

| Date (enter today's date): | |
|---|----------------------------------|
| | |
| To Whom It May Concern: | |
| I (enter name here) | , |
| the (enter relation - eg. wife) | of the late |
| | (given and surname of deceased). |
| authorise Joannides Funerals to transfe | er my loved one into their care. |
| | |
| Signed, | |
| | (sign here) |

Joannides Funerals

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