

Notary Page for Authorizing Agents of Sossoman Funeral Home
Cremation and Disposition Authorization Form

Authorizing Agent 1:

State of _____ County of _____

I, _____, a Notary Public for said County and State, do hereby certify that _____ personally appeared before me this ____ day of _____, 2007 and executed the foregoing instrument. Sworn to and Subscribed,

Notary Public

My Commission Expires _____ SEAL

Authorizing Agent 2:

State of _____ County of _____

I, _____, a Notary Public for said County and State, do hereby certify that _____ personally appeared before me this ____ day of _____, 2007 and executed the foregoing instrument. Sworn to and Subscribed,

Notary Public

My Commission Expires _____ SEAL

Authorizing Agent 3:

State of _____ County of _____

I, _____, a Notary Public for said County and State, do hereby certify that _____ personally appeared before me this ____ day of _____, 2007 and executed the foregoing instrument. Sworn to and Subscribed,

Notary Public

My Commission Expires _____ SEAL

Authorizing Agent 4:

State of _____ County of _____

I, _____, a Notary Public for said County and State, do hereby certify that _____ personally appeared before me this ____ day of _____, 2007 and executed the foregoing instrument. Sworn to and Subscribed,

Notary Public

My Commission Expires _____ SEAL