



PROOF OF EXPENSES FOR BURIALS, FUNERALS AND MEMORIAL SERVICES BY UNDERTAKER

WCB Case Number: Carrier Case Number: Social Security Number:

STATE OF NEW YORK COUNTY OF: } SS.:

being duly sworn, says that they are a duly licensed undertaker of at and on the day of they were directed to prepare the body of: , and such direction was provided by , who authorized the following itemized invoice (or attach copy of itemized invoice):

Table with 2 columns: Description, Amount (\$). Includes a TOTAL row at the bottom right.

No part of the invoice so authorized for this burial has been paid.

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD PRESENTS, CAUSES TO BE PRESENTED, OR PREPARES WITH KNOWLEDGE OR BELIEF THAT IT WILL BE PRESENTED TO OR BY AN INSURER, OR SELF-INSURER, ANY INFORMATION CONTAINING ANY FALSE MATERIAL STATEMENT OR CONCEALS ANY MATERIAL FACT SHALL BE GUILTY OF A CRIME AND SUBJECT TO SUBSTANTIAL FINES AND IMPRISONMENT.

Signature

Sworn to before me this day of , 20

Notary Public