

APPLICATION FOR PAYMENT OF PAUPER'S FUNERAL

Larry Wise 2530 Green Hill Rd Mt. Pleasant TX 75455
 Name of Deceased Address
2-4-1969 [REDACTED]-4840 38790299 TX
 Date of Birth Social Security # Driver's License # (State)

I, the undersigned, hereby state that I was related to the deceased Larry Wise
 as (Relationship) Sister

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:

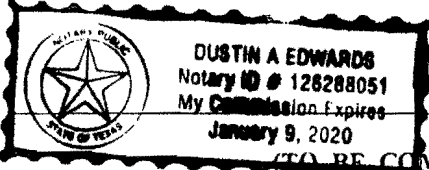
MONEY \$ 0 CHECKING ACCOUNT \$ 0 BANK \$ 0
 PROPERTY (Home) \$ 0 AUTO \$ 0 OTHER \$ 0
 INSURANCE \$ 0 SOCIAL SECURITY FOR BURIAL \$ 0
 OTHER ASSETS \$ 0 TOTAL ASSETS \$ None

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

Laura Darby 4-8-16
 APPLICANT FOR DECEASED DATE

SUBSCRIBED AND SWORN TO BEFORE ME a Notary Public in and for Titus County, Texas on this the 8th day of April, 2016

Dustin Edwards
 NOTARY PUBLIC



(TO BE COMPLETED BY FUNERAL HOME)

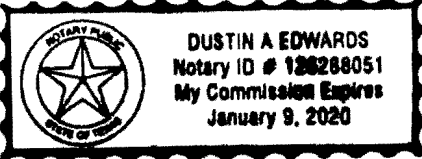
I understand that in order to qualify for a Pauper's Funeral, the total cost of services for the deceased will not exceed \$950.00. I further understand that if payment is made in any amount, whether by family, friends, church, other organizations, etc., such payment will disqualify this Application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

Therefore, I, (Owner/Representative) Jeff Quosky of (Funeral Home) Curry-Weiborn F.H. hereby submit an itemized statement for services of deceased Larry Wise and certify that such statement for \$950.00 represents the entire cost for services rendered.

4/8/2016 Jeff Quosky
 DATE OWNER/REPRESENTATIVE OF FUNERAL HOME

SUBSCRIBED AND SWORN TO BEFORE ME, a Notary Public in and for Titus County, Texas on this the 8th day of April, 2016.

Dustin Edwards
 NOTARY PUBLIC



Approved
4-25-16

PAUPER'S FUNERAL VERIFICATION STATEMENT

Date: 4-12-16

CURRY-Weiborn has not received any form of
(name of funeral home)

compensation for the funeral services for Larry WISE
(name of deceased)

If any form of compensation is received, we will notify the County Judge.

Jeff Ormsby
Signature
Authorized Funeral Home Representative

114-2016 A

1123 N. Jefferson
Mt Pleasant, Texas 75455
(903) 577-7500

Curry-Welborn Funeral Home

FUNERAL PURCHASE AGREEMENT

Name of Deceased Larry Wise Date of Death 4/8/16 Date of Service _____
Purchaser Laura Darby Telephone # (903) 331-9820
Address 63 Private Rd 2355 City Mount Pleasant State Tx Zip 75455

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.

PROFESSIONAL SERVICES SELECTED

A. 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 per day \$ _____

2 Funeral Service \$ _____

3 Memorial Service \$ _____

4 Graveside Service and equipment \$ _____

5 Other Services \$ _____

E. TRANSPORTATION

1. Transfer of remains to funeral home \$ _____

2 Automotive Equipment \$ _____

A. Hearse \$ _____

B. Lead / Minister Vehicle \$ _____

C. Flower / Utility Vehicle \$ _____

D. Limousine(s) \$ _____

E. Transportation to Airport \$ _____

F. Other Transportation \$ _____

G. Addl. Mileage @ _____ (per mile) \$ _____

TOTAL OF PROFESSIONAL SERVICES SELECTED \$ _____

F. MERCHANDISE

1 Casket \$ _____

2 Outer Receptacle \$ _____

3 Acknowledgement Cards \$ _____

4 Register Book \$ _____

5 Memorial Folders \$ _____

6 Prayer Cards \$ _____

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 cremations \$ 900.00

Additional charges for staff services and/or use of facilities \$ _____

Describe: _____

Cemetery or crematory requirements if any _____

TOTAL OF SPECIAL SERVICES SELECTED \$ _____

H. CASH ADVANCES

1 Cemetery charges \$ _____

2 Crematory charges \$ _____

3. Transportation \$ _____

4 Clergy honorarium \$ _____

5 Musicians honorarium \$ _____

6. Flowers \$ _____

7. Obituaries \$ _____

8. Certified copies of death certificates \$ _____

Number of copies _____

9. Escorts \$ _____

10. Other \$ _____

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 \$ 900.00

CASH ADVANCES \$ _____

TOTAL OF ALL CHARGES (Balance Due) \$ _____

METHOD OF PAYMENT:

Less: Cash Received on Account \$ 0

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 8 day of April, 2016

Accepted For Seller by:

[Signature]
(Signature of Funeral Director)

Laura Darby
(Signature of Buyer)

(Signature of Co-Buyer)

*Approved in court \$900
4-25-16
Bunnie Lee*