

# Preparing a Pre-Paid Funeral Service Contract

Information to provide to the funeral home for pre-paid contract preparation

#1

Please print neatly.

Legal Name	
Date of Birth	
Social Security Number	
Street Address	
City, State, Zip Code	
Phone Number	
Email (if applicable)	

#2

Legal Name of <b>Contract Signor</b> (if different from box #1)	
Social Security Number*	
Street Address	
City, State, Zip Code	
Phone Number	
Email (if applicable)	
Your relationship to box #1	

**\*Contract Signor:** Are you a Power-of-Attorney, Conservator, or Guardian for the person whom the contract is to be prepared?

- \_\_\_\_\_ **Yes** - Please provide the original legal document with a raised seal, or a photocopy which shows evidence of the raised seal if it is present from the original. If there is no raised seal on the original, or if the seal is not evident on the photocopy, please provide your social security number above in box #2.
- \_\_\_\_\_ **No** – Please provide your social security number above in box #2.

## **Please bring to your appointment with the funeral director:**

- This completed form
- Power-of-Attorney, Conservator or Guardian legal document (if applicable)
- Checkbook/check(s) payable to (name of Funeral Home). If a bank check is used, please draw funds from the account(s) owner of box #1 and include their name as remitter, or in the check memo area. Please note that two separate checks may be requested by funeral home for one individual. Funeral director will advise you based on the total funeral estimate and its statutory relevance to current CT Medicaid/Title 19 regulations.  
*Using a bank check(s) may be preferable during an active Medicaid “spend-down” as purchaser can remove funds immediately from their bank account. This can possibly allow for a more timely processing of the pre-paid contract(s) by the CT Department of Social Services (DSS), or another agency.*
- A completed Vital Statics form, if available. (See the funeral home for this information, which is needed to prepare a future legal death certificate and other necessary forms).