



CLC Funeral Grant Application

Please complete this application and return to AAMC

Fax: **08 8958 2801**

Email: **aamc.projects@clc.org.au**

This is a request for up to **\$5,500.00 (including GST)** to contribute to the cost of a **coffin, burial and transport. Only for People born in the CLC area.**

Under this category of funding, assistance can be provided in the form of purchase order to the nominated Funeral Service Provider.

Please complete all sections

Name of Community Group/ Family Name:	
Name of Deceased:	
Date of Birth:	Date of Death:
Place of Birth:	Place Lived:
Date of Funeral:	Cost of Funeral:

Please attach a funeral parlour quote

Name of Funeral Parlour:
Name of Applicant (<i>Person Completing This Application</i>):
Applicant's Relation to Deceased:
Contact Number of Applicant:
Signature of Applicant

OFFICE USE ONLY

AAMC Manager Approval: YES / NO

CLC #:

P/O #:

**Please return completed form
and funeral quote to AAMC:**

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