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: _____.

_____ _____

Signature Date

ACKNOWLEDGMENT

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

The foregoing instrument was acknowledged before me on this _____ day of _____, 20___ by _____.

_____

Notary