

St. Charles Community Unit School District 303



SUN LIFE EMPLOYEE BENEFITS

Protect what you love about your life





Welcome

It's time to enroll in your benefits!

We are pleased to offer you coverage from Sun Life Financial as part of your employee benefits program. With benefits from Sun Life, you can stay confident knowing that no matter what unexpected events lie ahead, you have made a plan to help protect your future and your finances.

Sun Life can help you protect what you love no matter your age or where you are in life:

- Out on your own and working hard to build your career and independence
- Living life your way - saving money and dreaming about what's yet to come
- Advancing your career, perhaps buying a home, or even starting a family
- Enjoying the benefits of all of your hard work or even planning for retirement

St. Charles Community Unit School District 303 is offering you the opportunity to enroll in the following:

Employee Optional Life and AD&D Insurance
Spouse Optional Life Insurance
Child Optional Life Insurance
Employee Voluntary Life and AD&D Insurance
Spouse Voluntary Life and AD&D Insurance
Child Voluntary Life and AD&D Insurance

In this booklet, you will find information that will help you understand your choices and how much coverage costs. Want to learn more about how Sun Life's benefits can help you? Visit www.SunLifeKnowsBenefits.com.

If you have questions about your benefits plan, ask your benefits administrator.

Notes

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Optional Life and AD&D insurance benefits

Protect the life you love by securing it for the people most important to you.

Take comfort in knowing that life and accidental death & dismemberment (AD&D) insurance can provide the people you love with financial support when you can't be there—and they need it most. Consider supplementing your employer-paid life and AD&D insurance if your income is needed to cover household or day-to-day expenses or if you share responsibility for a significant debt with someone else.

In four easy steps, estimate how much life insurance coverage you may need.¹

1. Identify your MONTHLY EXPENSES

Mortgage/rent	\$ _____
Car or transit payments	\$ _____
Health insurance and out-of-pocket expenses	\$ _____
Credit card debt	\$ _____
Family care (e.g., education and childcare costs)	\$ _____
Groceries	\$ _____
Utilities	\$ _____
Other expenses	\$ _____
Total monthly expenses	\$ _____

2. Identify your TOTAL ASSETS

401(k)	\$ _____
Retirement funds	\$ _____
Other life insurance	\$ _____
Other assets	\$ _____
Total assets	\$ _____

3. CALCULATE the future funds you need to cover your monthly expenses

\$ _____	X	12	X	_____	=	\$ _____
Total monthly expenses				Number of years		Total future funds needed

4. ESTIMATE your life insurance needs

\$ _____	-	\$ _____	=	\$ _____
Total future funds needed		Total assets		Amount of additional coverage you may need

1. This worksheet is provided for informational purposes only. It should not be relied on as financial advice or solicitation of insurance. You may wish to consult an independent financial professional for advice.

Optional Life and AD&D insurance benefits

More about Life and AD&D insurance

- If you enroll when you are first eligible, you do not have to provide proof of good health.²
- You are covered for a year at a time, so you can adjust your coverage as your needs change (e.g., you get married or have a baby).²
- It includes an equal amount of AD&D insurance that provides a benefit if you or a covered dependent suffers a covered accidental injury or dies from a covered accident.
- Apply to take your coverage with you if you retire or change employers.³
- Apply to receive a portion of your death benefit to help cover medical and living expenses if you become terminally ill.

The benefit highlights describe the Life and AD&D insurance plan.

Frequently asked questions

How is my benefit claim filed and paid?

Your beneficiary(ies) and your employer will complete a Death Benefits Claim Packet or an AD&D Claim Packet and submit it to Sun Life. Our claims examiners review the claim and gather additional information if necessary. We will notify you or your beneficiaries when a decision is made.

If your AD&D claim for an accidental injury is approved, the benefit amount will be paid directly to you. If your death claim is approved, your beneficiary(ies) may elect to receive a lump sum payment or to have the benefit paid into an interest-bearing account at Sun Life, where funds can be withdrawn at any time. State restrictions apply. Options may vary by state.

Does the coverage have exclusions?

Subject to state variations, life insurance benefits may be excluded for suicide. No AD&D benefit will be paid for losses resulting from suicide or for losses that are a result of drug use, driving while intoxicated, or committing a criminal act. Other exclusions may apply or vary by state. See the benefit highlights for more information.

How can I get more information about my coverage?

After the effective date of your coverage, you can contact our Customer Service representatives at 800-247-6875, 8:00 a.m. to 8:00 p.m. ET, Monday through Friday.

2. If the amount you apply for exceeds the Guaranteed Issue amount or if you decline coverage during your initial eligibility period and want to elect coverage or increase coverage at a later date, you are required to complete and submit an Evidence of Insurability application, which must be approved by Sun Life prior to coverage taking effect.
3. Subject to policy terms, conversion is available when life insurance coverage terminates or reduces, and portability is available when employment terminates. Coverage is subject to state variations. If portability is not available in your state, continuation may be available. Refer to your Certificate for specific conditions.

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Life and Accidental Death and Dismemberment (AD&D) insurance

For all eligible employees of St. Charles Community Unit School District 303, policy # 202891

Protect the life you love by securing it for the people most important to you.

Available coverage amounts

- Choose the benefit amounts that best meet your needs and your budget:

For you	For your spouse	For your child(ren)
You can elect \$10,000 to \$200,000—in \$10,000 increments—with no medical questions asked up to \$150,000 if under age 60, \$20,000 if ages 60-69, \$10,000 if ages 70-79 and \$1,000 if age 80 or over. ¹	If you elect coverage for yourself, you can sign up for \$10,000 to \$150,000—in \$10,000 increments—with no medical questions asked up to \$50,000. ¹ (Not to exceed 100% of your elected amount.)	If you elect coverage for yourself, you can sign up for \$1,000 to \$10,000—in \$1,000 increments. (Not to exceed 100% of your elected amount.)
Coverage is discontinued at termination of employment or retirement.	Coverage terminates when you turn 70 years old.	A full benefit is payable for a dependent child who is 6 months to 19 years old or to 23 years old if a full-time student. A reduced benefit is payable for a child from 14 days to 6 months.

- The cost for Sun Life’s Life and AD&D insurance depends on the benefit amount you choose and your age.

More about Sun Life’s Life and AD&D insurance

Take comfort in knowing that Life and AD&D insurance can provide the people you love with financial support when you can’t be there—and they need it most.

- Consider Life and AD&D insurance if your income is needed to cover household or day-to-day expenses, or if you share responsibility for a significant debt with someone else.
- The policy includes an equal amount of AD&D insurance, which provides a benefit if you or a covered dependent suffers a covered accidental injury or dies from a covered accident.
- Enroll when you are first eligible, and you do not have to provide proof of good health.¹
- Adjust your coverage as your needs change (e.g., you get married or have a baby), since you are covered for a year at a time.¹
- Apply to take your coverage with you if you retire or change employers.²
- Apply to receive a portion of your death benefit to help cover medical and living expenses if you become terminally ill.

How Sun Life's Life and AD&D insurance can help

Life and AD&D insurance may provide additional financial support by:

- covering household expenses,
- relieving debt (e.g., mortgage or student loans) you might leave behind,
- allowing your family members to hire someone if they need help when you are gone,
- leaving an inheritance for your loved ones or even for an organization you are passionate about, and
- assisting your family with the cost of your funeral or medical bills.

Limitations and exclusions

If the employee's cause of death is suicide:*

- No amount of Life or Dependent Life insurance is payable if the suicide occurs within 24 months after the employee's insurance is effective.
- No increased or additional amount of Life insurance is payable if the suicide occurs within 24 months after the increased or additional amount of Life insurance is effective.
- No amount of Life insurance in excess of the Guaranteed Issue amount is payable if the suicide occurs within 24 months after the amount in excess of the Guaranteed Issue amount is effective.

No AD&D benefit will be paid for a loss that is due to or results from:*

- suicide while sane or insane
- intentionally self-inflicted injuries
- bodily or mental infirmity or disease of any kind, or infection unless due to an accidental cut or wound
- committing or attempting to commit an assault, felony, or other criminal act
- active participation in a war (declared or undeclared) or active duty in any armed service during a time of war
- active participation in a riot, rebellion, or insurrection
- injury sustained from any aviation activities, other than riding as a fare-paying passenger
- the employee's voluntary use of any controlled substance as defined in Title II of the Comprehensive Drug Abuse Prevention and Control Act of 1970, as now or hereafter amended, unless administered on the advice of a Physician
- the employee's operation of any motorized vehicle while intoxicated.
 - Intoxicated means the minimum blood alcohol level required to be considered operating an automobile under the influence of alcohol in the jurisdiction where the accident occurred.
 - For the purposes of this exclusion, "Motorized Vehicle" includes, but is not limited to, automobiles, motorcycles, boats, and snowmobiles.

*Subject to state law variations.

1. If the amount you apply for exceeds the Guaranteed Issue amount or if you decline coverage during your initial eligibility period and want to elect coverage or increase coverage at a later date, you are required to complete and submit an Evidence of Insurability application, which must be approved by Sun Life prior to coverage taking effect.
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Life and AD&D insurance benefits

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- The policy includes an equal amount of AD&D insurance, which provides a benefit if you or a covered dependent suffers a covered accidental injury or dies from a covered accident.
- Enroll when you are first eligible, and you do not have to provide proof of good health.¹
- Adjust your coverage as your needs change (e.g., you get married or have a baby), since you are covered for a year at a time.¹
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No AD&D benefit will be paid for a loss that is due to or results from:*

- suicide while sane or insane
- intentionally self-inflicted injuries
- bodily or mental infirmity or disease of any kind, or infection unless due to an accidental cut or wound
- committing or attempting to commit an assault, felony, or other criminal act
- active participation in a war (declared or undeclared) or active duty in any armed service during a time of war
- active participation in a riot, rebellion, or insurrection
- injury sustained from any aviation activities, other than riding as a fare-paying passenger
- the employee's voluntary use of any controlled substance as defined in Title II of the Comprehensive Drug Abuse Prevention and Control Act of 1970, as now or hereafter amended, unless administered on the advice of a Physician
- the employee's operation of any motorized vehicle while intoxicated.
 - Intoxicated means the minimum blood alcohol level required to be considered operating an automobile under the influence of alcohol in the jurisdiction where the accident occurred.
 - For the purposes of this exclusion, "Motorized Vehicle" includes, but is not limited to, automobiles, motorcycles, boats, and snowmobiles.

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1. If the amount you apply for exceeds the Guaranteed Issue amount or if you decline coverage during your initial eligibility period and want to elect coverage or increase coverage at a later date, you are required to complete and submit an Evidence of Insurability application, which must be approved by Sun Life prior to coverage taking effect.
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Evidence of Insurability

Frequently asked questions

What is Evidence of Insurability?

Your group insurance policy may require Evidence of Insurability (EOI) for you and your dependents. Evidence of Insurability is a statement, or proof, of an employee's or dependent's medical history. We use it to determine whether or not we will provide the benefit you are requesting.

What is the EOI application?

The EOI application is an application on which you and/or your dependent(s) answer "yes" or "no" to questions concerning certain medical conditions. If you answer "yes" to any question(s), you are required to provide specific details of the condition, such as pertinent dates, treatments, and names of physicians. In some cases, a paramedical examination may also be required.

When do I need to submit an EOI application?

You may need to submit an EOI application, if you:

- apply for a coverage amount above the Guaranteed Issue amount,
- declined coverage for yourself or your dependent(s) within the initial eligibility period and are now applying for coverage, or
- enroll yourself or your dependent(s) and then subsequently elect to increase coverage.

Please refer to your benefit highlights page for complete information specific to your plan.

What is the process for submitting an EOI application?

To be considered for coverage, you must complete an EOI application, either online or on paper.

Submit your medical information online

It's the quick, easy, and smart way to submit EOI. And it's completely secure and confidential.

1. Have the following information ready:
 - Your group policy number, location, and the amount of coverage for yourself and any dependents who require EOI, and
 - Height, weight, and recent medical history for you and any dependents.
2. Go to www.mysunlifebenefits.com
 - Click on *Apply for Evidence of Insurability Online*, follow the instructions, review your answers, and sign your application electronically before you submit. You will receive an official acknowledgment that Sun Life Financial has received your EOI application. If you are approved, you may receive an approval e-mail that same day.

Submit your medical information on paper

If you need a paper application, you can access a printable version at www.mysunlifebenefits.com.

- Click Download Paper Forms
- Click Employee Benefits
- Select Evidence of Insurability
- Select the EOI application for the state in which your company is headquartered

After Sun Life receives and processes your EOI application, you will receive either a final decision or pending notification. If your application is pending, you may be contacted to schedule a medical exam (at Sun Life's expense). Coverage subject to EOI will not go into effect until Sun Life approves your application in writing.

Evidence of Insurability

How long does the approval process take?

As soon as we have received a completed online EOI application and as soon as the coverage amount is certified by your employer, often we can issue an approval within minutes and notify you or your employer via our online system or e-mail. For paper applications and applications that require review by a member of our medical underwriting team, the process usually takes five to seven business days. This time range is contingent on you returning a complete EOI application and our ability to obtain the necessary health information.

How will I be notified if I am approved?

If you submit your EOI application online and are approved right away, you will receive an e-mail. If you submit your EOI application via fax or mail, a letter will be sent to your home notifying you of the approval.

How will I be notified if I am denied?

If you are denied the requested coverage, a letter is sent to your home. This letter outlines why you were denied and gives you instructions on how you can appeal the decision.

When does my coverage take effect?

Coverage is effective on the later of the date Sun Life approves your application in writing or the date your coverage is effective under your employer's group insurance policy, provided that you or your dependent(s) are eligible under the group policy.

About privacy and security

In accordance with Sun Life Financial's strict privacy practices, your answers to the Health History portion of the EOI application are completely confidential. Sun Life never shows them to your employer. Also, we do not share your e-mail address or other personal information with any third parties except as permitted or required by law. The website includes state-of-the-art security; any information entered is encrypted and transmitted using Secure Sockets Layer (SSL) technology.

These instructions on how to submit an Evidence of Insurability form only apply to life and disability policies.

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Rate Sheet

Employee - Coverage and **monthly** cost for Employee Optional Life and AD&D.

Rates are effective as of February 01, 2017.

The chart below shows possible coverage amounts and corresponding costs per month.

Find your age bracket (as of the effective date of coverage) to determine the associated cost for the coverage amount you choose.

Age and Cost											
Coverage Amounts	<25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70+
\$10,000	0.81	0.91	1.12	1.22	1.32	1.83	2.65	4.69	7.04	13.28	21.00
\$20,000	1.62	1.82	2.24	2.44	2.64	3.66	5.30	9.38	14.08	26.56	42.00
\$30,000	2.43	2.73	3.36	3.66	3.96	5.49	7.95	14.07	21.12	39.84	63.00
\$40,000	3.24	3.64	4.48	4.88	5.28	7.32	10.60	18.76	28.16	53.12	84.00
\$50,000	4.05	4.55	5.60	6.10	6.60	9.15	13.25	23.45	35.20	66.40	105.00
\$60,000	4.86	5.46	6.72	7.32	7.92	10.98	15.90	28.14	42.24	79.68	126.00
\$70,000	5.67	6.37	7.84	8.54	9.24	12.81	18.55	32.83	49.28	92.96	147.00
\$80,000	6.48	7.28	8.96	9.76	10.56	14.64	21.20	37.52	56.32	106.24	168.00
\$90,000	7.29	8.19	10.08	10.98	11.88	16.47	23.85	42.21	63.36	119.52	189.00
\$100,000	8.10	9.10	11.20	12.20	13.20	18.30	26.50	46.90	70.40	132.80	210.00
\$110,000	8.91	10.01	12.32	13.42	14.52	20.13	29.15	51.59	77.44	146.08	231.00
\$120,000	9.72	10.92	13.44	14.64	15.84	21.96	31.80	56.28	84.48	159.36	252.00
\$130,000	10.53	11.83	14.56	15.86	17.16	23.79	34.45	60.97	91.52	172.64	273.00
\$140,000	11.34	12.74	15.68	17.08	18.48	25.62	37.10	65.66	98.56	185.92	294.00
\$150,000	12.15	13.65	16.80	18.30	19.80	27.45	39.75	70.35	105.60	199.20	315.00
\$160,000	12.96	14.56	17.92	19.52	21.12	29.28	42.40	75.04	112.64	212.48	336.00
\$170,000	13.77	15.47	19.04	20.74	22.44	31.11	45.05	79.73	119.68	225.76	357.00
\$180,000	14.58	16.38	20.16	21.96	23.76	32.94	47.70	84.42	126.72	239.04	378.00
\$190,000	15.39	17.29	21.28	23.18	25.08	34.77	50.35	89.11	133.76	252.32	399.00
\$200,000	16.20	18.20	22.40	24.40	26.40	36.60	53.00	93.80	140.80	265.60	420.00

Rate Sheet

Spouse - Coverage and **monthly** cost for Spouse Optional Life.

Rates are effective as of February 01, 2017.

Spouse rates are based on Employee's age.

The chart below shows possible coverage amounts and corresponding costs per month.

Find your age bracket (as of the effective date of coverage) to determine the associated cost for the coverage amount you choose.

Age and Cost										
Coverage Amounts	<25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69
\$10,000	0.51	0.61	0.82	0.92	1.02	1.53	2.35	4.39	6.74	12.98
\$20,000	1.02	1.22	1.64	1.84	2.04	3.06	4.70	8.78	13.48	25.96
\$30,000	1.53	1.83	2.46	2.76	3.06	4.59	7.05	13.17	20.22	38.94
\$40,000	2.04	2.44	3.28	3.68	4.08	6.12	9.40	17.56	26.96	51.92
\$50,000	2.55	3.05	4.10	4.60	5.10	7.65	11.75	21.95	33.70	64.90
\$60,000	3.06	3.66	4.92	5.52	6.12	9.18	14.10	26.34	40.44	77.88
\$70,000	3.57	4.27	5.74	6.44	7.14	10.71	16.45	30.73	47.18	90.86
\$80,000	4.08	4.88	6.56	7.36	8.16	12.24	18.80	35.12	53.92	103.84
\$90,000	4.59	5.49	7.38	8.28	9.18	13.77	21.15	39.51	60.66	116.82
\$100,000	5.10	6.10	8.20	9.20	10.20	15.30	23.50	43.90	67.40	129.80
\$110,000	5.61	6.71	9.02	10.12	11.22	16.83	25.85	48.29	74.14	142.78
\$120,000	6.12	7.32	9.84	11.04	12.24	18.36	28.20	52.68	80.88	155.76
\$130,000	6.63	7.93	10.66	11.96	13.26	19.89	30.55	57.07	87.62	168.74
\$140,000	7.14	8.54	11.48	12.88	14.28	21.42	32.90	61.46	94.36	181.72
\$150,000	7.65	9.15	12.30	13.80	15.30	22.95	35.25	65.85	101.10	194.70

Rate Sheet

Child - Coverage and **monthly** cost for Child Optional Life.

Rates are effective as of February 01, 2017.

The chart below shows possible coverage amounts and corresponding costs per month.

Coverage Amounts	Cost per Month
\$1,000	0.20
\$2,000	0.40
\$3,000	0.60
\$4,000	0.80
\$5,000	1.00
\$6,000	1.20
\$7,000	1.40
\$8,000	1.60
\$9,000	1.80
\$10,000	2.00

Rate Sheet

Employee - Coverage and **monthly** cost for Employee Voluntary Life and AD&D.

Rates are effective as of February 01, 2017.

The chart below shows possible coverage amounts and corresponding costs per month.

Find your age bracket (as of the effective date of coverage) to determine the associated cost for the coverage amount you choose.

Age and Cost											
Coverage Amounts	<25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70+
\$10,000	0.81	0.91	1.12	1.22	1.32	1.83	2.65	4.69	7.04	13.28	21.00
\$20,000	1.62	1.82	2.24	2.44	2.64	3.66	5.30	9.38	14.08	26.56	42.00
\$30,000	2.43	2.73	3.36	3.66	3.96	5.49	7.95	14.07	21.12	39.84	63.00
\$40,000	3.24	3.64	4.48	4.88	5.28	7.32	10.60	18.76	28.16	53.12	84.00
\$50,000	4.05	4.55	5.60	6.10	6.60	9.15	13.25	23.45	35.20	66.40	105.00
\$60,000	4.86	5.46	6.72	7.32	7.92	10.98	15.90	28.14	42.24	79.68	126.00
\$70,000	5.67	6.37	7.84	8.54	9.24	12.81	18.55	32.83	49.28	92.96	147.00
\$80,000	6.48	7.28	8.96	9.76	10.56	14.64	21.20	37.52	56.32	106.24	168.00
\$90,000	7.29	8.19	10.08	10.98	11.88	16.47	23.85	42.21	63.36	119.52	189.00
\$100,000	8.10	9.10	11.20	12.20	13.20	18.30	26.50	46.90	70.40	132.80	210.00
\$110,000	8.91	10.01	12.32	13.42	14.52	20.13	29.15	51.59	77.44	146.08	231.00
\$120,000	9.72	10.92	13.44	14.64	15.84	21.96	31.80	56.28	84.48	159.36	252.00
\$130,000	10.53	11.83	14.56	15.86	17.16	23.79	34.45	60.97	91.52	172.64	273.00
\$140,000	11.34	12.74	15.68	17.08	18.48	25.62	37.10	65.66	98.56	185.92	294.00
\$150,000	12.15	13.65	16.80	18.30	19.80	27.45	39.75	70.35	105.60	199.20	315.00
\$160,000	12.96	14.56	17.92	19.52	21.12	29.28	42.40	75.04	112.64	212.48	336.00
\$170,000	13.77	15.47	19.04	20.74	22.44	31.11	45.05	79.73	119.68	225.76	357.00
\$180,000	14.58	16.38	20.16	21.96	23.76	32.94	47.70	84.42	126.72	239.04	378.00
\$190,000	15.39	17.29	21.28	23.18	25.08	34.77	50.35	89.11	133.76	252.32	399.00
\$200,000	16.20	18.20	22.40	24.40	26.40	36.60	53.00	93.80	140.80	265.60	420.00

Rate Sheet

Spouse - Coverage and **monthly** cost for Spouse Voluntary Life and AD&D.

Rates are effective as of February 01, 2017.

Spouse rates are based on Employee's age.

The chart below shows possible coverage amounts and corresponding costs per month.

Find your age bracket (as of the effective date of coverage) to determine the associated cost for the coverage amount you choose.

Age and Cost										
Coverage Amounts	<25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69
\$10,000	0.51	0.61	0.82	0.92	1.02	1.53	2.35	4.39	6.74	12.98
\$20,000	1.02	1.22	1.64	1.84	2.04	3.06	4.70	8.78	13.48	25.96
\$30,000	1.53	1.83	2.46	2.76	3.06	4.59	7.05	13.17	20.22	38.94
\$40,000	2.04	2.44	3.28	3.68	4.08	6.12	9.40	17.56	26.96	51.92
\$50,000	2.55	3.05	4.10	4.60	5.10	7.65	11.75	21.95	33.70	64.90
\$60,000	3.06	3.66	4.92	5.52	6.12	9.18	14.10	26.34	40.44	77.88
\$70,000	3.57	4.27	5.74	6.44	7.14	10.71	16.45	30.73	47.18	90.86
\$80,000	4.08	4.88	6.56	7.36	8.16	12.24	18.80	35.12	53.92	103.84
\$90,000	4.59	5.49	7.38	8.28	9.18	13.77	21.15	39.51	60.66	116.82
\$100,000	5.10	6.10	8.20	9.20	10.20	15.30	23.50	43.90	67.40	129.80
\$110,000	5.61	6.71	9.02	10.12	11.22	16.83	25.85	48.29	74.14	142.78
\$120,000	6.12	7.32	9.84	11.04	12.24	18.36	28.20	52.68	80.88	155.76
\$130,000	6.63	7.93	10.66	11.96	13.26	19.89	30.55	57.07	87.62	168.74
\$140,000	7.14	8.54	11.48	12.88	14.28	21.42	32.90	61.46	94.36	181.72
\$150,000	7.65	9.15	12.30	13.80	15.30	22.95	35.25	65.85	101.10	194.70

Rate Sheet

Child - Coverage and **monthly** cost for Child Voluntary Life and AD&D.

Rates are effective as of February 01, 2017.

The chart below shows possible coverage amounts and corresponding costs per month.

Coverage Amounts	Cost per Month
\$1,000	0.20
\$2,000	0.40
\$3,000	0.60
\$4,000	0.80
\$5,000	1.00
\$6,000	1.20
\$7,000	1.40
\$8,000	1.60
\$9,000	1.80
\$10,000	2.00

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