



# COUNTY OF MONTEREY - #C0U57

## MONTHLY / INDUSTRY "B"

Name \_\_\_\_\_ Birth Date \_\_\_\_\_ SSN \_\_\_\_\_  
Last First MI

Home or Cell Phone ( ) \_\_\_\_\_ E-Mail \_\_\_\_\_

Spouse \_\_\_\_\_ Birth Date \_\_\_\_\_ Dependent Children Y / N

Home Address \_\_\_\_\_  
Street Address City State Zip

Employee ID# \_\_\_\_\_ Date of Hire \_\_\_\_\_ Job Title \_\_\_\_\_ Duties \_\_\_\_\_

Notes: \_\_\_\_\_

☐ **ACCIDENT ADVANTAGE** Individual Insured & Spouse 1 Parent Family 2 Parent Family  
(Series A36000 – Option 4)  
☐ 35.23 ☐ 47.19 ☐ 52.78 ☐ 67.21

☐ **SHORT-TERM DISABILITY / Employee Only – 0/7 Elimination Period**  
(Series A57600)

| Annual Income    | \$62,000                        | \$104,000                       | \$108,000                       | \$113,000                       | \$118,000                       | \$124,000                       | \$132,000                       | \$150,000                       | \$153,000                       | \$155,000                       |
|------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|
| 12 Month Benefit | \$1,300                         | \$1,400                         | \$1,500                         | \$1,600                         | \$1,700                         | \$1,800                         | \$1,900                         | \$2,000                         | \$2,100                         | \$2,200                         |
| Age 18 – 49      | <input type="checkbox"/> 89.57  | <input type="checkbox"/> 96.46  | <input type="checkbox"/> 103.35 | <input type="checkbox"/> 110.24 | <input type="checkbox"/> 117.13 | <input type="checkbox"/> 124.02 | <input type="checkbox"/> 130.91 | <input type="checkbox"/> 137.80 | <input type="checkbox"/> 144.69 | <input type="checkbox"/> 151.58 |
| Age 50 – 64      | <input type="checkbox"/> 111.54 | <input type="checkbox"/> 120.12 | <input type="checkbox"/> 128.70 | <input type="checkbox"/> 137.28 | <input type="checkbox"/> 145.86 | <input type="checkbox"/> 154.44 | <input type="checkbox"/> 163.02 | <input type="checkbox"/> 171.60 | <input type="checkbox"/> 180.18 | <input type="checkbox"/> 188.76 |

Annual Salary \$ \_\_\_\_\_ Days / Off-the-Job \$ \_\_\_\_\_ Monthly Benefit  
Premium: \$ \_\_\_\_\_ Paycheck \_\_\_\_\_ Days / Sickness \_\_\_\_\_ Mo / Yr. Benefit Period

☐ **CANCER PROTECTION ASSURANCE** Individual Insured & Spouse 1 Parent Family 2 Parent Family  
(Series B70300 – Level 3)  
Base w/ Specified Disease & Bldg. Riders ☐ 54.23 ☐ 95.82 ☐ 55.14 ☐ 96.73

☐ **CRITICAL CARE PROTECTION POLICY** Individual Insured & Spouse 1 Parent Family 2 Parent Family  
(Series A74300)  
Age 18 - 35 ☐ 21.32 ☐ 41.21 ☐ 34.06 ☐ 46.02  
Age 36 - 45 ☐ 32.37 ☐ 58.63 ☐ 43.16 ☐ 63.31  
Age 46 - 55 ☐ 46.93 ☐ 87.88 ☐ 55.90 ☐ 92.82  
Age 56 - 64 ☐ 63.70 ☐ 122.85 ☐ 77.48 ☐ 130.78

☐ **HOSPITAL CHOICE / Benefit Amount \$1500** Individual Insured & Spouse 1 Parent Family 2 Parent Family  
(Series B40100)  
Age 18 – 49 ☐ 69.69 ☐ 116.22 ☐ 98.15 ☐ 122.72  
Age 50 – 59 ☐ 77.09 ☐ 135.98 ☐ 102.83 ☐ 141.70  
Age 60 – 64 ☐ 86.32 ☐ 153.66 ☐ 113.23 ☐ 162.24

☐ **LIFE PROTECTOR**  
\$ \_\_\_\_\_ Whole Life \$ \_\_\_\_\_ Term Life (10, 20, 30 Year)  
\$ \_\_\_\_\_ Rider: Spouse  
\$ \_\_\_\_\_ Rider: Child \$ \_\_\_\_\_ Premium per Paycheck