

Sweet Home Funeral Chapel

1443 Long Street Sweet Home, OR 97386 - Ph: (541)367-2891 Fx: (541) 367-4095

Assignment of Proceeds of Insurance

To: _____
(INSURANCE COMPANY)

I, _____, being entitled to receive benefits under
(BENEFICIARY)

Policy Number _____

issued by _____
(INSURANCE COMPANY)

on the life of _____, now deceased,

and having contracted with and being indebted to Sweet Home Funeral Chapel of Sweet Home, Oregon

for funeral services and merchandise for the deceased in the amount of

_____ Dollars (\$_____),

do hereby set over, assign and transfer unto said Funeral Home the sum of

_____ Dollars (\$_____)

out of the proceeds of said Insurance Policy; and I hereby authorize and direct said Insurance Company to make checks payable to said Funeral Home for the assigned amount and to pay the remainder of the proceeds of said Insurance Policy, if any, to me. A statement of charges for funeral expenses for the deceased is attached hereto.

(BENEFICIARY)

Address _____

Date Signed _____