LIFESECURE INSURANCE COMPANY

lifesecure™

Critical Illness Insurance Monthly Premium Rates*

MINNESOTA

INDIVIDUAL – NON-NICOTINE

Benefit Amount: $25,000

Age	MALE *Self Only*	FEMALE *Self Only*	MALE OR FEMALE *with Spouse***
18	$9.55	$10.30	$15.05
19	$9.55	$10.30	$15.05
20	$9.55	$10.30	$15.05
21	$9.55	$10.30	$15.05
22	$9.55	$10.30	$15.05
23	$10.05	$10.80	$16.05
24	$10.55	$11.30	$17.05
25	$11.05	$11.80	$18.05
26	$11.55	$12.30	$19.05
27	$12.05	$12.80	$20.05
28	$12.80	$13.30	$21.30
29	$13.55	$14.05	$22.80
30	$14.30	$14.80	$24.30
31	$15.30	$15.55	$26.05
32	$16.30	$16.30	$27.80
33	$17.30	$17.30	$29.80
34	$18.55	$18.30	$32.05
35	$19.55	$19.30	$34.05
36	$20.80	$20.30	$36.30
37	$22.30	$21.55	$39.05
38	$24.05	$22.80	$42.05
39	$25.80	$24.05	$45.05
40	$27.55	$25.55	$48.30
41	$29.80	$27.05	$52.05
42	$32.05	$28.55	$55.80
43	$34.30	$30.05	$59.55
44	$36.55	$31.55	$63.30
45	$39.05	$33.30	$67.55
46	$41.55	$35.05	$71.80
47	$44.30	$36.80	$76.30
48	$47.30	$38.55	$81.05
49	$50.55	$40.30	$86.05
50	$53.80	$42.05	$91.05
51	$57.30	$44.05	$96.55
52	$61.05	$46.05	$102.30
53	$64.80	$48.05	$108.05
54	$68.55	$50.30	$114.05
55	$72.55	$52.30	$120.05
56	$76.80	$54.80	$126.80
57	$81.30	$57.30	$133.80
58	$86.05	$60.05	$141.30
59	$91.05	$63.05	$149.30
60	$96.30	$66.30	$157.80
61	$101.80	$69.55	$166.55
62	$107.55	$73.05	$175.80
63	$113.30	$76.55	$185.05
64	$119.30	$80.30	$194.80
65	$126.05	$84.55	$205.80
66	$133.30	$89.05	$217.55
67	$141.55	$94.05	$230.80
68	$151.80	$100.55	$247.55
69	$164.55	$108.30	$268.05
70	$181.30	$119.30	$295.80

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-0306-25K MN 11/18

LIFESECURE INSURANCE COMPANY

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Critical Illness Insurance Monthly Premium Rates*

MINNESOTA

INDIVIDUAL – NICOTINE

Benefit Amount: $25,000

Age	MALE *Self Only*	FEMALE *Self Only*	MALE OR FEMALE *with Spouse***
18	$12.80	$12.05	$20.05
19	$12.80	$12.05	$20.05
20	$12.80	$12.05	$20.05
21	$12.80	$12.05	$20.05
22	$12.80	$12.05	$20.05
23	$13.55	$12.80	$21.55
24	$14.55	$13.55	$23.30
25	$15.55	$14.05	$24.80
26	$16.55	$15.05	$26.80
27	$17.55	$15.80	$28.55
28	$19.05	$16.80	$31.05
29	$20.55	$17.80	$33.55
30	$22.30	$19.05	$36.55
31	$24.05	$20.30	$39.55
32	$26.05	$21.55	$42.80
33	$28.30	$23.05	$46.55
34	$30.55	$24.80	$50.55
35	$33.30	$26.55	$55.05
36	$36.05	$28.55	$59.80
37	$39.05	$30.55	$64.80
38	$42.55	$32.55	$70.30
39	$46.55	$35.05	$76.80
40	$50.80	$37.55	$83.55
41	$55.55	$40.30	$91.05
42	$60.55	$43.30	$99.05
43	$65.05	$46.30	$106.55
44	$69.80	$49.55	$114.55

Age	MALE *Self Only*	FEMALE *Self Only*	MALE OR FEMALE *with Spouse***
45	$75.05	$53.05	$123.30
46	$80.55	$56.55	$132.30
47	$86.30	$60.55	$142.05
48	$92.80	$64.30	$152.30
49	$99.55	$68.30	$163.05
50	$106.80	$72.55	$174.55
51	$114.55	$77.05	$186.80
52	$122.80	$81.80	$199.80
53	$131.05	$86.55	$212.80
54	$139.55	$91.30	$226.05
55	$148.80	$96.55	$240.55
56	$158.55	$102.05	$255.80
57	$168.80	$107.80	$271.80
58	$179.55	$114.05	$288.80
59	$190.80	$120.55	$306.55
60	$202.55	$127.30	$325.05
61	$215.05	$134.55	$344.80
62	$228.30	$142.05	$365.55
63	$240.80	$149.30	$385.30
64	$254.05	$156.80	$406.05
65	$268.55	$165.05	$428.80
66	$283.80	$173.80	$452.80
67	$300.80	$183.55	$479.55
68	$323.55	$195.55	$514.30
69	$351.55	$210.30	$557.05
70	$390.55	$231.05	$616.80

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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