

MILITARY VETERAN
YES ___ NO X

APPLICATION FOR PAYMENT OF PAUPER'S FUNERAL

Charles Jones 5506 C.R. 1905 Talco TX 75487
Name of Deceased Address

Sept. 18, 1932 [REDACTED] — TX
Date of Birth Social Security # Driver's License # (State)

I, the undersigned, hereby state that I was related to the deceased Charles Jones as (Relationship) Grand Daughter. I further state that neither the deceased nor any person responsible for the deceased had any assets such as money, bank accounts, investments, insurance, property or any such assets other than those listed below, which are applied to the cost of the funeral.

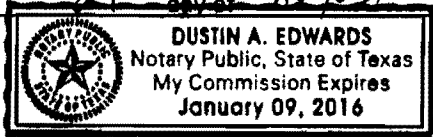
LIST OF ASSETS OWNED BY DECEASED, OR PERSON RESPONSIBLE FOR DECEASED:

MONEY \$ 0 CHECKING ACCOUNT \$ 0 BANK \$ 0
PROPERTY (Home) \$ 0 AUTO \$ 0 OTHER \$ 0
INSURANCE \$ 0 SOCIAL SECURITY FOR BURIAL \$ 0
OTHER ASSETS \$ 0 TOTAL ASSETS \$ None

I hereby make application to the Commissioners' Court of Titus County that payment be made for the funeral, less any assets as listed above:

Buchana Blain Granddaughter 8-20-2013
APPLICANT FOR DECEASED DATE

SUBSCRIBED AND SWORN BEFORE ME, a Notary Public in and for Titus County, Texas on this the 21 day of August, 2013.



Dustin Edwards
NOTARY PUBLIC

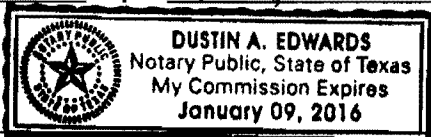
(TO BE COMPLETED BY FUNERAL HOME)

I understand that in order to qualify for a Pauper's Funeral, the **total cost of services** for the deceased **will not exceed \$950.00**. I further understand that if payment is made in any amount, whether by family, friends, church, other organizations, etc., such payment will disqualify this Application for consideration of payment by the Titus County Commissioners' Court.

Therefore, I, (Owner/Representative) Jeff Orwosky of (Funeral Home) CURRY-Wellborn hereby submit an itemized statement for services of deceased Charles Jones and certify that such statement for \$950.00 represents the entire cost for services rendered.

8-21-13 Jeff Orwosky
DATE OWNED/REPRESENTATIVE OF FUNERAL HOME

SUBSCRIBED AND SWORN BEFORE ME, a Notary Public in and for Titus County, Texas on this the 21 day of August, 2013.



Dustin Edwards
NOTARY PUBLIC

APPROVED BY COMMISSIONERS' COURT Brian P. [Signature]
8-26-13

2256 N. Edwards Avenue
Mt. Pleasant, Texas 75455
(903) 577-7500

Curry-Welborn Funeral Home

FUNERAL PURCHASE AGREEMENT

Name of Deceased Charles Jones Date of Death 8/20/13 Date of Service _____

Purchaser Barbara Blanton Telephone # (903) 243 - 1294

Address 5506 County Road 1905 City Talco State TX Zip 75487

Charges are only for those items that you have selected or that are required. If we are required by law or by cemetery or by crematory to use any items, we will explain the reasons in writing below. If you selected a funeral that may require embalming, such as a funeral with viewing, you may have to pay for embalming. You do not have to pay for embalming you did not approve if you selected arrangements such as a direct cremation or immediate burial. If we charged for embalming, we will explain why below.

A. SERVICES OF FUNERAL DIRECTOR AND STAFF

A.1 Additional Services of Funeral Director and Staff \$ _____
_____ \$ _____

B. EMBALMING

Reason for embalming _____ \$ _____

C. OTHER PREPARATION OF THE BODY

_____ \$ _____
_____ \$ _____
_____ \$ _____

D. USE OF FACILITIES, STAFF SERVICES AND EQUIPMENT

1. Viewing / Visitation \$ _____
2. Funeral Service \$ _____
3. Memorial Service \$ _____
4. _____ \$ _____
5. _____ \$ _____

E. TRANSPORTATION

1. Transfer of remains to funeral home \$ _____
2. Automotive Equipment
A. Hearse \$ _____
B. Lead / Clergy Car \$ _____
C. Utility / Flower Car \$ _____
D. Limousine(s) @ _____ \$ _____
E. _____ \$ _____
F. _____ \$ _____
G. Addl. Mileage @ _____ (per mile) \$ _____

TOTAL OF PROFESSIONAL SERVICES SELECTED \$ _____

F. MERCHANDISE

1. Casket _____ \$ _____
2. Outer Receptacle _____ \$ _____
3. Acknowledgement Cards _____ \$ _____
4. Register Book _____ \$ _____
5. _____ \$ _____
6. _____ \$ _____
7. _____ \$ _____
8. _____ \$ _____
9. _____ \$ _____

TOTAL OF MERCHANDISE SELECTED \$ _____

UNPAID BALANCE DUE BY _____

G. SPECIAL SERVICES

1. Forwarding remains to another funeral home \$ _____
2. Receiving remains from another funeral home \$ _____
3. Immediate Burial \$ _____
4. Direct Cremation \$ 900.00
5. _____ \$ _____
6. _____ \$ _____
7. _____ \$ _____

TOTAL OF SPECIAL SERVICES SELECTED \$ _____

Cemetery or crematory requirements if any : _____

H. CASH ADVANCES

1. _____ \$ _____
 2. _____ \$ _____
 3. _____ \$ _____
 4. _____ \$ _____
 5. _____ \$ _____
 6. _____ \$ _____
 7. _____ \$ _____
 8. Certified copies of death certificates
Number of copies _____ \$ _____
 9. _____ \$ _____
 10. _____ \$ _____

We charge you for our service in obtaining those items marked with an X.

TOTAL OF CASH ADVANCES \$ _____

SUMMARY OF CHARGES

PROFESSIONAL SERVICES \$ _____
MERCHANDISE SELECTED \$ _____
SPECIAL SERVICES \$ _____
CASH ADVANCES \$ _____
TOTAL OF ALL CHARGES (Balance Due) \$ 900.00

METHOD OF PAYMENT:

Less: Cash Received on Account \$ _____
 Sums consisting of my assignment to you of the proceeds of _____

type of benefit assigned:

which I am making this day in a separate instrument \$ _____

UNPAID BALANCE \$ 900.00

WARRANTIES: The only warranties, expressed or implied, granted in connection with goods sold with this funeral service are the express written warranties, if any, extended by the manufacturers thereof. No other warranties and no warranties of merchantability or fitness for a particular purpose are extended by seller.

I agree that any monies assigned above shall be paid to you within 60 days of the date of this contract. Upon giving me at least five (5) days prior written notice that any monies due under the assignment(s) described above have not been paid to you as promised, you can require that any such unpaid amount(s) previously credited to my account be paid by me at once.

Charges are made only for those items that are used. If the type of funeral selected requires extra items, we will explain the reason in writing on this contract. In the event I wish to complain or question any area of your service, I may contact you at my convenience. If any complaints cannot be resolved, I may also contact the Texas Funeral Service Commission, P.O. Box 12217, Austin, Texas 78711. Telephone Number 888.667.4881, Fax Number 512.479.5064

TERMS: The Unpaid Balance set out above will be due and payable on the Due Date set out above. A FINANCE CHARGE of 1 1/2 % per month (ANNUAL PERCENTAGE RATE 18 %) will be added to all past due amounts not paid on or before the Due Date set out above. If this agreement is placed in the hands of an attorney and/or agency for collection, I (we) agree to pay reasonable attorney's fees and/or collection costs.

By his (her) signature Buyer(s) in addition to authorizing Seller to conduct the funeral, perform the services, furnish the materials, and incur the charges specified within this agreement, on the terms and conditions set forth, acknowledges that prior to the execution of this Agreement, a printed or typewritten list of the retail price of the funeral services and funeral merchandise offered by Seller was made available to Buyer(s).

Executed this 21 day of August, 13

Accepted For Seller by:

Jeff Ormsby
(Signature of Funeral Director)

Barbara Blanton
(Signature of Buyer)

(Signature of Co-Buyer)