CREMATION AUTHORIZATION

I, _____, hereby state that upon my death it is my desire to be cremated and that my cremated remains be disposed of in the following manner: _____

_____

_____ Date: _____

Signature

ACKNOWLEDGMENT

STATE OF NEW MEXICO)
) ss.
COUNTY OF BERNALILLO)

The foregoing instrument was acknowledged before me on _____ 2015, by _____.

SEAL

My Commission Expires:
_____

_____
Notary Public

11/2014