



**JANSEN  
PROFESSIONAL  
SERVICES**

Jansen Family Funeral Home  
4705 Pine Street / PO Box 77  
Columbiaville, MI 48421  
Daniel L. Jansen, Manager / Owner  
Phone 810-793-6234

## **AUTHORIZATION FOR RELEASE OF REMAINS**

The undersigned hereby authorizes: \_\_\_\_\_  
Name of Hospital or Medical Examiners Office

to release the said remains of: \_\_\_\_\_ to:  
Name of Deceased

**Jansen Family Funeral Home ( Agent Funeral Home )  
4705 Pine St. - PO Box 77  
Columbiaville, Michigan 48421  
( 810 ) 793-6234**

Jansen Family Funeral Home is acting as a legal agent on behalf of:

\_\_\_\_\_  
Name of Funeral Home

\_\_\_\_\_  
City & State

\_\_\_\_\_  
Phone

This order is above all previous orders written or verbal and takes immediate effect. I represent that I'm of the same and nearest degree of relationship to the said deceased and/or legally authorized or charged with the responsibility for handling such final disposition.

\_\_\_\_\_  
Printed Name of Next of Kin

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Signature of Next of Kin

\_\_\_\_\_  
Relation

\_\_\_\_\_  
Printed Name of Witness

\_\_\_\_\_  
Signature of Witness

\_\_\_\_\_  
Date