



Lester Park 803-316-4415 lester\_park@us.aflac.com

Rate sheet prepared by Web User on 6/13/2018 8:38:51 AM.

South Carolina Payroll Premium rates are Semi-Monthly for industry Class A.

The rates shown on this insert page are for illustration purposes only; they do not imply coverage. For more information about policy/plan benefits and limitations, please refer to the accompanying product brochure for each insurance policy/plan listed below.

**AFLAC-SHORT TERM DISABILITY - Series A-57600**

Elimination Period Accident/Sickness - 0/7 DAYS

Annual Income		\$24,000	\$26,000	\$28,000	\$30,000	\$32,000	\$34,000	\$36,000	\$38,000	\$40,000	\$42,000
Benefit Period	Age	\$1,200	\$1,300	\$1,400	\$1,500	\$1,600	\$1,700	\$1,800	\$1,900	\$2,000	\$2,100
3 MONTHS	18-49	\$17.16	\$18.59	\$20.02	\$21.45	\$22.88	\$24.31	\$25.74	\$27.17	\$28.60	\$30.03
	50-64	\$17.94	\$19.44	\$20.93	\$22.43	\$23.92	\$25.42	\$26.91	\$28.41	\$29.90	\$31.40
	65-74	\$21.84	\$23.66	\$25.48	\$27.30	\$29.12	\$30.94	\$32.76	\$34.58	\$36.40	\$38.22

**Accident Advantage - 24-HOUR ACCIDENT OPTION 4 - Series A36000**

	Premium	Accidental Death*	Total
18-75 INDIVIDUAL	\$12.55	\$2.15	\$14.70
18-75 NAMED INSURED/SPOUSE	\$17.94	\$2.99	\$20.93
18-75 ONE-PARENT FAMILY	\$21.52	\$2.41	\$23.93
18-75 TWO-PARENT FAMILY	\$28.08	\$3.38	\$31.46

Accidental Death\*: Accidental Death Benefit Rider (Series A-36050) Premium (Available for ages 18-70)



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**CANCER PROTECTION ASSURANCE PLAN LEVEL 2 - Series B70200**

		Premium	IDR* (5 units)	DCR*	SDR*	Total
18-75	INDIVIDUAL	\$16.75	\$2.98	\$0.00	\$0.46	\$20.18
18-75	INSURED/SPOUSE	\$28.82	\$7.03	\$0.00	\$0.46	\$36.30
18-75	ONE-PARENT FAMILY	\$16.75	\$2.98	\$0.46	\$0.46	\$20.64
18-75	TWO-PARENT FAMILY	\$28.82	\$7.03	\$0.46	\$0.46	\$36.76

IDR\* = Optional Initial Diagnosis Rider (Series B70050) premium 1-5 units

DCR\* = Optional Dependent Child Rider (Series B70051) premium 1 unit

SDR\* = Optional Specified Disease Rider (Series B70052) premium

**AFLAC PLUS RIDER**

		Aflac Plus Rider
18-29	INDIVIDUAL	\$1.56
30-39		\$2.21
40-49		\$3.77
50-70		\$6.44
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18-29	INSURED/SPOUSE	\$2.93
30-39		\$4.36
40-49		\$7.15
50-70		\$12.29
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18-29	ONE-PARENT FAMILY	\$3.12
30-39		\$3.38
40-49		\$4.55
50-70		\$6.63
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18-29	TWO-PARENT FAMILY	\$3.77
30-39		\$4.88
40-49		\$7.35
50-70		\$12.35