

## AUTHORIZATION

I hereby designate Ziemer Funeral Home, Inc., to take charge of funeral arrangements for \_\_\_\_\_ and I authorize the release and removal of the remains to Ziemer Funeral Home for the purpose of embalming.

I represent that I am the next-of-kin, or am acting as an authorized agent for the next-of-kin.

Signed:

\_\_\_\_\_

Relationship:

\_\_\_\_\_

Co-signed:

\_\_\_\_\_

Relationship:

\_\_\_\_\_

Date: \_\_\_\_\_ Witness: \_\_\_\_\_