

ASSIGNMENT OF PROCEEDS OF INSURANCE

TO: _____
(Insurance Company)

I, _____, being entitled to receive benefits
(Beneficiary)
under Policy Number _____ issued by _____
(Insurance Company)

on the life of _____, now deceased,
and having contracted with and being indebted to _____ Range Funeral Home _____ of
(Funeral Home)
911 Sixteenth Street North, Virginia, Minnesota 55792 _____ for funeral services and merchandise
(Funeral Home Address)

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 its check 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 funeral goods and services selected for the deceased is attached hereto.

Beneficiary (Signature)
Relationship to Deceased _____
Date Signed _____
Social Security No. _____
Date of Birth: _____
Telephone No. _____
Address _____
City/State/Zip _____

Subscribed and sworn to before me this _____ day of _____, 20_____.

Notary Public
My commission expires: _____