

## ALABAMA BOARD OF FUNERAL SERVICE

## **AUTHORIZING AGENT AFFIDAVIT**

\*\*\*AFFIDAVIT MUST BE EXECUTED BEFORE A NOTARY PUBLIC.

## State of Alabama

HAVE HAVE NOT attached
HAVE HAVE NOT attached
fally comply with those directions, provided by estate to carry out those directions.
SIGNATURE
DAY OF
NOTARY Commission Expires:

Pursuant to Section 34-13-11(2b) of the <u>Code of Alabama</u>, <u>1975</u>, any person at least 18 years of age and of sound mind, may authorize another person to control the disposition of his or her remains pursuant to this affidavit.

## **Funeral Planning Form**



As your loved one makes his or her funeral plans, use this form to record all of his or her wishes for final arrangements.

rinal Arrangements for:
Memorial Services
Funeral home:
Funeral director:
Location of service:
To be officiated by:
Military/fraternal/social organization or lodge members to be present:
Pallbearers:
Veteran's flag:
Music:
Reading or scripture selections:
Flowers: Yes No
Memorial donations:
Name of charitable organization:
Casket: Open Closed OR Cremated remains present? Yes No
Preparation and printing of the order of memorial services (usually provided as part of service by funeral director with assistance from family):
Burial
Name, address, and phone of cemetery:

Cemetery documents located:
Casket: Wood Bronze Copper Steel
Burial Vault (usually required by cemetery/may be purchased through funeral home or cemetery-check on pricing):
Property or crypt
Location:
No. of spaces:
Type of burial:
Inscription to read:
Other information or instructions:
Cremation
Name, address, and phone number of funeral home or cremation society:
Urn: Bronze Wooden Marble Other:
Location of cremated remains:
Cemetery:
Private estate:
Final Disposition:
Alternative disposition:
Type of memorial or monument:
Inscription:

Preparing My Obituary
On a separate sheet of paper, make a record of the following information.
Name:
Spouse's name:
Date and place of death:
Children/cities where they reside:
Grandchildren/cities where they reside:
Siblings/cities where they reside:
Parents/cities where they reside (or resided, if deceased):
Date, time, and place of funeral or memorial service and burial:
Clergy/person officiating:
Address of funeral home:
Address of cemetery:
Memorial contributions may be made in lieu of flowers to: (optional)
Photo preferred:
Place and date of birth:
Education:
Wedding date:
Military service:
Employment:

Religious affiliation:	
Other affiliations:	
Significant acheivements:	

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