## Form of Assignment

For the valuable consideration	(the receipt of which is hereby acknow	wledged) I hereby assi	ign, transfer and set over, all my rights, title and
interest in policy number		on the life of	
issued by		on	
Box LB 02L, Allan Louisy administrators guarantee the va	Street, Laborie, St. Lucia and for alidity and sufficiency of the foregoin	the consideration a g assignment to the a	Union Limited, whose postal address is Post Office bove, expressed, I do also for my executors and bove named assignee, their executors, administrators rward policy document to the Laborie Co-operative
In witness whereof I have her	eunto my hand and seal this.		
Name of Policy Holder:			
	Signature of Policy Holder		
Date:			
Name of First Witness:	1	Name of Second Witn	ess:
Signature of	of First Witness		Signature of Second Witness
Date:			