

American Income Life Insurance Company

P.O. Box 2608 Waco, Texas 76797 www.aillins.com

ASSIGNMENT TO TRANSFER OWNERSHIP

Use this form only for an absolute transfer of ownership. If a collateral assignment for security purposes is intended, use American Bankers Assignment Form No. 10

The undersigned is the present owner of the following American Income Life Insurance Company policy:

Policy Number	Name of Insured
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The undersigned hereby assigns ownership of said policy to:

Assignee (new owner)	Relationship to present Owner
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_____ Dated at _____ on _____
Signature of Present Owner City State

Signature of Witness

_____ _____
Signature of New Owner Social Security Number of New Owner

IF THERE IS A CHANGE IN PREMIUM PAYMENT, PLEASE COMPLETE THE FOLLOWING:

Future premium billings are to be sent to:

Name	Address	City	State	Zip
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PLEASE NOTE THAT THIS CHANGE HAS NO EFFECT ON THE BENEFICIARY DESIGNATION. IF A CHANGE OF BENEFICIARY IS DESIRED, THE NEW OWNER MUST NOTIFY THE COMPANY OF THE CHANGE.

