

Marcom-Harvey Funeral Care

9100 Blue Ridge Blvd, Kansas City, MO 64138 (816)745-7533

DATE April 17, 2025

DECEASED NAME [REDACTED]

DATE OF DEATH April 16, 2025

PLACE OF DEATH Children Mercy Central Hospital Kansas City, MO

Charges are only those items that you selected or that are required. If we are required by law or by a cemetery or a crematory to use any items, we will explain the reasons in writing below. If you selected a funeral that may require embalming, such as a funeral with a casket, you may have to pay for embalming. You do not have to pay for embalming if you did not approve if you selected arrangements such as a direct cremation or immediate burial. If we charged for embalming, we will explain why below.

STATEMENT OF FUNERAL GOODS AND SERVICES SELECTED

A. CHARGE FOR SERVICES:

Professional Services	
Basic Services of Funeral Director & Embalming	\$ 295.00
Other Preparations	\$ -0-
Transportation of Remains to Funeral Home	\$ 495.00
	\$ -0-
	\$ -0-
	\$ -0-
Facilities and Staff	\$ 790.00
Viewing/Visitation	\$ 1.00
Use of Facilities and Staff for Funeral	\$ 1.00
Other Use of Facilities	\$ -0-
	\$ -0-
	\$ -0-
Automotive Equipment	\$ 2.00
Funeral Coach	\$ -0-
Flower Car/Service Vehicle	\$ 250.00
Lead Car	\$ -0-
Clergy's Car	\$ -0-
Utility Vehicle	\$ -0-
Limousine	\$ -0-
Additional Limousines	\$ -0-
Escorts	\$ -0-
	\$ 250.00

B. CHARGES FOR MERCHANDISE:

Casket	\$ 1,800.00
Casket	
Outer container	\$ -0-
Outer Container	
Vault	
Alternate Container	\$ -0-
Urn	\$ -0-
Register Book/Cards	\$ -0-
Burial Clothing	\$ -0-
Flowers	\$ -0-
Acknowledgement Cards	\$ -0-
Headstone or Marker	\$ -0-
Air Tray	\$ -0-
Memorial Folders	\$ -0-
Prayer Cards	\$ -0-
	\$ 1,800.00

The only warranty on the casket and / or outer burial container sold in connection with this service is the express written warranty, if any, granted by the manufacturer. This funeral home makes no warranty, express or implied, with respect to the casket and/or outer burial container.

Billing To _____

C. SPECIAL CHARGES:

Forwarding of Remains to Immediate Burial	\$ -0-
Receiving of Remains from Direct Cremation	\$ -0-
Body Donation	\$ -0-
Other Cost	\$ -0-
	\$ -0-
	\$ -0-

D. CASH ADVANCES:

Cemetery Charges	\$ 2,000.00
Newspaper Notice	\$ 115.00
Certified Copies	\$ 14.00
Clergy Honorarium	\$ -0-
Additional Death Certificates	\$ 22.00
Marker Foundation	\$ -0-
Vault Service Fee	\$ -0-
Tent Rental	\$ -0-
Chair Rental	\$ -0-
Decor/Professional Planning	\$ 250.00
2. Other	\$ -0-
3. Other	\$ -0-
	\$ -0-
	\$ -0-

We charge you for our services in obtaining:

SUMMARY OF CHARGES:

A. CHARGES FOR SERVICES	\$ 1,042.00
B. CHARGES FOR MERCHANDISE	\$ 1,800.00
C. SPECIAL CHARGES	\$ -0-
D. CASH ADVANCES	\$ 2,401.00
E. SALES TAX, IF APPLICABLE	\$ 161.55
TOTAL FUNERAL HOME CHARGES	\$ 5,404.55

LESS CREDIT AND PREPAYMENTS:

Service Discounts	\$ -960.00
Burial Insurance	\$ -0-
	\$ -0-
	\$ -0-
TOTAL CREDIT	\$ 960.00

BALANCE DUE \$ 4,444.55

If any law, cemetery or crematory requirements have required the purchase of any of the items listed above the law or requirement is explained below.

Reason for Embalming _____

I hereby agree that I have examined the above stated items and found them to be correct and according to the arrangements requested and I hereby acknowledge receipt of a copy of this memorandum and agreement. I hereby represent that I have sufficient funds and assets legally available for payment of cash price and hereby agree and covenant jointly and severally to make payments of \$ 5,404.55 within 1 days. A late charge of _____ per month amounting to _____ per year is applied to the unpaid balance beginning 30 days from the date of this agreement will be considered part of this agreement and the cost thereof will be added to the casket price list and the outer burial container price list.

Signed _____

Co-Signed _____

Name of funeral home representative _____

Dated _____

Dated _____

Relationship to Deceased _____

Initials _____