LIFESECURE INSURANCE COMPANY

lifesecure™

Critical Illness Insurance Monthly Premium Rates*

GEORGIA

INDIVIDUAL – NON-NICOTINE

Benefit Amount: $45,000

Age	MALE *Self Only*	FEMALE *Self Only*	MALE OR FEMALE *with Spouse***
18	$17.65	$18.55	$28.45
19	$17.65	$18.55	$28.45
20	$17.65	$18.55	$28.45
21	$17.65	$18.55	$28.45
22	$17.65	$18.55	$28.45
23	$18.55	$19.45	$30.25
24	$19.90	$20.80	$32.95
25	$20.80	$21.70	$34.75
26	$21.70	$22.60	$36.55
27	$23.05	$23.95	$39.25
28	$24.40	$25.30	$41.95
29	$25.75	$26.65	$44.65
30	$27.55	$28.00	$47.80
31	$29.35	$29.35	$50.95
32	$31.15	$31.15	$54.55
33	$33.40	$32.95	$58.60
34	$35.65	$35.20	$63.10
35	$38.35	$37.00	$67.60
36	$41.05	$39.70	$73.00
37	$43.75	$41.95	$77.95
38	$46.90	$44.65	$83.80
39	$50.50	$46.90	$89.65
40	$54.55	$50.05	$96.85
41	$59.05	$53.20	$104.50
42	$63.55	$56.35	$112.15
43	$68.50	$59.50	$120.25
44	$73.45	$62.65	$128.35
45	$78.85	$66.25	$137.35
46	$84.25	$69.85	$146.35
47	$90.55	$73.45	$156.25
48	$96.40	$77.05	$165.70
49	$102.70	$81.10	$176.05
50	$109.45	$85.15	$186.85
51	$116.65	$89.65	$198.55
52	$123.85	$94.15	$210.25
53	$131.50	$98.20	$221.95
54	$139.60	$102.25	$234.10
55	$147.70	$106.75	$246.70
56	$156.70	$111.70	$260.65
57	$166.15	$116.65	$275.05
58	$175.60	$122.50	$290.35
59	$185.50	$128.80	$306.55
60	$195.85	$135.55	$323.65
61	$206.65	$142.75	$341.65
62	$218.35	$149.95	$360.55
63	$230.50	$156.70	$379.45
64	$243.10	$164.35	$399.70
65	$257.05	$172.45	$421.75
66	$272.35	$181.45	$446.05
67	$289.45	$191.35	$473.05
68	$310.60	$204.40	$507.25
69	$336.70	$220.60	$549.55
70	$371.35	$243.55	$607.15

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-0306-45K GA 07/18

LIFESECURE INSURANCE COMPANY

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Critical Illness Insurance Monthly Premium Rates*

GEORGIA

INDIVIDUAL – NICOTINE

Benefit Amount: $45,000

Age	MALE *Self Only*	FEMALE *Self Only*	MALE OR FEMALE *with Spouse***
18	$23.95	$23.05	$39.25
19	$23.95	$23.05	$39.25
20	$23.95	$23.05	$39.25
21	$23.95	$23.05	$39.25
22	$23.95	$23.05	$39.25
23	$25.75	$24.40	$42.40
24	$28.00	$25.75	$46.00
25	$30.25	$27.10	$49.60
26	$32.50	$28.45	$53.20
27	$34.75	$30.25	$57.25
28	$37.45	$32.05	$61.75
29	$40.60	$34.30	$67.15
30	$44.20	$36.55	$73.00
31	$47.80	$39.25	$79.30
32	$51.85	$41.95	$86.05
33	$56.35	$45.10	$93.70
34	$60.85	$48.70	$101.80
35	$66.25	$52.30	$110.80
36	$71.65	$56.35	$120.25
37	$77.95	$60.85	$131.05
38	$85.60	$65.35	$143.20
39	$93.70	$70.75	$156.70
40	$103.15	$76.15	$171.55
41	$113.05	$82.45	$187.75
42	$123.85	$88.75	$204.85
43	$133.30	$94.60	$220.15
44	$142.75	$101.35	$236.35
45	$153.10	$108.10	$253.45
46	$164.35	$115.30	$271.90
47	$176.05	$122.95	$291.25
48	$189.10	$130.60	$311.95
49	$203.50	$139.15	$334.90
50	$218.35	$147.70	$358.30
51	$234.10	$157.15	$383.50
52	$250.75	$167.05	$410.05
53	$267.40	$176.05	$435.70
54	$285.40	$185.95	$463.60
55	$303.85	$195.85	$491.95
56	$324.10	$206.65	$523.00
57	$345.25	$218.35	$555.85
58	$367.75	$231.40	$591.40
59	$390.70	$244.90	$627.85
60	$415.45	$259.30	$667.00
61	$441.55	$274.60	$708.40
62	$468.55	$290.35	$751.15
63	$494.65	$305.20	$792.10
64	$521.65	$320.95	$834.85
65	$551.35	$337.60	$881.20
66	$583.30	$356.05	$931.60
67	$617.95	$375.85	$986.05
68	$664.75	$400.60	$1,057.60
69	$722.80	$430.75	$1,145.80
70	$802.90	$473.95	$1,269.10

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

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** 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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LS-CI-I-0306-45K GA 07/18