

## Disclosures and Compliance

I/we have the legal right to arrange for disposition of deceased, and acknowledge that I/we have been given for retention a General Price List, a Casket Price list and an Outer Burial Container Price list dated April 1, 2016.

I/we acknowledge that the cremation process will take place within 48 hours of receiving written authorization from the Medical Examiner having jurisdiction in the county in which the death occurred, excluding holidays and weekends.

I/we authorize the removal and disposal of any mechanical implanted device, including but not limited to pacemakers, defibrillators and medicine pumps.

I/we authorize the release and transport of the remains to the licensed cremation establishment, including but not limited to its authorized agents and employees.

I/we acknowledge that the name of the licensed cremation establishment will not appear in any death notice, obituary or other public announcement if any funeral service, memorial service or graveside is to take place and such service is mentioned in connection with the death notice, obituary or public announcement.

_____	_____
Authorized Agent	Relation to Decedent
_____	_____
Authorized Agent	Relation to Decedent
_____	_____
Name of Decedent	Date of Death