

Interstate Life Insurance Company

3750 West Deerfield Road • Riverwoods, Illinois 60015

(800) 233-3750 • www.interstatelife.com

Collateral Assignment

Contract Number(s)

Name of Owner (or Beneficiary if the Insured is deceased)

Name of Insured

For value received, the undersigned Owner, or Beneficiary if Insured is deceased, hereby collaterally assigns the above contract issued by the Company together with all rights, title, and interest thereunder, including all proceeds thereof and all sums of money, interest, benefits, rights, powers, privileges, and advantages whatsoever, now due or hereafter to arise or to be held had by virtue thereof, the sum of \$ _____ as the Assignee's interest may appear, unto:

Printed Name of Assignee

Assignee's Mailing Address

City

State

Zip Code

Assignee's Phone Number

Email

The right to change the beneficiary subject to the rights of the assignee, is reserved and this assignment does not and is not intended to change or revoke the beneficiary designation now in effect for this contract. Any balance of sums remaining thereunder after payment of the then existing liabilities to the assignees, shall be paid to the persons entitled thereto under the terms of the contract had this assignment not been executed. The Company is hereby authorized to recognize the assignee's claims to rights hereunder without investigating the reason for any action taken by the assignee, or the validity or the amount of the liabilities of the undersigned to the assignee or the existence of any default therein, or the application to be made by the assignee of any amounts to be paid to the assignee. The sole signature of the assignee shall be sufficient for the exercise of any rights under the contract assigned hereby and the sole receipt of the assignee for any sums received shall be a full discharge and release therefore to the Company. Checks for all or any part of the sums payable under the contract and assigned herein, shall be drawn to the exclusive order of the assignee if, when, and in such amounts as may be requested by the assignee. This assignment is subject to the terms and conditions of the contract and to any existing indebtedness under the contract.

Signature of Owner (or Beneficiary if the Insured is deceased)

Printed Name

Date

Spouse's Signature (required in: AZ, CA, ID, LA, NV, NM, TX, WA, WI) Printed Name

Date

Release of Collateral Assignment

Each undersigned hereby releases all rights, title, interest, and claim in and to the contract and, for value received, does hereby reassign same to the contract owner, or beneficiary if insured is deceased, thereof. This release is in all respects absolute and no right, title, interest, or claim, vested or contingent, present, or future, is reserved in the contract to the undersigned or to anyone claiming through the undersigned at this or any future time.

Signature of Assignee

Printed Name of Assignee

Date of Release

For Home Office Use Only

Interstate Life Insurance Company acknowledges receipt of the foregoing instrument and agrees to this request.

Assistant Secretary

Date