

200 N. Martingale Rd., Ste. 405 Schaumburg, IL 60173 847-342-4500 info@1891FinancialLife.com www.1891FinancialLife.com

## TRANSFER OF OWNERSHIP

NOTE: Before completing this form see the instructions on the reverse side.

Name of Insured:	Certificate No.:
Name of Current Owner:	
	ns and transfers, without any exception, limitation, or reservation t in this certificate to the New Owner indicated below.
1) Choose "Individual" or "Trust"	
☐ INDIVIDUAL	
First Name: Midd	lle: Last:
TRUST	
Trust Name:	Trust Date (MM/DD/YYYY):
Trustee Name(s):	· · · · · · · · · · · · · · · · · · ·
2) New Owner's Contact Information	
Address / Apt. No:	
City:	State: ZIP:
Primary Telephone No:	ell 🗌 Other Alternate Phone No: 🔲 Cell 🔲 Other
Email:	
SSN/TIN: DOB (MM/DD/Y	YYY): Gender:
Relationship to Insured:	
Any person who knowingly presents a false state subject to penalties under state law.	ement in a claim for insurance may be guilty of a criminal offense and
SIGNATURE OF NEW OWNER	DATE
I hereby sell, assign, and transfer all my rights, ti	tle, and interest in this certificate to the above New Owner.
SIGNATURE OF CURRENT OWNER	DATE
Subscribed and sworn to before me on thisday of, 2	Acknowledged by the Home Office on this day of, 20
NOTARY PUBLIC	AUTHORIZED SIGNATURE
My commission expires	

## INSTRUCTIONS

- 1) New Owner is to sign the form first. The Current Owner signs after the New Owner.
- 2) Only the Current Owner's signature requires notarization.
- 3) After form is completed and executed before a Notary Public it is to be returned to the Home Office, 1891 Financial Life Insurance, 200 N. Martingale Rd., Ste. 405, Schaumburg, IL 60173.
- 4) After acknowledged by the Home Office, the certificate ownership and all rights of ownership will be transferred to the New Owner.
- 5) The acknowledged form will be returned to the Current Owner to be placed with the certificate.
- 6) While the use of this form transfers ownership of the certificate, it does not affect the beneficiary designation. The New Owner must complete a Change of Beneficiary form if they desire to change the beneficiary designation.