



**SECURITY BENEFIT FUND
APPLICATION FOR
REIMBURSEMENT OF FUNERAL EXPENSES**

- All information on this application must be completed.
- Checks will be mailed to the address the Fund Office has on file for you or will be direct deposited to the bank account you have provided. If you wish to change your address please call the Fund Office for the necessary *Change of Address* form.
- Please take advantage of Direct Deposit so you can receive your benefit check electronically. You can download a form on steamfitters.com under the forms section or call our office to have one mailed, 212.465.8888
- You must attach copies of itemized funeral and/or burial bills, proof of payment and a copy of the death certificate. You must also complete the Affidavit of Dependency on the reverse side of this form. Funeral Expense reimbursements are reported at year end on Form 1099-MISC.

Book Number _____

Name _____

_____	_____	_____
Home Telephone	Mobile	E-mail

Name of Deceased _____ Date of Death ___ / ___ / ___

Relationship to Deceased _____

SIGNATURE _____	DATE _____
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**STEAMFITTERS' INDUSTRY SECURITY BENEFIT FUND
FUNERAL BENEFIT
AFFIDAVIT OF DEPENDENCY**

State of: _____

County of: _____

I, _____ [Insert Your Name], do hereby affirm to the Trustees of the Steamfitters' Industry Security Benefit Fund that _____ [Dependent], who was my _____ [Relationship] was dependent upon me for support.

I paid the funeral expenses relative to such dependent because there were no monies available to cover such expenses from any other source including, but not limited to, the assets of the Estate of such dependent. This affidavit is being furnished to substantiate my application for the Funeral Benefit based on the above referenced funeral expenses in the amount of \$ _____.

The above information is true and correct. If such information is found to be incorrect, the application for which this affidavit is being furnished will be null and void.

Signature

Book Number

Date

Sworn to before me this _____ day
of _____, 20_____

NOTARY PUBLIC