

## COLLATERAL ASSIGNMENT/RELEASE OF ASSIGNMENT

<b>Policy Number</b>	<b>Life Insured/Annuitant</b>
----------------------	-------------------------------

### Assignment - As Collateral Security

For value received, the undersigned hereby transfers his rights, interest and title in this policy to the below named assignee to the extent of his indebtedness.

Full Name of Assignee \_\_\_\_\_

Address No \_\_\_\_\_ Street \_\_\_\_\_ Apt. # \_\_\_\_\_

Town/City \_\_\_\_\_ Prov. \_\_\_\_\_ Postal Code \_\_\_\_\_

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

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Policyowner

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Beneficiary, where applicable

### Release of Collateral Assignment

Name of Assignee
------------------

For value received, the assignee hereby releases all rights and interest in the above policy.

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

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Signature of Assignee

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Signature of Assignee

### For Head Office Only

This document has been registered by Foresters Life Insurance Company but no responsibility is assumed for its validity.

Registered on \_\_\_\_\_ by \_\_\_\_\_.