Prepaid Funeral Benefits Individual Ledger

Beneficiary's Name: _____

Purchaser's Name: _____

Purchaser's Address: _____

_____

Purchaser's Phone #: _____

Beginning Contract Balance: _____

Contract #: _____

Date of Purchase: _____

Contract Face Amount: _____

Total Retainage: _____

Total Finance Charges: _____

Date	Transaction Amount	Interest	Total Interest	Retainage Withheld	Total Retainage	Finance Charge	Total Finance	Principal	Total Principal	Trust Balance	Balance Due on Contract