LIFESECURE INSURANCE COMPANY

lifesecure™

Critical Illness Insurance Monthly Premium Rates*

MONTANA

INDIVIDUAL – NON-NICOTINE

Benefit Amount: $40,000

Age	Self Only	With Spouse
18	$17.35	$26.95
19	$17.35	$26.95
20	$17.35	$26.95
21	$17.35	$26.95
22	$17.35	$26.95
23	$18.15	$28.55
24	$18.95	$30.15
25	$19.75	$31.75
26	$20.95	$34.15
27	$21.75	$35.75
28	$22.95	$38.15
29	$24.15	$40.55
30	$25.35	$42.95
31	$26.95	$46.15
32	$28.55	$49.35
33	$30.55	$53.35
34	$32.55	$57.35
35	$34.55	$61.35
36	$36.95	$66.15
37	$39.35	$70.95
38	$41.75	$75.75
39	$44.55	$81.35
40	$47.35	$86.95
41	$50.55	$93.35
42	$53.75	$99.75
43	$56.95	$106.15
44	$60.55	$113.35

Age	Self Only	With Spouse
45	$64.15	$120.55
46	$68.15	$128.55
47	$72.15	$136.55
48	$76.15	$144.55
49	$80.55	$153.35
50	$85.35	$162.95
51	$90.15	$172.55
52	$95.35	$182.95
53	$100.55	$193.35
54	$105.75	$203.75
55	$111.35	$214.95
56	$117.35	$226.95
57	$123.75	$239.75
58	$130.55	$253.35
59	$137.75	$267.75
60	$144.95	$282.15
61	$152.95	$298.15
62	$161.35	$314.95
63	$169.75	$331.75
64	$178.55	$349.35
65	$188.55	$369.35
66	$198.95	$390.15
67	$210.95	$414.15
68	$225.75	$443.75
69	$244.55	$481.35
70	$269.35	$530.95

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-0306-40K MT 05/18

LIFESECURE INSURANCE COMPANY

lifesecure™

Critical Illness Insurance Monthly Premium Rates*

MONTANA

INDIVIDUAL – NICOTINE

Benefit Amount: $40,000

Age	Self Only	With Spouse
18	$21.35	$34.95
19	$21.35	$34.95
20	$21.35	$34.95
21	$21.35	$34.95
22	$21.35	$34.95
23	$22.95	$38.15
24	$24.15	$40.55
25	$25.75	$43.75
26	$27.35	$46.95
27	$29.35	$50.95
28	$31.35	$54.95
29	$33.75	$59.75
30	$36.55	$65.35
31	$38.95	$70.15
32	$42.15	$76.55
33	$45.35	$82.95
34	$48.95	$90.15
35	$52.55	$97.35
36	$56.95	$106.15
37	$61.35	$114.95
38	$66.55	$125.35
39	$72.15	$136.55
40	$78.55	$149.35
41	$85.35	$162.95
42	$92.55	$177.35
43	$99.35	$190.95
44	$106.55	$205.35

Age	Self Only	With Spouse
45	$114.15	$220.55
46	$122.15	$236.55
47	$130.95	$254.15
48	$140.15	$272.55
49	$149.75	$291.75
50	$160.15	$312.55
51	$171.35	$334.95
52	$182.95	$358.15
53	$194.55	$381.35
54	$206.55	$405.35
55	$219.35	$430.95
56	$232.95	$458.15
57	$247.75	$487.75
58	$262.95	$518.15
59	$278.95	$550.15
60	$295.35	$582.95
61	$313.35	$618.95
62	$331.75	$655.75
63	$349.35	$690.95
64	$368.15	$728.55
65	$388.55	$769.35
66	$410.15	$812.55
67	$434.15	$860.55
68	$464.95	$922.15
69	$502.95	$998.15
70	$555.75	$1,103.75

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-0306-40K MT 05/18