

OFFICE OF CHIEF MEDICAL EXAMINER
TARRANT COUNTY, TEXAS

200 Feliks Gwozdz Place
Fort Worth, Texas 76104-4919
Phone (817) 920-5700 Fax (817) 920-5713

Date: X _____

This authorizes the office of Chief Medical Examiner of Tarrant County, Texas to deliver the remains of X _____ to the _____

Mayfield Kiser _____ funeral Home.

Please complete funeral home information below

Address: 12301 South Freeway City: Burleson
Phone # (817) 568-8836 Fax # (817) 568-9284 State Texas Zip 76028

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

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

X _____
Signature

X _____
Printed Name

X _____
Relationship

Note: Cash over \$50.00 must be picked up in person by next-of-kin.