



**DIRECTIONS FOR DISPOSITION OF CREMATED REMAINS**

Name of Deceased \_\_\_\_\_ Date of Death \_\_\_\_\_

\_\_\_\_\_ (hereinafter referred to as the "Funeral Home"), is hereby authorized and directed to make the following disposition of the cremated remains of the above named deceased.

- a) Deliver cremated remains to \_\_\_\_\_  
Arrangements have been made with them for disposition of the cremated remains.
- b) Notify \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
when the cremation process is completed and the cremated remains are ready to be released. Cremated remains are to be picked up from \_\_\_\_\_  
by \_\_\_\_\_ who is authorized to receive the cremated remains.
- c) Ship cremated remains via U.S. Postal Service "Registered Mail" to the following:  
Name (L2) \_\_\_\_\_ Name (L1) \_\_\_\_\_  
Address (L3) \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
City (L4) \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
- d) Other \_\_\_\_\_

Container Selected  TCC (temporary container)  Urn (describe) \_\_\_\_\_

Special Instructions \_\_\_\_\_

Authorized by:  
Signature &  
Print/Type Name \_\_\_\_\_ Relation \_\_\_\_\_ Date \_\_\_\_\_

**RECEIPT OF CREMATED REMAINS**

I hereby acknowledge receipt of the cremated remains of the above named deceased from the above Funeral Home. I am the person authorized above to receive and receipt for these cremated remains. I hereby agree to release said Funeral Home of any and all claims for cost or damages by reason of their delivery.

Container(s) Received - # \_\_\_\_\_  TCC  Urn (describe) \_\_\_\_\_

Comments \_\_\_\_\_

Received by:  
Signature &  
Print/Type Name \_\_\_\_\_ Relation \_\_\_\_\_ Date \_\_\_\_\_

Identification \_\_\_\_\_ Time \_\_\_\_\_

Verified & Released by \_\_\_\_\_ ID Disk # \_\_\_\_\_