

# Discharge Form

## Funeral Bond Benefit Fund



### Member / Separate Life Insured Details

Policy No.

Member Name

Date of Birth  Date of Death

If the policy was for a Separate Life Insured please provide additional details below.

Separate Life Insured Name

Date of Birth  Date of Death

### Declaration of Claimant

I (Authorised Officer),

on behalf of (Funeral home name)

declare that (Funeral home name)

Please **tick the box** below choosing the type of claim, noting that you can claim for both an assigned and nominated bond on the same form. If you are unsure whether the bond is assigned or nominated check the confirmation of membership.

- Assigned Bond**  
as the assigned of the abovementioned policy, we have performed the funeral service for the abovementioned deceased and are legally entitled to receive the sum payable under this policy.
- Nominated Bond**  
as the Nominated Funeral Director of the abovementioned policy, we have performed the funeral service for the abovementioned deceased and have provided the Society and the Legal Personal Representative of the abovementioned Estate an invoice / receipt for the funeral services carried out.

The Claimant hereby indemnifies 'Australian Friendly Society Limited ABN 29 087 648 851 (AFS)' against any loss, cost or damage it may suffer or incur, arising directly or indirectly from the Claimant's failure to perform the funeral service for the abovementioned deceased person or being paid policy proceeds in circumstances where it was not entitled to be paid.

Signature of Claimant (Authorised Officer)

Date

Once you have completed the Discharge Form either email it to [afs@bendigobank.com.au](mailto:afs@bendigobank.com.au) or post to Australian Friendly Society, PO Box 480, Bendigo VIC 3552.