

ABSOLUTE DEED OF ASSIGNMENT OF LIFE INSURANCE POLICY

KNOW ALL MEN BY THESE PRESENTS:

That I, _____, of legal age, single/married, and residing at _____, owner of Policy No. _____ issued or assumed by UNITED COCONUT PLANTERS LIFE ASSURANCE CORPORATION (hereinafter called the "Insurer") on the life of _____, for value received, do hereby assign, transfer and set over in a manner absolute and irrevocable, unto _____ (hereinafter called the "Assignee") of _____, the said policy and any supplementary contracts issued in connection therewith and all claims, options, privileges, rights, titles and interests therein and thereunder, subject to all the terms and conditions of the Policy and to all superior liens, if any, which the Insurer may have against the Policy. The sole signature of the Assignee shall be sufficient for the exercise of any rights under the Policy assigned hereby and the sole receipt of the Assignee for any sums received shall be full discharge and release therefore to the Insurer.

Done at _____ this _____ day of _____.

POLICY OWNER

WITH MY CONSENT:

Irrevocable Beneficiary/ies / Mortgagee

Signed In The Presence Of:

ACKNOWLEDGEMENT

REPUBLIC OF THE PHILIPPINES)
_____) S.S.

BEFORE ME, a Notary Public in and for the above jurisdiction on this _____ day of _____, 20 _____, personally appeared:

Name	Community Tax Cert. No.	Date/Place of Issue
_____	_____	_____
_____	_____	_____

known to me and to me known to be the same persons who executed and signed the foregoing Absolute Deed of Assignment of Life Insurance Policy who acknowledged to me that the same are their true and voluntary act and deed.

WITNESS MY HAND AND SEAL on the date and place first above written.

NOTARY PUBLIC

Doc. No. _____
Page No. _____
Book No. _____
Series of _____