



United Funeral Directors Benefit Life Insurance Company  
United Funeral Benefit Life Insurance Company  
United Pre-Need Funeral Plans, Inc  
Hawthorn Life Insurance Company

## Same Name Affidavit

THE STATE OF \_\_\_\_\_

County of \_\_\_\_\_

BEFORE ME, the undersigned authority, a Notary Public in and for said State and County, on this date personally appeared the undersigned (Affiant), as evidenced by \_\_\_\_\_, who, after having been by me first duly sworn, upon oath, according to law, deposed and said:

"My name is \_\_\_\_\_ and I am ONE AND THE SAME PERSON AS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I hereby affirm that the information given above is true and correct to the best of my knowledge and belief, that I have been known by the present and former names as stated above, and that I am one and the same person."

Executed this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_\_  
Affiant Signature

SUBSCRIBED AND SWORN TO BEFORE ME, on this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_\_  
Notary Public, State of \_\_\_\_\_