



APPLICATION FOR FUNERAL BENEFIT CLAIM

To the International Secretary-Treasurer of the Amalgamated Transit Union:

I hereby make application for the Funeral Benefit Claim of Brother/Sister _____ whose certificate of membership shows he/she became a member of Local _____ of the AMALGAMATED TRANSIT UNION, on the first day of _____, _____. Social Insurance Number _____.

Death Occurred on _____ day of _____, _____ at _____ in the Province of _____. Date of Birth _____ Age at time of Death _____.

Certificate of Death issued by the proper Municipal or Provincial authority is attached hereto.

Claim will be made payable to (Please indicate funeral home if bill is unpaid) _____ (In all cases give the first or christian name of the beneficiary.)

Relationship of beneficiary _____

Amount of Funeral Cost \$ _____.

Is beneficiary or beneficiaries named above the sole survivor or survivors eligible under our laws? _____

(Seal of Local)

Financial Secretary of Local

AFFIDAVIT

Province of _____ } City of _____ }

Mr./Mrs./Ms. _____, being duly sworn, deposes and says that he/she is the Financial Secretary of Local _____ of the Amalgamated Transit Union, and that the deceased, Mr./Mrs./Ms. _____ whose application he/she hereby presents for payment, was a member of said Union since the first day of _____, _____, and that the deceased had remained in good standing, paying all per capita tax, dues and assessments and has met all the Constitutional and General Laws of the Union.

To the best of my knowledge the beneficiary named in the application is the nearest legal heir, according to the Constitution and General Laws of the Union.

Subscribed and sworn to before me this _____ day of _____, _____ Commissioner of Oaths in City of _____, Province of _____

(COMMISSIONER'S SEAL)

Commissioner of Oaths

I hereby certify that the above application is correct.

President of Local

Accompanying this application must be the formal Certificate of Death furnished by the proper Municipal or Province authority, the last Working Card taken out by the deceased member and his/her Certificate of Membership. No claim will be considered without being duly filed and attested before a Commissioner of Oaths. In case the International Secretary-Treasurer is not satisfied with the genuineness of the claim, he/she will so notify the Applicant. The claim will then go before the General Executive Board at their first meeting after same is received. If their decision is not satisfactory, the claimants still have an appeal under the laws of the Union, to the regular Convention, whose decision is final. All claims will be paid in their order as they are filed in the International Office, providing they are satisfactory claims. The International Secretary-Treasurer has the right to demand further information concerning any claim and in the case further information is requested, the Claimant shall at once gather such information and forward it to the International Secretary-Treasurer's office.

If the beneficiary or beneficiaries are minors, a Guardian should be appointed by the Court and the certificate from the Court showing the appointment should be forwarded with the application, which shall clearly specify name of beneficiary or beneficiaries.

If the claim is made payable to an executor or executrix of the will of the deceased member, for the beneficiary or beneficiaries, certificate from the Court showing approval of such appointment and copy of the will should be submitted with the application.