

Application for Burial expenses of a Deceased Service Man's Widow

Under Subdivision (b) of Article 19 of "The County Code" of 1955 As Amended

APPLICATION

PART I - Affidavit supporting Burial Claim, to be executed by Personal Representative, Next of Kin, Individual, or Veterans' Organization I (We) hereby make application for the Burial Expenses of a Widow of a Deceased Service Man, as provided by Subdivision (b) Article 19 of "The County Code" of 1955, as amended in the amount of \$_____, and hereby certify that the facts set forth below are true and correct to the best of my (our) knowledge and belief:

1. (a) Full name of deceased widow _____
(b) Date of Death _____ (c) Place of Death _____
(d) Legal residence at time of death was _____
(Street and Number)
_____ County of _____, Pa.
(City, Borough, Town or Township)

She resided at this address for _____ years and _____ months immediately prior to her death.

(e) Date of Burial _____ (f) Place of Burial _____
2. (a) Name of deceased husband _____
(b) The veteran served during the _____ War. Rank _____
Co. _____ Regiment _____ Division _____
Serial Number _____
(c) Date of Enlistment _____ (d) Date of Discharge or Separation _____
(e) Date of Death _____ (f) Place of Burial _____
(g) Did decedent remarry after her husband's death _____
(h) Veteran was a legal resident of the State of _____ at time of enlistment.

3. Payment of this allowance shall be made to _____ as all expenses of burial Have // Have Not been paid.

4. In witness whereof I have placed my hand this _____ day of _____, 20____
(Sig.) _____

Sworn and subscribed before me this _____
Day of _____, 20____ (Personal Representative, Next of Kin, Individual, or Veterans' organization)
_____(Notary Public) _____(Address)

Part II - Affidavit by Undertaker.

I hereby certify that I buried the above named widow of a deceased service man, as hereinbefore stated, and that these expenses Have // Have Not been paid.

_____(Name of Firm)
Sworn and subscribed before me this _____
By _____(Name) _____(Title)
Day of _____, 20____
_____(Notary Public) _____(Address)

(NOTE: *Strike out word not when same does not apply)

Part III - Certification of Entitlement.

(To be completed by representative of the County Commissioners)

I certify that I have examined the proof of service of the deceased service person named in this application and the proof of relationship of the within named widow, and find that the statements made above are correct, and that the applicant is entitled to payment under subdivision (b) Article 19 of "The County Code" of 1955, as amended.

_____(Title: Director of Veterans' Affairs)

WIDOWS BURIAL

INSTRUCTIONS

1. A Deceased Service Man's Widow is defined as the unremarried widow of any male deceased service person, at the time of his death, serving in, or having served in and been honorably separated from the Army, Navy, Air Force, Marine Corps or Coast Guard, (1) during any war or armed conflict in which the United States has been, is now or shall hereafter be engaged, or (2) in a zone where a campaign or state or condition of war or armed conflict (established by the records of the Department of Defense of the Federal Government) then existed. (Sec. 1908 and 1909, "The County Code" of 1955, as amended.)

2. Application must be made by the personal representative, if any, of the widow, otherwise by any next of kin, individual, or veterans' organization, who or which assumes responsibility for the cost of burial of the body. (Sec. 1911, "The County Code" of 1955, as amended.)

3. **Application must be made within one year from the date of death.** No application will be given consideration unless fully completed.

4. The following papers must be attached to this application:

- (a) Official death certificate of the deceased service person whose widow the decedent is.
- (b) Official death certificate of the decedent, but if either or both death certificates are not procurable attach either (1) an affidavit of one or more persons personally acquainted with the deceased service man or the widow, as the case may be, and the fact of his or her death, or (2) proof of the record of death kept by the attending physician, or (3) of the record of burial kept by the undertaker by whom he or she was buried or (4) of the record of the church, burial association or cemetery company maintaining the cemetery in which he or she was buried.
- (c) Honorable discharge or other official record showing war service or service in zone where campaign or state or condition of war existed. Copies of War or Navy Department or Air Force records on file with State Department of Military Affairs will be accepted.
- (d) Proof of legal residence of widow in this county.
- (e) Proof that decedent was married to the deceased service man at the time of his death and that she has not since remarried.

PENALTY

Every person making a false oath is guilty of a felony and on conviction will be sentenced to pay a fine not exceeding \$3000.00 or to undergo imprisonment by separate or solitary confinement, at labor not exceeding seven years or both, and will be forever disqualified from being a witness in any matter in controversy. (Sec. 322, Act of June 24, 1959, P.L. 872)

(To be detached and mailed to applicant if payment is made to undertaker.)

_____, 20____

We have this day drawn a check, in the amount of \$_____, to the order of _____

as payment of the County Contribution toward the burial expense
of _____.

Commissioners of the County of _____

Commissioner

Commissioner

Commissioner

Snyder County Funeral Expense of a Deceased Veterans Spouse

1. The County is authorized to contribute \$75 towards the funeral of Deceased Spouse of a Veteran. Additional \$25 can be requested but it is by the authorization of the County Commissioners if the extra amount will be awarded
2. Application must be submitted to the Snyder County Director of Veterans Affairs within one Year of His (Her) death.
3. The deceased spouse must have at the time of their death been a resident of Snyder County whether they were buried within the county.
4. or the deceased spouse died and was buried within Snyder County but at the time of their death wasn't a legal resident of the Commonwealth of Pennsylvania if a service organization notifies the County director in writing that the body was unclaimed by relatives or friends.
5. Minimum documents that need to be enclosed with the application are
 - a. County Burial Expense application form
 - b. Copy of the Death Certificate
 - c. Copy of the veterans discharge from military service (DD form 214, Certificate of Release or Discharge from Active Duty , DD form 13 Statement of Service , DD form 217 Discharge Certificate, DD form 303 Certificate in Lieu of Lost or Destroyed Discharge, DD form 256 Honorable Discharge Certificate, NGB form 22 Separation report form the National Guard. Any other documents can be submitted but will need to be verified by the County Director for eligibility).
 - d. Certification for services provided by Funeral Director/ Undertaker.
6. Applications are to be sent to:

Director of Snyder County Veterans Affairs
713 Bridge Street, Suite 10
Selinsgrove, PA 17870
Phone: (570) 374-0181 Ext 129
Fax: (570) 374-2330