

RELEASE OF ASSIGNMENT

Midwestern United Life Insurance Company, Indianapolis, IN
ReliaStar Life Insurance Company, Minneapolis, MN
ReliaStar Life Insurance Company of New York, Woodbury, NY
Security Life of Denver Insurance Company, Denver, CO
Members of the Voya® family of companies
Venerable Insurance and Annuity Company, Des Moines, IA
(the "Company")

Customer Service, 2000 21st Ave., NW, Minot, ND 58703

Website: voya.com; Completed forms can be emailed to: liferequest@voya.com

ReliaStar Life Insurance Company ("ReliaStar") administers, and is solely responsible for, the life insurance policies and annuity contracts that it issues, and it also provides administrative services in relation to certain life insurance policies issued by Venerable Insurance and Annuity Company ("Venerable"). ReliaStar and Venerable are not otherwise affiliated. All contractual obligations under each life insurance policy or annuity contract remain the sole responsibility of the issuing insurance company.

The Company assumes no responsibility for the validity of the contents of this document.

ASSIGNMENT INFORMATION

Policy Number _____

Insured Name _____

Select only one alternative below:

☐ Collateral Assignment to _____ Date _____

☐ Split Dollar Endorsement to _____ Date _____

☐ Split Dollar Collateral Assignment to _____ Date _____

☐ Other Instrument _____ Date _____

AUTHORIZATION

The undersigned hereby releases and relinquishes all of the undersigned's rights, benefits, title and interest in the above policy. All such rights shall become vested in the owner of the policy.

Assignee Name _____ Phone (____) _____

(Please print full name of individual or entity. If an entity, attach corporate resolution or similar document listing authorized signatories. If entity has had a name change, include supporting documentation of successor in interest with listing of authorized signatories.)

 Assignee Signature _____ Date _____

If the owner is a trust, partnership or corporation, the signature and title of the trustee, partner, corporate representative or authorized corporate representative are required.

 Owner Signature _____ Date _____

Owner Title *(if the owner is a trust, partnership or corporation)* _____

CUSTOMER SERVICE USE ONLY

Filed by _____ Date _____ Effective Date _____