

**CREDIT DISABILITY INSURANCE
SINGLE PREMIUM RATES PER \$100 OF INITIAL
INSURED INDEBTEDNESS
Rates Effective January 1, 2015**

Benefits Payable After:

Original number of equal monthly <u>installments</u>	<u>the 14th day of disability</u>		<u>the 30th day of disability</u>		Original number of equal monthly <u>installments</u>	<u>the 14th day of disability</u>		<u>the 30th day of disability</u>	
	<u>Retroactive to first day</u>	<u>Non- retroactive</u>	<u>Retroactive to first day</u>	<u>Non- retroactive</u>		<u>Retroactive to first day</u>	<u>Non- retroactive</u>	<u>Retroactive to first day</u>	<u>Non- retroactive</u>
6	1.07	0.88	0.68	0.41	36	1.95	1.86	1.32	1.14
7	1.11	1.00	0.75	0.47	37	1.97	1.87	1.32	1.15
8	1.17	1.06	0.80	0.53	38	1.98	1.90	1.32	1.16
9	1.22	1.10	0.85	0.57	39	2.00	1.91	1.33	1.17
10	1.27	1.15	0.90	0.62	40	2.02	1.93	1.34	1.18
11	1.32	1.20	0.93	0.66	41	2.04	1.96	1.35	1.19
12	1.35	1.24	0.96	0.70	42	2.05	1.97	1.36	1.20
13	1.40	1.28	0.98	0.73	43	2.06	1.99	1.37	1.21
14	1.43	1.32	1.00	0.77	44	2.07	2.00	1.38	1.22
15	1.46	1.35	1.02	0.80	45	2.10	2.01	1.39	1.23
16	1.50	1.39	1.05	0.83	46	2.13	2.04	1.40	1.24
17	1.53	1.43	1.07	0.86	47	2.14	2.05	1.41	1.24
18	1.55	1.44	1.08	0.89	48	2.14	2.07	1.42	1.25
19	1.58	1.47	1.08	0.91	49	2.16	2.09	1.43	1.27
20	1.60	1.50	1.11	0.94	50	2.18	2.10	1.44	1.27
21	1.63	1.52	1.12	0.96	51	2.20	2.12	1.45	1.28
22	1.66	1.55	1.13	0.97	52	2.22	2.14	1.45	1.29
23	1.68	1.58	1.15	0.98	53	2.23	2.15	1.46	1.30
24	1.70	1.60	1.16	1.00	54	2.25	2.17	1.47	1.31
25	1.73	1.62	1.18	1.01	55	2.26	2.18	1.47	1.32
26	1.74	1.64	1.20	1.02	56	2.28	2.19	1.49	1.32
27	1.77	1.66	1.20	1.04	57	2.29	2.21	1.49	1.33
28	1.80	1.69	1.22	1.04	58	2.31	2.23	1.50	1.33
29	1.82	1.72	1.23	1.06	59	2.32	2.24	1.51	1.35
30	1.83	1.74	1.24	1.08	60	2.33	2.25	1.52	1.35
31	1.86	1.76	1.25	1.09	61	2.36	2.27	1.53	1.36
32	1.88	1.79	1.27	1.10	62	2.38	2.28	1.54	1.37
33	1.90	1.80	1.28	1.10	63	2.39	2.29	1.55	1.38
34	1.91	1.82	1.29	1.12	64	2.40	2.31	1.56	1.38
35	1.93	1.84	1.30	1.12	65	2.40	2.33	1.56	1.39

CREDIT DISABILITY INSURANCE (continued)

Benefits Payable After:

Original number of equal monthly installments	the 14th day of disability		the 30th day of disability		Original number of equal monthly installments	the 14th day of disability		the 30th day of disability	
	Retroactive to first day	Non- retroactive	Retroactive to first day	Non- retroactive		Retroactive to first day	Non- retroactive	Retroactive to first day	Non- retroactive
66	2.42	2.35	1.56	1.40	94	2.77	2.70	1.76	1.59
67	2.44	2.36	1.57	1.41	95	2.79	2.71	1.76	1.60
68	2.46	2.38	1.58	1.41	96	2.79	2.73	1.77	1.60
69	2.47	2.38	1.58	1.42	97	2.80	2.74	1.78	1.61
70	2.47	2.39	1.59	1.44	98	2.82	2.74	1.78	1.61
71	2.49	2.41	1.60	1.44	99	2.83	2.76	1.79	1.62
72	2.50	2.42	1.61	1.44	100	2.84	2.76	1.79	1.63
73	2.51	2.44	1.62	1.45	101	2.84	2.78	1.80	1.64
74	2.53	2.45	1.62	1.46	102	2.85	2.79	1.80	1.64
75	2.55	2.46	1.63	1.47	103	2.87	2.80	1.80	1.64
76	2.55	2.48	1.64	1.47	104	2.87	2.81	1.80	1.65
77	2.56	2.49	1.65	1.48	105	2.88	2.82	1.81	1.66
78	2.58	2.50	1.65	1.48	106	2.90	2.84	1.82	1.67
79	2.60	2.52	1.66	1.49	107	2.91	2.84	1.82	1.67
80	2.61	2.53	1.66	1.50	108	2.92	2.86	1.83	1.68
81	2.61	2.55	1.67	1.51	109	2.93	2.86	1.84	1.68
82	2.63	2.56	1.68	1.52	110	2.95	2.88	1.85	1.68
83	2.64	2.57	1.69	1.52	111	2.95	2.90	1.85	1.69
84	2.65	2.58	1.69	1.52	112	2.95	2.90	1.85	1.69
85	2.66	2.59	1.69	1.53	113	2.96	2.91	1.86	1.70
86	2.68	2.59	1.70	1.54	114	2.98	2.93	1.87	1.71
87	2.70	2.61	1.71	1.55	115	2.99	2.94	1.87	1.72
88	2.71	2.63	1.72	1.55	116	3.00	2.94	1.88	1.72
89	2.71	2.63	1.72	1.56	117	3.01	2.95	1.89	1.72
90	2.72	2.65	1.73	1.57	118	3.02	2.95	1.89	1.73
91	2.73	2.67	1.74	1.57	119	3.03	2.97	1.89	1.74
92	2.74	2.68	1.74	1.58	120	3.05	2.98	1.90	1.75
93	2.76	2.69	1.75	1.58					