



SECURITY MUTUAL LIFE
 INSURANCE COMPANY OF NEW YORK
 SECURITY MUTUAL BUILDING • 100 COURT ST.
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Security Mutual... Your Partner for Life.SM

LOST POLICY CERTIFICATE

Insured: _____ Policy Number: _____

The undersigned Policyowner hereby certifies: that to the best of his or her knowledge this Policy has been lost or destroyed, and is not in the possession, custody or control of any person, firm or corporation; and that neither this Policy nor any interest therein has been assigned or in any way transferred or encumbered.

Signed at _____ this _____ day of _____.

 Witness (Type or Print)

 Owner (Type or Print)

 Witness Signature

 Owner Signature

 Witness (Type or Print)

 Other Interested Party (Type or Print)

 Witness Signature

 Other Interested Party Signature

Important Note:

The Beneficiary must sign the foregoing as Other Interested Party if:

1. Designated without right of revocation, or
2. If Beneficiary is the spouse of a Policyowner living in a community property state.