American Heritage Life Insurance Company
Group Disability Insurance Policy Illustration
This Rate Generator does not validate income rules for any States.

This illustration and rates expire 9/6/2018
Issue State: Utah

Industry Class: Preferred Plus
Premium Mode: Semi-Monthly

Benefit Period	**6**	**6**	**6**	**6**	**6**
Elimination Period Acc/Sick	**14/14**	**14/14**	**14/14**	**14/14**	**14/14**
Issue Age	**18-49**	**50-59**	**60-64**	**65-69**	**70 +**
Portable?	**NO**	**NO**	**NO**	**NO**	**NO**
Monthly Benefit					
$ 400.00	$ 6.65	$ 8.63	$ 11.33	$ 12.13	$ 13.27
$ 500.00	$ 8.13	$ 10.60	$ 13.98	$ 14.98	$ 16.40
$ 600.00	$ 9.60	$ 12.57	$ 16.62	$ 17.82	$ 19.53
$ 700.00	$ 11.08	$ 14.54	$ 19.27	$ 20.67	$ 22.66
$ 800.00	$ 12.55	$ 16.51	$ 21.91	$ 23.51	$ 25.79
$ 900.00	$ 14.03	$ 18.48	$ 24.56	$ 26.36	$ 28.92
$ 1,000.00	$ 15.50	$ 20.45	$ 27.20	$ 29.20	$ 32.05
$ 1,100.00	$ 16.98	$ 22.42	$ 29.85	$ 32.05	$ 35.18
$ 1,200.00	$ 18.45	$ 24.39	$ 32.49	$ 34.89	$ 38.31
$ 1,300.00	$ 19.93	$ 26.36	$ 35.14	$ 37.74	$ 41.44
$ 1,400.00	$ 21.40	$ 28.33	$ 37.78	$ 40.58	$ 44.57
$ 1,500.00	$ 22.88	$ 30.30	$ 40.43	$ 43.43	$ 47.70
$ 1,600.00	$ 24.35	$ 32.27	$ 43.07	$ 46.27	$ 50.83
$ 1,700.00	$ 25.83	$ 34.24	$ 45.72	$ 49.12	$ 53.96
$ 1,800.00	$ 27.30	$ 36.21	$ 48.36	$ 51.96	$ 57.09
$ 1,900.00	$ 28.78	$ 38.18	$ 51.01	$ 54.81	$ 60.22
$ 2,000.00	$ 30.25	$ 40.15	$ 53.65	$ 57.65	$ 63.35
$ 2,100.00	$ 31.73	$ 42.12	$ 56.30	$ 60.50	$ 66.48
$ 2,200.00	$ 33.20	$ 44.09	$ 58.94	$ 63.34	$ 69.61
$ 2,300.00	$ 34.68	$ 46.06	$ 61.59	$ 66.19	$ 72.74
$ 2,400.00	$ 36.15	$ 48.03	$ 64.23	$ 69.03	$ 75.87
$ 2,500.00	$ 37.63	$ 50.00	$ 66.88	$ 71.88	$ 79.00
$ 2,600.00	$ 39.10	$ 51.97	$ 69.52	$ 74.72	$ 82.13
$ 2,700.00	$ 40.58	$ 53.94	$ 72.17	$ 77.57	$ 85.26
$ 2,800.00	$ 42.05	$ 55.91	$ 74.81	$ 80.41	$ 88.39
$ 2,900.00	$ 43.53	$ 57.88	$ 77.46	$ 83.26	$ 91.52
$ 3,000.00	$ 45.00	$ 59.85	$ 80.10	$ 86.10	$ 94.65
$ 3,100.00	$ 46.48	$ 61.82	$ 82.75	$ 88.95	$ 97.78
$ 3,200.00	$ 47.95	$ 63.79	$ 85.39	$ 91.79	$ 100.91
$ 3,300.00	$ 49.43	$ 65.76	$ 88.04	$ 94.64	$ 104.04
$ 3,400.00	$ 50.90	$ 67.73	$ 90.68	$ 97.48	$ 107.17
$ 3,500.00	$ 52.38	$ 69.70	$ 93.33	$ 100.33	$ 110.30
$ 3,600.00	$ 53.85	$ 71.67	$ 95.97	$ 103.17	$ 113.43
$ 3,700.00	$ 55.33	$ 73.64	$ 98.62	$ 106.02	$ 116.56
$ 3,800.00	$ 56.80	$ 75.61	$ 101.26	$ 108.86	$ 119.69
$ 3,900.00	$ 58.28	$ 77.58	$ 103.91	$ 111.71	$ 122.82
$ 4,000.00	$ 59.75	$ 79.55	$ 106.55	$ 114.55	$ 125.95
$ 4,100.00	$ 61.23	$ 81.52	$ 109.20	$ 117.40	$ 129.08
$ 4,200.00	$ 62.70	$ 83.49	$ 111.84	$ 120.24	$ 132.21
$ 4,300.00	$ 64.18	$ 85.46	$ 114.49	$ 123.09	$ 135.34
$ 4,400.00	$ 65.65	$ 87.43	$ 117.13	$ 125.93	$ 138.47
$ 4,500.00	$ 67.13	$ 89.40	$ 119.78	$ 128.78	$ 141.60
$ 4,600.00	$ 68.60	$ 91.37	$ 122.42	$ 131.62	$ 144.73
$ 4,700.00	$ 70.08	$ 93.34	$ 125.07	$ 134.47	$ 147.86
$ 4,800.00	$ 71.55	$ 95.31	$ 127.71	$ 137.31	$ 150.99
$ 4,900.00	$ 73.03	$ 97.28	$ 130.36	$ 140.16	$ 154.12
$ 5,000.00	$ 74.50	$ 99.25	$ 133.00	$ 143.00	$ 157.25

The Maximum Monthly Benefit that can be applied for must be reduced by the Monthly Benefits of all other existing coverage.

This illustration is incomplete without Brochure NCT

This quote is incomplete and cannot be used without the accompanying illustration pages that provide a complete description of all benefits, limitations and exclusions.