

Voluntary Life Insurance



Kansas City Life
Insurance Company

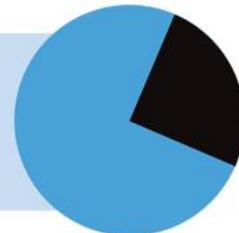


Group
Benefits

Determining how much life insurance you need requires a careful evaluation of your current and future financial obligations. Ask yourself: How much money will my family need after my death to meet immediate expenses, such as funeral expenses and debts? How much money will my family need to maintain its standard of living over the long run?

Nearly 1 in 4 people with only group insurance feel they need more.

Source: 2016 Insurance Barometer Study, Life Happens and LIMRA.



If you are one of those four individuals, now is the time to consider purchasing additional coverage. Typically, voluntary life insurance coverage offered through an employer is more affordable than purchasing an individual policy. Insurance premiums will be automatically deducted from your paycheck, and if you enroll in a timely manner, you may select a benefit in which you are not required to supply evidence of good health.

In order to evaluate how much life insurance you need, review your family's circumstances. In order to make this process easier for you, and to get a general sense of your needs, look at the calculator below. It will walk you through the process and provide you with an estimate of your insurance needs in a matter of minutes.

Most individuals are surprised to find out they are underinsured. How much life insurance do you need to protect your family? This simple worksheet can give you an idea.

- 1) Your current annual income: \$ _____
- 2) Years spouse will need your income (do not exceed seven years): _____
- Simply multiply line 1 by line 2 and put total here.** \$ _____
- 3) Mortgage and other outstanding debts: \$ _____
- 4) College costs for each child, in today's dollars: \$ _____
- Add lines 3 and 4 and put total here.** \$ _____
- Now add your two totals and put total here.** \$ _____
- 5) Other life insurance \$ _____
- 6) Subtract line 5 from the total \$ _____
- Estimated life insurance needed** \$ _____

Based on the amounts listed above, this is an estimate of the life insurance you need.

VOLUNTARY LIFE BENEFIT SUMMARY FOR Forestadent USA, Inc.

All Full-time active employees working 30 hours per week year-round, who are U.S. Citizens or legal U.S. residents and are performing the duties of their occupation on their last scheduled working day immediately preceding the effective date of the plan are eligible for insurance on that effective date.

Your benefit coverage is in increments of \$10,000, minimum of \$10,000, to a maximum of \$100,000, not to exceed 5 times annual earnings, whichever is less. Amounts in excess of the guaranteed issue amount of \$50,000 will require evidence of insurability. If the employee is age 70 or over, the amount is \$10,000.

Your spouse's benefit is in increments of \$5,000, minimum of \$5,000, to a maximum of \$50,000, or one half of the employee's elected amount, whichever is less. Amounts in excess of the guaranteed issue amount of \$25,000 will require evidence of insurability. The spouse's premiums are based on the employee's age.

The benefit amount for your children is in increments of \$2,500 to a maximum of \$10,000, or one-half of the employee's elected amount, whichever is less. Infants will be covered for \$1,500. Infants are defined as being fourteen days of age to six months, and children are six months of age to 19 (or 25 if a full-time student*).

*May vary by state.

Employee & Spouse Age/Rates per \$1,000					
Age 29 and under	\$0.075	45-49	\$0.250	65-69	\$1.370
30-34	\$0.099	50-54	\$0.386	70-74	\$2.347
35-39	\$0.129	55-59	\$0.576	75+	\$2.347
40-44	\$0.176	60-64	\$0.791	Child rates per \$2,500	\$0.716

Coverage reduces 50 percent at age 70. Coverage terminates at retirement.

Additional Benefits
Waiver of Premium
Conversion
Portability
Accelerated Death Benefit
Accidental Death and Dismemberment including**
- Seat Belt / Airbag
- Repatriation
- Day Care
- Spouse and Child Education
- Common Disaster

**Subject to state approval

Enroll today!

Complete, sign and turn in your enrollment form to Human Resources.

Coverage Limitation*

If a Covered Person dies by suicide, while sane or insane, within two years of the policy effective date, the amount payable by Us will be equal to the total premiums paid. If a Covered Person dies by suicide, while sane or insane, within two years after the effective date of any increase in the specified amount, the amount payable by Us associated with such increase will be limited to the cost of insurance associated with the increase.

*May vary by state.

This outline is intended to be a summary of your benefits and does not include all plan provisions and limitations. Details of your benefits can be found in your certificate of coverage, provided to you at a later date. If there are any discrepancies between this outline and the group certificate, the group certificate governs.

This is a brief description only and is not a contract. The Group Master Policy will determine all rights and benefits. For costs and further details of the coverage, including exclusions, any reductions or limitations and the terms under which the policy may be continued in force or discontinued, see your agent or write to the Company. The policy is cancellable or renewable at the option of the Company. The Company has the right to increase the premium rates. Coverage is not available in all states.

Policy and certificate referenced:
PJ136/CJ136



KANSAS CITY LIFE

GROUP BENEFITS

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