LIFESECURE INSURANCE COMPANY

lifesecure™

Critical Illness Insurance Monthly Premium Rates*

MINNESOTA

INDIVIDUAL – NON-NICOTINE

Benefit Amount: $20,000

Age	MALE *Self Only*	FEMALE *Self Only*	MALE OR FEMALE *with Spouse***
18	$8.60	$9.20	$13.00
19	$8.60	$9.20	$13.00
20	$8.60	$9.20	$13.00
21	$8.60	$9.20	$13.00
22	$8.60	$9.20	$13.00
23	$9.00	$9.60	$13.80
24	$9.40	$10.00	$14.60
25	$9.80	$10.40	$15.40
26	$10.20	$10.80	$16.20
27	$10.60	$11.20	$17.00
28	$11.20	$11.60	$18.00
29	$11.80	$12.20	$19.20
30	$12.40	$12.80	$20.40
31	$13.20	$13.40	$21.80
32	$14.00	$14.00	$23.20
33	$14.80	$14.80	$24.80
34	$15.80	$15.60	$26.60
35	$16.60	$16.40	$28.20
36	$17.60	$17.20	$30.00
37	$18.80	$18.20	$32.20
38	$20.20	$19.20	$34.60
39	$21.60	$20.20	$37.00
40	$23.00	$21.40	$39.60
41	$24.80	$22.60	$42.60
42	$26.60	$23.80	$45.60
43	$28.40	$25.00	$48.60
44	$30.20	$26.20	$51.60
45	$32.20	$27.60	$55.00
46	$34.20	$29.00	$58.40
47	$36.40	$30.40	$62.00
48	$38.80	$31.80	$65.80
49	$41.40	$33.20	$69.80
50	$44.00	$34.60	$73.80
51	$46.80	$36.20	$78.20
52	$49.80	$37.80	$82.80
53	$52.80	$39.40	$87.40
54	$55.80	$41.20	$92.20
55	$59.00	$42.80	$97.00
56	$62.40	$44.80	$102.40
57	$66.00	$46.80	$108.00
58	$69.80	$49.00	$114.00
59	$73.80	$51.40	$120.40
60	$78.00	$54.00	$127.20
61	$82.40	$56.60	$134.20
62	$87.00	$59.40	$141.60
63	$91.60	$62.20	$149.00
64	$96.40	$65.20	$156.80
65	$101.80	$68.60	$165.60
66	$107.60	$72.20	$175.00
67	$114.20	$76.20	$185.60
68	$122.40	$81.40	$199.00
69	$132.60	$87.60	$215.40
70	$146.00	$96.40	$237.60

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-0306-20K MN 11/18

LIFESECURE INSURANCE COMPANY

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Critical Illness Insurance Monthly Premium Rates*

MINNESOTA

INDIVIDUAL – NICOTINE

Benefit Amount: $20,000

Age	MALE *Self Only*	FEMALE *Self Only*	MALE OR FEMALE *with Spouse***
18	$11.20	$10.60	$17.00
19	$11.20	$10.60	$17.00
20	$11.20	$10.60	$17.00
21	$11.20	$10.60	$17.00
22	$11.20	$10.60	$17.00
23	$11.80	$11.20	$18.20
24	$12.60	$11.80	$19.60
25	$13.40	$12.20	$20.80
26	$14.20	$13.00	$22.40
27	$15.00	$13.60	$23.80
28	$16.20	$14.40	$25.80
29	$17.40	$15.20	$27.80
30	$18.80	$16.20	$30.20
31	$20.20	$17.20	$32.60
32	$21.80	$18.20	$35.20
33	$23.60	$19.40	$38.20
34	$25.40	$20.80	$41.40
35	$27.60	$22.20	$45.00
36	$29.80	$23.80	$48.80
37	$32.20	$25.40	$52.80
38	$35.00	$27.00	$57.20
39	$38.20	$29.00	$62.40
40	$41.60	$31.00	$67.80
41	$45.40	$33.20	$73.80
42	$49.40	$35.60	$80.20
43	$53.00	$38.00	$86.20
44	$56.80	$40.60	$92.60
45	$61.00	$43.40	$99.60
46	$65.40	$46.20	$106.80
47	$70.00	$49.40	$114.60
48	$75.20	$52.40	$122.80
49	$80.60	$55.60	$131.40
50	$86.40	$59.00	$140.60
51	$92.60	$62.60	$150.40
52	$99.20	$66.40	$160.80
53	$105.80	$70.20	$171.20
54	$112.60	$74.00	$181.80
55	$120.00	$78.20	$193.40
56	$127.80	$82.60	$205.60
57	$136.00	$87.20	$218.40
58	$144.60	$92.20	$232.00
59	$153.60	$97.40	$246.20
60	$163.00	$102.80	$261.00
61	$173.00	$108.60	$276.80
62	$183.60	$114.60	$293.40
63	$193.60	$120.40	$309.20
64	$204.20	$126.40	$325.80
65	$215.80	$133.00	$344.00
66	$228.00	$140.00	$363.20
67	$241.60	$147.80	$384.60
68	$259.80	$157.40	$412.40
69	$282.20	$169.20	$446.60
70	$313.40	$185.80	$494.40

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 non-nicotine – see other page.

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LS-CI-I-0306-20K MN 11/18