LIFESECURE INSURANCE COMPANY

lifesecure™

Critical Illness Insurance Monthly Premium Rates*

MINNESOTA

INDIVIDUAL – NON-NICOTINE

Benefit Amount: $15,000

Age	MALE *Self Only*	FEMALE *Self Only*	MALE OR FEMALE *with Spouse***
18	$7.65	$8.10	$10.95
19	$7.65	$8.10	$10.95
20	$7.65	$8.10	$10.95
21	$7.65	$8.10	$10.95
22	$7.65	$8.10	$10.95
23	$7.95	$8.40	$11.55
24	$8.25	$8.70	$12.15
25	$8.55	$9.00	$12.75
26	$8.85	$9.30	$13.35
27	$9.15	$9.60	$13.95
28	$9.60	$9.90	$14.70
29	$10.05	$10.35	$15.60
30	$10.50	$10.80	$16.50
31	$11.10	$11.25	$17.55
32	$11.70	$11.70	$18.60
33	$12.30	$12.30	$19.80
34	$13.05	$12.90	$21.15
35	$13.65	$13.50	$22.35
36	$14.40	$14.10	$23.70
37	$15.30	$14.85	$25.35
38	$16.35	$15.60	$27.15
39	$17.40	$16.35	$28.95
40	$18.45	$17.25	$30.90
41	$19.80	$18.15	$33.15
42	$21.15	$19.05	$35.40
43	$22.50	$19.95	$37.65
44	$23.85	$20.85	$39.90
45	$25.35	$21.90	$42.45
46	$26.85	$22.95	$45.00
47	$28.50	$24.00	$47.70
48	$30.30	$25.05	$50.55
49	$32.25	$26.10	$53.55
50	$34.20	$27.15	$56.55
51	$36.30	$28.35	$59.85
52	$38.55	$29.55	$63.30
53	$40.80	$30.75	$66.75
54	$43.05	$32.10	$70.35
55	$45.45	$33.30	$73.95
56	$48.00	$34.80	$78.00
57	$50.70	$36.30	$82.20
58	$53.55	$37.95	$86.70
59	$56.55	$39.75	$91.50
60	$59.70	$41.70	$96.60
61	$63.00	$43.65	$101.85
62	$66.45	$45.75	$107.40
63	$69.90	$47.85	$112.95
64	$73.50	$50.10	$118.80
65	$77.55	$52.65	$125.40
66	$81.90	$55.35	$132.45
67	$86.85	$58.35	$140.40
68	$93.00	$62.25	$150.45
69	$100.65	$66.90	$162.75
70	$110.70	$73.50	$179.40

Note: Each dependent child is automatically covered with a $2,500 Benefit Amount – *at no additional cost*

* To review monthly premiums for different benefit amounts and scenarios, visit **www.YourLifeSecure.com** and login to your secure portal to run quotes.

** Premium rates shown above assume an opposite gender spouse who is the same age and nicotine status as the policyholder. Different rates apply for nicotine users – see other page.

Policy Series LS-CI-0001 MN
LS-CI-I-0306-15K MN 11/18

LIFESECURE INSURANCE COMPANY

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Critical Illness Insurance Monthly Premium Rates*

MINNESOTA

INDIVIDUAL – NICOTINE

Benefit Amount: $15,000

Age	MALE *Self Only*	FEMALE *Self Only*	MALE OR FEMALE *with Spouse***
18	$9.60	$9.15	$13.95
19	$9.60	$9.15	$13.95
20	$9.60	$9.15	$13.95
21	$9.60	$9.15	$13.95
22	$9.60	$9.15	$13.95
23	$10.05	$9.60	$14.85
24	$10.65	$10.05	$15.90
25	$11.25	$10.35	$16.80
26	$11.85	$10.95	$18.00
27	$12.45	$11.40	$19.05
28	$13.35	$12.00	$20.55
29	$14.25	$12.60	$22.05
30	$15.30	$13.35	$23.85
31	$16.35	$14.10	$25.65
32	$17.55	$14.85	$27.60
33	$18.90	$15.75	$29.85
34	$20.25	$16.80	$32.25
35	$21.90	$17.85	$34.95
36	$23.55	$19.05	$37.80
37	$25.35	$20.25	$40.80
38	$27.45	$21.45	$44.10
39	$29.85	$22.95	$48.00
40	$32.40	$24.45	$52.05
41	$35.25	$26.10	$56.55
42	$38.25	$27.90	$61.35
43	$40.95	$29.70	$65.85
44	$43.80	$31.65	$70.65

Age	MALE *Self Only*	FEMALE *Self Only*	MALE OR FEMALE *with Spouse***
45	$46.95	$33.75	$75.90
46	$50.25	$35.85	$81.30
47	$53.70	$38.25	$87.15
48	$57.60	$40.50	$93.30
49	$61.65	$42.90	$99.75
50	$66.00	$45.45	$106.65
51	$70.65	$48.15	$114.00
52	$75.60	$51.00	$121.80
53	$80.55	$53.85	$129.60
54	$85.65	$56.70	$137.55
55	$91.20	$59.85	$146.25
56	$97.05	$63.15	$155.40
57	$103.20	$66.60	$165.00
58	$109.65	$70.35	$175.20
59	$116.40	$74.25	$185.85
60	$123.45	$78.30	$196.95
61	$130.95	$82.65	$208.80
62	$138.90	$87.15	$221.25
63	$146.40	$91.50	$233.10
64	$154.35	$96.00	$245.55
65	$163.05	$100.95	$259.20
66	$172.20	$106.20	$273.60
67	$182.40	$112.05	$289.65
68	$196.05	$119.25	$310.50
69	$212.85	$128.10	$336.15
70	$236.25	$140.55	$372.00

Note: Each dependent child is automatically covered with a $2,500 Benefit Amount – *at no additional cost*

* To review monthly premiums for different benefit amounts and scenarios, visit **www.YourLifeSecure.com** and login to your secure portal to run quotes.

** Premium rates shown above assume an opposite gender spouse who is the same age and nicotine status as the policyholder. Different rates apply for non-nicotine – see other page.

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