

FRANKLIN COUNTY BOARD OF COMMISSIONERS - #F015243

Eligibility

You are eligible to enroll if you work the minimum number of hours per week by your employer, and you have satisfied any waiting period.

Voluntary Life Insurance

Employee Benefit: **\$10,000 to \$500,000, in increments of \$10,000**

Spouse Benefit: **\$10,000 to \$150,000, in increments of \$10,000**

Guarantee Issue

Employee	\$100,000
Spouse	\$50,000

Child Coverage

Live birth to age 26: **\$5,000 or \$10,000**

EMPLOYEE & SPOUSE	
Voluntary Life	
Monthly rates per \$1,000	
Age	Rates
Under 20	\$0.050
20-24	\$0.050
25-29	\$0.060
30-34	\$0.067
35-39	\$0.072
40-44	\$0.100
45-49	\$0.150
50-54	\$0.230
55-59	\$0.430
60-64	\$0.660
65-69	\$1.034
70+	\$2.060

Dependent Life (Children)	
Monthly Premium per Family	
	Life
\$5,000	\$0.65
\$10,000	\$1.30

Voluntary Life Insurance

Monthly Premium Cost (Based on 12 payroll deductions per year)

Benefit Amount	ATTAINED AGE												
	<20	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70+	
\$10,000	\$ 0.50	\$ 0.50	\$ 0.60	\$ 0.67	\$ 0.72	\$ 1.00	\$ 1.50	\$ 2.30	\$ 4.30	\$ 6.60	\$ 10.34	\$ 20.60	
\$20,000	\$1.00	\$1.00	\$1.20	\$1.34	\$1.44	\$2.00	\$3.00	\$4.60	\$8.60	\$13.20	\$20.68	\$41.20	
\$30,000	\$1.50	\$1.50	\$1.80	\$2.01	\$2.16	\$3.00	\$4.50	\$6.90	\$12.90	\$19.80	\$31.02	\$61.80	
\$40,000	\$2.00	\$2.00	\$2.40	\$2.68	\$2.88	\$4.00	\$6.00	\$9.20	\$17.20	\$26.40	\$41.36	\$82.40	
\$50,000	\$2.50	\$2.50	\$3.00	\$3.35	\$3.60	\$5.00	\$7.50	\$11.50	\$21.50	\$33.00	\$51.70	\$103.00	
\$60,000	\$3.00	\$3.00	\$3.60	\$4.02	\$4.32	\$6.00	\$9.00	\$13.80	\$25.80	\$39.60	\$62.04	\$123.60	
\$70,000	\$3.50	\$3.50	\$4.20	\$4.69	\$5.04	\$7.00	\$10.50	\$16.10	\$30.10	\$46.20	\$72.38	\$144.20	
\$80,000	\$4.00	\$4.00	\$4.80	\$5.36	\$5.76	\$8.00	\$12.00	\$18.40	\$34.40	\$52.80	\$82.72	\$164.80	
\$90,000	\$4.50	\$4.50	\$5.40	\$6.03	\$6.48	\$9.00	\$13.50	\$20.70	\$38.70	\$59.40	\$93.06	\$185.40	
\$100,000	\$5.00	\$5.00	\$6.00	\$6.70	\$7.20	\$10.00	\$15.00	\$23.00	\$43.00	\$66.00	\$103.40	\$206.00	
\$110,000	\$5.50	\$5.50	\$6.60	\$7.37	\$7.92	\$11.00	\$16.50	\$25.30	\$47.30	\$72.60	\$113.74	\$226.60	
\$120,000	\$6.00	\$6.00	\$7.20	\$8.04	\$8.64	\$12.00	\$18.00	\$27.60	\$51.60	\$79.20	\$124.08	\$247.20	
\$130,000	\$6.50	\$6.50	\$7.80	\$8.71	\$9.36	\$13.00	\$19.50	\$29.90	\$55.90	\$85.80	\$134.42	\$267.80	
\$140,000	\$7.00	\$7.00	\$8.40	\$9.38	\$10.08	\$14.00	\$21.00	\$32.20	\$60.20	\$92.40	\$144.76	\$288.40	
\$150,000	\$7.50	\$7.50	\$9.00	\$10.05	\$10.80	\$15.00	\$22.50	\$34.50	\$64.50	\$99.00	\$155.10	\$309.00	
\$160,000	\$8.00	\$8.00	\$9.60	\$10.72	\$11.52	\$16.00	\$24.00	\$36.80	\$68.80	\$105.60	\$165.44	\$329.60	
\$170,000	\$8.50	\$8.50	\$10.20	\$11.39	\$12.24	\$17.00	\$25.50	\$39.10	\$73.10	\$112.20	\$175.78	\$350.20	
\$180,000	\$9.00	\$9.00	\$10.80	\$12.06	\$12.96	\$18.00	\$27.00	\$41.40	\$77.40	\$118.80	\$186.12	\$370.80	
\$190,000	\$9.50	\$9.50	\$11.40	\$12.73	\$13.68	\$19.00	\$28.50	\$43.70	\$81.70	\$125.40	\$196.46	\$391.40	
\$200,000	\$10.00	\$10.00	\$12.00	\$13.40	\$14.40	\$20.00	\$30.00	\$46.00	\$86.00	\$132.00	\$206.80	\$412.00	
\$250,000	\$12.50	\$12.50	\$15.00	\$16.75	\$18.00	\$25.00	\$37.50	\$57.50	\$107.50	\$165.00	\$258.50	\$515.00	
\$300,000	\$15.00	\$15.00	\$18.00	\$20.10	\$21.60	\$30.00	\$45.00	\$69.00	\$129.00	\$198.00	\$310.20	\$618.00	
\$350,000	\$17.50	\$17.50	\$21.00	\$23.45	\$25.20	\$35.00	\$52.50	\$80.50	\$150.50	\$231.00	\$361.90	\$721.00	
\$400,000	\$20.00	\$20.00	\$24.00	\$26.80	\$28.80	\$40.00	\$60.00	\$92.00	\$172.00	\$264.00	\$413.60	\$824.00	
\$450,000	\$22.50	\$22.50	\$27.00	\$30.15	\$32.40	\$45.00	\$67.50	\$103.50	\$193.50	\$297.00	\$465.30	\$927.00	
\$500,000	\$25.00	\$25.00	\$30.00	\$33.50	\$36.00	\$50.00	\$75.00	\$115.00	\$215.00	\$330.00	\$517.00	\$1,030.00	

Policy Provisions may vary by state. Refer to a certificate or enrollment brochure for details about coverage features and limitations.

For internal use only: Policy number FDL1-504-707

Vlife/sep-12

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