



PHONE 303.792.9777 TOLL-FREE 800.777.9777

WWW.ASSUREDLIFE.ORG

ASSIGNMENT OF CERTIFICATE

NOTICE: No assignment shall be binding of the Society, unless and until it is filed with the Society at its Home Office. The Society shall not be responsible for and makes no representations concerning the validity or sufficiency of this or any other assignment.	
Name of Assignor (Printed):
Certificate No.:	
Name of Assignee (Printed):
	nber of Assignee:
Address of Assigned	e (Include City, State & Zip):
	I hereby assign, transfer, and set over to the above-named assignee all my right, title, and interest in e of Insurance designated above.
and to make all ele surrender, or assig sufficient receipt,	ns and conditions of the Certificate, Assignee shall have the sole right to exercise all options ections provided for, including the right the change the Beneficiary of, borrow upon, gn said Certificate without notice to or demand upon me and to give to the Society a valid and discharge, and/or release therefore, without requiring any further release from me or anyone or under me. I warrant and represent:
(a) No ba	nkruptcy or insolvency proceedings are pending against me.
	dertificate is not encumbered by or subject to any previous act of assignment, transfer, lien, pledge or
order of the	he court.
(c) The A	ssignment is Valid.
indebtedness now when recorded at	and agreed that this Assignment is subject to the claim of the Society for payment of any outstanding against the Certificate. It is further understood and agreed that this Assignment, the Home Office of the Society, shall be effective as of its date execution, but subject to any action taken by the Society prior to its receipt at Home Office.
Date	Signature of Assignor
Date	Signature of Assignee
	My Commission Expires
	seal
consent to the action Property States: A	is instrument and being fully aware of its effect on my rights in the Certificate being assigned, I hereby on of the Assignor in making the Assignment. Please note that the following are Community rizona, California, Idaho, Louisiana, Nevada, New Mexico, Texas, Washington, and Wisconsin. rty States require the spouse's signature.
Date	Spouse's Signature
The Society, making	any representations concerning or assuming any responsibility for the validity of sufficiency of

Date _____ Authorized Signature _____