

AUTHORIZATION / DIRECTION TO CREMATE

STATE OF LOUISIANA

PARISH OF _____

I, _____ (Social Security Number : _____),
a resident of _____ Parish, Louisiana, being of sound mind, do hereby
make this specific declaration regarding my interment, expressly revoking any and all prior
directions or expressions:

I.

I hereby declare that upon my death my body shall be cremated. As such, therefore, I hereby authorize
and direct _____, or any person, firm or entity acting on its behalf, to handle all
affairs in connection with my interment (cremation).

II.

Accordingly, I direct that my heirs, succession representative, surviving spouse or any person kindred
adopt no steps to frustrate the effectuation of my wishes and desires herein expressed.

IN WITNESS WHEREOF, I have signed this declaration, under oath, on the _____ day of
_____, 20____, in the presence of _____
and _____, the undersigned competent witnesses, and a Notary Public.

WITNESSES:

AFFIANT

NOTARY PUBLIC