

# DESIGNATED AGENT FOR FUNERAL ARRANGEMENT

## WASHINGTON STATE

I, [PRINT NAME] \_\_\_\_\_,  
designate the following agent to act on my behalf for the sole purpose of directing my funeral and cemetery arrangements. I desire that my funeral preparation and burial be conducted according to the rites and traditions of the Holy Orthodox Church.

Absolutely no autopsy shall be performed unless required by law.

I AM     I AM NOT    an organ donor.

I authorize my Designated Agent for Funeral Arrangement to make these arrangements and coordinate my funeral and burial with my family, priest and parish.

I name the following person to be my designated agent for funeral arrangements:

\_\_\_\_\_  
PRIMARY AGENT'S FULL NAME RELATIONSHIP

\_\_\_\_\_  
PRIMARY AGENT'S ADDRESS

\_\_\_\_\_  
PRIMARY AGENT'S PHONE(S)

If my Primary Agent is for any reason unable or unwilling to serve in this capacity, I then name the following person to be my Designated Agent for funeral arrangements:

\_\_\_\_\_  
ALTERNATE AGENT'S FULL NAME RELATIONSHIP

\_\_\_\_\_  
ALTERNATE AGENT'S ADDRESS

\_\_\_\_\_  
ALTERNATE AGENT'S PHONE(S)

Neither doctors, hospitals, nursing homes, hospice, coroner nor any other person or entity in whose care I may be has any authority to make any arrangements, including calling a funeral home, for any reason before contacting the person(s) named above to be advised by that person of my wishes concerning the disposition of my bodily remains after my death. The above-named person should be contacted promptly if death is imminent or expected

I direct that all of my family and survivors shall honor this authorization. I direct that any funeral home, cemetery, memorial society or designated agent shall be held harmless for arranging or handling the disposition of my remains, if done in reliance upon this authorization.

\_\_\_\_\_  
DECLARANT'S SIGNATURE DATE

\_\_\_\_\_  
FULL LEGAL NAME OF DECLARANT DATE OF BIRTH

ACKNOWLEDGEMENT OF INDIVIDUAL

\*\*\*\*\*FOR NOTARY PUBLIC\*\*\*\*\*

STATE OF WASHINGTON, COUNTY OF \_\_\_\_\_

On this day personally appeared before me \_\_\_\_\_ ,  
to me known and the individual described in and who executed the within and  
foregoing instrument, and acknowledged that he/she signed the same as his/her free  
and voluntary act and deed, for the uses and purposes therein mentioned.

Given under my hand and seal of office this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
NOTARY PUBLIC RESIDING AT

\_\_\_\_\_  
PRINTED NAME

\_\_\_\_\_  
MY COMMISSION EXPIRES:

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