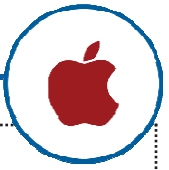


# Employee Paid Life Insurance



## MONTHLY COSTS – Employee - Must be purchased in increments of \$10,000

Age Band	\$10,000	\$20,000	\$30,000	\$40,000	\$50,000	\$60,000	\$100,000	\$130,000	\$150,000
0-24	1.00	2.00	3.00	4.00	5.00	6.00	10.00	13.00	15.00
25-29	1.10	2.20	3.30	4.40	5.50	6.60	11.00	14.30	16.50
30-34	1.20	2.40	3.60	4.80	6.00	7.20	12.00	15.60	18.00
35-39	1.60	3.20	4.80	6.40	8.00	9.60	16.00	20.80	24.00
40-44	2.00	4.00	6.00	8.00	10.00	12.00	20.00	26.00	30.00
45-49	2.90	5.80	8.70	11.60	14.50	17.40	29.00	37.70	43.50
50-54	4.40	8.80	13.20	17.60	22.00	26.40	44.00	57.20	66.00
55-59	7.40	14.80	22.20	29.60	37.00	44.40	74.00	96.20	111.00
60-64	11.00	22.00	33.00	44.00	55.00	66.00	110.00	143.00	165.00
65-69	20.30	40.60	60.90	81.20	101.50	121.80	203.00	263.90	304.50
70-74	35.00	70.00	105.00	140.00	175.00	210.00	350.00	455.00	525.00
75+	60.90	121.80	182.70	243.60	304.50	365.40	609.00	791.70	913.50

You may choose any increment of \$10,000 up to \$200,000 - not to exceed 5X your annual salary. To purchase an amount other than those levels indicated above, please complete the following:

$$\text{-----} \times \text{-----} = \text{-----}$$

# of 10,000 units                      Your age cost per 10,000 unit                      Monthly Cost

## MONTHLY COSTS – Spouse

Must be purchased in increments of \$5,000 (cannot exceed 100% of employees amount)

Age Band	\$5,000	\$10,000	\$15,000	\$20,000	\$25,000	\$30,000	\$50,000
0-24	0.50	1.00	1.50	2.00	2.50	3.00	5.00
25-29	0.55	1.10	1.65	2.20	2.75	3.30	5.50
30-34	0.60	1.20	1.80	2.40	3.00	3.60	6.00
35-39	0.80	1.60	2.40	3.20	4.00	4.80	8.00
40-44	1.00	2.00	3.00	4.00	5.00	6.00	10.00
45-49	1.45	2.90	4.35	5.80	7.25	8.70	14.50
50-54	2.20	4.40	6.60	8.80	11.00	13.20	22.00
55-59	3.70	7.40	11.10	14.80	18.50	22.20	37.00
60-64	5.50	11.00	16.50	22.00	27.50	33.00	55.00
65-69	10.15	20.30	30.45	40.60	50.75	60.90	101.50
70-74	17.50	35.00	52.50	70.00	87.50	105.00	175.00
75+	30.45	60.90	91.35	121.80	152.25	182.70	304.50

You may choose any increment of \$5,000 up to \$50,000. If you wish to purchase an amount other than those levels indicated above, please complete the following:

$$\text{-----} \times \text{-----} = \text{-----}$$

# of 5,000 units                      Spouses age cost Per 5,000 unit                      Monthly Cost

## MONTHLY COSTS – Child or Children

\$3.77 per month for \$10,000 worth of coverage.