

**VERIFICATION OF INABILITY TO PAY FUNERAL EXPENSE**

A request has been made for pauper burial with expenses to be paid by Gonzales County for the following individual. The deceased is a citizen of Gonzales County and responsible party/parties have indicated that he/she has no assets with which to pay funeral expenses.

Name of deceased: \_\_\_\_\_

Address: \_\_\_\_\_

Date of Death: \_\_\_\_\_

1. Deceased's earnings:  
Name of Employer \_\_\_\_\_  
Address \_\_\_\_\_  
Amount of Weekly or Monthly Earnings \_\_\_\_\_

2. Other Income (source & amount) \_\_\_\_\_  
\_\_\_\_\_

3. Life Insurance: Yes \_\_\_\_\_ No \_\_\_\_\_ Amount: \_\_\_\_\_

4. Burial Insurance: Yes \_\_\_\_\_ No \_\_\_\_\_

5. Veteran: Yes \_\_\_\_\_ No \_\_\_\_\_

6. Married \_\_\_\_\_ Single \_\_\_\_\_

7. Earnings of spouse and/or children (employer & amount) \_\_\_\_\_  
\_\_\_\_\_

8. Deceased owns the following property (address, balance, value)  
Home \_\_\_\_\_  
Automobiles, motorcycles, other vehicles \_\_\_\_\_  
Furniture \_\_\_\_\_  
Other land/buildings, stocks, bonds \_\_\_\_\_  
Notes, mortgages, trust deeds \_\_\_\_\_  
Animals, jewelry, other personal property \_\_\_\_\_

9. Deceased has the following money:  
a. At home \_\_\_\_\_ d. Safety deposit box \_\_\_\_\_  
b. Checking Account \_\_\_\_\_ e. Other \_\_\_\_\_  
c. Savings Account \_\_\_\_\_

10. Are there relatives and/or friends willing to assist with burial expenses? \_\_\_\_\_

Date \_\_\_\_\_ at Gonzales, Texas

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Address

\_\_\_\_\_  
Relationship to Deceased

\_\_\_\_\_  
Social Security Number