

# REQUEST TO VOLUNTARILY ABANDON PROPERTY

If you want to permanently abandon your investment interest, please complete and return this form to:

Magna Servicing, LLC  
P.O. Box 23226  
Waco, Texas 76702  
by email to: [custsrv@magnaservicing.com](mailto:custsrv@magnaservicing.com)

**Purchaser ID Number** (as found on all documentation): \_\_\_\_\_

Name / Entity Name: \_\_\_\_\_ (name on the account)

Contact Name: \_\_\_\_\_ (person completing form, if other than above)

Accountholder Address: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Taxpayer ID / Social Security Number (or last four digits only): \_\_\_\_\_

**Funding ID Number(s), Policy ID Number(s) and Amount Invested for each account:**

Funding ID: \_\_\_\_\_ Policy ID: \_\_\_\_\_ Amount: \_\_\_\_\_

Funding ID: \_\_\_\_\_ Policy ID: \_\_\_\_\_ Amount: \_\_\_\_\_

Funding ID: \_\_\_\_\_ Policy ID: \_\_\_\_\_ Amount: \_\_\_\_\_

Funding ID: \_\_\_\_\_ Policy ID: \_\_\_\_\_ Amount: \_\_\_\_\_

Funding ID: \_\_\_\_\_ Policy ID: \_\_\_\_\_ Amount: \_\_\_\_\_

Funding ID: \_\_\_\_\_ Policy ID: \_\_\_\_\_ Amount: \_\_\_\_\_

*If you have additional positions you would like to abandon, please attach another sheet to this one.*

**I hereby surrender and abandon any and all interest(s) in the policy or policies interests identified above to Life Partners, Inc.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_