

## **American Income Life Insurance Company**

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## **POLICY SERVICE REQUEST**

PLEASE PRINT CLEARLY

POLICIES TO BE CHANGE	ΕD					
Policy Number	ured Ov		Owner	vner		
Policy Number	Insur	red		Owner		
Policy Number	red Ov		Owner	vner		
ADDRESS CHANGE						
Old Address						
New Address						
Telephone						
E-mail Address  Date Change Effective						
NAME CHANGE						
	ured	U Owner	Premium Payor	Beneficiary		
	<b>Va</b> rriage	☐ Divorce	Court Order	Correction	☐ Adoption	
PRIMARY BENEFICIARY:						
Unless otherwise specified, proceeds to be paid in equal shares to the survivor(s).		ADDRESS		RELATIONSHIP	BIRTHDATE	
CONTINGENT BENEFICIARY -	To be pai	id if no surv	iving Primary B	eneficiary at the	time of de	eath.
Unless otherwise specified, procedule be paid in equal shares to the sur	eds to vivor(s).	AD	DRESS	RELATIONSHIP	BIRTHDATE	
MICCELLANEOUS						
MISCELLANEOUS						
	_					_
Date			Signa	ature of Owner		
Printed Agent Name		Agent Signature Agent Number			Number	
L-7 (R208) NZ IT IS NOT NECESSARY TO SEND US YOUR POLICY.						4
	Policy Number  Policy Number  Policy Number  ADDRESS CHANGE  Old Address  New Address  Telephone  E-mail Address  NAME CHANGE Change name of Inst Former Name New Name  Reason for change:  BENEFICIARY CHANGE PRIMARY BENEFICIARY:  Unless otherwise specified, procede paid in equal shares to the sur  CONTINGENT BENEFICIARY -  Unless otherwise specified, procede paid in equal shares to the sur  MISCELLANEOUS  Date  Printed Agent Name	Policy Number Insur  Policy Number Insur  ADDRESS CHANGE Old Address New Address Telephone E-mail Address  NAME CHANGE Change name of Insured Former Name New Name Reason for change: Marriage  BENEFICIARY CHANGE PRIMARY BENEFICIARY: Unless otherwise specified, proceeds to be paid in equal shares to the survivor(s).  CONTINGENT BENEFICIARY - To be paid Unless otherwise specified, proceeds to be paid in equal shares to the survivor(s).  MISCELLANEOUS  Date  Printed Agent Name	Policy Number Insured  Policy Number Insured  Policy Number Insured  ADDRESS CHANGE  Old Address  New Address  Telephone  E-mail Address  NAME CHANGE Change name of Insured Owner  Former Name New Name  Reason for change: Marriage Divorce  BENEFICIARY CHANGE PRIMARY BENEFICIARY:  Unless otherwise specified, proceeds to be paid in equal shares to the survivor(s).  CONTINGENT BENEFICIARY - To be paid if no survivor be paid in equal shares to the survivor(s).  MISCELLANEOUS  Date  Printed Agent Name Agent S	Policy Number Insured  Policy Number Insured  Policy Number Insured  ADDRESS CHANGE  Old Address  New Address  Telephone  E-mail Address Date Change E  NAME CHANGE Change name of Insured Owner Premium Payor  Former Name New Name  Reason for change: Marriage Divorce Court Order  BENEFICIARY CHANGE PRIMARY BENEFICIARY: Unless otherwise specified, proceeds to be paid in equal shares to the survivor(s).  CONTINGENT BENEFICIARY - To be paid if no surviving Primary B  Unless otherwise specified, proceeds to be paid in equal shares to the survivor(s).  MISCELLANEOUS  Date Signal  Printed Agent Name Agent Signature	Policy Number	Policy Number Insured Owner  ADDRESS CHANGE  Old Address New Address Telephone E-mail Address Date Change Effective  NAME CHANGE Change name of Insured Owner Premium Payor Beneficiary  Former Name New Name Reason for change: Marriage Divorce Court Order Correction Adoption  BENEFICIARY CHANGE PRIMARY BENEFICIARY: Unless otherwise specified, proceeds to be paid in equal shares to the survivor(s).  ADDRESS RELATIONSHIP BIRTHDATE  Unless otherwise specified, proceeds to be paid in equal shares to the survivor(s).  MISCELLANEOUS  Date Signature of Owner  Printed Agent Name Agent Signature Agent Number

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