

## Senior Life Insurance Policy Settlements Information Worksheet

Recipient's First Name \*

Recipient's Last Name \*

Email Address \*

Contact Telephone \*

Contact Fax

Recipient's Street Address \*

Recipient's Street Address Line 2 \*

Recipient's City \*

Recipient's State / Province / Region \*

Recipient's Postal Code \*

Recipient's Country \*

Lump Sum Cash Required \*

Name of Insurance Company \*

Policy Owner's Name \*

Policy Beneficiary's Name \*

Type of Policy \*

Term      Convertible Term      Whole Life      Universal Life      Other

Is Policy Paid Up? \*

Yes      No

If "No", Premium Amount Paid

Premium Frequency? \*

Monthly      Quarterly      Annually

Policy's Face Value \*

Date of Next Payment \*

...

Policy's Current Surrender Value \*

What are your current needs and why would you like to sell this policy? \*

