

Agility Fuel Systems

VOLUNTARY TERM LIFE/AD&D

Estimated Employee Bi-Weekly Premium Amounts
End of Rate Guarantee Period: 03/31/2019

Benefit Amount	29 & Under	30-34	35-39	40-44	45-49	50-54	55-59	60-64
\$10,000	\$0.66	\$0.70	\$0.84	\$1.21	\$1.95	\$3.10	\$4.81	\$7.40
\$20,000	\$1.32	\$1.41	\$1.68	\$2.42	\$3.90	\$6.21	\$9.62	\$14.79
\$30,000	\$1.98	\$2.12	\$2.54	\$3.64	\$5.86	\$9.32	\$14.44	\$22.20
\$40,000	\$2.64	\$2.83	\$3.38	\$4.86	\$7.81	\$12.43	\$19.26	\$29.59
\$50,000	\$3.30	\$3.53	\$4.22	\$6.07	\$9.76	\$15.53	\$24.07	\$36.99
\$60,000	\$3.96	\$4.23	\$5.06	\$7.28	\$11.71	\$18.63	\$28.88	\$44.39
\$70,000	\$4.62	\$4.95	\$5.92	\$8.50	\$13.67	\$21.75	\$33.70	\$51.79
\$80,000	\$5.28	\$5.65	\$6.76	\$9.71	\$15.62	\$24.85	\$38.51	\$59.19
\$90,000	\$5.94	\$6.35	\$7.60	\$10.92	\$17.57	\$27.95	\$43.32	\$66.59
\$100,000	\$6.60	\$7.06	\$8.44	\$12.14	\$19.52	\$31.06	\$48.14	\$73.98
\$110,000	\$7.26	\$7.77	\$9.30	\$13.36	\$21.48	\$34.17	\$52.96	\$81.39
\$120,000	\$7.92	\$8.48	\$10.14	\$14.57	\$23.43	\$37.28	\$57.77	\$88.78
\$130,000	\$8.58	\$9.18	\$10.98	\$15.78	\$25.38	\$40.38	\$62.58	\$96.18
\$140,000	\$9.24	\$9.88	\$11.82	\$16.99	\$27.33	\$43.48	\$67.39	\$103.58
\$150,000	\$9.90	\$10.59	\$12.66	\$18.20	\$29.28	\$46.59	\$72.20	\$110.97
\$160,000	\$10.56	\$11.30	\$13.52	\$19.42	\$31.24	\$49.70	\$77.02	\$118.38
\$170,000	\$11.22	\$12.01	\$14.36	\$20.64	\$33.19	\$52.81	\$81.84	\$125.77
\$180,000	\$11.88	\$12.71	\$15.20	\$21.85	\$35.14	\$55.91	\$86.65	\$133.17
\$190,000	\$12.54	\$13.41	\$16.04	\$23.06	\$37.09	\$59.01	\$91.46	\$140.57
\$200,000	\$13.20	\$14.13	\$16.90	\$24.28	\$39.05	\$62.13	\$96.28	\$147.97
\$210,000	\$13.86	\$14.83	\$17.74	\$25.49	\$41.00	\$65.23	\$101.09	\$155.37
\$220,000	\$14.52	\$15.53	\$18.58	\$26.70	\$42.95	\$68.33	\$105.90	\$162.77
\$230,000	\$15.18	\$16.24	\$19.42	\$27.92	\$44.90	\$71.44	\$110.72	\$170.16
\$240,000	\$15.84	\$16.95	\$20.28	\$29.14	\$46.86	\$74.55	\$115.54	\$177.57
\$250,000	\$16.50	\$17.66	\$21.12	\$30.35	\$48.81	\$77.66	\$120.35	\$184.96

Reduced Benefit	65-69
\$6,500	\$8.56
\$13,000	\$17.12
\$19,500	\$25.68
\$26,000	\$34.24
\$32,500	\$42.80
\$39,000	\$51.35
\$45,500	\$59.91
\$52,000	\$68.47
\$58,500	\$77.03
\$65,000	\$85.59
\$71,500	\$94.15
\$78,000	\$102.71
\$84,500	\$111.27
\$91,000	\$119.83
\$97,500	\$128.38
\$104,000	\$136.94
\$110,500	\$145.50
\$117,000	\$154.06
\$123,500	\$162.62
\$130,000	\$171.18
\$136,500	\$179.74
\$143,000	\$188.30
\$149,500	\$196.86
\$156,000	\$205.42
\$162,500	\$213.97

Reduced Benefit	70 & Over
\$4,500	\$10.56
\$9,000	\$21.12
\$13,500	\$31.68
\$18,000	\$42.22
\$22,500	\$52.78
\$27,000	\$63.34
\$31,500	\$73.90
\$36,000	\$84.46
\$40,500	\$95.02
\$45,000	\$105.57
\$49,500	\$116.12
\$54,000	\$126.68
\$58,500	\$137.24
\$63,000	\$147.80
\$67,500	\$158.36
\$72,000	\$168.92
\$76,500	\$179.47
\$81,000	\$190.02
\$85,500	\$200.58
\$90,000	\$211.14
\$94,500	\$221.70
\$99,000	\$232.26
\$103,500	\$242.81
\$108,000	\$253.36
\$112,500	\$263.92

NOTE: Proof of good health/evidence of insurability is required to apply for benefit amounts greater than those highlighted above.

If your age changes to a different rate band during the guarantee period, your monthly premium will change to reflect the new rate band effective on the next policy anniversary date.



WE'LL GIVE YOU AN EDGE®

Agility Fuel Systems

VOLUNTARY TERM LIFE/AD&D

Estimated Spouse Bi-Weekly Premium Amounts

End of Rate Guarantee Period: 03/31/2019

Benefit Amount	29 & Under	30-34	35-39	40-44	45-49	50-54	55-59	60-64
\$5,000	\$0.33	\$0.36	\$0.43	\$0.61	\$0.98	\$1.56	\$2.41	\$3.70
\$10,000	\$0.66	\$0.70	\$0.84	\$1.21	\$1.95	\$3.10	\$4.81	\$7.40
\$15,000	\$0.99	\$1.06	\$1.27	\$1.82	\$2.93	\$4.66	\$7.22	\$11.10
\$20,000	\$1.32	\$1.41	\$1.68	\$2.42	\$3.90	\$6.21	\$9.62	\$14.79
\$25,000	\$1.65	\$1.76	\$2.11	\$3.03	\$4.88	\$7.76	\$12.03	\$18.50
\$30,000	\$1.98	\$2.12	\$2.54	\$3.64	\$5.86	\$9.32	\$14.44	\$22.20
\$35,000	\$2.31	\$2.47	\$2.95	\$4.25	\$6.83	\$10.87	\$16.85	\$25.89
\$40,000	\$2.64	\$2.83	\$3.38	\$4.86	\$7.81	\$12.43	\$19.26	\$29.59
\$45,000	\$2.97	\$3.18	\$3.81	\$5.47	\$8.79	\$13.98	\$21.67	\$33.30
\$50,000	\$3.30	\$3.53	\$4.22	\$6.07	\$9.76	\$15.53	\$24.07	\$36.99

Reduced Benefit	65-69
\$3,250	\$4.28
\$6,500	\$8.56
\$9,750	\$12.84
\$13,000	\$17.12
\$16,250	\$21.40
\$19,500	\$25.68
\$22,750	\$29.96
\$26,000	\$34.24
\$29,250	\$38.52
\$32,500	\$42.80

Reduced Benefit	70 & Over
\$2,250	\$5.27
\$4,500	\$10.56
\$6,750	\$15.83
\$9,000	\$21.12
\$11,250	\$26.39
\$13,500	\$31.68
\$15,750	\$36.95
\$18,000	\$42.22
\$20,250	\$47.51
\$22,500	\$52.78

NOTE: Proof of good health/evidence of insurability is required to apply for benefit amounts greater than those highlighted above.

Child Deduction Schedule

\$20,000 \$0.92

If your age changes to a different rate band during the guarantee period, your monthly premium will change to reflect the new rate band effective on the next policy anniversary date.



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