Abbey Funeraria

FD 1579
1010 T Street, Fresno, CA 93721
Phone 559-237-4400

AUTHORIZATION TO RELEASE HUMAN REMAINS

TO: _____

THE UNDERSIGNED HEREBY AUTHORIZES AND REQUESTS RELEASE OF THE REMAINS OF:

Name:_____

TO: Yost & Webb Funeral Home, including its agents.

The above named funeral home, including its agents, is hereby authorized to sign on the undersigned's behalf, any and all other authorizations that may be required to secure release of the above named decedent.

The undersigned further represents that they have the legal right to make this authorization.

_____	_____	_____
Signed	*Relationship*	*Date*

_____	_____	_____	_____
Address	*City*	*State*	*Telephone*

IF AUTHORIZATION TO RELEASE REMAINS IS GRANTED ORALLY (BY TELEPHONE) COMPLETE THE FOLLOWING:

Name _____ Relationship_____

City _____ State _____ Zip _____ Phone ( ) _____

Date & Time authorization granted _____, 20____ at _____AM/PM

Signature of person accepting this authorization _____