

AUTHORIZATION FOR DISPOSITION WITH OR WITHOUT EMBALMING

To: All Faiths Mortuary and Crematory Services FD-1733
9840 Caminito Cuadro, San Diego, CA 92129

RE: _____ (Decedent) I, _____.
do ___ do not ___ (check one) request embalming, which I understand is the addition to, or the replacement of, body fluids by chemical preservatives or the application of chemical preservatives for the temporary preservation of tile body. I understand that embalming is not required by law.

I understand that for storage or embalming purposes the decedent may be transported to the following licensed funeral establishment:

Aztlan Mortuary Services. FD-1658 7856 La Mesa Blvd. La Mesa. CA 91941
(name and address of funeral establishment)

then returned for funeral services. I understand I may be charged an additional fee for transport.

The undersigned hereby represents that he/she has the legal right to control disposition of the remains of the decedent.

Signed: _____, Relationship _____.

Executed this ___ day of _____, _____, at City _____, State _____.

To Be Completed by funeral establishment if Authorization to Embalm and Notification to Transport Is Obtained Orally (by Telephone):

The above statement of authorization and notification was read to _____,
Relationship, _____ who did ___ did not ___ (check one) authorize embalming at the above named funeral establishment. City _____, State _____, Phone (____) _____.
Date and time authorization granted: _____.

Signature of funeral establishment representative accepting authorization.

I declare under penalty of perjury that the foregoing is true and correct. Executed this
____ day of _____, _____, at City _____, State _____.

(Signed) _____.