

the certificate.

WESTERN CATHOLIC UNION

A Fraternal Benefit Society Since 1877 510 Maine Street, Quincy, Illinois 62301 (800) 223-4928 - (217) 223-9721 - Fax (217) 223-9726 www.wculife.org



IRREVOCABLE ASSIGNMENT FOR FUNERAL SERVICES

IN	<u>IFOF</u>	RMATION	
Ar	∩nuit	tant/Insured:	Certificate #:
Owner (if other than annuitant/insured):			
Jc	oint (Owner (if applicable):	
Fι	uner	al Provider:	
ΑΙ	<u>UTH</u>	ORIZATION	
ar	าทuit	by irrevocably assign to representative as his/her/its into certificate designated above issued by Western Catholic to all terms and conditions of the certificate.	
1.	con	s irrevocable assignment is made to Funeral Home in c tract with Funeral Home executed by me on the date sl ts interest may arise by the fact of providing funeral ser tth.	nown below, or to any funeral provider
I understand that by signing this document I have irrevocably waived, and may not here after exercise any of the following rights:			
	(A)	The right to collect from Western Catholic Union the ne becomes a claim by my death;	et proceeds of the certificate when it
	(B)	The right to designate as primary beneficiary of the ce Home or any other funeral provider as its interest may	
	(C)	The right to hereafter surrender the certificate and rece	eive its surrender value;
	(D)	The right to obtain a loan or advance on the certificate	or pledge or assign it as collateral;
	(E)	The right to exercise any nonforfeiture rights in the cer	tificate;
	(F)	The right to receive any income from the certificate, if	the certificate is an annuity.
3.		derstand that I, or my legal representative, retain the rignother funeral provider.	ght to change the irrevocable assignee

4. The irrevocable assignee shall be under no obligation to pay any premium or any other charges in

- 5. Western Catholic Union is hereby authorized to recognize as valid this assignment and any exercise of rights by the assignee hereunder without any further investigation or inquiry on the part of Western Catholic Union. The liability of Western Catholic Union under this agreement shall be fully discharged upon the payment of the sums herein assigned to the irrevocable assignee as its interests may appear.
- 6. I hereby declare that no proceedings in bankruptcy are pending against me and that my property is not subject to any assignment for the benefit of creditors.
- 7. In the event of any conflict between or among provisions of this assignment, the Prearranged Funeral Contract and the certificate, the provisions of this assignment shall prevail.
- 8. I ACKNOWLEDGE AND UNDERSTAND THAT I SHALL HAVE NO RIGHT TO REVOKE, CANCEL OR OTHERWISE TERMINATE THIS IRREVOCABLE ASSIGNMENT. Owner's Signature: _____ Date: _ Owner's Address: Date: Funeral Provider's Authorized Signature: _____ Date: _____ Funeral Provider's Address: **COMMUNITY PROPERTY STATE CONSENT** For residents of Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Texas, Washington, or Wisconsin: If you are married and reside in a community property state, and if you are making assignment to someone other than your spouse, then your spouse must consent to this assignment by signing the statement below. As the Annuitant's/Insured's spouse, I do hereby agree to the above assignment and waive any community property or Uniform Marital Property Act (UMPA) rights that I may have in the subject of this assignment. Spouse's Signature: _____ Date: _____ Please return the completed form to our office. You will receive a copy to place with your certificate after we have recorded the change. FOR HOME OFFICE USE ONLY: Western Catholic Union has recorded the change requested and retained the original of the request. ____at Quincy, IL by ______

Signed on ________(Month, Day, Year)