

This cession must be stamped as required by law. Cedent to affix stamps here and cancel with initials and date

IMPORTANT

This cession forms an integral part of the title to the policy and should not be detached even if it is subsequently cancelled. PLEASE COMPLETE IN DUPLICATE.

I, the undersigned, **(full names of member, cedent)**.....

do hereby cede, assign and transfer all my rights, title and interest in and to policy (one policy number only)

..... Effected with Old Mutual, and all accumulations already accrued

or which may hereafter accrue in respect thereof, to and in favour of, **Designation** :.....

Full names of **cessionary (new member)** :.....

Details of cessionary:

Tick applicable block Male Female English

Date of birth of **cessionary (new member)** :.....

Relationship between **cedent and cessionary**:

Full postal address of **cessionary** :.....

The **reason** for this cession (refer to examples on the instruction form).....

..... Tick applicable block **Outright** **Security**

The Matrimonial Property Act of 1984

(Tick applicable block.) **A** Married **B** Single Divorced / Widowed

Cedent, member is a male or female

If **A** applies – spouse’s consent **not** required

I am aware of the tax implications when ceding an Anchor Plan package.

Signed at this day of20.....

CESSION AND CERTIFICATE TO BE COMPLETED IN THE EVENT OF A DECEASED ESTATE

FOR OFFICE USE ONLY

Cession recorded.....
.....
For General Manager – Old Mutual

CERTIFICATE

Policy (one policy number only).....on the life of.....

effected with the Old Mutual Life Assurance Society.

I, the undersigned.....

in my capacity as the executor/executrix in the estate of the late.....

of the cessionary and that there are no restrictions or prohibitions which will prevent the cessionary from subsequently dealing with the policy in any manner.

Date..... Signature of Executor/Executrix.....