



Family owned since 1894

13304 E. Philadelphia St. Whittier, CA 90601 562-698-0304

Authorization for the Release of Remains

I hereby authorize _____ to release the remains
(Facility Name)

of _____ to White-Emerson Mortuary.
(Name of Deceased) (Name of Mortuary)

I hereby declare that I have the legal right to provide said authorization according to section 7100 of the California Health and Safety Code.

Signed Date Time

Relationship to Deceased

Acknowledgement of Receipt of Remains

I hereby acknowledge the receipt of the remains of _____
(Name of Deceased)

from _____.
(Facility Name)

Signed Date Time

Name of Mortuary

Mortuary Phone Number