

## **CHANGE OF NAME**

## Please complete ALL information requested.

I authorize a change of name for cont			
owned by		This request should be	
accompanied by a photocopy of offici Divorce Decree, or Official Government	al documentation for the name	change: Marriage Certificate,	
This is to certify the change of name to Annuitant  Owner	for (check one)		
by reason of (check one)  Divorce  Marriage  Other			
Please print new complete legal na	me – e.g. Mary Jane Smith no	ot Mrs. John J. Smith:	
The following statement is required by on this form is my correct Social Security			vn
I certify that I am not under guardians document affecting ownership or right further that no proceedings in bankrup	t to any monies due or to becor	ne due under this contract, and	
This form dated at	on the	day of, 20	
City/State		day o, <u>zo</u>	
		( )	
Signature of Owner(s) (if Joint – both must sign)	Owner's Social Security Number or Taxpayer ID Number	Owner's Telephone Number	
Signature of Witness*	() Telephone Number of Witness	Owner's E-mail Address (if available)	
*Owner's signature must be witnessed by an adult v	who is not a Beneficiary or newly named O	vner.	
After we have recorded the change, a contract.	an acknowledged copy will be s	ent to you to be kept with your	
	For Home Office Use		
Recorded By	Date		