

## Individual Accident (IAC4000) for VT

Applicable to Policy Forms IAC4000

### ● On/Off-Job Accident Coverage

BENEFIT LEVEL	ISSUE AGE	NAMED INSURED	EMPLOYEE & SPOUSE	ONE-PARENT FAMILY	TWO-PARENT FAMILY
Basic	0-80	\$13.11	\$22.10	\$29.05	\$38.04
Preferred	0-80	\$17.17	\$28.91	\$37.73	\$49.47
Premier	0-80	\$21.02	\$35.37	\$46.23	\$60.58

## Individual Accident (IAC4000) for VT

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### ● On/Off-Job Accident Coverage, Active Lifestyles

BENEFIT LEVEL	ISSUE AGE	NAMED INSURED	EMPLOYEE & SPOUSE	ONE-PARENT FAMILY	TWO-PARENT FAMILY
Basic	0-80	\$14.42	\$24.31	\$31.96	\$41.84
Preferred	0-80	\$18.89	\$31.80	\$41.50	\$54.42
Premier	0-80	\$23.12	\$38.91	\$50.85	\$66.64

## Individual Accident (IAC4000) for VT

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### ● On/Off-Job Accident Coverage, Gunshot Wound \$5,000

BENEFIT LEVEL	ISSUE AGE	NAMED INSURED	EMPLOYEE & SPOUSE	ONE-PARENT FAMILY	TWO-PARENT FAMILY
Basic	0-80	\$14.11	\$23.10	\$30.05	\$39.04
Preferred	0-80	\$18.17	\$29.91	\$38.73	\$50.47
Premier	0-80	\$22.02	\$36.37	\$47.23	\$61.58

## Individual Accident (IAC4000) for VT

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### ● On/Off-Job Accident Coverage, Wellbeing Assistance Basic - \$50

BENEFIT LEVEL	ISSUE AGE	NAMED INSURED	EMPLOYEE & SPOUSE	ONE-PARENT FAMILY	TWO-PARENT FAMILY
Basic	0-80	\$17.26	\$26.25	\$33.20	\$42.19
Preferred	0-80	\$21.32	\$33.06	\$41.88	\$53.62
Premier	0-80	\$25.17	\$39.52	\$50.38	\$64.73

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### ● Off-Job Accident Coverage, Active Lifestyles

BENEFIT LEVEL	ISSUE AGE	NAMED INSURED	EMPLOYEE & SPOUSE	ONE-PARENT FAMILY	TWO-PARENT FAMILY
Basic	0-80	\$11.34	\$19.95	\$28.64	\$37.26
Preferred	0-80	\$14.88	\$26.14	\$37.18	\$48.43
Premier	0-80	\$18.24	\$32.00	\$45.58	\$59.35

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### ● Off-Job Accident Coverage

BENEFIT LEVEL	ISSUE AGE	NAMED INSURED	EMPLOYEE & SPOUSE	ONE-PARENT FAMILY	TWO-PARENT FAMILY
Basic	0-80	\$10.31	\$18.14	\$26.04	\$33.87
Preferred	0-80	\$13.53	\$23.76	\$33.80	\$44.03

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### ● Off-Job Accident Coverage

BENEFIT LEVEL	ISSUE AGE	NAMED INSURED	EMPLOYEE & SPOUSE	ONE-PARENT FAMILY	TWO-PARENT FAMILY
Premier	0-80	\$16.58	\$29.09	\$41.44	\$53.95

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### ● Off-Job Accident Coverage, Gunshot Wound \$5,000

BENEFIT LEVEL	ISSUE AGE	NAMED INSURED	EMPLOYEE & SPOUSE	ONE-PARENT FAMILY	TWO-PARENT FAMILY
Basic	0-80	\$11.31	\$19.14	\$27.04	\$34.87
Preferred	0-80	\$14.53	\$24.76	\$34.80	\$45.03

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### ● Off-Job Accident Coverage, Wellbeing Assistance Basic - \$50

BENEFIT LEVEL	ISSUE AGE	NAMED INSURED	EMPLOYEE & SPOUSE	ONE-PARENT FAMILY	TWO-PARENT FAMILY
Basic	0-80	\$14.46	\$22.29	\$30.19	\$38.02
Preferred	0-80	\$17.68	\$27.91	\$37.95	\$48.18

#### Important Notice

Insurance coverage has exclusions and limitations that may affect benefits payable. For a complete description of benefits, limitations and exclusions, please refer to an outline of coverage, sample policy/certificate, proposal description or see your Colonial Life benefits counselor. Coverage type, benefits and rates vary by state. Coverage may not be available in all states. Rates provided are illustrative and your actual premium may be different depending on your particular situation and plan choices.

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