

# Request for deposit

## (Life Assurance Companies Act 1896)

**CFO 106**  
(01.19)

Policy number

\_\_\_\_\_

Name of life assurance company

\_\_\_\_\_

Name of person whose life is covered

Name of court

\_\_\_\_\_

Details of funds to be deposited	Amount

## Notes

A sealed copy of the affidavit or witness statement filed in accordance with rule 37.4 of the Civil Procedure Rules 1998 must accompany this request.

Court seal

[illegible]

**Signed**

\_\_\_\_\_

Date

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Give the name, address and reference of **the person who will make the deposit**

Name

\_\_\_\_\_

Address

Postcode 

Postcode

| | | | |

Ref.

\_\_\_\_\_

Give the name, address and reference of the **person filing this form**

Name

\_\_\_\_\_

Address

Postcode -

1

Postcode

Ref.

\_\_\_\_\_

## How to contact the Court Funds Office

## Customer Helpline

0300 0200 199

## Email

enquiries@cfo.gsi.gov.uk

### Address

Court Funds Office	Court Funds Office
Sunderland	DX 328004
SR43 3AB	Sunderland 19

## How to pay

Cheques must be made payable to:  
Accountant General  
of the Senior Courts

For full details of how your information is used please see our privacy notice at <https://www.gov.uk/government/collections/court-funds-office-forms> or contact CFO who will provide you with a copy.