

# FUNERAL FUNDING OF MICHIGAN

## CLAIM CHECKLIST

ALL CLAIMS MUST HAVE THIS FORM INCLUDED IN THE PACKAGE YOU SEND

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Funeral Home: \_\_\_\_\_

Deceased: \_\_\_\_\_

Irrevocable Reassignment Form   
(Signed by Director and Notarized)

Funeral Home Assignment Form   
(Signed by Beneficiary(s) and Notarized)

Accessibility of Policies Statement   
(Signed by Beneficiary(s) and Witnessed)

Certified Death Certificate

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### ANY ADDITIONAL DOCUMENTS NEEDED TO COMPLETE THIS CLAIM, SUCH AS:

Claimant Statement   
Most Ins. Co. require one – please ask  
(Completed and Signed by Beneficiary(s))

Death Certificate for Deceased Beneficiary

Funeral Bill if Assignment is over \$5000   
(Bill must Equal to or Larger than Assignment Amount)

Copy of Marriage License   
(For Change of Beneficiary or Deceased Name)