APPENDIX X. SELLERS NOTICE TO THE INSURANCE COMMISSIONER

Sellers Notice to the Insurance Commissioner

Permit Number

KNOW ALL BY THESE PRESENTS that I, ________________________, (Seller) current (Current Owner)
owner of __________________ doing business as a Prepaid Funeral Benefits (Name of Funeral Establishment)
organization in the State of Oklahoma and required by OKLA. STAT. TIT. 36 § 6124.1 to provide notice of Transfer in Ownership hereby submit to you the following;

a) Name of Acquiring Organization __________________________

b) Date Acquiring Organization Assumes Control ______________

c) Attached and made part of this Notice is the required listing of outstanding Prepaid Funeral Contracts

The Seller, now obligates the acquiring organization to apply for and receive a permit of sameness from the Insurance Commissioner of the State of Oklahoma, prior to acting as the Prepaid Funeral Benefits organization for all prepaid funeral contracts included in the transfer of ownership.

Seller further agrees that all monies paid into Trust as part of the prepaid funeral contract remain under the control of Seller until the Insurance Commissioner, in order to safeguard the rights and interests of the individual prepaid funeral contract holder, expressly authorizes the transfer of said Trust monies to the Buyer.

I, _________________________ hereby affirm that all information provided in this notice (Current Owner) and inscribed on the attached listing of outstanding Prepaid Funeral Contracts is true and correct. I further affirm that I have disclosed any adverse change foreseen due to the transfer in Ownership.

State of ___________________________

County of __________________________

Signed and affirmed before me on ______ by ____________________________
(Date) (Current Owner)

(Signature of Notarial Officer)

(seal)

(Title)

(Commission Expiration)

PFSN 2009