

## Transfer of Ownership

- Form must be used with any certificate number from 356000 and up.
- Form must be completed in black ink or typed.
- Signature of Owner required.
- Witness must be Agent or Person of legal age with no interest in the contract.
- If a Trust is to be the Owner, a copy of the Trust Agreement must be attached.
- Be sure to name a Contingent Owner for life insurance if the new owner will be someone other than the insured.
- If a Corporation is the Owner, signatures and titles of two officers are required.
- Send completed form to the Home Office.

GENERAL INFORMATION – COMPLETION REQUIRED		
Insured	Certificate Number	
Current Owner	Owner's SSN or Tax ID Number	
New Certificate Owner (Print Full Name)		Date of Birth
Address		City, State, ZIP
Telephone Number	Relationship to Insured	New SSN or Tax ID Number
New Contingent Certificate Owner (Print Full Name)		Date of Birth
Address		City, State, ZIP
Telephone Number	Relationship to Insured	New SSN or Tax ID Number

**Certification Statement** – Under penalties of perjury, I certify (1) that the number shown on this form is my correct taxpayer identification number and (2) that I am not subject to backup withholding either because I have not been notified that I am subject to backup withholding as a result of a failure to report all interest and dividends, or the Internal Revenue Service has notified me that I am no longer subject to backup withholding. I further certify that I am not a party in a pending bankruptcy, divorce, or separation.

Dated at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

City & State Month Year

\_\_\_\_\_  
Signature of Witness

\_\_\_\_\_  
Signature of Present Owner

\_\_\_\_\_  
Signature of Witness

\_\_\_\_\_  
Signature of New Owner

\_\_\_\_\_  
Signature of Witness

\_\_\_\_\_  
Second Signature for Corporate Owner

**HOME OFFICE USE ONLY:** The original has been received and approved as of this date.

Date: \_\_\_\_\_ Registrar: \_\_\_\_\_