



AMERICAN FRATERNAL UNION

PO Box 59 • Ely, MN 55731-0059 • (218) 365-3143

OWNER DESIGNATION

Name of Insured	Policy Number
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The American Fraternal Union is hereby requested to endorse this Certificate so that the rights of ownership herein are transferred to the owner designated below. The owner hereafter of all right, title and interest of the undersigned and of the executors or administrators of the undersigned in said policy, including any proceeds thereof, will be

Name and Relationship of New Owner to the Insured	Address of New Owner
Date of Birth of New Owner	Social Security Number of New Owner

Said policy is to be held as separate property, and said policy will contain an endorsement, in form agreeable to the Union evidencing said new owner's rights therein.

For the purposes hereof such change will be deemed not to be an assignment and the owner shall be deemed not to be an assignee within the meaning of those terms as used in the policy in its present form or as endorsed.

Any existing appointment of Owner's Designee is hereby revoked as of the date this change takes effect. This change will take effect as of the date hereof subject to any payment made or other action taken by the Union before such endorsement.

Date

Signature of Policyowner

Witness to Signature of Policyowner

Home Office Acknowledgement (Do not write below this line)

The above has been filed at the Home Office of the American Fraternal Union.

Examined by _____
Date _____

National Secretary _____