

**GROUP POLICY**  
**Lake County**  
 Group Benefit Plan: 0064325-4

**PREMIUM RATE NOTIFICATION**

The premium rates contained in the Group Policy are amended as outlined below.

<b>MODE OF PAYMENT</b>		<b>NEW PREMIUM RATES EFFECTIVE</b>	
Monthly		01/01/2013 *	
<b>COVERAGE</b>	<b>CURRENT</b>	<b>NEW</b>	
	<b>PREMIUM RATES</b>	<b>PREMIUM RATES</b>	
<b>Life Basic Employee, per \$1,000</b>	\$ 0.107	\$ 0.107	
<b>Accidental Death &amp; Dismemberment Basic Employee, per \$1,000</b>	0.02	0.02	
<b>Life Supplemental Employee, per \$1,000</b>			
Under 25	0.05	0.05	
25 - 29	0.06	0.06	
30 - 34	0.08	0.08	
35 - 39	0.09	0.09	
40 - 44	0.122	0.122	
45 - 49	0.186	0.186	
50 - 54	0.292	0.292	
55 - 59	0.486	0.486	
60 - 64	0.745	0.745	
65 - 69	1.337	1.337	
70 - 74	2.06	2.06	
75 +	2.06	2.06	
<b>Life Supplemental Dependent Spouse, per \$1,000</b>			
Under 25	0.05	0.05	
25 - 29	0.06	0.06	
30 - 34	0.08	0.08	
35 - 39	0.09	0.09	
40 - 44	0.122	0.122	
45 - 49	0.186	0.186	
50 - 54	0.292	0.292	
55 - 59	0.486	0.486	
60 - 64	0.745	0.745	
65 - 69	1.337	1.337	
70 - 74	2.06	2.06	
75 +	2.06	2.06	
<b>Life Supplemental Dependent Children, per \$2,000</b>	0.295	0.295	

\* Premium Rate Notification due to policy renewal.  
 All Premium Rates are Guaranteed from 01/01/2012 to 01/01/2015.