STATEMENT OF LOST CONTRACT

| I, | , hereby certify that the original contract | |
|--------------------------------------|---|-----------------------------|
| or any subsequently provided duplic | ates of Contract Number | , on the life |
| of | have been lost or destroye | ed and are no longer in the |
| possession of any known individual | or party. | |
| I further agree that if any documer | nt whether original or duplicate is | found under the contract |
| number indicated above it will be re | eturned to Federal Life Insurance C | ompany (Mutual) or duly |
| destroyed. | | |
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| Signature of Owner | | Date |
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| | | |
| F | or Home Office Use Only | |
| ☐ Claim | ☐ Duplicate ☐ Su | rrender/Cancellation |
| ☐ Conversion/Replacement | ☐ Maturity ☐ Ext | ernal 1035 Exchange |

L-5431 12-10