

Remember My Footprints Burial/Funeral Assistance Fund

412 Lavansville Road
Somerset, Pa 15501
(814) 233-4583

Applicants must meet the following criteria in order to be considered
for assistance with burial/funeral expense for their child.

- Child must have passed away during pregnancy (15 weeks or later) or within the first year of life.
- Application must be completed within six months of child's passing
- Applicant must reside in Somerset or Cambria County, PA and provide proof of residency upon request.
- Applicant must be free of legal investigations
- Applications will be considered by the Board of Remember My Footprints and submission of the application does not guarantee award of funds.
- Applicant will provide proof, upon request of Remember My Footprints, of funeral bill or receipt for funeral related expenses paid by the applicant.
- Funds will be paid directly to funeral home, crematory, cemetery, or monument company.

APPLICATION FOR BURIAL ASSISTANCE

Name of deceased:	
Date of birth:	Date of death:
Gestational age of child (if passed away during pregnancy):	

Applicant/Relative Information

Name of Applicant:
Relationship to Deceased:
Mailing Address:
Home Phone:

Funeral Home Information

Name of Funeral Home:
Contact Person:
Funeral Home Phone Number:
Funeral Home Address:

READ BEFORE SIGNING

Applicants or recipients who knowingly and willfully provide false or fraudulent information are subject to prosecution under 18 U.S.C. §1001, the Federal Law concerning fraud which carries a fine of not more than \$10,000 or imprisonment of not more than five years or both. I understand the above and I agree to provide any documents necessary to prove eligibility for assistance. I (We) certify to the best of my knowledge that the information contained in this application is accurate and true.

Applicant Signature

Date

Applicant Printed Name