

UKRAINIAN FRATERNAL SOCIETY OF CANADA

235 McGregor Street
Winnipeg MB R2W 4W5

Phone 204.586.4482
Fax 204.589.6411
Email contact@ufsc.ca

WILL PREPARATION BENEFIT CLAIM FORM

Before you complete this application:

1. To qualify , you must be a UFSC or UMBA life insurance policy owner 18 years of age or older
2. The premiums on your insurance policy must be up-to-date
3. Use a legal professional to prepare or update your will
4. Submit a copy of the paid invoice that you received from a legal professional with this application.

Name

Preferred Contact Number

Email

Street Address

City Prov/State Postal Code/Zip

I have enclosed a copy of my paid invoice from a legal professional who drafted my will. If my paid invoice is for less than \$75, I understand that UFSC will reimburse only the actual cost incurred.

X

Signature

Date

Please Note : Only one (1) Will Preparation Benefit is permitted per policy owner.

FOR OFFICE USE ONLY

Approved By: _____

Policy Number: _____

Cheque # _____

Date Mailed: _____