LIFESECURE INSURANCE COMPANY

lifesecure™

Critical Illness Insurance Monthly Premium Rates
COLORADO, SOUTH DAKOTA & WASHINGTON
INDIVIDUAL – NON-NICOTINE

Benefit Amount: $50,000

Age	MALE *Self Only*	FEMALE *Self Only*	MALE OR FEMALE *with Spouse**
18	$16.48	$17.98	$27.48
19	$16.48	$17.98	$27.48
20	$16.48	$17.98	$27.48
21	$16.48	$17.98	$27.48
22	$16.48	$17.98	$27.48
23	$17.48	$18.98	$29.48
24	$18.48	$19.98	$31.48
25	$19.48	$20.98	$33.48
26	$20.48	$21.98	$35.48
27	$21.48	$22.98	$37.48
28	$22.98	$23.98	$39.98
29	$24.48	$25.48	$42.98
30	$25.98	$26.98	$45.98
31	$27.98	$28.48	$49.48
32	$29.98	$29.98	$52.98
33	$31.98	$31.98	$56.98
34	$34.48	$33.98	$61.48
35	$36.48	$35.98	$65.48
36	$38.98	$37.98	$69.98
37	$41.98	$40.48	$75.48
38	$45.48	$42.98	$81.48
39	$48.98	$45.48	$87.48
40	$52.48	$48.48	$93.98
41	$56.98	$51.48	$101.48
42	$61.48	$54.48	$108.98
43	$65.98	$57.48	$116.48
44	$70.48	$60.48	$123.98

Age	MALE *Self Only*	FEMALE *Self Only*	MALE OR FEMALE *with Spouse**
45	$75.48	$63.98	$132.48
46	$80.48	$67.48	$140.98
47	$85.98	$70.98	$149.98
48	$91.98	$74.48	$159.48
49	$98.48	$77.98	$169.48
50	$104.98	$81.48	$179.48
51	$111.98	$85.48	$190.48
52	$119.48	$89.48	$201.98
53	$126.98	$93.48	$213.48
54	$134.48	$97.98	$225.48
55	$142.48	$101.98	$237.48
56	$150.98	$106.98	$250.98
57	$159.98	$111.98	$264.98
58	$169.48	$117.48	$279.98
59	$179.48	$123.48	$295.98
60	$189.98	$129.98	$312.98
61	$200.98	$136.48	$330.48
62	$212.48	$143.48	$348.98
63	$223.98	$150.48	$367.48
64	$235.98	$157.98	$386.98
65	$249.48	$166.48	$408.98
66	$263.98	$175.48	$432.48
67	$280.48	$185.48	$458.98
68	$300.98	$198.48	$492.48
69	$326.48	$213.98	$533.48
70	$359.98	$235.98	$588.98

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

* 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
LS-CI-I-0306-50K LR60 09/18

LIFESECURE INSURANCE COMPANY

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Critical Illness Insurance Monthly Premium Rates
COLORADO, SOUTH DAKOTA & WASHINGTON
INDIVIDUAL – NICOTINE

Benefit Amount: $50,000

Age	MALE *Self Only*	FEMALE *Self Only*	MALE OR FEMALE *with Spouse**
18	$22.98	$21.48	$37.48
19	$22.98	$21.48	$37.48
20	$22.98	$21.48	$37.48
21	$22.98	$21.48	$37.48
22	$22.98	$21.48	$37.48
23	$24.48	$22.98	$40.48
24	$26.48	$24.48	$43.98
25	$28.48	$25.48	$46.98
26	$30.48	$27.48	$50.98
27	$32.48	$28.98	$54.48
28	$35.48	$30.98	$59.48
29	$38.48	$32.98	$64.48
30	$41.98	$35.48	$70.48
31	$45.48	$37.98	$76.48
32	$49.48	$40.48	$82.98
33	$53.98	$43.48	$90.48
34	$58.48	$46.98	$98.48
35	$63.98	$50.48	$107.48
36	$69.48	$54.48	$116.98
37	$75.48	$58.48	$126.98
38	$82.48	$62.48	$137.98
39	$90.48	$67.48	$150.98
40	$98.98	$72.48	$164.48
41	$108.48	$77.98	$179.48
42	$118.48	$83.98	$195.48
43	$127.48	$89.98	$210.48
44	$136.98	$96.48	$226.48

Age	MALE *Self Only*	FEMALE *Self Only*	MALE OR FEMALE *with Spouse**
45	$147.48	$103.48	$243.98
46	$158.48	$110.48	$261.98
47	$169.98	$118.48	$281.48
48	$182.98	$125.98	$301.98
49	$196.48	$133.98	$323.48
50	$210.98	$142.48	$346.48
51	$226.48	$151.48	$370.98
52	$242.98	$160.98	$396.98
53	$259.48	$170.48	$422.98
54	$276.48	$179.98	$449.48
55	$294.98	$190.48	$478.48
56	$314.48	$201.48	$508.98
57	$334.98	$212.98	$540.98
58	$356.48	$225.48	$574.98
59	$378.98	$238.48	$610.48
60	$402.48	$251.98	$647.48
61	$427.48	$266.48	$686.98
62	$453.98	$281.48	$728.48
63	$478.98	$295.98	$767.98
64	$505.48	$310.98	$809.48
65	$534.48	$327.48	$854.98
66	$564.98	$344.98	$902.98
67	$598.98	$364.48	$956.48
68	$644.48	$388.48	$1,025.98
69	$700.48	$417.98	$1,111.48
70	$778.48	$459.48	$1,230.98

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

* 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-0306-50K LR60 09/18