

AUTHORIZATION FOR CREMATION

I / We hereby request Brett Funeral Home to cremate the remains of

_____ who died

On the _____ day of _____, _____

I / We further certify that I / We have the right and authority to order

this cremation and that I / We are related to the deceased as

In the absence of other family members who have equal rights of
determining disposition, I / We certify that I am acting on their behalf

with their permission.

Disposition of said cremated remains will be as follows:

I / We swear under oath that the above statement is true.

Signed _____

All cremations will be performed within seven days of all documentation needed.