

**The PAT Fund
Performers Assistance Trust**

Administered by the Wichita Blues Society

**Final Expenses/Burial Assistance
Confidential Application**

Name of the Deceased: _____ aka: _____

How did this person die? Accident Long illness Suddenly_____

Please, briefly explain: _____

Your Name: _____ Relationship: _____

What is your request? _____

Is there burial insurance? _____ Other insurance? _____

Do you have legal recourse for your loss? _____

Do you foresee being able to repay this assistance?

Who can verify that the deceased was an active, professional musician in Wichita/So. Central KS?
(References can be club owners, other area musicians, etc.)

Name: _____ Contact #: _____

Name: _____ Contact #: _____

Name: _____ Contact #: _____

Applicant's signature: _____ Date: _____

Send your completed application to: Ann Keefer, ad hoc chairperson
3017 Oakland
Wichita, KS 67211

If you have any questions, call: 316-651-0407

— FOR PAT FUND COMMITTEE & WBS USE ONLY —

Date Rec'd: Reviewed:

Notes/Comments: _____

Recommended/Declined: _____

Chairperson: _____

Submitted to WBS Board: _____

Approved assistance of: _____

Denied: _____

Check/Funds issued: _____

WBS Treasurer: _____
