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Memorial Donation Request

Bristol Bay Native Corporation (BBNC) will make a payment of up to \$1,500 as a result of the death of a shareholder. Payment is subject to the following:

1. This form must be signed by the authorized family representative or court appointed personal representative.
2. The request for payment of funeral expenses must be made within 60 days after the death of a shareholder.
3. BBNC reserves the right to question the reasonableness of any payment request, and reserves the right to make full or partial payments, or to deny any payments in its sole discretion.

Name of deceased: _____

Date of death: _____

Payable to: _____

Mailing address: _____

_____ Phone: _____

Payable for: _____

CERTIFICATION

By my signature below, I certify that the funds received are to help pay for funeral related expenses.

Signature: _____ Relationship to Deceased: _____

Printed Name: _____ SSN: _____

Address: _____

Phone: _____

Date: _____

For staff use only:

Benefit paid \$ _____ Date _____ Paid to: _____

Benefit paid \$ _____ Date _____ Paid to: _____

 Staff signature

 Date