



SCHEDULE "E"

TRANSFER OF BURIAL DEED FROM OWNER TO ANOTHER PERSON

Name of Current Owner: _____

Name of Person Receiving the Transfer: _____

Address of Person Receiving the Transfer: _____

Phone No. of Person Receiving the Transfer: _____

Date of Transfer: _____

Gibbons Memorial Gardens: Plan _____ Block _____ Lot _____

Columbarium: Plan _____ Block _____ Lot _____

Signature of Transferor

Signature of Transferee

NOTE: TRANSFER FEES MUST BE PAID IN ACCORDANCE WITH SCHEDULE "A"