

AFFIDAVIT FOR DISPOSITION OF REMAINS

**STATE OF LOUISIANA
PARISH OF ORLEANS**

BEFORE ME, the undersigned Notary Public, duly commissioned and qualified in and for the parish and state aforesaid, personally came and appeared:

(Affiant’s Printed Name)

who after being duly sworn did depose and state the following:

That he/she makes this notarized declaration of disposition of his/her remains in accordance with the provisions of La. R.S. 8:655 and 37:876; that he/she is of sound mind and voluntarily makes this declaration before the undersigned Notary Public after a due reading of the whole; that he/she does hereby declare that his next of kin or other person with authority over his/her remains, honor this request for disposition of his/her remains by cremation; and he/she does hereby authorize and empower the funeral director, funeral establishment or crematory authority to accept this notarized declaration as authority for cremation of his/her remains.

Affiant Signature

SWORN TO AND SUBSCRIBED BEFORE ME

This _____ day of _____, 20_____

Notary Public
Commissioned for Life