

**WAIVER CERTIFICATE**

TO WHOM IT MAY CONCERN:

I/WE \_\_\_\_\_ widow/children/kin of  
the deceased veteran \_\_\_\_\_  
do hereby voluntarily WAIVED, RENOUNCED and CEDED all our rights,  
interest and participation over the funeral benefit claim in behalf of the said  
deceased veteran in favor of \_\_\_\_\_.  
(Name of applicant)

\_\_\_\_\_  
(PRINT NAME & SIGNATURE)

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