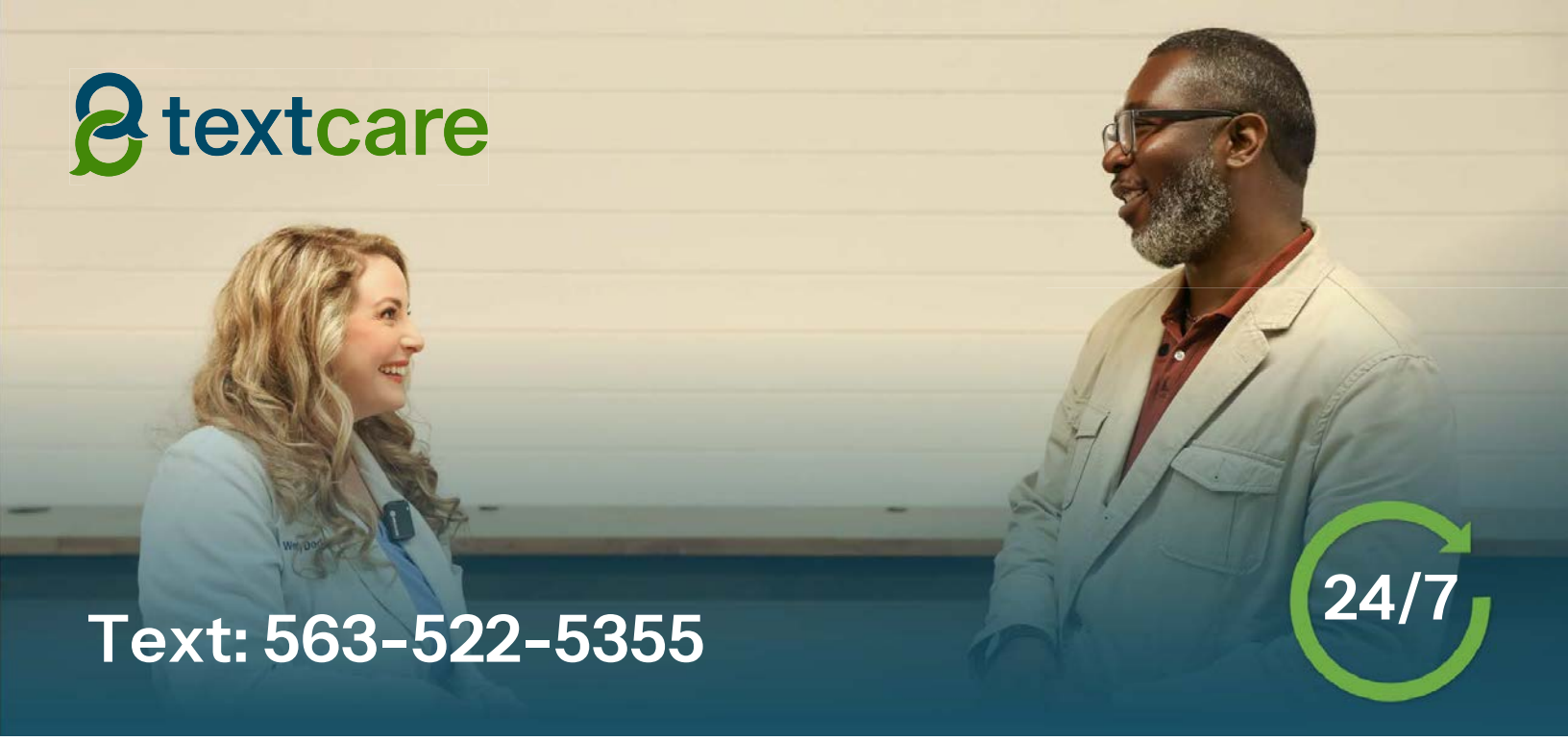
What are preventive exams?

Medically speaking, preventive exams are care received in the absence of a medical condition or symptom. That means preventive exams or services can help avoid sickness or disease by identifying health conditions in their early stages when they are easier and less costly to treat. Preventive exams can include a complete physical, standard immunizations, blood pressure screenings, blood work, depression screenings, eye exam and more.

Term	Description
Premium	The amount you pay for health insurance coverage out of each paycheck.
Deductible	Generally, the amount you pay for covered health care services before your insurance plan starts to pay.
Co-pay	A fixed dollar amount a patient must pay upfront for medical services.
Coinsurance	An insured individuals share of the cost of a covered health care expense.
Out-of-Pocket Maximum (OOP)	A cap or limit on the amount of money you have to pay for covered health care services in a plan year.

Traveling Abroad

Access care via GeoBlue. Download the GeoBlue Mobile App for country specific hospitals, providers, and more resources.



Welcome to TextCare!

Effective January 1, 2027

KENT WORLDWIDE

Discuss primary and urgent care needs, chronic condition management, and routine medication needs.

Get support finding high-quality, high-value specialists.

Accessible via text message and video chat. Simply send us a text message to initiate care. It's that easy!

SCAN ME

Scan to save the contact info

If you need access to medical care, TextCare provides access to One to One Health medical providers via text message - 24/7

- Receive direct access to on-demand high-quality care.
- Appointments are not required. Simply send a text to initiate care.
- TextCare is available at no cost to all KENT Worldwide medical plan participants and their households.

textcare

Frequently Asked Questions

Text: 563-522-5355

1 How do I contact TextCare?

Send a text message to **563-522-5355.** Your care team will respond within 5 minutes. Appointments are not required, and there is no app to download.

2 What can I use TextCare for?

Your care team can help with any health or medical question and should be your first point of contact for any issue. Even if your issue cannot be resolved virtually, the care team provides expert care navigation and will refer you to specialty providers.

3 Will my TextCare team be able to understand my question or issue via text?

Yes! You can chat, upload pictures, or one-click into a video visit with your provider.

4 What if I need additional care outside of TextCare?

Your TextCare provider will refer you to high quality, low-cost providers and specialists.

5 What if I need medication to treat my diagnosis?

Your TextCare provider can prescribe medication, and the prescription will be sent to a pharmacy of your choice.

6 What if my initial visit requires a follow-up?

Your care team will reach out via text message to follow up with you.

7 Should I go to an Urgent Care or the ER?

Many urgent care and emergency room visits end up being unnecessary. TextCare is available to you 24/7 and can help triage the situation to avoid a lengthy trip to the ER. However, we encourage you to call 911 or go to the ER if you are experiencing a medical emergency.

8 Who is eligible for this service? Can my family use TextCare?

Yes! TextCare is available at no cost to all KENT Worldwide medical plan participants and their households. If you, your spouse, or your dependent has a medical need, please contact TextCare.

9 Will my employer have access to my health information?

No! All patient information is strictly confidential. TextCare is managed by One to One Health, a workplace healthcare provider headquartered in Chattanooga, Tennessee. One to One Health complies with all HIPAA and healthcare regulations to maintain your privacy, ensuring your health information is kept confidential.

SCAN ME

KENT WORLDWIDE

Scan to save the contact info

NATIONWIDE HIGH DEDUCTIBLE

The Nationwide High Deductible Health Plan is an option for eligible ***KENT WORLDWIDE*** employees.

Overview of coverage:

Category	Employee Only	With Spouse, Child(ren), or Family
Deductible	$3,500	$7,000 ($3,500 per individual, but not more than $7,000)
Out-of-Pocket Maximum	$3,500	$7,000 (max)
Provider Network	Alliance Select (Nationwide)	
Pharmacy (CVS Caremark through RxBenefits)	Participant pays 100% of cost up to deductible	
Office Visit (Primary Care)	Participant pays 100% of cost up to deductible	
Office Visit (Specialist)	Participant pays 100% of cost up to deductible	
Emergency Room	Participant pays 100% of cost up to deductible	
Tax Advantaged Account Option	Health Savings Account	
Preventive Care	100% covered by plan	

Who this plan works well for:

- This plan is great for healthy individuals, or low utilizer of health care services to take advantage of a lower premium.
- This plan has the lowest out-of-pocket maximum, so it also works well for someone who knows they will have services or high-cost medications and reach the out-of-pocket maximum.
- This plan is also for anyone wanting to take advantage of a Health Savings Account.

IOWA HIGH DEDUCTIBLE

The Iowa High Deductible Health Plan is an option for eligible ***KENT WORLDWIDE*** employees at Iowa locations. Guest plan access is available for children who live outside of Iowa but still within the United States, including those away at college.

Overview of coverage:

Category	Employee Only	With Spouse, Child(ren), or Family
Deductible	$3,500	$7,000 ($3,500 per individual, but not more than $7,000)
Out-of-Pocket Maximum	$3,500	$7,000 (max)
Provider Network	Blue Access (Iowa and Surrounding Communities)	
Pharmacy (CVS Caremark through RxBenefits)	Participant pays 100% of cost up to deductible	
Office Visit (Primary Care)	Participant pays 100% of cost up to deductible	
Office Visit (Specialist)	Participant pays 100% of cost up to deductible	
Emergency Room	Participant pays 100% of cost up to deductible	
Tax Advantaged Account Option	Health Savings Account	
Preventive Care	100% covered by plan	

Who this plan works well for:

- Everything under Nationwide HDHP
- Lives in & receives primary care in Iowa to take advantage of lower premium & fee schedule within narrow provider network.
- Emergency coverage or Telehealth is available when traveling out of Iowa.

CLASSIC PPO

The Classic PPO Health Plan is an option for eligible ***KENT WORLDWIDE*** employees.

Overview of coverage:

Category	Employee Only	With Spouse, Child(ren), or Family
Out-of-Pocket Maximum	$4,500	$10,000 (max)
Deductible	$1,500	$3,800 (max)
Provider Network	Alliance Select (Nationwide)	
Pharmacy (CVS Caremark through RxBenefits)	15% Generic, 30% Preferred Brand, 45% Non-Preferred Brand, 20% Specialty	
Office Visit (Primary Care)	$45 copay	
Office Visit (Specialist)	$65 copay	
Emergency Room	$250 copay and 30% coinsurance per visit for facility and physician(s) combined	
Tax Advantaged Account Option	Flex Spending Account (FSA)	
Preventive Care	100% covered by plan	

Who this plan works well for:

- Has Rx that are low to moderate cost.
- Prefers co-pays for office visits.
- Takes advantage of Flex Spending Account.

YOUR KEY TO BETTER PHARMACY BENEFITS

Welcome to MedOne!

All benefit eligible employees will transition to a new prescription benefit plan with MedOne Pharmacy Benefit Solutions. MedOne is a pharmacy benefit administrator that works directly with clients, pharmacies, prescribers, and partners to help members easily access the right prescriptions at the best prices.

Welcome Video

SCAN HERE

ID Card

You will receive a new ID card. This card will contain MedOne prescription processing information. Please show this card to at the pharmacy when you get a prescription filled on or after your go-live date. This ensures your prescriptions are processed correctly through MedOne.

Member Resources

The MedOne website features a variety of resources for MedOne members. To access the member tab of our website, tap or click the **MEMBERS** tile along the bottom of the homepage or select **MEMBERS** in our main menu. Here, you are able to access the drug lookup tool, review our FAQs on mail order and coverage, download documents & forms, access the myMedOne Member Portal and more!

Member Assistance

Our Member Advocate Team consists of certified pharmacy technicians who are equipped to assist you with any questions you may have.

MedOne is located at:

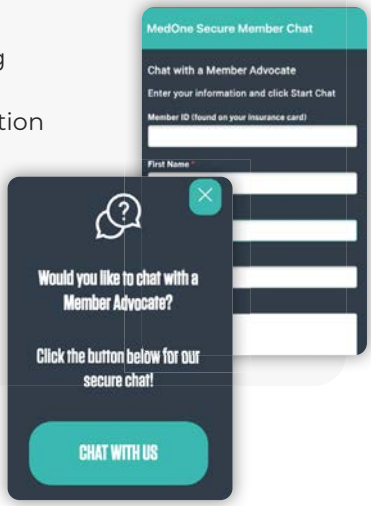
1590 University Avenue
Dubuque, IA 52001

and we can be reached through the following methods.

By Phone:
Please call 866-335-9057 and our Member Advocate team is more than happy to assist you.

By Fax:
If you need to fax paperwork to MedOne, please do so using 563-588-8725. Please send all prior authorization information to 563-293-8156.

By Chat:
Check out our LIVE chat feature on our website at www.medone-rx.com.



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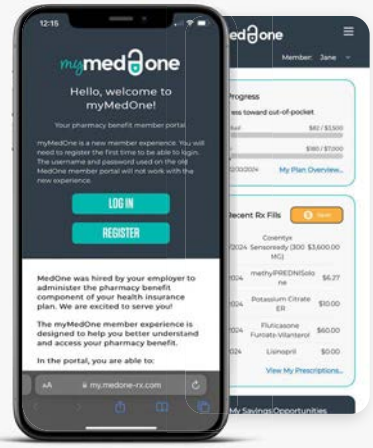
Member Portal

The MyMedOne Member Portal allows you to access information about your pharmacy benefit anytime, anywhere.

To access myMedOne, go to **www.medone-rx.com** and click on **MEMBER PORTAL** or visit **my.medone-rx.com** directly. myMedOne offers the following features:

- Review progress toward deductibles & out-of-pocket maximums
- Look up in-network pharmacies in your area & obtain sample pricing
- Check the status of a prior authorization
- Identify savings opportunities
- View claims details & prescription history
- Access drug information directory
- Gather ID card processing information
- Enroll in mail order



Visit myMedOne

SCAN HERE

Frequently Asked Questions

Is my drug on the MedOne formulary?

MedOne's drug look-up tool allows you to view medications that are on your formulary along with formulary alternatives.

- Go to **medone-rx.com/members/drug-lookup**
- Enter in the Rx **GROUP ID** (located on your ID card)
- If you are currently taking one of the non-covered medications, please contact your physician and request a new prescription for one of the covered alternatives to be filled on or after your plan effective date.
- If you or your physician have questions about a medication or available alternatives, please call MedOne for assistance.

Will I need a prior authorization for my medication?

Your prescription benefit plan may include clinical programs and plan edits for specific medications or therapy classes. Prior authorization (otherwise known as pre-approval) may be needed to ensure safe and effective medication therapies are provided while keeping healthcare costs low for you and your plan sponsor. In some cases, certain medications may not be covered under your plan and lower-cost equivalents or alternative medications are made available.

We encourage you to call MedOne at **866-335-9057** if you are prescribed a new medication in order to determine coverage status.

What do I do if I have issues filling my prescription on or after the plan effective date?

Your plan has chosen programs and edits on select medications or therapy classes, however a rejection at the pharmacy does not necessarily mean your medication is not covered. Rather, your medication may be subject to review and approval. If your pharmacist advises there is an issue, please ask them to call MedOne at **866-335-9057** to speak to one of our Member Advocates. Our Member Advocates will work quickly to resolve any issues. This number is also located on your prescription ID card.

How do I go about filling my specialty medication?

Specialty medications treat complex medical conditions such as cancer and multiple sclerosis that often require specific handling and storage requirements. The plan requires members to utilize MedOne Pharmacy Services for filling specialty medications on or after your plan effective date. If you are filling a specialty medication, we encourage you to call MedOne prior to your plan effective date at **866-335-9057**.

When you call, we will ask you a few questions about your specialty medication in order to assist you in transferring your medication to MedOne Pharmacy Services.

medone

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MEDICAL PREMIUMS

All medical premiums are deducted pre-tax.

Nationwide High Deductible Health Plan (HDHP)

Coverage Level	Weekly	Bi-Weekly
Employee	$16.35	$32.70
Employee +Spouse	$55.25	$110.50
Employee + Child(ren)	$46.43	$92.86
Family	$72.76	$145.52

Iowa High Deductible Health Plan (HDHP)

Coverage Level	Weekly	Bi-Weekly
Employee	$9.67	$19.34
Employee +Spouse	$39.59	$79.18
Employee + Child(ren)	$29.27	$58.54
Family	$49.44	$98.88

Classic PPO

Coverage Level	Weekly	Bi-Weekly
Employee	$33.62	$67.24
Employee +Spouse	$97.55	$195.10
Employee + Child(ren)	$83.10	$166.20
Family	$117.52	$235.04

PLAN COMPARISON

Annual Total Risk Perspective

When you consider the three medical plans from an annual total risk perspective, it can help determine which plan is right for you and your eligible dependents. 75% of covered employees and their dependents have less than $2,800 in claims. Many do not meet the deductible or only seek preventive care. Should an unexpected event occur, or if you have higher plan utilization, this should provide you peace of mind showing the total you could pay in premiums and claims.

Employee Only	Iowa HDHP	Nationwide HDHP	Classic PPO
Premiums	$503	$850	$1,784
Out-Of-Pocket Max	$3,500	$3,500	$4,500
HSA	($750)	($750)	$0
Total	$3,253	$3,600	$6,248

Employee + Spouse	Iowa HDHP	Nationwide HDHP	Classic PPO
Premiums	$2,059	$2,873	$5,073
Out-Of-Pocket Max	$7,000	$7,000	$10,000
HSA	($1,000)	($1,000)	$0
Total	$8,059	$8,873	$15,073

Employee + Child(ren)	Iowa HDHP	Nationwide HDHP	Classic PPO
Premiums	$1,522	$2,414	$4,321
Out-Of-Pocket Max	$7,000	$7,000	$10,000
HSA	($1,000)	($1,000)	$0
Total	$7,522	$8,414	$14,321

Family	Iowa HDHP	Nationwide HDHP	Classic PPO
Premiums	$2,571	$3,784	$6,111
Out-Of-Pocket Max	$7,000	$7,000	$10,000
HSA	($1,000)	($1,000)	$0
Total	$8,571	$9,784	$16,111

HEALTH SAVINGS ACCOUNT

For employees enrolled in a High Deductible Health Plan, you are eligible for a Health Savings Account. Health Savings Accounts provide three key tax advantages: the ability to defer tax-free, the ability to pay for qualified expenses using tax-free dollars, and the ability to invest where your earnings grow tax free. Health Savings Accounts roll over in full year-over-year, so the money is always yours. You are able to change your deferral at any time, without requiring a qualifying event.

On an annual basis ***KENT WORLDWIDE*** contributes $750 to those enrolled in employee only coverage and $1,000 for all other coverage levels. Our contribution is made twice annually in mid-January (1/2) and mid-July (1/2). The contribution from us counts towards the annual limit set by the IRS. Employees who are at least age 55 are allowed an additional $1,000 for catch-up contribution. The enrollment system recognizes the employer contributions and age for determining the amount you are eligible to defer and ensures you are only allowed up to your maximum amount.

For new hires, your employer contributions will start in the half of year based on date of hire. If you have contributed to a Health Savings Account in the current calendar year, you are responsible for calculating your eligible contribution to ensure you are below the IRS limits when you file your taxes.

IRS Limits for 2027:

	Single	Family
2027	$4,500	$9,000
Catch-up (age 55+)	$1,000	$1,000

Have a Health Savings Account from your former employer?

Our HSA allows rollovers from other plans. Please contact the Benefits Team for assistance.

Example of Employee only coverage up to 2027 Limit

$750 KENT WW + $3,750 You = $4,500 Total

Example of Family Coverage up to 2027 Limit:

$1,000 KENT WW + $8,000 You = $9,000 Total

Example of Employee only coverage with Catch-up:

$750 KENT WW + $4,750 You = $5,500 Total

Example of Family Coverage with Catch-up:

$1,000 KENT WW + $9,000 You = $10,000 Total

Health Savings: Getting Started and Milestone Targets

Save up enough to cover Deductible for a year or more → Start investing in Mutual Funds for additional growth → Maximize your contributions → Save for medical expenses in Retirement, including Medicare premiums

FLEXIBLE SPENDING ACCOUNTS

Flexible Spending Accounts are voluntary pre-tax savings accounts that help you stretch your benefit dollars. An active election is required to participate. If you decide to participate, it is important to base your contribution amount on your best estimate of expenses for the calendar year. Changes can be made with a qualifying event. Claims may be submitted up to March 31 of the following year for expenses incurred in the calendar year.

Healthcare FSA & Limited Purpose

If you enroll in a medical or limited purpose FSA, your entire contribution amount is available right away to pay for eligible expenses.

Your contributions are deducted each pay period of the calendar year.

Carryover is allowed annually, any amount remaining over the carryover beyond March 31 of the following year is forfeited.

Dependent Care FSA

Dependent Care FSA is used toward care for child(ren) under age 13 or disabled/dependent adult and elder care. You can only access funds that are available in your account. No carryover is allowed for dependent care. Any amount not used after March 31 of the following year is forfeited.

Types of Spending Accounts:

	MEDICAL FLEX SPENDING ACCOUNT	LIMITED PURPOSE SPENDING ACCOUNT	DEPENDENT CARE SPENDING ACCOUNT
Eligibility	Enrolled in Classic PPO plan	Enrolled in Nationwide HDHP or Iowa plan	Claim children as dependents on taxes
IRS Contribution Limit	$3,400	$3,400	$7,500
Catch-up Contribution	No	No	No
Employer Contribution	Employee contributions only	Employee contributions only	Employee contributions only
Able to change Contribution Amount During the Year	No, unless you experience a qualifying event	No, unless you experience a qualifying event	No, unless you experience a qualifying event
Able to Invest	No	No	No
Tax Treatment	Contributions tax free Qualified expenses paid tax free	Contributions tax free Qualified expenses paid tax free	Contributions tax free Qualified expenses paid tax free
Eligible Expenses	Qualified medical, dental, vision expenses	Dental and vision related expenses, paired with Health Savings Account & High-deductible health plan	Dependent care – child under 13 (before/after school, summer program, etc.). Adult dependent care if criteria met.
Expense Has to Occur During the Plan Year	Yes	Yes	Yes
Unused Balance Carry-Over	Up to $680 unused can be carried over	Up to $680 unused can be carried over	No

DENTAL

KENT WORLDWIDE offers two dental plans to select from. Both plans come with Delta Dental's two Provider networks. You do not have to select the network at enrollment, just the plan. Your dentist enrolls in the network of their choice with Delta Dental. Upon enrolling in dental coverage, you will be mailed dental insurance cards to your home.

Check-up Plus Plan:

This plan provides basic dental coverage at a lower premium cost. It provides routine and major services for accidents, fillings, crowns, etc. It does not provide orthodontia services or third office visit.

Coverage Overview	PPO Network	Premier Network
Calendar Year Benefit Maximum	$1,200 + Cleanings (per covered member)	
Deductible	$25 Single / $75 Family	$50 Single / $150 Family
Preventative (twice a year)	Plan 100% / You 0%	
Routine / Restorative	Plan 60% / You 40%	Plan 50% / You 50%
Major	Plan 50% / You 50%	
Orthodontia (Adults & Children)	Not Covered	

Total Dental Care Plan:

The Total Care Dental Plan provides comprehensive coverage for those who need more robust services, such as, orthodontia, implants, etc. This Plan allows for three office visit charges.

Coverage Overview	PPO Network	Premier Network
Calendar Year Benefit Maximum	$2,500 (per covered member)	
Deductible	$15 Single / $45 Family	$25 Single / $75 Family
Preventative (twice a year)	Plan 100% / You 0%	
Routine / Restorative	Plan 75% / You 25%	Plan 65% / You 35%
Major	Plan 65% / You 35%	
Orthodontia (Adults & Children)	Plan 65% / You 35% Up to $2,500 lifetime	

VISION

KENT WORLDWIDE is proud to offer a vision benefit. This is a MATERIALS ONLY benefit. Please note, eye exams are covered as a preventive service on the health plan.

Materials only plans provide access to a large network, discounted rates, to purchase hardware for your eyes, like glasses or contacts. We offer two vision plans to select from, Basic and Enhanced. Our vision coverage is through VSP, a leading nationwide carrier with a large network of providers. To search for a provider, go to https://www.vsp.com/.

There are no insurance cards distributed when you elect the vision benefit.
Your eye doctor's office will verify your coverage through the VSP portal.

The Summary of Coverage for materials benefits is as follows:

Vision Basic Plan (1 pair of glasses or contacts per year)

Coverage Overview	VSP Network	Out-of-Network
Deductible	$25 co-pay	N/A
Lenses	100% covered after co-pay (additional may apply for custom or premium)	Reimbursed from $0-$100
Frames (covered every 24 months)	$150 allowance (1 per year) $80 Costco/Sam's Club	Reimbursed up to $70
Contacts	Elective $150 allowance Medically Necessary 100% covered	Elective reimbursed up to $105, Medically Necessary up to $210
Brand Frames (covered every 24 months)	$200 allowance	N/A
Other Benefits	Discounts on additional purchases and laser surgery	N/A

Vision Enhanced Plan (2 pairs of glasses or contacts or combination per year)

Coverage Overview	VSP Network	Out-of-Network
Deductible	$25 co-pay	N/A
Lenses	100% covered after co-pay (additional may apply for custom or premium)	Reimbursed from $0-$100
Frames (covered every 24 months)	$180 allowance (2 per year) $100 Costco/Sam's Club	Reimbursed up to $70
Contacts	Elective $180 allowance Medically Necessary 100% covered	Elective reimbursed up to $105, Medically Necessary up to $210
Brand Frames (covered every 24 months)	$230 allowance	
Other Benefits	Discounts on additional purchases and laser surgery	N/A
2nd paid coverage annually – can be allowances for 2 glasses or 2 contacts, or 1 of each		

VISION & DENTAL PREMIUMS

All dental & vision premiums are deducted pre-tax.

Dental Total Care

Coverage Level	Weekly	Bi-Weekly
Employee	$3.82	$7.64
Employee +Spouse	$7.17	$14.34
Employee + Child(ren)	$8.65	$17.30
Family	$13.99	$27.98

Dental Check-up Plus Plan

Coverage Level	Weekly	Bi-Weekly
Employee	$2.31	$4.62
Employee +Spouse	$4.33	$8.66
Employee + Child(ren)	$4.25	$8.50
Family	$7.08	$14.16

Vision - Basic

Coverage Level	Weekly	Bi-Weekly
Employee	$0.92	$1.84
Employee +Spouse	$1.84	$3.68
Employee + Child(ren)	$1.97	$3.94
Family	$3.15	$6.30

Vision - Enhanced

Coverage Level	Weekly	Bi-Weekly
Employee	$1.64	$3.28
Employee +Spouse	$3.29	$6.58
Employee + Child(ren)	$3.52	$7.04
Family	$5.62	$11.24

LIFE INSURANCE

KENT WORLDWIDE provides group life insurance for you, your spouse and dependents at no cost to you. You have the option to enroll in supplemental life coverage. All life insurance includes AD&D coverage in the equal amount of life insurance coverage.

Group Life Coverage:

Employee $50,000 → **Spouse** $20,000 → **Each Child** $10,000

Supplemental Life Insurance for You

You can elect supplemental life insurance coverage in increments of $25,000 up to a maximum of $250,000. No Evidence of Insurability (EOI) is required at initial enrollment. During annual enrollment, you can increase your existing coverage by $25,000 without requiring EOI. If you are increasing existing coverage by more than $25,000, EOI is required. If you initially waive coverage, EOI is required for any amount you elect.

Supplemental Life Insurance for Your Spouse

You can elect supplemental life insurance coverage for your spouse in increments of $10,000, up to a maximum of $150,000. After initial eligibility, up to $50,000 does not require Evidence of Insurability (EOI). During annual enrollment, you can increase coverage in increments of $10,000, up to $50,000 without requiring EOI. If you increase by more than $10,000, elect more than $50,000 or waive coverage initially, EOI is required.

	EMPLOYEE	SPOUSE
AGE	Monthly Cost Per $1,000	
0-29	0.10	0.10
30-34	0.11	0.11
35-39	0.127	0.11
40-44	0.18	0.16
45-49	0.285	0.24
50-54	0.452	0.34
55-59	0.69	0.52
60-64	0.81	0.77
65-69	1.35	1.10
70-74	2.38	1.10
75 and up	4.93	1.10

How to calculate your premium for Supplemental Life Coverage

Amount of coverage elected divided by 1,000		Monthly cost per $1,000 from chart above		Total Monthly Cost for Coverage	X 12 to get annual amount and then / (divided by) 26 or 52 to get per pay period	Per Pay Period Deduction for Coverage
	X		=			

Coverage for your Child(ren)

You can elect life insurance for your eligible child(ren).
The coverage amount is $10,000, at a cost of $0.23 per week or $0.46 bi-weekly.

PAID TIME AWAY

Paid Time Off

Grant: Employees are granted PTO on January 1 of each calendar year. PTO is granted based on years of service and employment status. PTO is granted in hourly increments and is used in hourly increments. Prorated PTO is granted for new hires that begin work during the calendar year.

Carryover: You may carryover up to 50% of the annual grant amount into the next calendar year.

Employment Separation: Employees with more than 1 year of service will be paid for all accrued but unused PTO at the time of separation.

Years of Service	PTO Grant	Eligible for Carryover
0-initial	84	42
1-2	104	52
3-4	124	62
5-9	144	72
10-14	184	92
15-19	204	102
20-24	244	122
25+	264	132

Company Observed Holidays

KENT WORLDWIDE observes 9 holidays. Benefit eligible employees are paid 8 hours of holiday pay for the for full-time employees, the number of hours is pro-rated for part-time employees. If the holiday falls on a Saturday, it will be observed on Friday, if it falls on a Sunday, it will be observed Monday. KENT WW has facilities that work 24/7/365 and observe the actual date rather than the observed date. Hours worked on the holiday are paid at time and a half, in addition to the holiday pay.

Company Observed Holidays are:		
New Year's Day	Fourth of July	Friday after Thanksgiving
Good Friday	Labor Day	Christmas Eve
Memorial Day	Thanksgiving Day	Christmas Day

Bereavement

KENT WORLDWIDE provides paid time away for loss of an immediate family member. Five paid days/shifts are allowed for death of spouse or child. Three paid days/shifts are allowed for: parent, grandparent, brother/sister, spouse of brother/sister, spouse of son/daughter and grandchild.

Jury Duty

In the event of a jury summons, ***KENT WORLDWIDE*** pays the employee's time to serve at their normal rate of pay. The civil service check is paid at a rate below your typical working wage and also includes reimbursement for mileage, thus employees are not asked to forfeit their jury pay. Proof of jury duty summons may be required.

PAID TIME AWAY

Short-Term Disability

In the event of a personal medical issue where an employee is unable to work, ***KENT WORLDWIDE*** provides short-term disability (STD). STD provides 60% salary replacement for a period of up to 26 weeks after meeting a 7-day waiting period, benefits will be paid from date of disability. To request short-term disability, a claim should be submitted to our Leave Administrator and The Standard will intake the claim, obtain medical details, interface with medical provider and release to return to work. They keep us informed of days needed to be away from work and return to work details. Personal health information is kept private unless related to job responsibilities.

Voluntary Long Term Disability

- Provides 66 2/3% income replacement, less social security.
- After 26 week waiting period (aligned to when STD exhausts).
- $5,000 per month maximum payout; not to exceed monthly salary.
- Claims are reviewed by our leave administrator, The Standard. Requests are subject to approval.

Parental Leave

Parental leave includes two components, Recovery Leave after live birth and Bonding Leave. These leaves are paid at regular base rate based upon the employee's standard workweek.

Parental Leave allowed weeks:

Parental Leave Type	Leave Amount	Leave Eligibility
Recovery Leave (first 10 weeks of Leave)	10 weeks	Leave for individuals recovering from live birth
Bonding Leave	2 weeks	Leave for bonding

Bonding leave may be used intermittently, but in all instances must be used within the first 12 months of the birth/adoption of a child. Recovery Leave and Bonding Leave run concurrently with FMLA, where applicable. Recovery Leave and Bonding Leave are not used concurrently. Parental Leaves are used in full day/shift increments. To request Recovery Leave or Bonding Leave, submit a claim request to our Leave Administrator, The Standard.

Military Leave

KENT WORLDWIDE supports military, including employees serving and deployed. In compliance with the Federal Government's Uniformed Services Employment and Reemployment Rights Act, KENT WW follows the required provisions for employers. Military Leave should be submitted to our leave administrator, The Standard, to initiate process required notices and documentation. USERRA applies to all military branches, including Guard and Reserve.

YOUR MONEY LINE | KENT WORLDWIDE

BENEFIT OVERVIEW

Your guide to a better financial tomorrow

Your Money Line provides **free and confidential** 1:1 financial guidance, education, & tools, so you can stress less about money and enjoy greater stability & confidence.

1:1 Coaching

Financial Guides meet you where you're at, shame-free, with an individualized approach to help you reach financial stability.

Guides are available Monday-Friday, 9am-9pm EST.

Education

Learn essential money skills at your own pace, with YML exclusive videos, courses, and articles on common financial challenges.

Pro tip: Enroll in Stability Academy for tailored content each month!

Money App

See all your finances in one place, use smart money tools and get personalized coaching —all in one easy to use mobile app!

Includes: Credit monitoring, smart budgeting, spending insights, goals, and more!

Scan to get the YML App

Register with your employer code: **KENTWW**

Connect with a YML Guide

Schedule: yourmoneyline.com/schedule
Call: 833-890-4077
Text: 317-676-1978
Email: answers@yourmoneyline.com

IDENTITY PROTECTION

MetLife | Identity & Fraud

Keep your personal information *personal.*

Our easy-to-use solution is powered by leading digital security company Aura. It helps protect your personal information, finances and privacy—and it's available to you at a discounted rate.

Coverage	Weekly	Bi-Weekly
Employee Only	$1.95	$3.90
Family	$3.91	$7.82

Financial Fraud Protection
Credit Monitoring & Alerts (3 bureau)
Annual Credit Report (3 bureau)
Monthly Credit Score Tracker
In-Platform Credit Dispute
Credit, Bank & Utility Account Freeze Assistance
Home & Vehicle Title Monitoring
Financial Accounts & Transactions Monitoring
High-Risk Transaction Alerts
Payday/Specialty Loans Block
Experian Credit Lock
Credit Score Simulator
Identity Theft Protection
Privacy Assistant & Spam Reduction
Dark Web Monitoring
Digital Vault
SSN & Identity Authentication Alerts
Criminal, Court & Public Records Monitoring
USPS Address Monitoring
Social Media Account Monitoring and Takeover Alerts
Gamertag Monitoring
Social Media Privacy Checkup
Privacy & Device Protection
Password Manager
Email Alias
Safe Web Browsing
IP Address Monitoring
Wi-Fi Security/VPN (unlimited devices)
Antivirus (unlimited devices)
AI-Powered Call & Text Screening
Family Safety (Included with Family coverage only)
Parental Controls
Child Cyberbullying Protection
3-Bureau Child Credit Freeze Wizard
Child SSN Monitoring & Alerts
Sex Offender Geo Alerts
Family Sharing
Child Safety Checklist
Services & Support
$5M Insurance Policy Per Enrolled Adult
Lost Wallet Protection with $500 Emergency Cash
24/7/365 100% US-based Customer Care
White Glove Fraud Resolution Services
Mobile App (iOS & Android)
Online Resolution Tracker

WHY MetLife LEGAL PLANS?

Vetted Nationwide Network

With a nationwide network of over 18,000 pre-qualified, experienced attorneys, your employees can easily access trusted legal support wherever they are.

Choice and convenience

Work with an attorney of your preference by filtering through our network for experience, legal matter, and even cultural sensitivity. There are no copays, deductibles, or usage restrictions1. Employees can schedule an attorney consultation for multiple covered matters throughout the year.

Comprehensive coverage

From consultations and help with drafting or reviewing documents to representation in court proceedings, participating plan attorneys can support your employees through their covered matter.

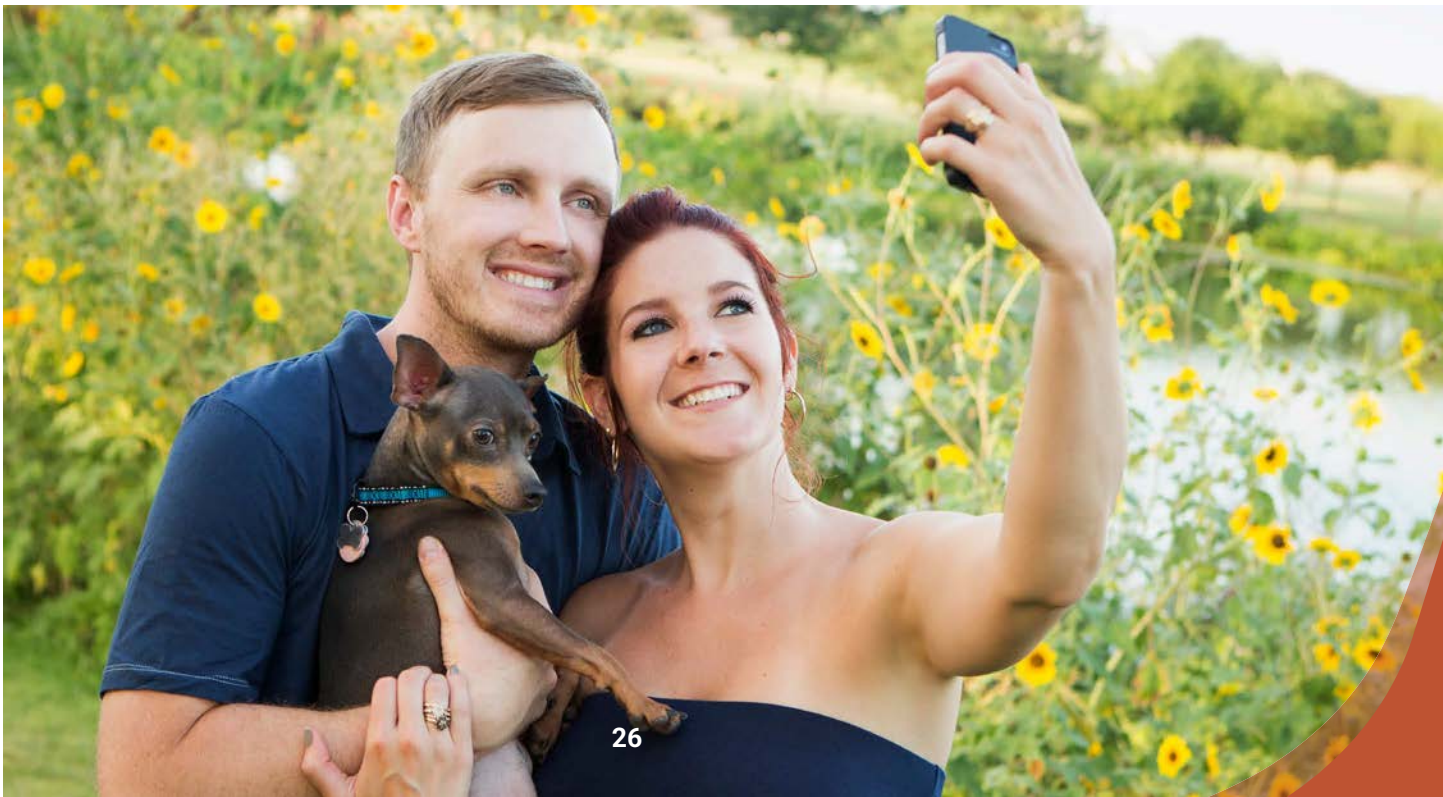
Flexible Service

Whether your employees prefer to communicate via phone, chat, email, or online, our award-winning Client Service Center and our Member Portal take the guesswork out of finding an attorney.

24/7 Online Support

During the day, our “live chat” feature resolves most questions employees have about the service and their coverage. After hours, the 24/7 “Ask Lexi” chat tool offers your employees helpful articles, while the self-help library provides access to hundreds of legal documents. Employees can filter attorneys by gender, language, race, and expertise, and complete estate planning online.[2]

Coverage	Weekly	Bi-Weekly
Legal Plan	$4.33	$8.66



Prioritize your wellbeing

Whatever life brings, your program offers expert guidance for you and your family

Connect to care your way

- Reach a licensed clinician by phone 24/7/365 when you call for in-the-moment support
- Access no-cost short-term counseling in person or by video for concerns such as stress, anxiety, depression, burnout or substance use
- Message a Coach to boost your emotional fitness, learn healthy habits, increase resilience and more

Simplify your everyday life with work-life benefits

- Get expert consultations for financial and legal concerns
- Receive referrals for needs such as child or elder care, pet care, home improvement or auto repair

Prefer digital access? No problem!

The web platform and mobile app make it easy to connect to care and strengthen your wellbeing — anytime, anywhere.

- Create a personalized profile for resources tailored to your needs
- Understand your emotions and receive help with mental health check-ins
- Schedule sessions with a licensed clinician via in-person, video or text
- Attend anonymous group sessions for support and connection in a safe, text-based space
- Track your mood and journal to build self-awareness and notice progress

Access guided paths

Follow step-by-step programs on topics such as easing anxiety, building resilience and more with support at every stage of your mental health journey.

Strict confidentiality standards ensure no one will know you have accessed the program without your written permission, except as required by law.

Log in today to take the next step in your wellbeing journey

888-881-5462
mysupportlinc.com
group code: kentcorp

PET INSURANCE

Nationwide offers two ready-made employee plans, plus the ability to customize a coverage plan for individual pets and their specific care needs.

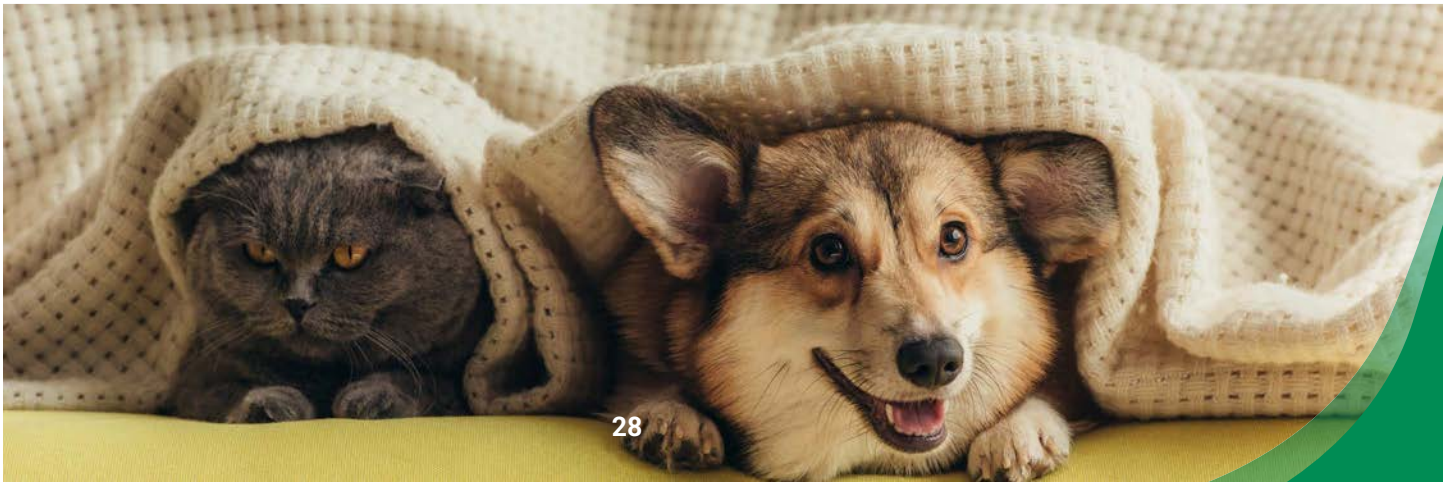
My Pet Protection Choice	Accident & Illness	Accident, Illness, & Wellness	Customizable
Annual deductible options	$250	$250	$100 to $500
Reimbursement level	80%	80%	50%, 70%, or 80%
Accident coverage	✓	✓	✓
Annual maximum	$5,000	$5,000	$2,500 or $5,000
Broken bones, animal attack, hit by car, poisoning, heatstroke, and more	✓	✓	✓
Illness coverage	✓	✓	Optional
Annual maximum	$250	$250	$250
Ear infections, diabetes, vomiting, allergies, cancer, and more	✓	✓	✓
Hereditary & congenital coverage	✓	✓	Optional when purchased with illness coverage
Annual maximum	$5,000	$5,000	$2,500 or $5,000
Hip dysplasia, cherry eye, elbow dysplasia, umbilical hernia, brachycephalic syndrome, and more	✓	✓	✓
Wellness coverage (for dogs & cats)		✓	Optional
Annual maximum		$450	$450 or $800
Vaccination or titer, fecal test, deworming, microchip, health certificate, heartworm, or FeLV/FIV test, flea control, or heartworm prevention, and more		✓	✓
Spay/neuter or dental and one additional test			✓

Scan to sign-up!

All Nationwide pet insurance members enjoy unlimited access to VetHelpline for round-the-clock telehealth with licensed veterinary professionals.

Nationwide pet insurance members save 10% on every visit to a Vetco Total Care Hospital or Vetco Vaccination Clinic inside Petco.

Vetco Total Care is a full-service animal hospital that offers everything from preventive care to diagnostics and surgery.



OTHER BENEFITS

FMLA (Family Medical Leave Act)

FMLA eligibility is defined as being employed for a minimum of 1 year and working at least 1,250 hours in prior 12 months. FMLA is unpaid time and can run concurrently with paid leaves, including but not limited to Short-term disability, parental leave (recovery and bonding), or leave due to work related injury. FMLA provides up to 12 weeks of job protection. Employees may supplement time with Paid Time Off. See FMLA Rights Notice upon leave request.

Gym/Fitness Center Membership

- KENT WW will pay 50%, up to the maximum allowed for a gym/fitness membership.
- Memberships to the Muscatine and Daviess County Family YMCA for employee portion can be payroll deducted and submitted on your behalf. Please contact Reception for form.
- Maximum Monthly reimbursement rate is updated as rates change. Current monthly maximum reimbursement rate is: $18.50 for Individual, $8.00 for Youth/Teen, $21.00 for Single Parent Family and $31.50 for Family/Household. Check with Reception to verify current rates.
- Requests for reimbursement can be sent quarterly to reception@KENTww.com with supporting documentation showing proof of membership and payment. Reimbursement is provided on a regular paycheck and is taxable income.
- On-site workout facilities are available to employees at the McKee Building, GPC Muscatine, and Washington locations.

Holiday Meal

- Thanksgiving and Christmas are special times of the year. KENT WW supports a meal with your family by providing a contribution/gift towards your holiday meal.

Recognition

- Service milestones are important and recognized in 5 year increments. Service recognition includes a monetary award, certificate/plaque and recognition program.

Access to Retiree Coverage

KENT WW offers retiree coverages for employees who retire from KENT WW and are at least age 55 with 5 years of service.

- Medicare Supplement and Part D coverage available at age 65
- Retiree dental is offered to retirees through Delta Dental
- Retiree Vision is available through VSP
- Retiree Microsite - https://www.kentwwbenefits-retirees.com/

RETIREMENT

Contributions - Employee

The ***KENT WORLDWIDE*** 401(k) Plan allows employees to elect their amount up to the limits allowed by the IRS. Our plan also allows employees to defer pre-tax, Roth or both in combination. Employee deferrals must be whole numbers, meaning no decimal places. Employees should consult a tax or personal advisor regarding questions about pre-tax or Roth deferrals.

Employees are auto enrolled at a 6% pre-tax deferral. Upon hire, your demographic data is sent to Vanguard after your first paycheck to generate your account. The auto enrollment is sent back to KENT WW to start your deferral. You have the ability to change your deferral at any time. Employee deferrals are sent to KENT WW on Thursday morning, with a Tuesday evening cut-off, so any changes after Tuesday would be sent the following week.

Contributions – Employer

KENT WORLDWIDE will provide a 2:1 employer matching contribution, on up to 4% total employee deferral. The employer match is considered pre-tax. The employer match is also subject to vesting, addressed on page 28.

KENT WW's matching contribution is above benchmarks and is a very generous benefit that invests in your long-term future. Employees who defer less than 4% are not receiving the full employer benefit. Employer contributions are deposited annually in November. Must be employed on September 30, the last day of the plan year to receive the employer contribution.

Employee Deferral (pre-tax and/or Roth)	Match (pre-tax)
0%	0%
1%	2%
2%	4%
3%	6%
4%	8%
Anything >4% up to IRS limit	8%

To update your deferral, login to your account at Vanguard or call 1.800.523.1188.

Plan # is 094837.

You can sign-up for auto-increase and have your deferral increase annually. New hires will be defaulted to a 1% increase annually until they reach 15% unless they opt-out or change election.

Employee Contribution of at least 4%

Maximum Employer Match 8%

12% Total Contribution

*Benchmark data suggests a savings rate of 12%-15% is needed to replace 70% of income in retirement and stay "on-track" to retire. ***KENT WORLDWIDE* wants to help get you to AND through retirement by offering this generous benefit aligned to suggested saving benchmark levels.**

RETIREMENT

Investments

The ***KENT WORLDWIDE*** 401(k) plan investment line-up offers participants the option to select from a portfolio of funds representing the most common asset classes, or default to the Vanguard Target Date fund based on year the participant turns 65. The target date funds will automatically adjust the balance of stocks and bonds to ensure appropriate risk allocation as the participant gets closer to age 65 and retirement. The investment line-up and fund performance are reviewed regularly and funds may be updated based on performance.

Advice Services

Vanguard offers 3 advice options; each level provides different support. Fees associated with advice services are paid by the participant, thus you must opt-in to utilize.

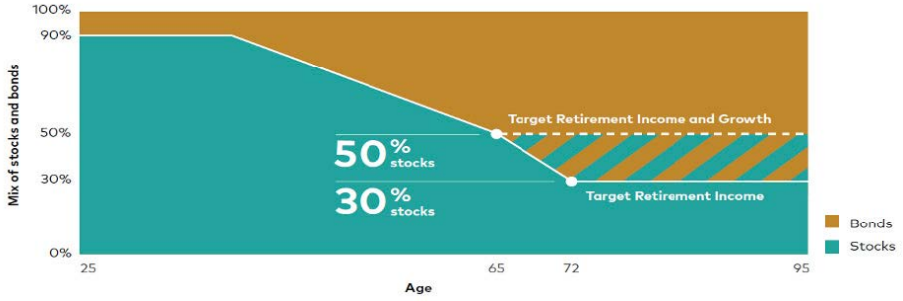
	Vanguard Digital Advisor	Vanguard Personal Advisor	Vanguard Situational Advisor
Level of Support	Unlimited digital access	Unlimited advisor support & digital access	Access to an advisor when you need one
What it offers	• Ongoing money management • Advice for all goals, not just retirement • Online financial tools	• Ongoing money management • Advice for all goals, not just retirement • Ongoing advisor support for complex financial goals	• Advice only, you still manage your money • Advice for a specific goal or questions • Advice for complex financial goals
Eligibility	Minimum of $5 account balance	Minimum of $250,000 account balance	Minimum of $500 account balance
Cost	About $15 per $10,000 managed (net annual cost)	About $30 per $10,000 managed (net annual cost)	No cost

Fees

Vanguard record-keeping fees are $13 per quarter as a flat rate and are auto-deducted from your account balance. Other fees are based on your specific fund portfolio and balance. For distribution requests, such as loans, withdrawals, etc., the participant is responsible for initiating the request from Vanguard. Fees are reviewed on a regular basis and are under benchmark.

Target Date Glide Path

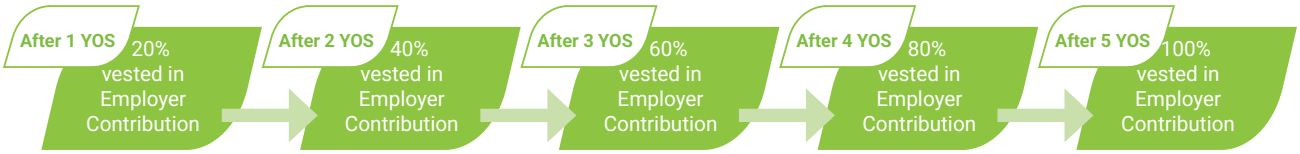
For participants in the Target Date Fund, the glide path will reduce the asset mix to 50% stocks and bonds at age 65. The default glide path will reduce to 30% stocks and 70% bonds over the next 7 years (between 65-72). Our plan allows you to elect the Target Retirement Income and Growth to remain at a 50% stocks and 50% bonds asset mix beyond age 65. This feature is for participants who are comfortable with that mix and seek to maintain a higher return to sustain regular monthly income, while remaining within the plan.



RETIREMENT

Vesting

Employees are always 100% vested in their contributions. Employer contributions are subject to vesting. Each year of service, starting from your hire date, you vest at 20% until you reach full vesting after 5 years of service (YOS).



Rollovers In/Out & Auto Portability

Our ***KENT WORLDWIDE*** 401(k) accepts rollovers both in and out of our plan. Rollover outs can occur at separation of employee or as in-service withdrawals if over age 59.5. Balances of $7,000 or less fall under plan force out provisions as allowed by the IRS and recently updated provisions of the Secure Act.

Balance of $7,000 or less	• Will Auto Port in/out of our plan, if with a participating recordkeeper in the Retirement Clearinghouse. No forms needed! • If not in Retirement Clearinghouse, our plan would move you to an IRA. For former employer, verify their force out provisions.
Balance >$7,000	• Not subject to forceout provisions. Money will remain in our plan for as long you determine. • To request a rollover or distribution, log into your account or call Vanguard Customer Service to initiate.

In-plan Roth conversions

You can convert all or a portion of your vested pre-tax and after-tax savings—which includes your contributions as well as company contributions—to Roth money within your retirement plan.

About Roth

Roth contributions and their earnings are not taxed when you take a distribution if you're at least age 59½ and you made your first Roth contribution at least five years earlier. That could be a significant advantage over pre-tax and after-tax contributions.

What you need to know

There are some important considerations to keep in mind before converting money to Roth:

- The money you convert to Roth will be taxed in the year you make the conversion.
- A Roth conversion increases your tax rate. This is because the amount you convert will be added to your taxable income. In some instances, this could be enough to push you into a higher income tax bracket or cause other adverse tax consequences.
- In most cases, you'll have to pay the taxes with money from outside the plan. You can't use your retirement money to cover this expense.

While having Roth money can be valuable in retirement, an in-plan conversion requires careful consideration. We recommend consulting with a tax advisor before making a Roth conversion.

BENEFICIARIES

It is important to designate beneficiaries for your life insurance, ***KENT WORLDWIDE*** 401(k) Retirement Plan and your Health Savings Account (if enrolled in the Nationwide or Iowa High Deductible Health Plan). Your beneficiaries will receive payment of benefits provided under the plan provisions in the event of your death. Designating and maintaining your beneficiaries as you have life change, will help ensure your assets will be distributed per your wishes. Your beneficiaries can be changed at any time throughout the year. If you do not elect a beneficiary, plan provisions stipulate money distributions.

You are able to elect primary and contingent beneficiaries. Primary beneficiaries receive your assets first, contingents are used if there is no surviving primary. For example, if your spouse is your primary and you both pass away at the same time, the contingent would receive the benefit payment. You can also elect multiple beneficiaries and allocate a percentage. The total allocation must equal 100% to fully utilize.

- **Life Coverage** – Designate beneficiary for your company paid and voluntary life coverages in UKG. You do not need to designate beneficiaries for spouse or child life; you are automatically the beneficiary since the coverage is through your employment relationship at ***KENT WORLDWIDE***.
- **401(k) Retirement Plan** – Log in to your account with Vanguard. Go to https://investor.vanguard.com/my-account/log-on
- **Health Savings Account** – Log in to your account with Optum. Go to www.optumhealthfinancial.com

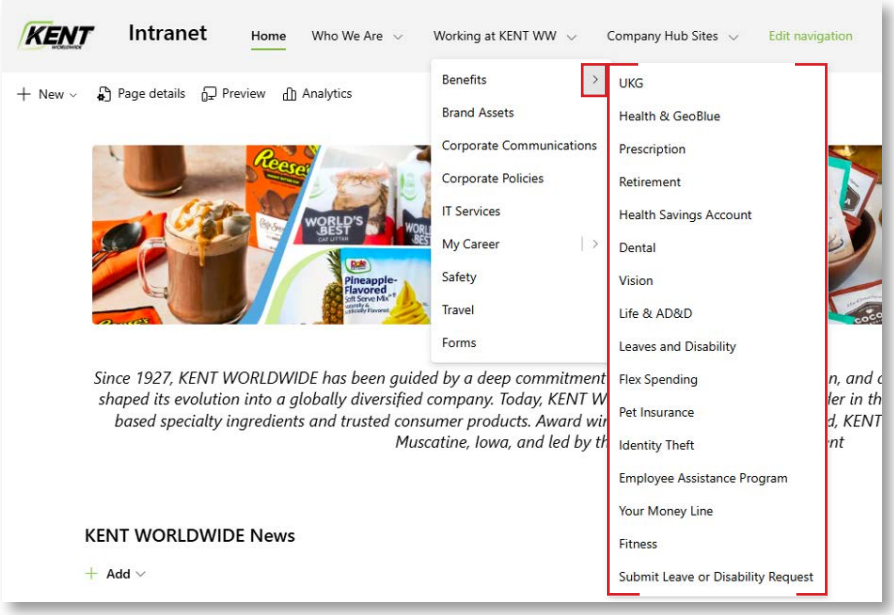
NUMBERS & WEBSITES

BENEFIT CARRIER	PHONE NUMBER	WEBSITE
Wellmark BCBS Medical	800-381-0214	www.wellmark.com
TextCare	563-522-5355	
MedOne Pharmacy	866-335-9057	www.medone-rx.com
Delta Dental of Iowa Dental	800-544-0718	www.deltadentalia.com
Optum Health Savings Account (HSA) Flexible Spending Account (FSA) Dependent Care Account (DCFSA)	800-243-5543	www.optumhealthfinancial.com
VSP Vision	800-877-7195	www.vsp.com
Nationwide Pet Insurance	877-738-7874	www.PetsNationwide.com Company – ***KENT WORLDWIDE***
The Standard Basic & Voluntary Life Insurance Voluntary Long Term Disability	563-264-4444 Sherri Conaway	www.standard.com
Short Term Disability & FMLA		www.standard.com Company code: KENTCORP
Aura Identity Theft	844-931-2872	www.aura.com
Supportlinc / Curalinc Employee Assistance Program	888-881-LINC (5462)	www.supportlinc.com Company code: KENTcorp
Vanguard Retirement Plan 401(k)	800-523-1188	www.vanguard.com
Your Money Line Pete the Planner Financial Wellness	833-890-4077 answers@yourmoneyline.com	www.yourmoneyline.com/kentww

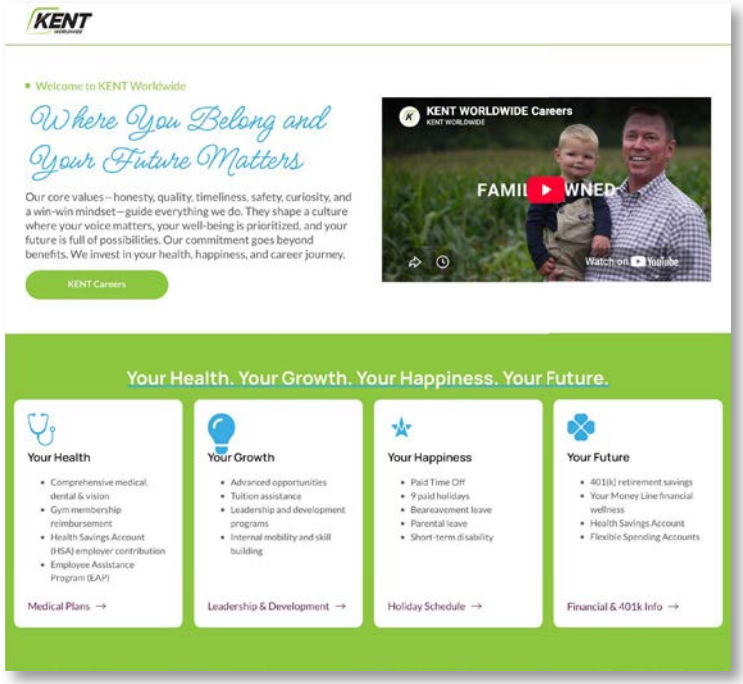
RESOURCES

Sharepoint Benefit Pages

Explore benefit information | Review benefit documents | Submit leave or disability request



Scan to Access Benefits Guide



Your Benefits Team

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WORLDWIDE