



HERMANN SONS LIFE

Ownership Change Request Form

Date _____ Certificate No. _____

Name _____

Address _____

City _____ State _____ Zip _____

Email _____

Phone No. _____ Social Security No. _____

I assign and transfer, without any exception, limitation or reservation whatsoever all of the rights, title and interest in and to the above mentioned certificate to:

Name	Date of Birth	Social Security No.
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1. _____

Please Choose **One** Designation: *If Living Otherwise* *OR* *And*

If you fail to choose a designation or if your choice is unclear *If Living Otherwise* is assumed.

2. _____

Once approved, this document gives the new owner(s) all contractual rights, including but not limited to surrendering, taking a loan against and changing beneficiary of the certificate. Changing ownership may generate a tax consequence. Please speak with your competent tax advisor regarding any tax applicable to this transaction.

Signature of Current Owner

State of _____

County of _____

This instrument was acknowledged before me on _____
by _____

(Personalized Seal)

Notary Public's Signature

*Mail completed form to: Hermann Sons Life, P.O. Box 1941, San Antonio, TX 78297-1941.
Home Office Phone: 800-234-4124 or 210-226-9261 • Website: hermannsonslife.org*