

Funeral Costs Policy
Promotion of Lore and Culture

Provides each registered beneficiary with financial assistance to cover reasonable costs incurred in conducting a funeral or reburial service (casket, undertaker, flowers, printing, advertising, wake, transport of deceased, clothing to attend). Families are able to 'pool' funds together to assist with the financial expenses. The costs of the funeral must be paid in the first instance and no other financial assistance will be provided until these costs have been finalised.

BENEFICIARY INFORMATION

| | | | |
|-------------------|--|----------------|---|
| Application Date: | | Date of Birth: | |
| Full Name: | | | Suffix: <input type="checkbox"/> Junior <input type="checkbox"/> Senior |
| Street Address: | | | |
| City / Suburb: | | State: | Postcode: |
| Email: | | Phone: | |

Please tick if the phone number provided is a new number and you would like us to update your contact details

FUNERAL DETAILS

| | |
|----------------------|----------------------|
| Surname of Deceased: | |
| Date of funeral: | Location of funeral: |

FUNDS REQUESTED

| | |
|---------------------------------|--|
| Funeral Director fees: \$ | Funeral Director: |
| Additional costs: \$ | <input type="checkbox"/> Casket <input type="checkbox"/> Flowers <input type="checkbox"/> Wake <input type="checkbox"/> Printing/advertising <input type="checkbox"/> Transport of deceased <input type="checkbox"/> Clothing to attend |
| Other costs: \$ | Please specify: |
| TOTAL \$ | Up to \$15,000 per beneficiary per financial year (included in \$15,000 combined sub-limit) All payments are made direct to a supplier or reimbursed upon provision of invoices or proof of payment (ie receipts) |

REIMBURSEMENT OR PAYMENT DIRECT TO SUPPLIER?

| | | |
|----------------------------------|---|-----------------------------|
| Have you paid the bill? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| If 'yes' please provide: | <input type="checkbox"/> Quote / invoice/ receipt detailing services and that the account has been paid; and / or <input type="checkbox"/> Receipt / Bank statement / remittance showing the funds were paid from your bank account. | |
| If 'no' please provide: | <input type="checkbox"/> A quote or invoice from the supplier detailing the services and the amount owed; and <input type="checkbox"/> Supplier contact, payment details and ABN, these details should be included on the supplier invoice. | |
| Supporting Documentation: | <input type="checkbox"/> Confirmation from Funeral Director or family member that you are responsible for the costs of the funeral is attached. <input type="checkbox"/> Quote from Funeral Director or other suppliers are attached. <input type="checkbox"/> Supplier contact, payment details and ABN. | |

Applications will NOT be processed until supporting documentation and supplier payment details are received.

- I am not eligible for benefits from any other funding source in relation to this account (e.g. another Trust or a government agency).
- I am not able to claim costs associated with this funeral through an insurance policy.
- I understand that my application will be processed by the Trustee (Mutual Trust) within **FIVE (5) business days once all required supporting documentation has been received.**

Beneficiary Signature:

Date: / /

NOTE: Please keep a record of your receipts as you may be asked to account for how these funds were spent as per the Yinhawangka Charitable Trust Deed.

Please send completed forms and supporting documents to Mutual Trust by:

Fax: (08) 9230 7701 **Email:** perthadmin@mutualtrust.com.au

Mail: Mutual Trust, PO Box 122, NEDLANDS WA 6909

If you have any queries, please contact us on (08) 9230 7700
