

**Second Amendment of the Restated
Dixon Public Schools District #170
ALL Health Care Benefits Plan**

WHEREAS, the Dixon Public Schools District #170 (the "District") maintains the Dixon Public Schools District #170 Health Care Benefits Plan effective January 1, 2006 (the "Plan"); and,

WHEREAS, amendment of the Plan is now considered desirable;

NOW, THEREFORE IT IS RESOLVED that, by virtue and in exercise of the power reserved to the Company, the Plan is amended in the following Particulars:

Effective 9/1/2016 dependent children termination is hereby being deleted and replaced with the following:

Effective Date of Termination for Dependents

Coverage for your dependents will automatically terminate when your coverage ends or, if sooner, at 11:59 P.M. on the first day on which any of the following occurs *except for a child who reaches the age of 26, coverage will terminate at 11:59 P.M. on the last date of the birth month:*

1. for a spouse –
 - a. you become legally divorced; or,
 - b. if you are an active employee, the day on which he or she makes a written election to be covered by Medicare for Health coverage instead of the Plan.
2. for a child who ceases to meet the applicable eligibility requirements.
3. you request that your contributions for Family coverage be stopped.

I hereby certify that the foregoing is a correct copy of the 2nd amendment to the Dixon Public Schools District #170 Health Care Benefits, duly adopted by the Plan Sponsor and that the amendment has not been changed or repealed.

Dated this 14th day of December 2016



Signature

Business Manager

Title