



**STRUCTURED SETTLEMENTS
CHANGING YOUR ADDRESS**

NOTE: SEND THIS ADDRESS CHANGE AND ANY OTHER CORRESPONDENCE TO:

Benefit Control
John Hancock
P.O. Box 9512
Portsmouth, NH 03802-9512

Phone: (800) 624-5155
Or Fax to: (617) 572-0355

Contract Number _____

Please check off the appropriate box(es) which apply:

- #1 Home Address (legal residence)
- #2 Check Mailing Address

Please print clearly

Last Name _____ First Name _____

Middle Initial _____

New Address _____, _____,

_____, _____,

This change is effective: Month _____ Year _____

Your Phone # (_____) _____ - _____

Signature _____ Date _____

Insurance products are issued by: John Hancock Life Insurance Company (U.S.A.) (not licensed in New York), Boston, MA 02116;
John Hancock Life Insurance Company of New York, Valhalla, NY 10595, herein collectively referred to as John Hancock.