LIFESECURE INSURANCE COMPANY

lifesecure™

Critical Illness Insurance Monthly Premium Rates*

MONTANA

INDIVIDUAL – NON-NICOTINE

Benefit Amount: $50,000

Age	Self Only	With Spouse
18	$19.75	$31.75
19	$19.75	$31.75
20	$19.75	$31.75
21	$19.75	$31.75
22	$19.75	$31.75
23	$20.75	$33.75
24	$21.75	$35.75
25	$22.75	$37.75
26	$24.25	$40.75
27	$25.25	$42.75
28	$26.75	$45.75
29	$28.25	$48.75
30	$29.75	$51.75
31	$31.75	$55.75
32	$33.75	$59.75
33	$36.25	$64.75
34	$38.75	$69.75
35	$41.25	$74.75
36	$44.25	$80.75
37	$47.25	$86.75
38	$50.25	$92.75
39	$53.75	$99.75
40	$57.25	$106.75
41	$61.25	$114.75
42	$65.25	$122.75
43	$69.25	$130.75
44	$73.75	$139.75

Age	Self Only	With Spouse
45	$78.25	$148.75
46	$83.25	$158.75
47	$88.25	$168.75
48	$93.25	$178.75
49	$98.75	$189.75
50	$104.75	$201.75
51	$110.75	$213.75
52	$117.25	$226.75
53	$123.75	$239.75
54	$130.25	$252.75
55	$137.25	$266.75
56	$144.75	$281.75
57	$152.75	$297.75
58	$161.25	$314.75
59	$170.25	$332.75
60	$179.25	$350.75
61	$189.25	$370.75
62	$199.75	$391.75
63	$210.25	$412.75
64	$221.25	$434.75
65	$233.75	$459.75
66	$246.75	$485.75
67	$261.75	$515.75
68	$280.25	$552.75
69	$303.75	$599.75
70	$334.75	$661.75

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-0306-50K MT 05/18

LIFESECURE INSURANCE COMPANY

lifesecure™

Critical Illness Insurance Monthly Premium Rates*

MONTANA

INDIVIDUAL – NICOTINE

Benefit Amount: $50,000

Age	Self Only	With Spouse
18	$24.75	$41.75
19	$24.75	$41.75
20	$24.75	$41.75
21	$24.75	$41.75
22	$24.75	$41.75
23	$26.75	$45.75
24	$28.25	$48.75
25	$30.25	$52.75
26	$32.25	$56.75
27	$34.75	$61.75
28	$37.25	$66.75
29	$40.25	$72.75
30	$43.75	$79.75
31	$46.75	$85.75
32	$50.75	$93.75
33	$54.75	$101.75
34	$59.25	$110.75
35	$63.75	$119.75
36	$69.25	$130.75
37	$74.75	$141.75
38	$81.25	$154.75
39	$88.25	$168.75
40	$96.25	$184.75
41	$104.75	$201.75
42	$113.75	$219.75
43	$122.25	$236.75
44	$131.25	$254.75

Age	Self Only	With Spouse
45	$140.75	$273.75
46	$150.75	$293.75
47	$161.75	$315.75
48	$173.25	$338.75
49	$185.25	$362.75
50	$198.25	$388.75
51	$212.25	$416.75
52	$226.75	$445.75
53	$241.25	$474.75
54	$256.25	$504.75
55	$272.25	$536.75
56	$289.25	$570.75
57	$307.75	$607.75
58	$326.75	$645.75
59	$346.75	$685.75
60	$367.25	$726.75
61	$389.75	$771.75
62	$412.75	$817.75
63	$434.75	$861.75
64	$458.25	$908.75
65	$483.75	$959.75
66	$510.75	$1,013.75
67	$540.75	$1,073.75
68	$579.25	$1,150.75
69	$626.75	$1,245.75
70	$692.75	$1,377.75

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

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Policy Series LS-CI-0001
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