



# TEXAS PANHANDLE FORENSICS

2002 Ave J Lubbock, TX 79411

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## RELEASE OF REMAINS

This authorizes the Texas Panhandle Forensics in Lubbock, Texas, to release the remains of

\_\_\_\_\_ (Deceased), who expired on

\_\_\_\_\_, to the \_\_\_\_\_ Funeral Home at

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

Authorization is also given to the above named funeral home, or its designated agents, to remove the Deceased to their place of business to care for, and prepare for disposition in accordance with professional standards and applicable law.

Funeral Home is authorized to receive valuables: ( ) yes ( ) no

I certify that I am the \_\_\_\_\_ of the Deceased and it is my legal right to control the disposition of the remains referenced above. I hereby release and hold harmless Texas Panhandle Forensics and its employees from any and all loss, damages, liability or cause of action (including, but not limited to attorney's fees and cost of litigation) in connection with the release of the remains of the Deceased as authorized herein.

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Relationship to Deceased

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
State/Driver's License #

\_\_\_\_\_  
First Witness Printed Name

\_\_\_\_\_  
Second Witness Printed Name

\_\_\_\_\_  
First Witness Signature

\_\_\_\_\_  
Second Witness Signature