

**AFFIDAVIT OF LOST POLICY
AND REQUEST FOR CERTIFICATE OF LOST POLICY**

TO

Life Insurance Company of Alabama

GADSDEN, ALABAMA

I, _____ hereby certify that
Policy No. _____, Dated _____, and issued
by the Life Insurance Company of Alabama, has been lost or destroyed and that said policy is not
assigned, hypothecated, or pledged in any way whatsoever. I, therefore, request the issuance of a
certificate for lost policy and agree that should the original policy be found or in any way come
into my possession, I will return the certificate or cause the same to be returned to the Life
Insurance Company of Alabama, its successors or assigns.

Date at _____ this _____ day of _____, 20_____

WITNESS

POLICYOWNER