## **Explanation of Assignment**

A separate form must be completed for each policy.

	Security Life	Insurance Co	mpany
☐ Westerr	n American Li	fe Insurance	Company

**This is not an assignment form.** This form is used to explain the assignment when there are multiple Claimants for a policy who are assigning a portion of their proceeds.

1. Benefits assigned to (Assignee)
2. Policy Number:
3. Face amount of policy listed in line 2:
4. Total cost of Funeral Services and Merchandise: \$
5. Total amount to be assigned from this policy: \$

Claimant (Danafisiany) Nama	Dollar Amount Assigned	Signature of Claimant
Claimant (Beneficiary) Name	by this Claimant	Signature of Claimant
A.	\$	
В.	\$	
C.	\$	
D.	\$	
E.	\$	
F.	\$	
G.	\$	
Н.	\$	
I.	\$	
6. Total of A-I	\$	

Instructions: The total amounts in lines 5 and 6 must match. The totals in lines 5 and 6 must not exceed the policy face amount in line 3. The face amount in line 3 may be reduced by premiums due, loans outstanding, etc. If the total proceeds available are less than the total assigned, the proceeds will be assigned in the same proportions as requested above.