Dearborn Life Insurance Company

Shaker Heights City Schools

Eligibility

All Active Full-Time Employees working 20 or more hours per week

		Employee Supplemental Life			
Supplemental	Life and AD&D (AD&D is for Employee Only)	Monthly rates per \$1,000			
Employee Benefit:		Age	Rates		
	of \$300,000 of 5 times salary	Under 20	\$0.050		
Spouse Benefit:	\$5,000 to \$150,000 in \$5,000 increments.	20-24	\$0.050		
	(not to exceed 50% of the employee benefit)	25-29	\$0.040		
Note: Spouse may	not have coverage unless the employee has coverage.	30-34	\$0.040		
		35-39	\$0.060		
		40-44	\$0.090		
		45-49	\$0.140		
		50-54	\$0.250		
Guarantee Issue*		55-59	\$0.420		
Employee	\$50,000, not to exceed 3 times salary	60-64	\$0.580		
Spouse	\$25,000	65-69	\$1.020		
Assumes 27% partici	pation	70-74	\$2.110		
		75+	\$3.230		
		Supplemental AD&D Monthly rates per \$1,00			
<u>Child Coverage</u>		Employee	\$0.020		
Birth to 14 days:	\$0				
15 days to 6 month	s: \$5,000				
6 months to age 26	5,000 to \$10,000 in increments of \$5,000	Dependent	t Life (Children)		
-		Monthly Pre	mium per Family		
		Life			
		\$5,000	\$1.05		
		\$10,000	0 \$2.10		

Life and AD&D benefits reduce by 35% of the original amount at age 65 and further reduce by 50% of the original amount at age 70.

Supplemental Life and AD&D (AD&D is for Employee Only)

		ATTAINED AGE											
Benefit													
Amount	EE AD&D	<20	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74
\$10,000	\$0.10	\$0.25	\$0.25	\$0.20	\$0.20	\$0.30	\$0.45	\$0.70	\$1.25	\$2.10	\$2.90	\$5.10	\$10.55
\$20,000	\$0.20	\$0.50	\$0.50	\$0.40	\$0.40	\$0.60	\$0.90	\$1.40	\$2.50	\$4.20	\$5.80	\$10.20	\$21.10
\$30,000	\$0.30	\$0.75	\$0.75	\$0.60	\$0.60	\$0.90	\$1.35	\$2.10	\$3.75	\$6.30	\$8.70	\$15.30	\$31.65
\$40,000	\$0.40	\$1.00	\$1.00	\$0.80	\$0.80	\$1.20	\$1.80	\$2.80	\$5.00	\$8.40	\$11.60	\$20.40	\$42.20
\$50,000	\$0.50	\$1.25	\$1.25	\$1.00	\$1.00	\$1.50	\$2.25	\$3.50	\$6.25	\$10.50	\$14.50	\$25.50	\$52.75
\$60,000	\$0.60	\$1.50	\$1.50	\$1.20	\$1.20	\$1.80	\$2.70	\$4.20	\$7.50	\$12.60	\$17.40	\$30.60	\$63.30
\$70,000	\$0.70	\$1.75	\$1.75	\$1.40	\$1.40	\$2.10	\$3.15	\$4.90	\$8.75	\$14.70	\$20.30	\$35.70	\$73.85
\$80,000	\$0.80	\$2.00	\$2.00	\$1.60	\$1.60	\$2.40	\$3.60	\$5.60	\$10.00	\$16.80	\$23.20	\$40.80	\$84.40
\$90,000	\$0.90	\$2.25	\$2.25	\$1.80	\$1.80	\$2.70	\$4.05	\$6.30	\$11.25	\$18.90	\$26.10	\$45.90	\$94.95
\$100,000	\$1.00	\$2.50	\$2.50	\$2.00	\$2.00	\$3.00	\$4.50	\$7.00	\$12.50	\$21.00	\$29.00	\$51.00	\$105.50
\$110,000	\$1.10	\$2.75	\$2.75	\$2.20	\$2.20	\$3.30	\$4.95	\$7.70	\$13.75	\$23.10	\$31.90	\$56.10	\$116.05
\$120,000	\$1.20	\$3.00	\$3.00	\$2.40	\$2.40	\$3.60	\$5.40	\$8.40	\$15.00	\$25.20	\$34.80	\$61.20	\$126.60
\$130,000	\$1.30	\$3.25	\$3.25	\$2.60	\$2.60	\$3.90	\$5.85	\$9.10	\$16.25	\$27.30	\$37.70	\$66.30	\$137.15
\$140,000	\$1.40	\$3.50	\$3.50	\$2.80	\$2.80	\$4.20	\$6.30	\$9.80	\$17.50	\$29.40	\$40.60	\$71.40	\$147.70
\$150,000	\$1.50	\$3.75	\$3.75	\$3.00	\$3.00	\$4.50	\$6.75	\$10.50	\$18.75	\$31.50	\$43.50	\$76.50	\$158.25
\$200,000	\$2.00	\$5.00	\$5.00	\$4.00	\$4.00	\$6.00	\$9.00	\$14.00	\$25.00	\$42.00	\$58.00	\$102.00	\$211.00
\$250,000	\$2.50	\$6.25	\$6.25	\$5.00	\$5.00	\$7.50	\$11.25	\$17.50	\$31.25	\$52.50	\$72.50	\$127.50	\$263.75
\$300,000	\$3.00	\$7.50	\$7.50	\$6.00	\$6.00	\$9.00	\$13.50	\$21.00	\$37.50	\$63.00	\$87.00	\$153.00	\$316.50

Supplemental Life and AD&D PREMIUM RATE GRID

Dearborn Life Insurance Company

Shaker Heights City Schools

Eligibility

All Active Full-Time Employees working 20 or more hours per week

		S	Spouse		
		Supple	Supplemental Life		
Supplemental Life	Monthly rates per \$1,000				
Employee Benefit: \$10,	000 to \$300,000 in \$10,000 increments, is the lesser	Age	Rates		
of \$3	300,000 of 5 times salary	Under 20	\$0.050		
Spouse Benefit:	20-24	\$0.050			
(not to	25-29	\$0.040			
		30-34	\$0.040		
Note: Spouse may not hav	35-39	\$0.060			
Spouse's rate is bas	40-44	\$0.090			
		45-49	\$0.140		
		50-54	\$0.250		
Guarantee Issue*	55-59	\$0.420			
Employee	\$50,000, not to exceed 3 times salary	60-64	\$0.580		
Spouse	\$25,000	65-69	\$1.020		
*Assumes 27% participation		70-74	\$2.110		
		75+	\$3.230		
Child Coverage					
Birth to 14 days:	\$0				
15 days to 6 months:	\$5,000				
6 months to age 26:	\$5,000 to \$10,000 in increments of \$5,000	Dependent Life (Children) Monthly Premium per Family			
		Iviontniy Pre			
		¢5 000	Life ¢1.05		
		\$5,000	• • •		
		\$10,000	0 \$2.10		

Life and AD&D benefits reduce by 35% of the original amount at age 65 and further reduce by 50% of the original amount at age 70.

Supplemental Life and AD&D (AD&D is for Employee Only)

ATTAINED AGE												
Benefit												
Amount	<20	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74
\$5,000	\$0.13	\$0.13	\$0.10	\$0.10	\$0.15	\$0.23	\$0.35	\$0.63	\$1.05	\$1.45	\$2.55	\$5.28
\$10,000	\$0.25	\$0.25	\$0.20	\$0.20	\$0.30	\$0.45	\$0.70	\$1.25	\$2.10	\$2.90	\$5.10	\$10.55
\$15,000	\$0.38	\$0.38	\$0.30	\$0.30	\$0.45	\$0.68	\$1.05	\$1.88	\$3.15	\$4.35	\$7.65	\$15.83
\$20,000	\$0.50	\$0.50	\$0.40	\$0.40	\$0.60	\$0.90	\$1.40	\$2.50	\$4.20	\$5.80	\$10.20	\$21.10
\$25,000	\$0.63	\$0.63	\$0.50	\$0.50	\$0.75	\$1.13	\$1.75	\$3.13	\$5.25	\$7.25	\$12.75	\$26.38
\$30,000	\$0.75	\$0.75	\$0.60	\$0.60	\$0.90	\$1.35	\$2.10	\$3.75	\$6.30	\$8.70	\$15.30	\$31.65
\$35,000	\$0.88	\$0.88	\$0.70	\$0.70	\$1.05	\$1.58	\$2.45	\$4.38	\$7.35	\$10.15	\$17.85	\$36.93
\$40,000	\$1.00	\$1.00	\$0.80	\$0.80	\$1.20	\$1.80	\$2.80	\$5.00	\$8.40	\$11.60	\$20.40	\$42.20
\$45,000	\$1.13	\$1.13	\$0.90	\$0.90	\$1.35	\$2.03	\$3.15	\$5.63	\$9.45	\$13.05	\$22.95	\$47.48
\$50,000	\$1.25	\$1.25	\$1.00	\$1.00	\$1.50	\$2.25	\$3.50	\$6.25	\$10.50	\$14.50	\$25.50	\$52.75
\$55,000	\$1.38	\$1.38	\$1.10	\$1.10	\$1.65	\$2.48	\$3.85	\$6.88	\$11.55	\$15.95	\$28.05	\$58.03
\$60,000	\$1.50	\$1.50	\$1.20	\$1.20	\$1.80	\$2.70	\$4.20	\$7.50	\$12.60	\$17.40	\$30.60	\$63.30
\$70,000	\$1.75	\$1.75	\$1.40	\$1.40	\$2.10	\$3.15	\$4.90	\$8.75	\$14.70	\$20.30	\$35.70	\$73.85
\$80,000	\$2.00	\$2.00	\$1.60	\$1.60	\$2.40	\$3.60	\$5.60	\$10.00	\$16.80	\$23.20	\$40.80	\$84.40
\$90,000	\$2.25	\$2.25	\$1.80	\$1.80	\$2.70	\$4.05	\$6.30	\$11.25	\$18.90	\$26.10	\$45.90	\$94.95
\$100,000	\$2.50	\$2.50	\$2.00	\$2.00	\$3.00	\$4.50	\$7.00	\$12.50	\$21.00	\$29.00	\$51.00	\$105.5
\$125,000	\$3.13	\$3.13	\$2.50	\$2.50	\$3.75	\$5.63	\$8.75	\$15.63	\$26.25	\$36.25	\$63.75	\$131.8
\$150,000	\$3.75	\$3.75	\$3.00	\$3.00	\$4.50	\$6.75	\$10.50	\$18.75	\$31.50	\$43.50	\$76.50	\$158.2

Insurance products issued by Dearborn Life Insurance Company, 701 E. 22nd St. Suite 300, Lombard, IL 60148. Policy Provisions may vary by state. Refer to a certificate or enrollment brochure for details about coverage features and limitations.