## ASSIGNMENT OF PROCEEDS OF INSURANCE

TO:		(Insurance Company)
		(Insurance Company)
I.		, being entitled to receive benefit
(Beneficiary)		
under Policy Number	issue	ed by
		(Insurance Company)
on the life of		, now deceased
and having contracted with an	d being indebted	d to
		(Funeral Home)
		for funeral services and merchandis
( Funeral	Home Address)	
for the deceased in the amount	of	Dollar
\$	, do hereby set o	over, assign and transfer unto said funeral home the sum of
	_	Dollars \$
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	re me this	day of, 20
	Notary F My com	Public mission expires: