

Assignment/ Release of Assignment

	Milite			
1	Policy Reference Number(s)			
2	Life Assured: Title			
	First Name(s)			
	Last Name			
Ass	ignment - Absolute or as Collateral Security			
	value received, the undersigned hereby tradd interests the above policy/ies:	nsfers and assigns to the person n	amed below all rights	
	Name			
	Address			
	The undersigned hereby states that this assig (enter either 'absolute' or 'as collateral sect			
	Signed at	this	day of	20
	Witness			
	or Policyholder if other than Life Assured			
Rel	ease of Collateral Assignment			
	Name of Assignee			
	For value received, the assignee hereby releases all rights and interests in the above policy(ies) to such person or persons entitled as if the assignment had not taken place.			
	Signed at	this	day of	20
	Witness		Signature of Assignee	
If a	corporation is completing this form, then the	eir corporate officer(s) must indicc	ute their title(s):	
		, , , , , ,	.,	
	ase send two completed copies to the Comp all cases, you must ensure that the policy nur	mber and name of the Life Assure	d are provided.	
		ou require any further details, plea	se ask your financial adviser.	in touch using our email address: