

*Futura Funeral Trust*  
Fiduciary Partners Trust Company, Trustee

Provider-Licensee Firm Servicing Information

*This form is to provide the trustee, Fiduciary Partners Trust Company the information necessary to administer pre-need funeral and burial accounts for your customers.*

Certification:

As a provider of services licensed under the Illinois Funeral or Burial Funds Act, we wish to participate in the Futura Funeral Trust Pre-Need Trust program with Fiduciary Partners Trust Company, Trustee. We are licensed under the Illinois Funeral or Burial Funds Act and maintain the minimum bond required by the Act. The information below is current and accurate.

**Business is conducted at the following location(s) under the same license number:**

\_\_\_\_\_

Funeral Home Name (Licensed Location)

\_\_\_\_\_

Address	City	State	Zip
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\_\_\_\_\_

Funeral Home Name (if more than 1 location under the same license; attach page(s) as necessary)

\_\_\_\_\_

Address	City	State	Zip
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**The following individual(s) whose signature(s) below, is/are authorized to sign funeral trust contracts, open trust accounts and make withdrawals by reason of death or request.**

***PLEASE NOTIFY FUTURA FUNERAL TRUST IF THESE INDIVIDUALS CHANGE***

Name: \_\_\_\_\_

Funeral Director License: \_\_\_\_\_

Signature: \_\_\_\_\_

Name: \_\_\_\_\_

Funeral Director License: \_\_\_\_\_

Signature: \_\_\_\_\_

Name: \_\_\_\_\_

Funeral Director License: \_\_\_\_\_

Signature: \_\_\_\_\_