## LIFESECURE INSURANCE COMPANY

lifesecure™

# Critical Illness Insurance Monthly Premium Rates*

# MONTANA

## INDIVIDUAL – NON-NICOTINE

**Benefit Amount: $35,000**

| Age | Self Only | With Spouse |
|---|---|---|
| 18 | $16.15 | $24.55 |
| 19 | $16.15 | $24.55 |
| 20 | $16.15 | $24.55 |
| 21 | $16.15 | $24.55 |
| 22 | $16.15 | $24.55 |
| 23 | $16.85 | $25.95 |
| 24 | $17.55 | $27.35 |
| 25 | $18.25 | $28.75 |
| 26 | $19.30 | $30.85 |
| 27 | $20.00 | $32.25 |
| 28 | $21.05 | $34.35 |
| 29 | $22.10 | $36.45 |
| 30 | $23.15 | $38.55 |
| 31 | $24.55 | $41.35 |
| 32 | $25.95 | $44.15 |
| 33 | $27.70 | $47.65 |
| 34 | $29.45 | $51.15 |
| 35 | $31.20 | $54.65 |
| 36 | $33.30 | $58.85 |
| 37 | $35.40 | $63.05 |
| 38 | $37.50 | $67.25 |
| 39 | $39.95 | $72.15 |
| 40 | $42.40 | $77.05 |
| 41 | $45.20 | $82.65 |
| 42 | $48.00 | $88.25 |
| 43 | $50.80 | $93.85 |
| 44 | $53.95 | $100.15 |

| Age | Self Only | With Spouse |
|---|---|---|
| 45 | $57.10 | $106.45 |
| 46 | $60.60 | $113.45 |
| 47 | $64.10 | $120.45 |
| 48 | $67.60 | $127.45 |
| 49 | $71.45 | $135.15 |
| 50 | $75.65 | $143.55 |
| 51 | $79.85 | $151.95 |
| 52 | $84.40 | $161.05 |
| 53 | $88.95 | $170.15 |
| 54 | $93.50 | $179.25 |
| 55 | $98.40 | $189.05 |
| 56 | $103.65 | $199.55 |
| 57 | $109.25 | $210.75 |
| 58 | $115.20 | $222.65 |
| 59 | $121.50 | $235.25 |
| 60 | $127.80 | $247.85 |
| 61 | $134.80 | $261.85 |
| 62 | $142.15 | $276.55 |
| 63 | $149.50 | $291.25 |
| 64 | $157.20 | $306.65 |
| 65 | $165.95 | $324.15 |
| 66 | $175.05 | $342.35 |
| 67 | $185.55 | $363.35 |
| 68 | $198.50 | $389.25 |
| 69 | $214.95 | $422.15 |
| 70 | $236.65 | $465.55 |

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.

Policy Series LS-CI-0001
LS-CI-I-0306-35K MT 05/18

## LIFESECURE INSURANCE COMPANY

lifesecure™

# Critical Illness Insurance Monthly Premium Rates*

# MONTANA

## INDIVIDUAL – NICOTINE

**Benefit Amount: $35,000**

| Age | Self Only | With Spouse |
|---|---|---|
| 18 | $19.65 | $31.55 |
| 19 | $19.65 | $31.55 |
| 20 | $19.65 | $31.55 |
| 21 | $19.65 | $31.55 |
| 22 | $19.65 | $31.55 |
| 23 | $21.05 | $34.35 |
| 24 | $22.10 | $36.45 |
| 25 | $23.50 | $39.25 |
| 26 | $24.90 | $42.05 |
| 27 | $26.65 | $45.55 |
| 28 | $28.40 | $49.05 |
| 29 | $30.50 | $53.25 |
| 30 | $32.95 | $58.15 |
| 31 | $35.05 | $62.35 |
| 32 | $37.85 | $67.95 |
| 33 | $40.65 | $73.55 |
| 34 | $43.80 | $79.85 |
| 35 | $46.95 | $86.15 |
| 36 | $50.80 | $93.85 |
| 37 | $54.65 | $101.55 |
| 38 | $59.20 | $110.65 |
| 39 | $64.10 | $120.45 |
| 40 | $69.70 | $131.65 |
| 41 | $75.65 | $143.55 |
| 42 | $81.95 | $156.15 |
| 43 | $87.90 | $168.05 |
| 44 | $94.20 | $180.65 |

| Age | Self Only | With Spouse |
|---|---|---|
| 45 | $100.85 | $193.95 |
| 46 | $107.85 | $207.95 |
| 47 | $115.55 | $223.35 |
| 48 | $123.60 | $239.45 |
| 49 | $132.00 | $256.25 |
| 50 | $141.10 | $274.45 |
| 51 | $150.90 | $294.05 |
| 52 | $161.05 | $314.35 |
| 53 | $171.20 | $334.65 |
| 54 | $181.70 | $355.65 |
| 55 | $192.90 | $378.05 |
| 56 | $204.80 | $401.85 |
| 57 | $217.75 | $427.75 |
| 58 | $231.05 | $454.35 |
| 59 | $245.05 | $482.35 |
| 60 | $259.40 | $511.05 |
| 61 | $275.15 | $542.55 |
| 62 | $291.25 | $574.75 |
| 63 | $306.65 | $605.55 |
| 64 | $323.10 | $638.45 |
| 65 | $340.95 | $674.15 |
| 66 | $359.85 | $711.95 |
| 67 | $380.85 | $753.95 |
| 68 | $407.80 | $807.85 |
| 69 | $441.05 | $874.35 |
| 70 | $487.25 | $966.75 |

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.

Policy Series LS-CI-0001
LS-CI-I-0306-35K MT 05/18