



GLUNT FUNERAL HOME AND CREMATORY^{INC}

210 ERIE STREET • EDINBORO, PA 16412

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

814-734-1611

Harry D. Glunt, L.F.D.

Credit, Payment Policy

Full Name of Deceased: _____ Date of Death: _____

To lose someone you love is a devastating experience. We sincerely appreciate the opportunity to serve your family during this time of loss. We understand the importance of recognizing and celebrating a life lived and we will assist you in arranging an appropriate and meaningful service that meets your needs.

While funerals are far from the most expensive events in our lives, it is important to be realistic and sensible about funeral expenses. The services you choose should keep with your family's wishes and budget. To prevent misunderstanding or embarrassment, we encourage you to discuss your financial situation with us at any time. ***Please Remember, we are here to serve you with dignity and confidentiality.***

As the person(s) arranging for this funeral, you are personally accepting the financial obligation to pay the funeral expenses in full. A Statement of Goods and Services will be completed and presented to you for your review and acceptance. Your signature(s) on the Statement of Goods and Services indicates that you accept this financial obligation both personally and in any official capacity in which you may serve, now or in the future.

- Please select which payment choice you plan to use to pay the funeral expenses. We gladly accept the following forms of payments:

Cash

Check

Credit Card (please read below)

- ♦ A convenience fee will be charged on credit card transactions. This fee is not greater than our cost of acceptance (approximately 3.0 - 3.5%).
- ♦ There is **NO** convenience fee on **debit card** transactions.

Insurance Assignment (please read below) _____ Insurance Company

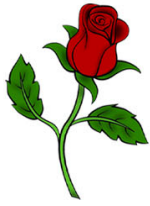
- ♦ Due to changes within the insurance industry, all insurance assignments will be processed through ClaimCheck, a 3rd party company. ClaimCheck will charge a 3.5% fee to process the claim, which will be added to the total amount deducted for the funeral costs.
- ♦ Once ClaimCheck verifies the policy and receives the signed forms, they will advance the amount specified for the funeral costs directly to the funeral home.
- ♦ The beneficiary also has the option to have any remaining insurance funds advanced directly to them. ClaimCheck will charge a 3.5% fee which will be paid out of any remaining insurance funds advanced to the beneficiary.

Financing with Lending USA (GFH will assist with if chosen)

Other Form of Payment: _____ (please explain)

In all cases, payment in full is due within 10 days of the date on the Statement of Goods and Services.

The Statement of Goods and Services is not your final invoice. A final invoice will be given or mailed to you shortly after the funeral service.



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Credit and Payment Policy (continued)

In all cases, outstanding balances older than 15 days will be charged an interest rate of 1.5% per month (18% per annual) on the total unpaid balance and capitalized beginning on the 16th day following the date on the Statement of Goods and Services.

We do not bill estates, as they are not normally processed within our 15 day terms. The person who pays the funeral bill can and should invoice the estate for reimbursement of funeral expenses.

We require no less than two (2) signatures in order to extend credit for funeral expenses.

Cash advances (money paid to third parties on your behalf) represent an interest-free cash outlay on the part of the funeral home. We reserve the right to require payment for any or all such cash advances prior to providing services.

We reserve the right, for any or no reason, to require payment in full of any or all funeral expenses prior to providing services.

In the event that the funeral expenses are not paid in full within 15 days of the Statement of Goods and Services date, we reserve the right to turn the bill over to legal counsel who will pursue collection in full by any and all legal means. All expenses incurred by Glunt Funeral Home and Crematory, Inc. related to said collection of funeral expenses will be added to the final funeral bill.

The total or estimated total of your funeral expenses are: _____

- * I/we agree to be bound by the terms and conditions set forth herein and further agree to pay the funeral expenses in full, both jointly and severally.

Signature: _____ Printed Name: _____

Address: _____

Relationship to Deceased: _____ Social Security Number: _____

Date: _____

Signature: _____ Printed Name: _____

Address: _____

Relationship to Deceased: _____ Social Security Number: _____

Date: _____

Signature of Witness: _____ Printed Name: _____