



Federal Life Insurance Company (Mutual)

3750 West Deerfield Road • Riverwoods, Illinois 60015 • 800-233-3750 • federallife.com

Contract Change Form

Contract # (s) _____ Owner Name _____ Date of Birth _____

1. **CHANGE NAME of:** Owner Insured (Provide legal evidence)

Reason for change: Marriage Divorce Correction Adoption Other Legal change date _____

Former Name (Please Print) _____

New Name (Please Print) _____

2. **DIVIDENDS** Change my option for future dividends to Cash Reduce Premium Accumulate at Interest
 Paid-up Additions Surrender (all or \$ _____) of dividends on deposit.

Apply \$ _____ to (premium or loan) on contract #. _____ and send the remainder to me.

3. **NON-FORFEITURE** Reduced Paid Up Insurance Extended Term Insurance Face Amount \$ _____

Effective Date _____

4. **BENEFITS & RIDERS**

Add Remove

Children's Term Rider (complete form L-7570)

Accidental Death Benefit

Add Remove

Waiver of Premium

5. **CONTRACT** Plan to _____ Face Amount to \$ _____ Effective date _____

CONVERSION Premium mode _____ Dividend Option _____

CHANGE Automatic Premium Loan Yes No Planned Periodic Premium (Universal Life Only) \$ _____

Indicate all BENEFITS AND RIDERS to be added or retained.

- Complete the Reinstatement/Change Form if applying for additional coverage, adding Waiver of Premium, adding Accidental Death Benefit, adding Child Term Rider, or requesting change to non-tobacco user.
- Complete Beneficiary Form L-5514 for all conversions.

For more customer service options, please go to <http://federallife.com/customer-service/> or call 1-800-233-3750 ext. 503

6. **OTHER**

Signature of Owner

Printed Name of Owner

Date

Signature of Agent (If applicable)

Agent Code

Date