



Body Disposition Authorization Affidavit

This form, the Body Disposition Authorization Affidavit, was drafted for use by consumers to help secure the right to specify one's body disposition. This law provides that the consumer's wishes as expressed in such an instrument must be "faithfully" carried out by whoever has legal authority to control the disposition.

STATE OF TEXAS

COUNTY OF _____

I, _____ (print name), based on the authority of the Texas Health and Safety Code, §711.002(g), upon my oath make the following declaration and directive concerning the disposition of my body after my death: I declare that it is my wish and I hereby authorize and direct that, upon my death, my remains be (check one box):

- Cremated
- Interred at a cemetery or on private property
- Interred at a mausoleum
- Donated to medical science; if this disposition is not possible because no medical or research facility will accept my body, I direct that my remains be (initial one box):

- Cremated
- Interred at a cemetery or on private property
- Interred at a mausoleum
- Other disposition as specified:

- Other disposition as specified:

Signature of Declarant: _____ Date: _____

Printed name of Declarant: _____

BEFORE ME, the undersigned notary public for the State of Texas, personally appeared _____, the Declarant in this Body Disposition Authorization Affidavit, who upon his/her oath made the foregoing declaration(s), including placing his/her initials in the boxes he/she choose on this the _____ day of _____, 20_____.

Notary Public for the State of Texas

My commission expires: _____