



- ☐ Have you paid for the funeral expenses ?
 - ☐ yes (please clarify amount and join the bills)
 - ☐ no
- ☐ Have you have deposit a life assurance ?
 - ☐ oui (please clarifiy and join the justifications)
 - ☐ no

Please inform only by partner or child to support : économique situation

Deceased victim

- Occupation :
- Employee ☐ yes
 ☐ no
- Annual profits (Please join the two last tax assessments) :
- The act of terrorism took place during : ☐ work
 ☐ route home-work
 ☐ private life
- Name and address of the social complementary organization of the victim :
-
-

Bénéficiary

- Occupation :
- Employee ☐ yes
☐ no
- Amount of net last wages (join two last) :
- Have you received prestations from a social organism or an assurance because of death ?
☐ yes (Please clarify amount and join the justifications)
☐ no

Others beneficiaries

- Name and address of others beneficiaries (child, grand-parents, brothers, sisters, parents, grands-child) :
- | | |
|---------|---------|
| ■ | ■ |
| ■ | ■ |
| ■ | ■ |

DONE AT :
SIGNATURE :

ON :