FD 1993
Robert Rey Jr. GARCIA
FUNERAL SERVICES
830 East Santa Paula Street, Santa Paula, CA 93060 • Office: (805) 229-7054 • FD #1993

AUTHORIZATION FOR DISPOSITION WITH OR WITHOUT EMBALMING

TO: Robert Rey Garcia Jr. Funeral Services

RE: _____(DECEDENT)

I, _____ Do _____ Do not _____ (Check one) request embalming, which I understand is the addition to, or replacement of, body fluids by chemical preservatives or the application of chemical preservatives for the temporary preservation of the body. I understand that EMBALMING IS NOT REQUIRED BY LAW.

I understand that for storage or embalming purposes the decedent may be transported to the following licensed funeral establishment:

Funeraria Garcia Mortuary FD 1338, 629 South "A" Street, Oxnard CA 93030

(Name and Address of Funeral Establishment)

then returned for funeral services. I understand I may be charged an additional fee for transport.

The undersigned hereby represents that he/she has the legal right to control disposition of the remains of the decedent.

Signed: _____ Relationship _____

Executed this _____ Day of _____, _____. at City _____State _____

VERBAL AUTHORIZATION FOR EMBALMING

To be completed by funeral establishment if Authorization to Embalm and Notification to transport is obtained orally (by telephone):

The above statement of authorization and notification was read to _____, Relationship _____, who did _____ did not _____ (check one) Authorize embalming at the above named funeral establishment.

City _____, State _____, Phone _____
Date and time authorization granted: _____

Signature of funeral establishment representative accepting authorization. _____
I declare under penalty of perjury that the foregoing is true and correct. Executed this _____ Day of _____, _____, at City _____, State _____, (s) _____.

Note: Authorization cited: Section 7606 and 7616, Business and Professional Code. Reference: Section 7606, Business and Professional Code.