LIFESECURE INSURANCE COMPANY

lifesecure™

Critical Illness Insurance Monthly Premium Rates*

GEORGIA

INDIVIDUAL – NON-NICOTINE

Benefit Amount: $20,000

Age	MALE *Self Only*	FEMALE *Self Only*	MALE OR FEMALE *with Spouse***
18	$12.15	$12.55	$16.95
19	$12.15	$12.55	$16.95
20	$12.15	$12.55	$16.95
21	$12.15	$12.55	$16.95
22	$12.15	$12.55	$16.95
23	$12.55	$12.95	$17.75
24	$13.15	$13.55	$18.95
25	$13.55	$13.95	$19.75
26	$13.95	$14.35	$20.55
27	$14.55	$14.95	$21.75
28	$15.15	$15.55	$22.95
29	$15.75	$16.15	$24.15
30	$16.55	$16.75	$25.55
31	$17.35	$17.35	$26.95
32	$18.15	$18.15	$28.55
33	$19.15	$18.95	$30.35
34	$20.15	$19.95	$32.35
35	$21.35	$20.75	$34.35
36	$22.55	$21.95	$36.75
37	$23.75	$22.95	$38.95
38	$25.15	$24.15	$41.55
39	$26.75	$25.15	$44.15
40	$28.55	$26.55	$47.35
41	$30.55	$27.95	$50.75
42	$32.55	$29.35	$54.15
43	$34.75	$30.75	$57.75
44	$36.95	$32.15	$61.35
45	$39.35	$33.75	$65.35
46	$41.75	$35.35	$69.35
47	$44.55	$36.95	$73.75
48	$47.15	$38.55	$77.95
49	$49.95	$40.35	$82.55
50	$52.95	$42.15	$87.35
51	$56.15	$44.15	$92.55
52	$59.35	$46.15	$97.75
53	$62.75	$47.95	$102.95
54	$66.35	$49.75	$108.35
55	$69.95	$51.75	$113.95
56	$73.95	$53.95	$120.15
57	$78.15	$56.15	$126.55
58	$82.35	$58.75	$133.35
59	$86.75	$61.55	$140.55
60	$91.35	$64.55	$148.15
61	$96.15	$67.75	$156.15
62	$101.35	$70.95	$164.55
63	$106.75	$73.95	$172.95
64	$112.35	$77.35	$181.95
65	$118.55	$80.95	$191.75
66	$125.35	$84.95	$202.55
67	$132.95	$89.35	$214.55
68	$142.35	$95.15	$229.75
69	$153.95	$102.35	$248.55
70	$169.35	$112.55	$274.15

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 GA
LS-CI-I-0306-20K GA 07/18

LIFESECURE INSURANCE COMPANY

lifesecure™

Critical Illness Insurance Monthly Premium Rates*

GEORGIA

INDIVIDUAL – NICOTINE

Benefit Amount: $20,000

Age	MALE *Self Only*	FEMALE *Self Only*	MALE OR FEMALE *with Spouse***
18	$14.95	$14.55	$21.75
19	$14.95	$14.55	$21.75
20	$14.95	$14.55	$21.75
21	$14.95	$14.55	$21.75
22	$14.95	$14.55	$21.75
23	$15.75	$15.15	$23.15
24	$16.75	$15.75	$24.75
25	$17.75	$16.35	$26.35
26	$18.75	$16.95	$27.95
27	$19.75	$17.75	$29.75
28	$20.95	$18.55	$31.75
29	$22.35	$19.55	$34.15
30	$23.95	$20.55	$36.75
31	$25.55	$21.75	$39.55
32	$27.35	$22.95	$42.55
33	$29.35	$24.35	$45.95
34	$31.35	$25.95	$49.55
35	$33.75	$27.55	$53.55
36	$36.15	$29.35	$57.75
37	$38.95	$31.35	$62.55
38	$42.35	$33.35	$67.95
39	$45.95	$35.75	$73.95
40	$50.15	$38.15	$80.55
41	$54.55	$40.95	$87.75
42	$59.35	$43.75	$95.35
43	$63.55	$46.35	$102.15
44	$67.75	$49.35	$109.35
45	$72.35	$52.35	$116.95
46	$77.35	$55.55	$125.15
47	$82.55	$58.95	$133.75
48	$88.35	$62.35	$142.95
49	$94.75	$66.15	$153.15
50	$101.35	$69.95	$163.55
51	$108.35	$74.15	$174.75
52	$115.75	$78.55	$186.55
53	$123.15	$82.55	$197.95
54	$131.15	$86.95	$210.35
55	$139.35	$91.35	$222.95
56	$148.35	$96.15	$236.75
57	$157.75	$101.35	$251.35
58	$167.75	$107.15	$267.15
59	$177.95	$113.15	$283.35
60	$188.95	$119.55	$300.75
61	$200.55	$126.35	$319.15
62	$212.55	$133.35	$338.15
63	$224.15	$139.95	$356.35
64	$236.15	$146.95	$375.35
65	$249.35	$154.35	$395.95
66	$263.55	$162.55	$418.35
67	$278.95	$171.35	$442.55
68	$299.75	$182.35	$474.35
69	$325.55	$195.75	$513.55
70	$361.15	$214.95	$568.35

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.

Policy Series LS-CI-0001 GA
LS-CI-I-0306-20K GA 07/18