



MODE OF DISPOSITION OF HUMAN REMAINS (ASHES)

**TO: ROMANS FUNERAL HOME LIMITED
23 DUNROBIN AVENUE,
KINGSTON 10
TELEPHONE # 1(876) 969-3821-2
FAX #: 1(876) 969-3823**

RE: DECEASED: _____

I _____

OF _____

HEREBY INSTRUCT TO HAVE THE ASHES OF _____

DISPOSED OF AS FOLLOWS:

- I WISH TO BE PRESENT AT THE CREMATION
- I DO NOT WISH TO BE PRESENT AT THE CREMATION

- I WISH TO BE NOTIFIED AT THE CREMATION DATE
- I DO NOT WISH TO BE NOTIFIED OF THE CREMATION DATE

- DIRECT CREMATION – NO BODY AT SERVICE/ NO VIEWING
- BODY TO BE PRESENT – VIEWING &/OR BLESSING

SIGNED _____

RELATIONSHIP _____

TELEPHONE NUMBER _____

DATE _____