

ASSIGNMENT OF OWNERSHIP OF INSURANCE POLICY

Know all men by these presents, that I, _____
owner of _____ Life Insurance Company
(hereafter referred to as "Company") Policy number _____,
issued upon the life of _____, hereby
transfer, assign and convey all the rights, powers and incidents of ownership which I now hold
under the aforesaid policy to _____, and
furthermore, I hereby release and forever discharge the Company, its successors and assigns,
from any claims, demands or causes of action which I might have against the said Company
arising out of the aforesaid Policy.

WITNESS my hand this _____ day of _____, _____.

Owner Signature _____

Social Security Number _____ Date of Birth _____

New Owner Signature _____

Name (Print) _____

Street Address _____

City, State ZIP _____

Telephone Number (_____) _____

Social Security Number _____ Date of Birth _____

THE STATE OF

COUNTY OF

BEFORE ME

_____, known to me to be the person whose
name is subscribed on the foregoing instrument, and acknowledged to me that he/she executed
the same for the purpose therein expressed.

GIVEN UNDER MY HAND AND SEAL OF OFFICE

this _____ day of _____, _____

(signature)

Notary Public in and for

_____ County, _____

My commission expires: _____