

Liberty Life Assurance Company of Boston

Service Center – MS 03-3 100 Liberty Way Dover, NH 03820

COLLATERAL ASSIGNMENT

(Use when a contract is transferred as security)

1. Assignee Information				
Name		Telephone Number	Telephone Number	
Street Address	City	State	Zip	
2. Contract Information				
Owner's Name	Insured's Name	Contract Number		
3. Authorization				
For One Dollar, and other valuable consideration, receipt of which is acknowledged, I/We hereby assign, transfer and set over unto the above mentioned creditor ("assignee"), as its interest may appear, and to the executors, administrators, successors or assigns of said assignee, all right, title and interest in and to the above mentioned contract issued by Liberty Life Assurance Company of Boston (The Company). If the contract is assigned to a minor, the Company will deal with such minor only through a legally appointed guardian, acting under court order.				
4. SIGNATURES				
Signed in City Signed in State				
Signature of Owner(s)/Assignor(s)		Date (mm/dd/yy)		
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Signature of Assignee(s) (If corporate indicate name/title)		Date (mm/dd/yy)		
Signature of Witness		Date (mm/dd/yy)		
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5. RELEASE OF COLLATERAL ASSIGNMENT				
For value received, the Assignee named above hereby releases ALL rights, title and interest on the above listed contract on the life of:				
(List Insured's Name)				
	/			
Signature of Assignee(s) (If corporate indicate name/title)		Date (mm/dd/yy)		
This form was received and a copy was filed at the Service Center of The Company on the above signed date and Assignee. Liberty				
Life Assurance Company of Boston assumes no responsibility for the validity or the sufficiency of this or any other assignment.				

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