



3601 5th Avenue, Sacramento, CA 95817

AUTHORIZATION FOR RELEASE

TO: _____

Please release the remains of:

_____ to THOMPSON
ROSE CHAPEL, INC. (FD 860).

I/WE DECLARE UNDER PENALTY OF PERJURY THAT I/we have the right to control the disposition of _____ in accordance with Health and Safety Code Section 7100.

Name: _____ Relationship: _____

Address: _____ City _____

State: _____ Zip: _____ Phone: _____

Signature: _____