



FUNERAL HOME

TIMOTHY D. COOPER JACOB B. HEBDON
LICENSED FUNERAL DIRECTORS
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Customer's Designation of Intentions

Name of Deceased:

Cremation: (Schedule Date) (Location)

Manner of Disposition of Cremains:

- Burial at: Return to:
Entombment at: Other:

Disposition of Cremains Designated by: (Signature) (Address) (City) (ST) (Zip) (Telephone)

Cremains which shall not have been claimed within 120 days from the date of cremation may be disposed of by this firm, in the following manner of disposition: Burial .

(Name of Funeral Director) (Signature of Funeral Director) (Date)

TO BE COMPLETED FOLLOWING CREMATION AND DISPOSITION

Cremation: (Actual Date) (Location of Crematory)

Disposition of Cremated Remains
Cremains Received by: (Signature of Person Receiving) (Date)

(Manner of Disposition) (Location) (Date) (Name of Person Making Disposition) (Signature) (Date)