ABSOLUTE ASSIGNMENT OF CERTIFICATE

This Agreement made this _	day of	20	_, by and between
	City of	, (County of,
State of	hereinafter refer	red to as ASSIGNC	PR,
and	, City of		, County of,
State of	, hereinafter referre	d to as ASSIGNEE	
Annuity/Life Insurance Assignor and being Cert 2. Assignor may not chang 3. ASSIGNOR AGREES T a. Assignee or their le benefit, and without the fraternal benefits b. This assignment is s	policy, excepting Frater tificate Number tificate Number the beneficiary. HAT: gal representative may to joinder of anyone, exercise therein provided retained	at any time, in Asscise all privileges of the Slovak Catholic	e Assignee all of their interest in the ded therein specifically to the member by Slovak Catholic Sokol. signee's own name, for Assignee's own of ownership in said certificate excepting Sokol for payment of indebtedness and ficate.
The ASSIGNOR, as owner above assigned and that no			y possess sole interest in the certificate
•	, ,	•	
IN WITNESS WHEREOF, the State of	, the		•
Assignor Signature:			
SSN or EIN:	Assigno	or Date of Birth:	//
Email Address:			<u></u>
Assignee Signature:			
Complete Address:			
SSN or EIN:			
Email Address:			