

# FUNERAL FUNDING OF MICHIGAN

## CUSTOMER INFORMATION

Please provide the following information so we can create your account. We will not disclose this information to any entity not affiliated with Funeral Funding of Michigan – this is simply to ensure we have accurate information for maintaining communication with our customers.

### Please Type or Print Clearly

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

Address (No PO Box): \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

Primary Contact: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_ Email: \_\_\_\_\_

Alternate Contact: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_ Email: \_\_\_\_\_

Funeral Home Fax: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

Preferred Method of Payment:  Check  ACH  Wire Transfer  
(Please call us if you wish to create or modify an ACH or Wire Transfer account)

Would you prefer a fax or a phone call from us for document or information requests?  Phone Call  Fax

Comments:

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Please fax completed form to (248) 357-5236