## **Funeral Billing Statement**

**Funeral Home Name**Address: [Street Address, City, State, Zip Code]  
Phone: [Phone Number] | Email: [Email Address] | Website: [Website URL]

**Billing Statement No:** [Unique Statement Number]  
**Date of Issue:** [MM/DD/YYYY]  
**Due Date:** [MM/DD/YYYY]

### **1. Customer Information**

**Name of Deceased:** [Full Name]  
**Family Representative:** [Name of Family Representative]  
**Customer ID:** [Unique Customer ID]  
**Address:** [Customer Address]  
**Phone:** [Customer Phone Number]  
**Email:** [Customer Email]

### **2. Statement Summary**

| **Description** | **Invoice Number** | **Invoice Date** | **Due Date** | **Amount** | **Payments** | **Balance Due** |
| --- | --- | --- | --- | --- | --- | --- |
| Funeral Service Package | [INV-001] | [MM/DD/YYYY] | [MM/DD/YYYY] | [$Amount] | [$Payment] | [$Balance] |
| Casket / Urn | [INV-002] | [MM/DD/YYYY] | [MM/DD/YYYY] | [$Amount] | [$Payment] | [$Balance] |
| Cremation Services | [INV-003] | [MM/DD/YYYY] | [MM/DD/YYYY] | [$Amount] | [$Payment] | [$Balance] |
| Memorial Service Fees | [INV-004] | [MM/DD/YYYY] | [MM/DD/YYYY] | [$Amount] | [$Payment] | [$Balance] |
| Burial Plot / Grave Fee | [INV-005] | [MM/DD/YYYY] | [MM/DD/YYYY] | [$Amount] | [$Payment] | [$Balance] |
| Additional Services (e.g., floral arrangements) | [INV-006] | [MM/DD/YYYY] | [MM/DD/YYYY] | [$Amount] | [$Payment] | [$Balance] |
| **Total** |  |  |  | **[$Total]** | **[$Total]** | **[$Total]** |

### **3. Payment Details**

**Total Amount Due:** [$Total Amount Due]  
**Payment Due Date:** [MM/DD/YYYY]

**Payment Methods:**

* Bank Transfer: [Bank Name, Account Number, SWIFT/BIC]
* Online Payment Link: [Payment URL]
* Other Payment Methods: [Specify if applicable]

### **4. Terms and Conditions**

1. Payments must be received by the due date to avoid any late fees.
2. Any unpaid balance after [X days] will incur a late fee of [X%] per month.
3. Refunds, if applicable, will be processed as per our refund policy.
4. If you have questions regarding this billing statement, please contact us at [Phone Number] or [Email Address]

### **5. Notes and Remarks**

* "Thank you for trusting us during this difficult time. Our team is here to support you in every way possible."
* [Any other important instructions, special remarks, or notes related to payments or services.]

### **6. Footer (Optional)**

**Funeral Home Name** | Address: [Street Address] | Phone: [Phone Number] | Email: [Email Address]