ASSIGNMENT OF INSURANCE PROCEEDS OR POLICY

The undersigned, in consideration for services rendered by Funeral Director_____

in connection with the burial of_____

hereby assigns and transfers to said Funeral Director any interest the undersigned has as a beneficiary or owner of Policy No. _____ issued by _____

(NAME OF INSURANCE COMPANY)

not to exceed, however, $_____, said amount being the balance owed to the above Funeral Director for the burial set forth above.

The undersigned hereby directs and authorizes the above insurance company to pay over to the Funeral Director named above any amount to which the undersigned is entitled under the above policy, not to exceed, however, the amount set forth in the preceding paragraph, provided that the Funeral Director shall give an appropriate receipt and a release of this assignment.

_____

STATE OF _____)
) ss
County of _____)

I, _____, a Notary Public in and for said County and State aforesaid, do hereby certify that _____ who (are) (is) personally known to me to be the same person(s) whose name(s) (are) (is) subscribed to the forgoing instrument, appeared before me this day in person and acknowledged that _____he_____signed, sealed, and delivered the said instrument as _____free and voluntary act, for the uses and purposes therein set forth.

Given under my hand and notarial seal this _____day of_____, 20 ___.

_____

NOTARY PUBLIC

OGR
Making Independent Funeral Homes Exceptional