



**WILLIAM R. MAY
FUNERAL HOME, INC.**

A Family Tradition of Care

Easton Road and Keswick Avenue
Glenside, PA 19038
215-884-8410 Fax: 215-884-4810

Main Street and Elm Avenue
North Wales, PA 19454
215-699-3442 Fax: 215-699-1876

www.mayfuneralhome.com

Harry M. May, Supervisor

Kathleen May-Seweryn, Supervisor

IRREVOCABLE INSURANCE ASSIGNMENT

I _____ being entitles to receive benefits under policy
number(s): _____ on the life
of: _____ now deceased and having contracted with and
indebted to WILLIAM R. MAY FUNERAL HOME, INC for the funeral services and merchandise
for the deceased in the amount of _____ do hereby set over, assign and transfer
unto aforesaid Funeral Home, the sum of _____
out of the proceeds of said Insurance Policy. I hereby authorize and direct said Insurance Company
to make its check payable to the aforesaid Funeral Home for assigned amount and pay the remainder
of the proceeds of said insurance policy, if any, to me. The undersigned and my/our Attorney-in-fact
to act for me/us with full power to make collections of, compromises settle and receipt for the
proceeds of said polocios or certificates in my/our names and otherwise with authority to endorse
checks as fully as I/We myself/ourselves could do, with full power of substitution and revocation
hereby ratifying and conforming all that my/out attorneys or their substitutes may do or cause to be
done by virtue hereof.

IN WITNESS WHEREOF, we have hereunto set our hands and seals on:

Signed _____

(Beneficiary)

Name _____

Address _____

City, State, Zip _____

Relationship _____

Soc. Sec. No. _____

WITNESS:

Name _____ Address: _____

MAKE FUNERAL HOME CHECK PAYABLE TO:

Firm: WILLIAM R. MAY FUNERAL HOME, INC

Address: 354 N. Easton Rd.

City, State, Zip: Glenside, PA 19038

Tax ID Number: 23-2097217

Phone: 215-884-8410 Fax: 215-884-4810

Signed: _____

(funeral director)