

**SCHEDULE OF DISABILITIES AND MAXIMUM BENEFITS EXCLUSIVE OF AMPUTATION AND ENUCLEATION
EFFECTIVE 1/1/2008**

PER- CENT	HAND		FINGERS - SEE FOOTNOTE					LEG 315 WEEKS	FOOT 230 WEEKS	TOES		EYE 200 WEEKS	HEARING		PARTIAL TOTAL BASED ON 600 WEEKS	PER- CENT
	245 WEEKS	330 WEEKS	THUMB 75 WEEKS	FIRST 50 WEEKS	SECOND 40 WEEKS	THIRD 30 WEEKS	FOURTH 20 WEEKS			GREAT TOE 40 WEEKS	OTHER TOE 15 WEEKS		1 EAR 60 WEEKS	2 EARS 200 WEEKS		
1	2,450.00 485.10	3,300.00 653.40	0,750.00 148.50	0,500.00 99.00	0,400.00 79.20	0,300.00 59.40	0,200.00 39.60	3,150.00 623.70	2,300.00 455.40	0,400.00 79.20	0,150.00 29.70	2,000.00 396.00	0,600.00 118.80	2,000.00 396.00	6,000.00 1,188.00	1
100	245,000.00 109,025.00	330,000.00 179,520.00	75,000.00 14,850.00	50,000.00 9,900.00	40,000.00 7,920.00	30,000.00 5,940.00	20,000.00 3,960.00	315,000.00 171,360.00	230,000.00 91,080.00	40,000.00 7,920.00	15,000.00 2,970.00	200,000.00 69,200.00	60,000.00 11,880.00	200,000.00 69,200.00	600,000.00 XXXXXXXX	100

Footnote: Hand or Thumb and First and Second Fingers (on 1 Hand) or 4 Fingers (on 1 Hand)

EXPLANATION: The percent columns on the outside of the chart represent percentage of disability. The remaining columns show this percentage in terms of weeks and total benefits. The top figure in each box represents weeks, and the lower figure is dollar benefits.

