

MURRAY  FAMILY
FUNERAL CHAPEL
OUR FAMILY SERVING YOURS

4147 Rocklin Road, Rocklin, California 95677 | Phone (916) 824-2737 | Fax (916) 824-2729

ORDER FOR RELEASE

To: _____

I certify I am the next-of-kin pursuant to Section 7100, Health and Safety Code, State of California, or am a relative acting as agent for the next-of-kin and it is my legal right to nominate a funeral director to take charge of the remains of:

_____, deceased.
Therefore, please release the remains and personal effects of the above-named decedent to the Murray Family Funeral Chapel, 4147 Rocklin Road, Rocklin, California 95677.

Signed: _____

Printed Name: _____

Relationship: _____

Street Address: _____

City: _____

State: _____

Phone: _____

E-Mail: _____

Date Signed: _____

Witness: _____