

ASSIGNMENT OF POLICY DEATH BENEFITS TO FUNERAL HOME

Having contracted with _____ ("Funeral Home"),
_____ for funeral services
and merchandise to be provided upon the death of the Insured, _____ I hereby
assign the proceeds of Policy _____ issued by United Home Life Insurance Company ("the Company") for the
lesser of the sum of these services or the available proceeds of the policy.

It is expressly understood that the Company is hereby authorized and directed to release payment to the Funeral Home upon receipt of satisfactory proof of claim and proof of services performed as deemed necessary by the Company.

It is expressly understood that in the event that funeral services and merchandise are provided by a funeral home other than that named in this Assignment, the Company is directed to pay the proceeds of the policy to the designated beneficiary.

It is expressly understood that this Assignment is subject to the terms and conditions of said policy and to all superior liens, if any, which the Company may have against the policy.

_____ **IRREVOCABLE ASSIGNMENT** (Must be checked if selecting Irrevocable Assignment).

It is expressly understood that:

1. The Policy Owner hereunder having so requested, it is agreed and understood that the Policy Owner may not revoke or change the Assignment of Policy Death Benefits without the written consent of the Funeral Home.
2. While said Policy remains assigned to the Funeral Home, the Policy Owner may not obtain a loan on the policy, surrender the policy and receive the surrender value thereof, or exercise any other option, right, or privilege provided in the Policy, including but not limited to the right to elect any nonforfeiture provisions, without the written consent of the Funeral Home. Paid-Up Additions must be kept intact.
3. The Policy Owner retains the right to designate or change the Beneficiary. The rights of any Beneficiary to receive the policy proceeds shall remain subject to the rights of the Funeral Home named herein so long as this Assignment is in effect.

_____ **REVOCABLE ASSIGNMENT** (Must be checked if selecting Revocable Assignment).

It is expressly understood that:

1. The named Policy Owner may cancel and revoke this Assignment of Policy Death Benefits at any time prior to the death of the Insured by filing properly written notice of cancellation with the Company at the above address. If the Assignment is canceled, the net death benefits referred to herein are to be paid to the Beneficiary named in the Policy in accordance with the Policy provisions unless a subsequent Assignee is designated.
2. The ownership rights of the Policy are reserved for the named Policy Owner and are excluded from this Assignment and do not pass by virtue hereof.

Dated _____

at _____

Policy Owner(s)

Date

Witness

Date