



# Martinez Family Funeral Home Inc. FD 1998™

*1680 Alum Rock Ave., San Jose, CA 95116 ~ Tel. 408.347.8674 ~ Fax 408.347.9271*

## Authorization and Release of Personal Property

**Name of the Deceased:** \_\_\_\_\_

**Day, Date, & Time of Service:** \_\_\_\_\_

Martinez Family Funeral Home will not assume any responsibility for jewelry or other items worn by and or placed in the casket of the deceased.

This is to certify that I, \_\_\_\_\_ am the immediate next of kin and/or the personal representative of the above listed deceased. It is my desire that the following item(s) be worn or placed inside the casket of the deceased:

Inventory of Items Received:	Placement:	Return:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I certify that I have the right to make this authorization and I agree to assume any and all liability for these items. I further agree to hold Martinez Family funeral Home harmless for any and all liability of said authorization in the event any damage to or loss of these items. I further understand that items that I have authorized to stay with the deceased will no longer be available to me after the interment or inurnment.

_____ Signature	_____ Relationship	_____ Date
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_____ Signature of Funeral Home Representative	_____ Date
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