



FUNERAL AND DISPOSITION OF REMAINS DIRECTIVE DECLARATION

STATE OF LOUISIANA

PARISH OF _____

I, _____, hereinafter **DECLARANT**, being of sound mind and voluntarily making this declaration, hereby nominate and appoint:

Name: _____

Residence Address: _____

Telephone #: _____

to serve as my **AGENT** regarding my funeral and the disposition of my remains pursuant to LA Rev Stat §§ 8:655 and 37:876.

My Agent shall have the authority and power to control the arrangements for my funeral and the disposition of my remains. The Executor of my estate, if different from my Agent, shall notify my Agent of this appointment in a timely manner and shall advise my Agent of the financial means available to carry out the funeral and disposition arrangements.

In the event _____ should predecease me or be unable or unwilling to serve as my Agent, I nominate and appoint to be my successor agent the following:

Name: _____

Residence Address: _____

Telephone #: _____



MY DIRECTIVES ARE AS FOLLOWS:

_____ My remains are to be cremated.

_____ My remains are to be buried.

Additional notes: _____

Regarding any ceremony or event to commemorate my death:

Accordingly, I direct that my heirs, succession representative, surviving spouse or any person kindred adopt no steps to frustrate the effectuation of my wishes and desires herein expressed.

Signature page follows



I sign my name to this form on _____, 20____ at _____,
_____ Parish, Louisiana

DECLARANT Signature: _____

Print Name of **DECLARANT**: _____

WITNESSES:

Signature: _____

Print Name: _____

Signature: _____

Print Name: _____

Notary Public Name: _____

ID #: _____