

Life Benefit

Voluntary Life Insurance with Accidental Death and Dismemberment (AD&D)

SUMMARY OF BENEFITS

Dependent

Sponsored by: Southeast Personnel Leasing, Inc.

Employee

All Full-Time and Regular Part-Time Employees with a 30 day Waiting Period All Full-Time and Regular Part-Time Employees with a 60 day Waiting Period All Full-Time and Regular Part-Time Employees with a 90 day Waiting Period

	Employee must elect cover	rage for Spouse or dependents to	be eligible.
Amount	Choice of \$10,000 increments	Choice of \$5,000 increments	Age 14 Days to 6 months: \$250 6 months to age 19 (to age 25 if full-time student): \$5,000 - \$10,000
			Newborn children to age 14 days are not eligible for a benefit
Minimum Amount	\$10,000	\$5,000	\$5,000
Maximum Amount	\$100,000, limited to 5 times your annual salary Employees age 70 and older, maximum benefit is \$50,000	\$50,000, limited to 50% of employee amount	\$10,000
Guarantee Issue for Newly Eligible Employee	\$100,000	\$30,000	
Current Eligible Employees	You or your Spouse may elect or increase insurance levels on a guaranteed acceptance basis during you enrollment period, provided that you or your Spouse declined, withdrawn, or pending for coverage.	r company's defined annual open	
AD&D Benefit	Employee	Spouse	
Amount	Benefit amount equal to the life amount elected by you. Cost included in the schedule.	Same as employee	
Benefit Reduction	Employee	Spouse	
Benefits will	50% at age 70;	50% at Employee Age 70	
reduce:	Benefits terminate at retirement	Benefits terminate at Employee Retirement	
Eligibility	Employee	Spouse and Dependents	
	All employees in an eligible class.	Cannot be in a period of limited effect.	activity on the day coverage takes
Additional Benefit	ts		
See Definition:	Accelerated Death Benefit		
See Definition:	Portability		
See Definition:	Conversion		
See Definition:	Seat Belt, Airbag, and Common Carrio	er	

Spouse

Definitions Accelerated Death Benefit

Accelerated Death Benefit provides an option to withdraw a percentage of your life insurance coverage when diagnosed as terminally ill (as defined in the policy). The death benefit will be reduced by the amount

withdrawn. To qualify, you have satisfied the Active Work rule and have been covered under this policy for the required amount of time as defined by the policy. Check with your tax advisor or attorney before exercising this

option.

AD&D Accidental Death and Dismemberment (AD&D) insurance provides specified benefits for a covered accidental

bodily injury that directly causes dismemberment (e.g., the loss of a hand, foot, or eye). In the event that death

occurs from a covered accident, both the life and the AD&D benefit would be payable

Conversion If you terminate your employment or become ineligible for this coverage, you have the option to convert all or part

of the amount of coverage in force to an individual life policy on the date of termination without Evidence of

Insurability. Conversion election must be made within 31 days of your date of termination.

Guarantee Issue For timely entrants enrolled within 31 days of becoming eligible, the Guarantee Issue amount is available without

any Evidence of Insurability requirement. Evidence of Insurability will be required for any amounts above this, for

late enrollees or increase in insurance, and it will be provided at your own expense.

Limited Activity A period when a Spouse or dependent is confined in a health care facility; or, whether confined or not, is unable to

perform the regular and usual activities of a healthy person of the same age and sex.

Portability If coverage has been in force for at least 12 months, you may continue coverage for a specified period of time after

your employment by paying the required premium. Portability is available if you cease employment for a reason other than total disability or retirement at Social Security Normal Retirement Age. A written application must be

made within 31 days of your termination.

Seat Belt, Airbag, and Common Carrier

If you die as a result of a covered auto accident while wearing a seat belt or in a vehicle equipped with an airbag, additional benefits are payable up to \$10,000 or 10% of the principal sum, whichever is less. If loss occurs for you due to an accident while riding as a passenger in a common carrier, benefits will be double the amount that would

otherwise apply as outlined in the certificate.

Term Life Benefit provided to the designated beneficiary upon the death of the insured. The benefit is provided for the time

period that you are eligible and premium is paid. There is no cash value associated with this product.

Exclusion: Suicide Benefits will not be paid if the death results from suicide within 2 years after coverage is effective. May apply if

employee contributes toward the premium.

Additional Benefits

LifeKeysSM Online will & testament preparation service, identity theft resources and beneficiary assistance support for all

employees and eligible dependents covered under the Group Term Life and/or AD&D policy.

TravelConnectSM Travel assistance services for employees and eligible dependents traveling more than 100 miles from home.

For assistance or additional information Cor	ntact Lincoln Financial Group at
(800) 423-2765; reference ID: SEPERLEAS	www.LincoInFinancial.com

NOTE: This is not intended as a complete description of the insurance coverage offered. Controlling provisions are provided in the policy, and this summary does not modify those provisions or the insurance in any way. This is not a binding contract. A certificate of coverage will be made available to you that describes the benefits in greater details. Should there be a difference between this summary and the contract, the contract will govern.

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Monthly Employee Premium

Life and Accidental Death and Dismemberment Premium for sample benefit amounts

Employee and Spouse premiums are calculated separately.
Refer to Program Specifications for your maximum benefit amounts.
Benefits and premium amounts reflect age reductions.

Monthly Per \$1000	AGE	\$ 10,000	\$ 20,000	\$ 30,000	\$ 40,000	\$ 50,000	\$ 60,000	\$ 70,000	\$ 80,000	\$ 90,000	\$ 100,000
0.1000	<25	\$1.00	\$2.00	\$3.00	\$4.00	\$5.00	\$6.00	\$7.00	\$8.00	\$9.00	\$10.00
0.1000	25-29	\$1.00	\$2.00	\$3.00	\$4.00	\$5.00	\$6.00	\$7.00	\$8.00	\$9.00	\$10.00
0.1100	30-34	\$1.10	\$2.20	\$3.30	\$4.40	\$5.50	\$6.60	\$7.70	\$8.80	\$9.90	\$11.00
0.1400	35-39	\$1.40	\$2.80	\$4.20	\$5.60	\$7.00	\$8.40	\$9.80	\$11.20	\$12.60	\$14.00
0.2000	40-44	\$2.00	\$4.00	\$6.00	\$8.00	\$10.00	\$12.00	\$14.00	\$16.00	\$18.00	\$20.00
0.3200	45-49	\$3.20	\$6.40	\$9.60	\$12.80	\$16.00	\$19.20	\$22.40	\$25.60	\$28.80	\$32.00
0.5900	50-54	\$5.90	\$11.80	\$17.70	\$23.60	\$29.50	\$35.40	\$41.30	\$47.20	\$53.10	\$59.00
0.9200	55-59	\$9.20	\$18.40	\$27.60	\$36.80	\$46.00	\$55.20	\$64.40	\$73.60	\$82.80	\$92.00
1.0800	60-64	\$10.80	\$21.60	\$32.40	\$43.20	\$54.00	\$64.80	\$75.60	\$86.40	\$97.20	\$108.00
1.9200	65-69	\$10,000	\$20,000	\$30,000	\$40,000	\$50,000	\$60,000	\$70,000	\$80,000	\$90,000	\$100,000
		\$19.20	\$38.40	\$57.60	\$76.80	\$96.00	\$115.20	\$134.40	\$153.60	\$172.80	\$192.00
3.7300	70-74	\$5,000	\$10,000	\$15,000	\$20,000	\$25,000	N/A	N/A	N/A	N/A	N/A
		\$18.65	\$37.30	\$55.95	\$74.60	\$93.25	N/A	N/A	N/A	N/A	N/A
9.9600	75-79	\$5,000	\$10,000	\$15,000	\$20,000	\$25,000	N/A	N/A	N/A	N/A	N/A
		\$49.80	\$99.60	\$149.40	\$199.20	\$249.00	N/A	N/A	N/A	N/A	N/A
22.7600	80+	\$5,000	\$10,000	\$15,000	\$20,000	\$25,000	N/A	N/A	N/A	N/A	N/A
		\$113.80	\$227.60	\$341.40	\$455.20	\$569.00	N/A	N/A	N/A	N/A	N/A

This is an estimate of premium cost. Actual deductions may vary slightly due to rounding and payroll frequency.

Example:

Example:

Use this formula to calculate premium for benefit amounts over \$ 100,000

Age	Э	Monthly	Rate Per \$1,000	Х	Benefit In \$1,000's	=	Monthly	Cost
	35	0.1	400	Х	150	=	\$	21.00
				X		=		

Dependent Children Benefit Monthly Rate:

\$ 5,000 \$ 10,000 \$ 1.00 \$ 2.00

Monthly Spouse Premium

Life and Accidental Death and Dismemberment Premium for sample benefit amounts

Employee and Spouse premiums are calculated separately. Spouse premiums will be calculated based on the Employee Age Refer to Program Specifications for your maximum benefit amounts. Benefits and premium amounts reflect age reductions.

Monthly RATE Per \$1000	AGE	\$ 5,000	\$ 10,000	\$ 15,000	\$ 20,000	\$ 25,000	\$ 30,000	\$ 35,000	\$ 40,000	\$ 45,000	\$ 50,000
0.1000	<25	\$0.50	\$1.00	\$1.50	\$2.00	\$2.50	\$3.00	\$3.50	\$4.00	\$4.50	\$5.00
0.1000	25-29	\$0.50	\$1.00	\$1.50	\$2.00	\$2.50	\$3.00	\$3.50	\$4.00	\$4.50	\$5.00
0.1100	30-34	\$0.55	\$1.10	\$1.65	\$2.20	\$2.75	\$3.30	\$3.85	\$4.40	\$4.95	\$5.50
0.1400	35-39	\$0.70	\$1.40	\$2.10	\$2.80	\$3.50	\$4.20	\$4.90	\$5.60	\$6.30	\$7.00
0.2000	40-44	\$1.00	\$2.00	\$3.00	\$4.00	\$5.00	\$6.00	\$7.00	\$8.00	\$9.00	\$10.00
0.3200	45-49	\$1.60	\$3.20	\$4.80	\$6.40	\$8.00	\$9.60	\$11.20	\$12.80	\$14.40	\$16.00
0.5900	50-54	\$2.95	\$5.90	\$8.85	\$11.80	\$14.75	\$17.70	\$20.65	\$23.60	\$26.55	\$29.50
0.9200	55-59	\$4.60	\$9.20	\$13.80	\$18.40	\$23.00	\$27.60	\$32.20	\$36.80	\$41.40	\$46.00
1.0800	60-64	\$5.40	\$10.80	\$16.20	\$21.60	\$27.00	\$32.40	\$37.80	\$43.20	\$48.60	\$54.00
1.9200	65-69	\$5,000	\$10,000	\$15,000	\$20,000	\$25,000	\$30,000	\$35,000	\$40,000	\$45,000	\$50,000
		\$9.60	\$19.20	\$28.80	\$38.40	\$48.00	\$57.60	\$67.20	\$76.80	\$86.40	\$96.00
3.7300	70-74	\$2,500	\$5,000	\$7,500	\$10,000	\$12,500	\$15,000	\$17,500	\$20,000	\$22,500	\$25,000
		\$9.33	\$18.65	\$27.98	\$37.30	\$46.63	\$55.95	\$65.28	\$74.60	\$83.93	\$93.25
9.9600	75-79	\$2,500	\$5,000	\$7,500	\$10,000	\$12,500	\$15,000	\$17,500	\$20,000	\$22,500	\$25,000
		\$24.90	\$49.80	\$74.70	\$99.60	\$124.50	\$149.40	\$174.30	\$199.20	\$224.10	\$249.00
22.7600	80+	\$2,500	\$5,000	\$7,500	\$10,000	\$12,500	\$15,000	\$17,500	\$20,000	\$22,500	\$25,000
		\$56.90	\$113.80	\$170.70	\$227.60	\$284.50	\$341.40	\$398.30	\$455.20	\$512.10	\$569.00

This is an estimate of premium cost. Actual deductions may vary slightly due to rounding and payroll frequency.

Example:

Example:

Use this formula to calculate premium for benefit amounts over

50,000

A	ge	Monthly Ra	ate Per 1,000	х	Benefit In \$1,000's	II	Monthly	Cost
	35	0.1400	0	Х	75	=	\$	10.50
				Х		=		

\$

Dependent Children Benefit Monthly Rate:

\$ 5,000	\$ 10,000
\$ 1.00	\$ 2.00

Weekly Employee Premium

Life and Accidental Death and Dismemberment Premium for sample benefit amounts

Employee and Spouse premiums are calculated separately.
Refer to Program Specifications for your maximum benefit amounts.
Benefits and premium amounts reflect age reductions.

Weekly RATE Per \$1000	AGE	\$ 10,000	\$ 20,000	\$ 30,000	\$ 40,000	\$ 50,000	\$ 60,000	\$ 70,000	\$ 80,000	\$ 90,000	\$ 100,000
0.0231	<25	\$0.23	\$0.46	\$0.69	\$0.92	\$1.16	\$1.39	\$1.62	\$1.85	\$2.08	\$2.31
0.0231	25-29	\$0.23	\$0.46	\$0.69	\$0.92	\$1.16	\$1.39	\$1.62	\$1.85	\$2.08	\$2.31
0.0254	30-34	\$0.25	\$0.51	\$0.76	\$1.02	\$1.27	\$1.52	\$1.78	\$2.03	\$2.29	\$2.54
0.0323	35-39	\$0.32	\$0.65	\$0.97	\$1.29	\$1.62	\$1.94	\$2.26	\$2.58	\$2.91	\$3.23
0.0462	40-44	\$0.46	\$0.92	\$1.39	\$1.85	\$2.31	\$2.77	\$3.23	\$3.70	\$4.16	\$4.62
0.0738	45-49	\$0.74	\$1.48	\$2.21	\$2.95	\$3.69	\$4.43	\$5.17	\$5.90	\$6.64	\$7.38
0.1362	50-54	\$1.36	\$2.72	\$4.09	\$5.45	\$6.81	\$8.17	\$9.53	\$10.90	\$12.26	\$13.62
0.2123	55-59	\$2.12	\$4.25	\$6.37	\$8.49	\$10.62	\$12.74	\$14.86	\$16.98	\$19.11	\$21.23
0.2492	60-64	\$2.49	\$4.98	\$7.48	\$9.97	\$12.46	\$14.95	\$17.44	\$19.94	\$22.43	\$24.92
0.4431	65-69	\$10,000	\$20,000	\$30,000	\$40,000	\$50,000	\$60,000	\$70,000	\$80,000	\$90,000	\$100,000
		\$4.43	\$8.86	\$13.29	\$17.72	\$22.16	\$26.59	\$31.02	\$35.45	\$39.88	\$44.31
0.8608	70-74	\$5,000	\$10,000	\$15,000	\$20,000	\$25,000	N/A	N/A	N/A	N/A	N/A
		\$4.30	\$8.61	\$12.91	\$17.22	\$21.52	N/A	N/A	N/A	N/A	N/A
2.2985	75-79	\$5,000	\$10,000	\$15,000	\$20,000	\$25,000	N/A	N/A	N/A	N/A	N/A
		\$11.49	\$22.99	\$34.48	\$45.97	\$57.46	N/A	N/A	N/A	N/A	N/A
5.2523	80 +	\$5,000	\$10,000	\$15,000	\$20,000	\$25,000	N/A	N/A	N/A	N/A	N/A
		\$26.26	\$52.52	\$78.78	\$105.05	\$131.31	N/A	N/A	N/A	N/A	N/A

This is an estimate of premium cost. Actual deductions may vary slightly due to rounding and payroll frequency.

Example:

Use this formula to calculate premium for benefit amounts over \$ 100,000

Ą	ge	Weekly	Rate Per \$1,000	Х	Benefit In \$1,000's	=	Weekly	Cost
	35	0.0	323	Х	150	=	\$	4.85
				X		_		

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Example:

Dependent Children Benefit
Weekly Rate:

\$ 5,000 \$ 10,000
\$ 0.23 \$ 0.46

Weekly Spouse Premium

Life and Accidental Death and Dismemberment Premium for sample benefit amounts

Employee and Spouse premiums are calculated separately. Spouse premiums will be calculated based on the Employee Age Refer to Program Specifications for your maximum benefit amounts. Benefits and premium amounts reflect age reductions.

Weekly RATE Per \$1000	AGE	\$ 5,000	\$ 10,000	\$ 15,000	\$ 20,000	\$ 25,000	\$ 30,000	\$ 35,000	\$ 40,000	\$ 45,000	\$ 50,000
0.0231	<25	\$0.12	\$0.23	\$0.35	\$0.46	\$0.58	\$0.69	\$0.81	\$0.92	\$1.04	\$1.16
0.0231	25-29	\$0.12	\$0.23	\$0.35	\$0.46	\$0.58	\$0.69	\$0.81	\$0.92	\$1.04	\$1.16
0.0254	30-34	\$0.13	\$0.25	\$0.38	\$0.51	\$0.64	\$0.76	\$0.89	\$1.02	\$1.14	\$1.27
0.0323	35-39	\$0.16	\$0.32	\$0.48	\$0.65	\$0.81	\$0.97	\$1.13	\$1.29	\$1.45	\$1.62
0.0462	40-44	\$0.23	\$0.46	\$0.69	\$0.92	\$1.16	\$1.39	\$1.62	\$1.85	\$2.08	\$2.31
0.0738	45-49	\$0.37	\$0.74	\$1.11	\$1.48	\$1.85	\$2.21	\$2.58	\$2.95	\$3.32	\$3.69
0.1362	50-54	\$0.68	\$1.36	\$2.04	\$2.72	\$3.41	\$4.09	\$4.77	\$5.45	\$6.13	\$6.81
0.2123	55-59	\$1.06	\$2.12	\$3.18	\$4.25	\$5.31	\$6.37	\$7.43	\$8.49	\$9.55	\$10.62
0.2492	60-64	\$1.25	\$2.49	\$3.74	\$4.98	\$6.23	\$7.48	\$8.72	\$9.97	\$11.21	\$12.46
0.4431	65-69	\$5,000	\$10,000	\$15,000	\$20,000	\$25,000	\$30,000	\$35,000	\$40,000	\$45,000	\$50,000
		\$2.22	\$4.43	\$6.65	\$8.86	\$11.08	\$13.29	\$15.51	\$17.72	\$19.94	\$22.16
0.8608	70-74	\$2,500	\$5,000	\$7,500	\$10,000	\$12,500	\$15,000	\$17,500	\$20,000	\$22,500	\$25,000
		\$2.15	\$4.30	\$6.46	\$8.61	\$10.76	\$12.91	\$15.06	\$17.22	\$19.37	\$21.52
2.2985	75-79	\$2,500	\$5,000	\$7,500	\$10,000	\$12,500	\$15,000	\$17,500	\$20,000	\$22,500	\$25,000
		\$5.75	\$11.49	\$17.24	\$22.99	\$28.73	\$34.48	\$40.22	\$45.97	\$51.72	\$57.46
5.2523	80+	\$2,500	\$5,000	\$7,500	\$10,000	\$12,500	\$15,000	\$17,500	\$20,000	\$22,500	\$25,000
	İ	\$13.13	\$26.26	\$39.39	\$52.52	\$65.65	\$78.78	\$91.92	\$105.05	\$118.18	\$131.31

This is an estimate of premium cost. Actual deductions may vary slightly due to rounding and payroll frequency.

Example:

Example:

Use this formula to calculate premium for benefit amounts over

50,000

Age	WAAKIV	Rate Per 61,000	X	Benefit In \$1,000's	-	Weekly	Cost
35	0.032	23	Х	75	=	\$	2.42
			Χ		=		

\$

Dependent Children Benefit Weekly Rate:

\$ 5,000	\$ 10,000
\$ 0.23	\$ 0.46