Cremation Authorization Form

On this _____ day of _____, 200__, I, _____ (name), hereby state that upon my death it is my desire to be cremated and that my cremated remains be disposed of in the following manner: *(state where you want your cremated remains scattered/buried)*

I authorize _____ to carry out the above instructions, including, but not limited to, 1) claiming and arranging for transport of my body, 2) cremation, and 3) accepting delivery of my remains. In accordance with NMSA 1978, Section 61-32-19(C), the permission of my next of kin or any other person shall not be required for my cremation. If _____ is unavailable or unwilling to act, then I authorize _____ to carry out the above instructions, including, but not limited to, 1) claiming and arranging for transport of my body, 2) cremation, and 3) accepting delivery of my remains.

_____
Signature of Declarant

This form must be signed above by you and below by <u>either</u> two witnesses <u>or</u> a notary public using the appropriate format that follows.

WITNESSES

We believe the person who signed this document to be of sound mind and under no constraint or undue influence. On this _____ day of _____, 200__, _____ (name), of _____ (address), signed this document, consisting of one page, in our sight and presence and declared the same to be his/her cremation wishes, and at his/her request and in his/her sight and presence and in the sight and presence of each other, we signed our names as witnesses.

_____ residing at _____
Witness Signature Address

_____ residing at _____
Witness Signature Address

STATE OF NEW MEXICO)
) ss.
COUNTY OF _____)

The foregoing instrument was acknowledged before me this _____ day of _____, 200__, by _____ (declarant's name).

_____
Notary Public

My Commission Expires: