

CATHOLIC ASSOCIATION OF FORESTERS

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CHANGE OF OWNERSHIP FORM

Certificate No. _____

I, _____
residing at _____
and now a member of _____ Court No. _____
hereby order and direct that ownership of my certificate be transferred to the following
individual:

Name of New Owner: _____

Address: _____

Date of Birth: _____ Relationship to the Insured: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Witness my hand this _____ day of _____, 20____

Signature of Member: _____

Sworn and subscribed to before me a Notary Public on the ___ Day of _____, 20__

My Commission Expires: _____

Notary's Signature: _____