Owens-Ramey Funeral Services

P.O. Box 417, 516 lowa Street Wiggins, Mississippi 39577 (601) 928-2199 (601) 928-5824 Fax

No	
DECEASED	
DATE OF DEATH	
PLACE OF DEATH	
DATE OF STATEMENT	
A. CHARGE FOR SERVICES SELECTED 1. Professional Services:	
Basic Services of Funeral Director & Staff	
Embalming	
Other preparation of body	
2. Facilities, Equipment & Staff:	
Use of Facilities & Staff for Viewing / Visitation	
Use of Facilities & Staff for Funeral Ceremony	
Use of Facilities & Staff for Memorial Service	
Use of Equipment & Staff for Graveside Service	
Use of Equipment & Staff for Church Service	
3. Transportation:	
Transfer of Remains to Funeral Home	
Hearse	
Limousine	
Sedan	
Service / Utility Vehicle	
4. Other Services / Facilities / Equipment:	
TOTAL OF SERVICES SELECTED	\$
B. CHARGE FOR MERCHANDISE SELECTED	
Casket (or other receptacle)	
Name/No.	
Material	
Color	
Outer Burial Container	
Name/No.	
Material	
Acknowledgement Cards	
Memory Folders / Prayer Cards	
Clothing	
Olouming	
Cremation Urn	
TOTAL OF MERCHANDISE SELECTED	\$
C. SPECIAL CHARGES	
☐ Forwarding remains to: ☐ Receiving remains from:	
Immediate Burial	
Direct Cremation	
Other	
TOTAL OF SPECIAL CHARGES	\$
TOTAL FUNERAL HOME CHARGES	\$
(This total does not include Cash Advances)	
All selections above (merchandise and services) are inflation pr	oof and
guaranteed as to price unless designated by an asterisk (*), in we prices of those items are not guaranteed.	which case the

STATEMENT OF FUNERAL GOODS AND SERVICES SELECTED

Charges are only for those items that you selected or that are required. If we are required by law or by a cemetery or 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.

•	es of Death Certificate \$ ===================================
Clergy	
Musician	
Paid Newspa	per Notice
Cemetery	
Other	
04.10.	
We charge yo	* TOTAL CASH ADVANCES \$u for our services in obtaining: (specify cash advance items)
SUMMARY	,
Total Funeral	Home Charges
Local Sales 7	ax (if applicable) \$
	ax (if applicable)
Total Cash A	dvances\$
Less Credits	GRAND TOTAL \$and Payments
	\$\$
	\$
Total Credits	\$
	BALANCE DUE ▶ \$
Rilling To	L.,
	metery or crematory requirements have required the any items listed, the law or requirement is explained below.
I hereby ack services for to perform specified on	EDGEMENT AND AGREEMENT nowledge that I have the legal right to arrange the fina he deceased, and I authorize this funeral establishmen services, furnish goods, and incur outside charges this Statement. I acknowledge that I have received the List and the Casket Price List and the Outer Buria ce List.
Terms of Pay	ment:
	is due no later than
	nt is not paid when due, an unanticipated LATE CHARGE
on the unpai listed on this payment to attorney's for applicable. liability for the addition to deceased. B	% per month (ANNUAL PERCENTAGE RATE% d balance will be due. I agree to pay the Balance Due Statement, plus any Late Charge. In the event I default in this funeral establishment, I agree to pay reasonable ses and court costs in addition to any Late Charge understand and agree that I am assuming personate charges set forth in this Statement and that this is in the liability imposed by law upon the estate of the yay my signature below, I hereby agree to all of the above added receipt of a copy of this Statement.
x Signed Social Security	
x Signed	Dated
ACCEPTANO	Dated E This funeral establishment agrees to provide all services and cash advances indicated on this Statement.