## Policy Ownership



## Assignment and transfer of ownership of alife insurance policy

If you have questions, contact Policy Services at 1-800-33	<b>36-4538.</b> Policy Number(s)
1. POLICY	r olicy (valitiber(3)
Insured Name (Last, First MI)	Insured SSN
2. CURRENT OWNER	
Name (Last, First MI)	SSN/TIN
Mailing Address	
3. NEW OWNER (if no change leave blank)	
Name (Last, First MI)	SSN/TIN
Mailing Address	Relation to Insured
4. NEW SUCCESSOR OWNER (if no change leave blank	3
Name (Last, First MI)	SSN/TIN
Mailing Address	Relation to Insured
5. SIGNATURES	
Owner, his/her heirs and assigns, all rights, titles and inte	es hereby assign, transfer, give, grant and convey to said New rest in the life insurance policy(ies) listed, issued by Armed te and deliver any further documents necessary to vest title in
If a New Successor Owner is designated above, ownership of the death of the owner.	of this policy will be transferred to that successor in the event
Current Owner Signature	Date Signed (mm/dd/yyyy)
New Owner Signature (if designated above)	Date Signed (mm/dd/yyyy)
Witness Signature	Witness Name (Last, First MI)

OFFICE USE ONLY. Approved by Armed Forces Mutual Secretary, by authority of the Board of Directors	Date Signed (mm/dd/yyyy)
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