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**CREMATION AUTHORIZATION AND DISPOSITION OF CREMAINS**

1. NAME OF DECEASED (Last, First, Middle Initial)	2. GRADE OF DECEASED	3. SSN OF DECEASED
4. NAME AND ADDRESS OF NEXT OF KIN ENTITLED TO DISPOSITION	5. PHONE NUMBER OF NEXT OF KIN	6. RELATIONSHIP TO DECEASED

I, THE UNDERSIGNED NEXT OF KIN, AUTHORIZE THE RELEASE OF REMAINS TO THE U.S. AIR FORCE. I DIRECT THE U.S. AIR FORCE TO PREPARE, DRESS, AND CASKET THE DECEASED IN A SPECIFICATION WOOD CASKET; CREMATE HIS/HER REMAINS; AND ENCASE HIS/HER CREMAINS IN THE URN SELECTED IN ITEM 7 BELOW.

I UNDERSTAND THAT DUE TO THE NATURE OF THE CREMATION PROCESS, ANY VALUABLE MATERIAL, INCLUDING DENTAL GOLD, WILL EITHER BE DESTROYED OR NOT BE RECOVERABLE. ANY PERSONAL POSSESSIONS HAVE EITHER BEEN REMOVED OR MAY BE DESTROYED.

I UNDERSTAND THAT CREMATED REMAINS ARE BONE FRAGMENTS WHICH WILL BE REDUCED IN SIZE AND PLACED IN THE URN THAT I HAVE SELECTED IN ITEM 7 WHICH WILL BE PROVIDED BY THE U.S. AIR FORCE. IN THE EVENT A STANDARD SIZE (200 CUBIC INCHES) URN DOES NOT ACCOMMODATE THE CREMAINS, THEY WILL BE PLACED IN AN OVERSIZED URN.

I AGREE THAT I WILL INDEMNIFY AND HOLD HARMLESS THE U.S. AIR FORCE, INCLUDING ITS OFFICERS OR EMPLOYEES, ITS CONTRACTOR, AND THE CREMATORY, FROM ANY LIABILITY, COSTS, EXPENSES, OR CLAIMS RESULTING FROM THIS AUTHORIZATION.

I DIRECT THE DISPOSITION OF THE CREMAINS ACCORDING TO THE OPTION INDICATED BELOW (please complete and initial one option only):

<b>OPTION 1</b>	<input type="checkbox"/> I <input type="checkbox"/> ESCORT WILL HANDCARRY THE CREMAINS TO _____ <div style="text-align: right; font-size: small;">(Name of Person or Firm)</div> _____, _____, _____, _____ <div style="text-align: center; font-size: small;">(Street) (City) (State) (Zip Code)</div> FOR CONDUCT OF SERVICES FOLLOWED BY <input type="checkbox"/> INTERMENT <input type="checkbox"/> PLACEMENT IN A COLUMBARIUM  IN THE _____ <div style="text-align: center; font-size: small;">(Name of Cemetery)</div> _____, _____ <div style="text-align: center; font-size: small;">(City) (State)</div>
<b>OPTION 2</b>	DELIVER THE INURNED CREMAINS TO ME, THE UNDERSIGNED NEXT OF KIN.  I WILL RETAIN THE INURNED CREMAINS FOR AN INDEFINITE PERIOD OF TIME.
<b>OPTION 3</b>	DELIVER THE INURNED CREMAINS TO ME, THE UNDERSIGNED NEXT OF KIN.  I WILL SCATTER THE CREMAINS AND RETAIN THE URN.

7. URN SELECTION (Please place an "X" in the appropriate box)       SOLID AMERICAN WALNUT       SOLID BRONZE

8. SIGNATURE OF NEXT OF KIN	9. DATE OF SIGNATURE (YYYYMMDD)
10. SIGNATURE OF MORTUARY OFFICER (Witness)	11. DATE OF SIGNATURE (YYYYMMDD)