

LOST POLICY AFFIDAVIT

_____ BEING FIRST DULY SWORN UPON OATH
DEPOSES AND SAYS THAT I/WE ARE THE BENEFICIARY(IES) OF THE
INSURANCE POLICY NUMBER _____
ISSUED BY THE
TO _____
WHO DIED _____

AFFIANT FURTHER SAYS THAT SAID POLICY HAS BEEN LOST, AND DOES
HEREBY AGREE THAT IN THE EVENT SAID POLICY IS FOUND, TO RETURN THE
AFOREMENTIONED POLICY TO THE OFFICE OF THE SAID INSURANCE COMPANY
FOR CANCELLATION.

BENEFICIARY

SUBSCRIBED AND SWORN TO BEFORE
ME THIS _____ DAY OF
_____, 20__

NOTARY PUBLIC