

Sample rates*

Aflac Monthly Pricing – A

Accident	L4	Cancer	L1	L2
Individual	\$25.09	Individual	\$24.50	\$40.36
Husband/Wife	\$35.88	Husband/Wife	\$43.99	\$72.60
Single Parent	\$43.03	Single Parent	\$25.41	\$41.27
2 Parent Family	\$56.16	2 Parent Family	\$44.90	\$73.51

⁻ Bldg Benefit, Disease rider, Dep. Care

"Paycheck Insurance" (Short Term Disability) Benefit Period 3 Months

- Elimination Period Accident/Sickness: 7/7 days

Annual Income	\$18,000	\$24,000	\$30,000	\$36,000	\$42,000
Monthly Benefit	\$900	\$1,200	\$1,500	\$1,800	\$2,100
Age					
18-49	\$24.57	\$32.76	\$40.95	\$49.14	\$57.33
50-64	\$25.74	\$34.32	\$42.90	\$51.48	\$61.06

- Elimination Period Accident/Sickness: 14/14 days

Annual Income	\$18,000	\$24,000	\$30,000	\$36,000	\$42,000
Monthly Benefit	\$900	\$1,200	\$1,500	\$1,800	\$2,100
Age					
18-49	\$15.21	\$20.28	\$25.35	\$30.42	\$35.49
50-64	\$16.38	\$21.84	\$27.30	\$32.76	\$38.32

Aflac Plus Rider – can be added to Accident or Short Term Disability \$5,000 lump sum benefit for any of 15 events including heart attack, stroke, type 1 diabetes

	<u>Individual</u>	<u>Family</u>		
18-29	\$ 3.12	\$ 7.67		
30-39	\$ 4.55	\$10.01		
40-49	\$ 7.93	\$15.21		
50-70	\$13.39	\$24.18		
Husband/Wife and Single Parent Rates on Request				

Quotes Available for Life, Additional Dental, Heart/Stroke, Maternity Help

Stan Poole (435) 467-7777 Lane Morgan (435) 668-2626

Aflac Monthly Pricing

Dental	Essentials	Level 1	Level 2
Individual	\$25.74	\$33.41	\$40.82
Husb/Wife	\$45.24	\$65.00	\$80.08
Single Parent	\$48.10	\$68.77	\$85.15
2 Parent Family	\$77.74	\$116.35	\$143.65

Critical Care Protection Policy

Option	1	One Parent		
_	<u>Individual</u>	<u>Family</u>	Husband/Wife	<u>Family</u>
18-35	\$11.70	\$12.87	\$18.07	\$20.28
36-45	\$18.85	\$19.63	\$30.94	\$33.54
46-55	\$25.35	\$26.13	\$43.68	\$46.67
56-70	\$32.89	\$33.80	\$60.32	\$63.96
-Building	Benefit Rider			

Vision Now

One Parent					
	<u>Individual</u>	<u>Family</u>	Husband/Wife	<u>Family</u>	
18-39	\$13.90	\$22.90	\$21.90	\$28.90	
40-49	\$18.90	\$26.40	\$31.90	\$37.30	
50-70	\$28.40	\$32.90	\$48.90	\$49.90	

Hospital Choice Policy

		One Parent		
	<u>Individual</u>	<u>Family</u>	Husband/Wife	<u>Family</u>
18-49	\$ 47.32	\$ 71.11	\$ 80.47	\$ 89.70
50-59	\$ 54.60	\$ 75.66	\$ 98.15	\$104.65
60-75	\$ 62.40	\$ 85.93	\$110.89	\$121.03
Ontion 1	\$500 Renefit Amount			

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