



# Why should you consider purchasing life insurance protection at your workplace?

Employees find significant value in obtaining non-medical products in their workplace.

*(Source: Shopping on the Job: Life and Disability Insurance Sales at the Workplace, LIMRA Research Briefings, March, 2012.)*

Nearly 1 in 5 Americans go through their workplace to purchase life insurance. For employees that have the option, 75% ultimately decide to purchase life insurance.

*(Source: To Shop or Not To Shop for Life Insurance. Turning Shoppers Into Buyers, LIMRA, 2011.)*

50% of U.S. households have unmet life insurance needs: 58 million say they do not have enough life insurance.

*(Source: Household Trends in the U.S. Life Insurance Ownership, LIMRA, 2010.)*

While employees have many possible resources for benefit information, they rely most on the information created by their employer.

**Many of us lead busy lives and seldom take time to think about life's risks. Consider the following reasons many people purchase group TERM life insurance:**

- Replacing income
  - Paying off mortgage
  - Providing funds for college education
  - Paying for medical / burial / final expenses
- Preparing for life events, such as:
  - Marriage
  - Growing family
  - Home Purchase
- Transferring wealth to family
- Making a charitable gift
- Supporting aging parents

**Advantages of shopping at work include:**

- Affordable group rates
- Convenient payroll deduction
- Guaranteed issue for timely applicant
- Easy access



## AUL's Group Voluntary Term Life and AD&D Insurance Terms and Definitions

**Eligible Employees:** This benefit is available for employees who are actively at work on the effective date and working a minimum of 30 hours per week.

**Flexible Choices:** Since everyone's needs are different, this plan offers flexibility for you to choose a benefit amount that fits your needs and budget.

**Accidental Death & Dismemberment (AD&D):** If approved for this benefit, additional life insurance benefits may be payable in the event of an accident which results in death or dismemberment as defined in the contract.

**Guaranteed Issue Amounts:** This is the most coverage you can purchase without having to answer any health questions. If you decline insurance coverage now and decide to enroll later, you will need to provide Evidence of Insurability.

Employee Guaranteed Issue Amount:	\$150,000
Spouse Guaranteed Issue Amount:	\$30,000
Child Guaranteed Issue Amount:	\$10,000

**Timely Enrollment:** Enrolling timely means you have enrolled during the initial enrollment period when benefits were first offered by AUL, or as a newly hired employee within 31 days following completion of any applicable waiting period.

**Evidence of Insurability:** If you elect a benefit amount over the Guaranteed Issue Amount shown above for you or your eligible dependents, or you do not enroll timely, you will need to submit a Statement of Insurability form for review. Based on health history, you and / or your dependents will be approved or declined for insurance coverage by AUL.

**Guaranteed Increase in Benefit:** If eligible, this benefit allows you to increase your coverage every year as your life insurance needs change. You may be able to increase your benefit amount by the greater of 10% of your benefit amount or \$10,000 every year until you reach your maximum amount, without providing Evidence of Insurability.

### Continuation of Coverage Options:

**Portability** Should your coverage terminate for any reason, you may be eligible to take this term life insurance with you without providing Evidence of Insurability. You must apply within 31 days from the last day you are eligible. The Portability option is available until you reach age 70.

OR

**Conversion** Should your life insurance coverage, or a portion of it, cease for any reason, you may be eligible to convert your Group Term Coverage to Individual Coverage without providing Evidence of Insurability. You must apply within 31 days from the last day you are eligible.

**Accelerated Life Benefit:** If diagnosed with a terminal illness and have less than 12 months to live, you may apply to receive 25%, 50% or 75% of your life insurance benefit to use for whatever you choose.

**Waiver of Premium:** If approved, this benefit waives your and your dependents' insurance premium in case you become totally disabled and are unable to collect a paycheck.

**Reductions:** Upon reaching certain ages, your original benefit amount will reduce to a percentage as shown in the following schedule.

Age:	70	75	80	85	90
Reduces To:	45%	30%	20%	15%	10%

This invitation to inquire allows eligible employees an opportunity to inquire further about AUL's group insurance and is limited to a brief description of any losses for which benefits are payable. The contract has exclusions, limitations reduction of benefits, and terms under which the contract may be continued in force or discontinued.

## Voluntary Term Life including matching AD&D Coverage

### Semi-Monthly Payroll Deduction Illustration

About your benefit options:

- You may select a minimum benefit of \$10,000 up to a maximum amount of \$500,000, in increments of \$1,000, not to exceed 5 times your annual base salary only, rounded to the next higher \$10,000.
- Amounts requested above \$150,000 for an Employee, \$30,000 for a Spouse, or any amount not requested timely will require Evidence of Insurability.
- Employee must select coverage to select any Dependent coverage.
- Dependent coverage cannot exceed 50% of the Voluntary Term Life amount selected by the Employee.
- A Spouse must be under age 70 to be eligible for benefits.

#### EMPLOYEE ONLY OPTIONS (based on Employee's age as of 01/01)

Life & AD&D	0-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75+
\$10,000	\$0.55	\$0.55	\$0.55	\$0.75	\$0.90	\$1.30	\$1.95	\$3.70	\$5.85	\$8.10	\$13.40	\$13.40	\$13.40
\$20,000	\$1.10	\$1.10	\$1.10	\$1.50	\$1.80	\$2.60	\$3.90	\$7.40	\$11.70	\$16.20	\$26.80	\$26.80	\$26.80
\$30,000	\$1.65	\$1.65	\$1.65	\$2.25	\$2.70	\$3.90	\$5.85	\$11.10	\$17.55	\$24.30	\$40.20	\$40.20	\$40.20
\$40,000	\$2.20	\$2.20	\$2.20	\$3.00	\$3.60	\$5.20	\$7.80	\$14.80	\$23.40	\$32.40	\$53.60	\$53.60	\$53.60
\$50,000	\$2.75	\$2.75	\$2.75	\$3.75	\$4.50	\$6.50	\$9.75	\$18.50	\$29.25	\$40.50	\$67.00	\$67.00	\$67.00
\$75,000	\$4.13	\$4.13	\$4.13	\$5.63	\$6.75	\$9.75	\$14.63	\$27.75	\$43.88	\$60.75	\$100.50	\$100.50	\$100.50
\$100,000	\$5.50	\$5.50	\$5.50	\$7.50	\$9.00	\$13.00	\$19.50	\$37.00	\$58.50	\$81.00	\$134.00	\$134.00	\$134.00
\$125,000	\$6.88	\$6.88	\$6.88	\$9.38	\$11.25	\$16.25	\$24.38	\$46.25	\$73.13	\$101.25	\$167.50	\$167.50	\$167.50
\$150,000	\$8.25	\$8.25	\$8.25	\$11.25	\$13.50	\$19.50	\$29.25	\$55.50	\$87.75	\$121.50	\$201.00	\$201.00	\$201.00

#### SPOUSE ONLY OPTIONS (based on Employee's Age as of 01/01)

Life Options	0-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69
\$5,000	\$0.23	\$0.23	\$0.23	\$0.33	\$0.40	\$0.60	\$0.93	\$1.80	\$2.88	\$4.00	\$6.65
\$7,500	\$0.34	\$0.34	\$0.34	\$0.49	\$0.60	\$0.90	\$1.39	\$2.70	\$4.32	\$6.00	\$9.98
\$10,000	\$0.45	\$0.45	\$0.45	\$0.65	\$0.80	\$1.20	\$1.85	\$3.60	\$5.75	\$8.00	\$13.30
\$12,500	\$0.57	\$0.57	\$0.57	\$0.82	\$1.00	\$1.50	\$2.32	\$4.50	\$7.19	\$10.00	\$16.63
\$15,000	\$0.68	\$0.68	\$0.68	\$0.98	\$1.20	\$1.80	\$2.78	\$5.40	\$8.63	\$12.00	\$19.95
\$17,500	\$0.79	\$0.79	\$0.79	\$1.14	\$1.40	\$2.10	\$3.24	\$6.30	\$10.07	\$14.00	\$23.28
\$20,000	\$0.90	\$0.90	\$0.90	\$1.30	\$1.60	\$2.40	\$3.70	\$7.20	\$11.50	\$16.00	\$26.60
\$22,500	\$1.02	\$1.02	\$1.02	\$1.47	\$1.80	\$2.70	\$4.17	\$8.10	\$12.94	\$18.00	\$29.93
\$25,000	\$1.13	\$1.13	\$1.13	\$1.63	\$2.00	\$3.00	\$4.63	\$9.00	\$14.38	\$20.00	\$33.25
\$30,000	\$1.35	\$1.35	\$1.35	\$1.95	\$2.40	\$3.60	\$5.55	\$10.80	\$17.25	\$24.00	\$39.90

#### CHILD(REN) OPTIONS (Premium shown for Child(ren) reflects the cost for all eligible dependent children)

	Child(ren) 6 months to age 19, or 25 if full-time student	Child(ren) live birth to 6 months	Semi-monthly Payroll Deduction Amount
Option 1:	\$5,000	\$1,000	\$0.54
Option 2:	\$10,000	\$1,000	\$1.08

Dependent Child must be:  
 Unmarried  
 Claimed as a tax dependent  
 Not active duty military  
 Full time student if over age 19

About Premiums: The premiums shown above may vary slightly due to rounding; actual premiums will be calculated by American United Life Insurance Company® (AUL), and may increase upon reaching certain age brackets, according to contract terms, and are subject to change.

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**Voluntary Term Life including matching AD&D Coverage**  
*Semi-Monthly Payroll Deduction Illustration*

**EMPLOYEE ONLY OPTIONS**

(based on Employee Age as of 01/01)

	<b>0-19</b>	<b>20-24</b>	<b>25-29</b>	<b>30-34</b>	<b>35-39</b>	<b>40-44</b>	<b>45-49</b>	<b>50-54</b>	<b>55-59</b>	<b>60-64</b>	<b>65-69</b>	<b>70-74</b>	<b>75+</b>
\$10,000	\$0.55	\$0.55	\$0.55	\$0.75	\$0.90	\$1.30	\$1.95	\$3.70	\$5.85	\$8.10	\$13.40	\$13.40	\$13.40
\$20,000	\$1.10	\$1.10	\$1.10	\$1.50	\$1.80	\$2.60	\$3.90	\$7.40	\$11.70	\$16.20	\$26.80	\$26.80	\$26.80
\$30,000	\$1.65	\$1.65	\$1.65	\$2.25	\$2.70	\$3.90	\$5.85	\$11.10	\$17.55	\$24.30	\$40.20	\$40.20	\$40.20
\$40,000	\$2.20	\$2.20	\$2.20	\$3.00	\$3.60	\$5.20	\$7.80	\$14.80	\$23.40	\$32.40	\$53.60	\$53.60	\$53.60
\$50,000	\$2.75	\$2.75	\$2.75	\$3.75	\$4.50	\$6.50	\$9.75	\$18.50	\$29.25	\$40.50	\$67.00	\$67.00	\$67.00
\$60,000	\$3.30	\$3.30	\$3.30	\$4.50	\$5.40	\$7.80	\$11.70	\$22.20	\$35.10	\$48.60	\$80.40	\$80.40	\$80.40
\$70,000	\$3.85	\$3.85	\$3.85	\$5.25	\$6.30	\$9.10	\$13.65	\$25.90	\$40.95	\$56.70	\$93.80	\$93.80	\$93.80
\$80,000	\$4.40	\$4.40	\$4.40	\$6.00	\$7.20	\$10.40	\$15.60	\$29.60	\$46.80	\$64.80	\$107.20	\$107.20	\$107.20
\$90,000	\$4.95	\$4.95	\$4.95	\$6.75	\$8.10	\$11.70	\$17.55	\$33.30	\$52.65	\$72.90	\$120.60	\$120.60	\$120.60
\$100,000	\$5.50	\$5.50	\$5.50	\$7.50	\$9.00	\$13.00	\$19.50	\$37.00	\$58.50	\$81.00	\$134.00	\$134.00	\$134.00
\$110,000	\$6.05	\$6.05	\$6.05	\$8.25	\$9.90	\$14.30	\$21.45	\$40.70	\$64.35	\$89.10	\$147.40	\$147.40	\$147.40
\$120,000	\$6.60	\$6.60	\$6.60	\$9.00	\$10.80	\$15.60	\$23.40	\$44.40	\$70.20	\$97.20	\$160.80	\$160.80	\$160.80
\$130,000	\$7.15	\$7.15	\$7.15	\$9.75	\$11.70	\$16.90	\$25.35	\$48.10	\$76.05	\$105.30	\$174.20	\$174.20	\$174.20
\$140,000	\$7.70	\$7.70	\$7.70	\$10.50	\$12.60	\$18.20	\$27.30	\$51.80	\$81.90	\$113.40	\$187.60	\$187.60	\$187.60
\$150,000	\$8.25	\$8.25	\$8.25	\$11.25	\$13.50	\$19.50	\$29.25	\$55.50	\$87.75	\$121.50	\$201.00	\$201.00	\$201.00
<b>The amounts below require Statement of Insurability form</b>													
\$160,000	\$8.80	\$8.80	\$8.80	\$12.00	\$14.40	\$20.80	\$31.20	\$59.20	\$93.60	\$129.60	\$214.40	\$214.40	\$214.40
\$170,000	\$9.35	\$9.35	\$9.35	\$12.75	\$15.30	\$22.10	\$33.15	\$62.90	\$99.45	\$137.70	\$227.80	\$227.80	\$227.80
\$180,000	\$9.90	\$9.90	\$9.90	\$13.50	\$16.20	\$23.40	\$35.10	\$66.60	\$105.30	\$145.80	\$241.20	\$241.20	\$241.20
\$190,000	\$10.45	\$10.45	\$10.45	\$14.25	\$17.10	\$24.70	\$37.05	\$70.30	\$111.15	\$153.90	\$254.60	\$254.60	\$254.60
\$200,000	\$11.00	\$11.00	\$11.00	\$15.00	\$18.00	\$26.00	\$39.00	\$74.00	\$117.00	\$162.00	\$268.00	\$268.00	\$268.00
\$210,000	\$11.55	\$11.55	\$11.55	\$15.75	\$18.90	\$27.30	\$40.95	\$77.70	\$122.85	\$170.10	\$281.40	\$281.40	\$281.40
\$220,000	\$12.10	\$12.10	\$12.10	\$16.50	\$19.80	\$28.60	\$42.90	\$81.40	\$128.70	\$178.20	\$294.80	\$294.80	\$294.80
\$230,000	\$12.65	\$12.65	\$12.65	\$17.25	\$20.70	\$29.90	\$44.85	\$85.10	\$134.55	\$186.30	\$308.20	\$308.20	\$308.20
\$240,000	\$13.20	\$13.20	\$13.20	\$18.00	\$21.60	\$31.20	\$46.80	\$88.80	\$140.40	\$194.40	\$321.60	\$321.60	\$321.60
\$250,000	\$13.75	\$13.75	\$13.75	\$18.75	\$22.50	\$32.50	\$48.75	\$92.50	\$146.25	\$202.50	\$335.00	\$335.00	\$335.00
\$260,000	\$14.30	\$14.30	\$14.30	\$19.50	\$23.40	\$33.80	\$50.70	\$96.20	\$152.10	\$210.60	\$348.40	\$348.40	\$348.40
\$270,000	\$14.85	\$14.85	\$14.85	\$20.25	\$24.30	\$35.10	\$52.65	\$99.90	\$157.95	\$218.70	\$361.80	\$361.80	\$361.80
\$280,000	\$15.40	\$15.40	\$15.40	\$21.00	\$25.20	\$36.40	\$54.60	\$103.60	\$163.80	\$226.80	\$375.20	\$375.20	\$375.20
\$290,000	\$15.95	\$15.95	\$15.95	\$21.75	\$26.10	\$37.70	\$56.55	\$107.30	\$169.65	\$234.90	\$388.60	\$388.60	\$388.60
\$300,000	\$16.50	\$16.50	\$16.50	\$22.50	\$27.00	\$39.00	\$58.50	\$111.00	\$175.50	\$243.00	\$402.00	\$402.00	\$402.00
\$310,000	\$17.05	\$17.05	\$17.05	\$23.25	\$27.90	\$40.30	\$60.45	\$114.70	\$181.35	\$251.10	\$415.40	\$415.40	\$415.40
\$320,000	\$17.60	\$17.60	\$17.60	\$24.00	\$28.80	\$41.60	\$62.40	\$118.40	\$187.20	\$259.20	\$428.80	\$428.80	\$428.80
\$330,000	\$18.15	\$18.15	\$18.15	\$24.75	\$29.70	\$42.90	\$64.35	\$122.10	\$193.05	\$267.30	\$442.20	\$442.20	\$442.20
\$340,000	\$18.70	\$18.70	\$18.70	\$25.50	\$30.60	\$44.20	\$66.30	\$125.80	\$198.90	\$275.40	\$455.60	\$455.60	\$455.60
\$350,000	\$19.25	\$19.25	\$19.25	\$26.25	\$31.50	\$45.50	\$68.25	\$129.50	\$204.75	\$283.50	\$469.00	\$469.00	\$469.00
\$360,000	\$19.80	\$19.80	\$19.80	\$27.00	\$32.40	\$46.80	\$70.20	\$133.20	\$210.60	\$291.60	\$482.40	\$482.40	\$482.40
\$370,000	\$20.35	\$20.35	\$20.35	\$27.75	\$33.30	\$48.10	\$72.15	\$136.90	\$216.45	\$299.70	\$495.80	\$495.80	\$495.80
\$380,000	\$20.90	\$20.90	\$20.90	\$28.50	\$34.20	\$49.40	\$74.10	\$140.60	\$222.30	\$307.80	\$509.20	\$509.20	\$509.20
\$390,000	\$21.45	\$21.45	\$21.45	\$29.25	\$35.10	\$50.70	\$76.05	\$144.30	\$228.15	\$315.90	\$522.60	\$522.60	\$522.60
\$400,000	\$22.00	\$22.00	\$22.00	\$30.00	\$36.00	\$52.00	\$78.00	\$148.00	\$234.00	\$324.00	\$536.00	\$536.00	\$536.00
\$410,000	\$22.55	\$22.55	\$22.55	\$30.75	\$36.90	\$53.30	\$79.95	\$151.70	\$239.85	\$332.10	\$549.40	\$549.40	\$549.40
\$420,000	\$23.10	\$23.10	\$23.10	\$31.50	\$37.80	\$54.60	\$81.90	\$155.40	\$245.70	\$340.20	\$562.80	\$562.80	\$562.80
\$430,000	\$23.65	\$23.65	\$23.65	\$32.25	\$38.70	\$55.90	\$83.85	\$159.10	\$251.55	\$348.30	\$576.20	\$576.20	\$576.20
\$440,000	\$24.20	\$24.20	\$24.20	\$33.00	\$39.60	\$57.20	\$85.80	\$162.80	\$257.40	\$356.40	\$589.60	\$589.60	\$589.60

**Voluntary Term Life including matching AD&D Coverage**  
*Semi-Monthly Payroll Deduction Illustration*

**EMPLOYEE ONLY OPTIONS**

(based on Employee Age as of 01/01)

	<b>0-19</b>	<b>20-24</b>	<b>25-29</b>	<b>30-34</b>	<b>35-39</b>	<b>40-44</b>	<b>45-49</b>	<b>50-54</b>	<b>55-59</b>	<b>60-64</b>	<b>65-69</b>	<b>70-74</b>	<b>75+</b>
\$450,000	\$24.75	\$24.75	\$24.75	\$33.75	\$40.50	\$58.50	\$87.75	\$166.50	\$263.25	\$364.50	\$603.00	\$603.00	\$603.00
\$460,000	\$25.30	\$25.30	\$25.30	\$34.50	\$41.40	\$59.80	\$89.70	\$170.20	\$269.10	\$372.60	\$616.40	\$616.40	\$616.40
\$470,000	\$25.85	\$25.85	\$25.85	\$35.25	\$42.30	\$61.10	\$91.65	\$173.90	\$274.95	\$380.70	\$629.80	\$629.80	\$629.80
\$480,000	\$26.40	\$26.40	\$26.40	\$36.00	\$43.20	\$62.40	\$93.60	\$177.60	\$280.80	\$388.80	\$643.20	\$643.20	\$643.20
\$490,000	\$26.95	\$26.95	\$26.95	\$36.75	\$44.10	\$63.70	\$95.55	\$181.30	\$286.65	\$396.90	\$656.60	\$656.60	\$656.60
\$500,000	\$27.50	\$27.50	\$27.50	\$37.50	\$45.00	\$65.00	\$97.50	\$185.00	\$292.50	\$405.00	\$670.00	\$670.00	\$670.00

**Voluntary Term Life Coverage**  
*Semi-Monthly Payroll Deduction Illustration*

**SPOUSE ONLY OPTIONS**

Spouse premium based on EMPLOYEE'S age and amount of coverage chosen

Spouse coverage amount cannot exceed 50% of employee amount

	0-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75+
\$5,000	\$0.23	\$0.23	\$0.23	\$0.33	\$0.40	\$0.60	\$0.93	\$1.80	\$2.88	\$4.00	\$6.65		
\$10,000	\$0.45	\$0.45	\$0.45	\$0.65	\$0.80	\$1.20	\$1.85	\$3.60	\$5.75	\$8.00	\$13.30		
\$15,000	\$0.68	\$0.68	\$0.68	\$0.98	\$1.20	\$1.80	\$2.78	\$5.40	\$8.63	\$12.00	\$19.95		
\$20,000	\$0.90	\$0.90	\$0.90	\$1.30	\$1.60	\$2.40	\$3.70	\$7.20	\$11.50	\$16.00	\$26.60		
\$25,000	\$1.13	\$1.13	\$1.13	\$1.63	\$2.00	\$3.00	\$4.63	\$9.00	\$14.38	\$20.00	\$33.25		
\$30,000	\$1.35	\$1.35	\$1.35	\$1.95	\$2.40	\$3.60	\$5.55	\$10.80	\$17.25	\$24.00	\$39.90		
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\$35,000	\$1.58	\$1.58	\$1.58	\$2.28	\$2.80	\$4.20	\$6.48	\$12.60	\$20.13	\$28.00	\$46.55		
\$40,000	\$1.80	\$1.80	\$1.80	\$2.60	\$3.20	\$4.80	\$7.40	\$14.40	\$23.00	\$32.00	\$53.20		
\$45,000	\$2.03	\$2.03	\$2.03	\$2.93	\$3.60	\$5.40	\$8.33	\$16.20	\$25.88	\$36.00	\$59.85		
\$50,000	\$2.25	\$2.25	\$2.25	\$3.25	\$4.00	\$6.00	\$9.25	\$18.00	\$28.75	\$40.00	\$66.50		
\$55,000	\$2.48	\$2.48	\$2.48	\$3.58	\$4.40	\$6.60	\$10.18	\$19.80	\$31.63	\$44.00	\$73.15		
\$60,000	\$2.70	\$2.70	\$2.70	\$3.90	\$4.80	\$7.20	\$11.10	\$21.60	\$34.50	\$48.00	\$79.80		
\$65,000	\$2.93	\$2.93	\$2.93	\$4.23	\$5.20	\$7.80	\$12.03	\$23.40	\$37.38	\$52.00	\$86.45		
\$70,000	\$3.15	\$3.15	\$3.15	\$4.55	\$5.60	\$8.40	\$12.95	\$25.20	\$40.25	\$56.00	\$93.10		
\$75,000	\$3.38	\$3.38	\$3.38	\$4.88	\$6.00	\$9.00	\$13.88	\$27.00	\$43.13	\$60.00	\$99.75		
\$80,000	\$3.60	\$3.60	\$3.60	\$5.20	\$6.40	\$9.60	\$14.80	\$28.80	\$46.00	\$64.00	\$106.40		
\$85,000	\$3.83	\$3.83	\$3.83	\$5.53	\$6.80	\$10.20	\$15.73	\$30.60	\$48.88	\$68.00	\$113.05		
\$90,000	\$4.05	\$4.05	\$4.05	\$5.85	\$7.20	\$10.80	\$16.65	\$32.40	\$51.75	\$72.00	\$119.70		
\$95,000	\$4.28	\$4.28	\$4.28	\$6.18	\$7.60	\$11.40	\$17.58	\$34.20	\$54.63	\$76.00	\$126.35		
\$100,000	\$4.50	\$4.50	\$4.50	\$6.50	\$8.00	\$12.00	\$18.50	\$36.00	\$57.50	\$80.00	\$133.00		
\$105,000	\$4.73	\$4.73	\$4.73	\$6.83	\$8.40	\$12.60	\$19.43	\$37.80	\$60.38	\$84.00	\$139.65		
\$110,000	\$4.95	\$4.95	\$4.95	\$7.15	\$8.80	\$13.20	\$20.35	\$39.60	\$63.25	\$88.00	\$146.30		
\$115,000	\$5.18	\$5.18	\$5.18	\$7.48	\$9.20	\$13.80	\$21.28	\$41.40	\$66.13	\$92.00	\$152.95		
\$120,000	\$5.40	\$5.40	\$5.40	\$7.80	\$9.60	\$14.40	\$22.20	\$43.20	\$69.00	\$96.00	\$159.60		
\$125,000	\$5.63	\$5.63	\$5.63	\$8.13	\$10.00	\$15.00	\$23.13	\$45.00	\$71.88	\$100.00	\$166.25		
\$130,000	\$5.85	\$5.85	\$5.85	\$8.45	\$10.40	\$15.60	\$24.05	\$46.80	\$74.75	\$104.00	\$172.90		
\$135,000	\$6.08	\$6.08	\$6.08	\$8.78	\$10.80	\$16.20	\$24.98	\$48.60	\$77.63	\$108.00	\$179.55		
\$140,000	\$6.30	\$6.30	\$6.30	\$9.10	\$11.20	\$16.80	\$25.90	\$50.40	\$80.50	\$112.00	\$186.20		
\$145,000	\$6.53	\$6.53	\$6.53	\$9.43	\$11.60	\$17.40	\$26.83	\$52.20	\$83.38	\$116.00	\$192.85		
\$150,000	\$6.75	\$6.75	\$6.75	\$9.75	\$12.00	\$18.00	\$27.75	\$54.00	\$86.25	\$120.00	\$199.50		
\$155,000	\$6.98	\$6.98	\$6.98	\$10.08	\$12.40	\$18.60	\$28.68	\$55.80	\$89.13	\$124.00	\$206.15		
\$160,000	\$7.20	\$7.20	\$7.20	\$10.40	\$12.80	\$19.20	\$29.60	\$57.60	\$92.00	\$128.00	\$212.80		
\$165,000	\$7.43	\$7.43	\$7.43	\$10.73	\$13.20	\$19.80	\$30.53	\$59.40	\$94.88	\$132.00	\$219.45		
\$170,000	\$7.65	\$7.65	\$7.65	\$11.05	\$13.60	\$20.40	\$31.45	\$61.20	\$97.75	\$136.00	\$226.10		
\$175,000	\$7.88	\$7.88	\$7.88	\$11.38	\$14.00	\$21.00	\$32.38	\$63.00	\$100.63	\$140.00	\$232.75		
\$180,000	\$8.10	\$8.10	\$8.10	\$11.70	\$14.40	\$21.60	\$33.30	\$64.80	\$103.50	\$144.00	\$239.40		
\$185,000	\$8.33	\$8.33	\$8.33	\$12.03	\$14.80	\$22.20	\$34.23	\$66.60	\$106.38	\$148.00	\$246.05		
\$190,000	\$8.55	\$8.55	\$8.55	\$12.35	\$15.20	\$22.80	\$35.15	\$68.40	\$109.25	\$152.00	\$252.70		
\$195,000	\$8.78	\$8.78	\$8.78	\$12.68	\$15.60	\$23.40	\$36.08	\$70.20	\$112.13	\$156.00	\$259.35		
\$200,000	\$9.00	\$9.00	\$9.00	\$13.00	\$16.00	\$24.00	\$37.00	\$72.00	\$115.00	\$160.00	\$266.00		
\$205,000	\$9.23	\$9.23	\$9.23	\$13.33	\$16.40	\$24.60	\$37.93	\$73.80	\$117.88	\$164.00	\$272.65		
\$210,000	\$9.45	\$9.45	\$9.45	\$13.65	\$16.80	\$25.20	\$38.85	\$75.60	\$120.75	\$168.00	\$279.30		
\$215,000	\$9.68	\$9.68	\$9.68	\$13.98	\$17.20	\$25.80	\$39.78	\$77.40	\$123.63	\$172.00	\$285.95		

**Voluntary Term Life Coverage**  
*Semi-Monthly Payroll Deduction Illustration*

**SPOUSE ONLY OPTIONS**

Spouse premium based on EMPLOYEE'S age and amount of coverage chosen

Spouse coverage amount cannot exceed 50% of employee amount

	0-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75+
\$220,000	\$9.90	\$9.90	\$9.90	\$14.30	\$17.60	\$26.40	\$40.70	\$79.20	\$126.50	\$176.00	\$292.60		
\$225,000	\$10.13	\$10.13	\$10.13	\$14.63	\$18.00	\$27.00	\$41.63	\$81.00	\$129.38	\$180.00	\$299.25		
\$230,000	\$10.35	\$10.35	\$10.35	\$14.95	\$18.40	\$27.60	\$42.55	\$82.80	\$132.25	\$184.00	\$305.90		
\$235,000	\$10.58	\$10.58	\$10.58	\$15.28	\$18.80	\$28.20	\$43.48	\$84.60	\$135.13	\$188.00	\$312.55		
\$240,000	\$10.80	\$10.80	\$10.80	\$15.60	\$19.20	\$28.80	\$44.40	\$86.40	\$138.00	\$192.00	\$319.20		
\$245,000	\$11.03	\$11.03	\$11.03	\$15.93	\$19.60	\$29.40	\$45.33	\$88.20	\$140.88	\$196.00	\$325.85		
\$250,000	\$11.25	\$11.25	\$11.25	\$16.25	\$20.00	\$30.00	\$46.25	\$90.00	\$143.75	\$200.00	\$332.50		

**CHILD(REN) OPTIONS**

Benefits for:

Option 1:    Option 2:

Child(ren) 6 months to age 19, or 25 if full-time student

\$5,000    \$10,000

Dependent Child must be:

Child(ren) live birth to 6 months

\$1,000    \$1,000

Unmarried

Semi-monthly Payroll Deduction Amount

\$0.54    \$1.08

Claimed as a tax dependent

Not active duty military

Full time student if over age 19

**Group Voluntary Disability Insurance Coverage**

About your benefit options:

- Short Term Disability (STD) benefits are illustrated monthly, but are paid on a weekly basis.
- Amounts not requested timely will require Evidence of Insurability.
- Benefit amounts are based upon a percentage of covered monthly earnings. Potential benefits may be reduced by other income offsets including but not limited to Social Security benefits.
- Maximum benefit periods that are based on Social Security Full Retirement Age (SSFRA), are payable under the contract based on your age at time of disability and may vary in duration.

**Employee Options (Class 1)**

	<b>Benefit Percentage</b>	<b>Maximum Covered Monthly Earnings</b>	<b>Maximum Monthly Benefit</b>	<b>Elimination Period</b>	<b>Maximum Benefit Duration</b>	<b>Pre-Existing Condition Period</b>
Option 1 - STD	66.66%	\$649.56	\$433	7 days	12 weeks	3/12
Option 2 - STD	66.66%	\$1,300.63	\$867	7 days	12 weeks	3/12
Option 3 - STD	66.66%	\$2,275.73	\$1,517	7 days	12 weeks	3/12
Option 4 - STD	66.66%	\$3,250.82	\$2,167	7 days	12 weeks	3/12
Option 5 - STD	66.66%	\$9,000.90	\$6,000	7 days	12 weeks	3/12

**To Determine Your Estimated Monthly Benefit:**

1. Enter the LESSER of your Monthly Salary or the Maximum Covered Monthly Earnings from the Plan Options above: \_\_\_\_\_
2. Multiply Step 1 by 66.66%: \_\_\_\_\_ . This is your Estimated Monthly Benefit.

This invitation to inquire allows eligible employees an opportunity to inquire further about AUL's group insurance and is limited to a brief description of any losses for which benefits are payable. The contract has exclusions, limitations reduction of benefits, and terms under which the contract may be continued in force or discontinued.



**Group Voluntary Disability Insurance Coverage for Eligible Employees**  
*Payroll Deduction Illustration*

**Steps to Calculate Semi-monthly Deduction (Class 1)**

<u>*Example</u>	Opt 1	Opt 2	Opt 3	Opt 4	Opt 5
	<u>STD</u>	<u>STD</u>	<u>STD</u>	<u>STD</u>	<u>STD</u>

**Note: Please use the following formula to calculate the cost for this benefit. You can only elect one STD plan option.**

1A: Enter your Monthly Salary	<u>\$2,083</u>	_____	_____	_____	_____	_____
1B: Maximum Covered Monthly Earnings	<u>\$9,001</u>	<u>\$650</u>	<u>\$1,301</u>	<u>\$2,276</u>	<u>\$3,251</u>	<u>\$9,001</u>
1C: Enter the lesser amount of 1A or 1B	<u>\$2,083</u>	_____	_____	_____	_____	_____
2. Divide Step 1C by 100	<u>\$20.83</u>	_____	_____	_____	_____	_____
3. Enter Rate from chart below	<u>X \$0.51</u>	<u>X</u>	<u>X</u>	<u>X</u>	<u>X</u>	<u>X</u>
4. Multiply Step 2 by Step 3 (Mo Prem)	<u>= \$10.62</u>	<u>=</u>	<u>=</u>	<u>=</u>	<u>=</u>	<u>=</u>
5. Multiply Step 4 by 12 and divide by 24	<u>= \$5.31</u>	<u>=</u>	<u>=</u>	<u>=</u>	<u>=</u>	<u>=</u>

to get Semi-monthly Deduction Amount

\*Example: Based on an Employee Age 36 with an annual salary of \$25,000 choosing Opt 5

**Monthly Premium Rates per \$100 of Covered Monthly Earnings**  
**(Based on Age as of 1/1)**

Age Brackets:	Opt 1 <u>STD</u>	Opt 2 <u>STD</u>	Opt 3 <u>STD</u>	Opt 4 <u>STD</u>	Opt 5 <u>STD</u>
0 - 19	\$ .540	\$ .540	\$ .540	\$ .540	\$ .540
20 - 24	\$ .540	\$ .540	\$ .540	\$ .540	\$ .540
25 - 29	\$ .540	\$ .540	\$ .540	\$ .540	\$ .540
30 - 34	\$ .540	\$ .540	\$ .540	\$ .540	\$ .540
35 - 39	\$ .510	\$ .510	\$ .510	\$ .510	\$ .510
40 - 44	\$ .580	\$ .580	\$ .580	\$ .580	\$ .580
45 - 49	\$ .720	\$ .720	\$ .720	\$ .720	\$ .720
50 - 54	\$ .890	\$ .890	\$ .890	\$ .890	\$ .890
55 - 59	\$ 1.170	\$ 1.170	\$ 1.170	\$ 1.170	\$ 1.170
60 - 64	\$ 1.400	\$ 1.400	\$ 1.400	\$ 1.400	\$ 1.400
65 - 69	\$ 1.400	\$ 1.400	\$ 1.400	\$ 1.400	\$ 1.400
70 - 74	\$ 1.400	\$ 1.400	\$ 1.400	\$ 1.400	\$ 1.400

About Premiums: The premiums shown above may vary slightly due to rounding; actual premiums will be calculated by American United Life Insurance Company® (AUL), and may increase upon reaching certain age brackets, according to contract terms, and are subject to change.

This invitation to inquire allows eligible employees an opportunity to inquire further about AUL's group insurance and is limited to a brief description of any losses for which benefits are payable. The contract has exclusions, limitations reduction of benefits, and terms under which the contract may be continued in force or discontinued.

Products and financial services provided by American United Life Insurance Company®  
a ONEAMERICA® company. Visit us at [www.oneamerica.com](http://www.oneamerica.com) for more information.