

Protective Life Insurance Company P.O. Box 830619 Birmingham, AL 35283-0619

ASSIGNMENT/TRANSFER OF OWNERSHIP SECTION 1035 EXCHANGE

INSURED:			
OWNER:			
INSURER: (Provide Name of Existing Insurance Company with Street Address, City, State and Zip Code)			
POLICY NUMBER(S):			
ESTIMATED VALUE: \$			
PHONE NUMBER(S):			
For value received, I hereby assign and translisted policy(ies) in an exchange intended to quand agreements set forth below are condition Insured(s) named above. This conditional assignment	ualify under Section 10 ned upon Protective L	035 of the Internal Revenue Code. How ife's underwriting and approving a ne	vever, this assignment and all other terms we life insurance policy on the life of the
I understand that if Protective Life approves a the assigned policy(ies) and it/they will no lo approves the new life insurance policy, Protect on the assigned policy(ies) and apply such am- of the policy on the actual date of surrender is policy to be surrendered is a variable policy, s Life assumes no responsibility if the full schedu	nger be in force or e tive Life will collect wh ount received as prem s likely to be different since the cash surrence	effect as of the date of surrender. I finatever cash surrender values are available in the new life insurance policy. I from the cash surrender value of the pater value of a variable policy fluctuates	urther understand that, if Protective Life able from the existing insurance company understand that the cash surrender value olicy today. This is especially true if the with the market. I agree that Protective
I certify that the above listed policy(ies) is/are further certify that there is no proceeding in bar			any legal or equitable claims, or liens. I
I hereby designate Protective Life as beneficia of the Insured(s) named above. All other UNDERSTAND THAT THE POLICY(IES) TO OWNER(S) AS THE ABOVE LISTED POLICY	beneficiary designati BE ISSUED BY PR	ions under the above listed policy(ie	es) will remain in effect. I FURTHER
I certify that if the above listed policy(ies) is/a waive all rights and benefits under such policy(
I understand and agree that I will be responsit such time as Protective Life notifies me in writing	ole for keeping the abong that I have been iss	ove listed policy(ies) in force by paying sued a new life insurance policy.	any premiums as they become due until
I understand that under Section 1035, reporting exchanges of insurance contracts on Form 10 outstanding policy loan at the time of exchanging characterized as tax-free. In fact, any gain with when filing my individual federal income tax reexchanged pursuant to Section 1035 or otherword.	D99-R, including tax-fr ge. If there is an ou If be taxed to the exte turn that I enclose a c	ree exchanges under Section 1035 in statanding policy loan at the time of the ent of the outstanding policy loan. According to the reporting form (Form 1099-F	situations in which a policyholder has an e exchange, the transaction may not be ordingly, I understand that it is advisable (3) with an explanation that the policy was
Check One: I have enclosed the policy	y(ies).		been lost or destroyed. After due search edge, it/they is/are not in the possession
Insured(s) Signatures(s)		Witness	Date
*Spouse Signature (For Community Property S	States Only)	Witness	Date
Owner Signature		Witness	Date
Owner Signature		Witness	Date
Collateral Assignee/Irrevocable Beneficiary Sig	nature, if any	Witness	Date
(* If the Owner resides in the Community Pro	perty states of AZ, CA	A, ID, LA, NM, NV, TX, WA or WI we re	ecommend that the Owner's spouse also

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sign this form. Signatures must be witnessed by a disinterested party of legal age.)