

Disability 1000 for CA A Risk Class

Applicable to policy form DIS1000

- Off-Job Injury, Off-Job Sickness
- 6 Month Benefit Period

ELIMINATION PERIOD	ISSUE AGE	\$1,000*	\$1,500*	\$2,000*	\$2,500*	\$3,000*
14 days Injury / 14 days Sickness	17-49	\$39.10	\$58.65	\$78.20	\$97.75	\$117.30
	50-64	\$51.70	\$77.55	\$103.40	\$129.25	\$155.10

*monthly benefit amount

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. Colonial Life products are underwritten by Colonial Life & Accident Insurance Company, for which Colonial Life is the marketing brand.
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