

## GLUNT FUNERAL HOME AND CREMATORYING

210 Erie Street • Edinboro, PA 16412

David T. Glunt, L.F.D. & Supervisor

814-734-1611

Harry D. Glunt, L.F.D.

## **Insurance Assignment**

FOR VALUE RECEIVED, I hereby assign to the:

## **GLUNT FUNERAL HOME AND CREMATORY, INC**

of Edinboro, PA, all my rights, title and interest in and to

Policy Number(s)	
issued by	Insurance Company,
upon the life of	
upon the life of	(Deceased)
of(City)	(State)
is given to the Glunt Funeral Home and Cre	ematory, Inc. full and complete authority to collect
the proceeds of said insurance policy and to a	apply the said proceeds first to the payment of the
funeral bill of the Glunt Funeral Home and Cre	ematory, Inc. in the sum of
dollars for the death of said deceased, the bala	ance, if any, of such proceeds to be paid to me the
beneficiary of said policy(s).	
It is agreed that the payment under said poli-	cy by the Insurance Company to the said assignee
and the said assignee's receipt for the same sl	hall be a full and complete discharge, acquittance
and release of the said insurance company of	of any and all claims whatsoever under the said
policy, and the said insurance company shall	not be required or bound in any way to see to the
application of any of the said policy, and I he	ereby authorize the said Glunt Funeral Home and
Crematory, Inc. to surrender the said policy to	the said Insurance Company, and expressly waive
any and all claims or rights whatsoever under	the said policy so far as the insurance company is
concerned.	
Witness my hand this day of _	
X	X
Beneficiary Signature	Beneficiary Signature
Printed Name	Printed Name
Address	Address
	David T. Glunt, L.F.D. Funeral Director
	I unctal Director