

6-67 040840 Lot 67 Plot 2 5/15/06 Hamlin & am

APPLICATION AND PERMIT FOR DISPOSITION OF HUMAN REMAINS

USE BLACK INK ONLY — MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS

1A. NAME OF DECEDENT—FIRST (GIVEN) Randall		1B. MIDDLE William		1C. LAST (FAMILY) Hamlin		2. DATE OF BIRTH MONTH, DAY, YEAR 05/22/1946		3. DATE OF DEATH MONTH, DAY, YEAR 02/13/2006		4. S M	
5A. CITY OF DEATH Sacramento		5B. COUNTY OF DEATH — OUTSIDE CALIF., ENTER STATE Sacramento		6. NAME, RELATIONSHIP, FULL MAILING ADDRESS AND ZIP C OF INFORMANT Janette Hamlin (Wife) 9 Pelican Ct Sacto CA 95833							
7A. TYPED NAME AND ADDRESS OF CALIFORNIA - FUNERAL DIRECTOR OR PERSON ACTING AS SUCH Sharer-Nightingale 2329 Lexington St Sacto CA 95815		7B. CALIF. LICENSE NUMBER — IF APPLICABLE FD 912		8A. SIGNATURE OF APPLICANT — Person taking permit  8B. DATE SIGN 02/15/2006							
ACKNOWLEDGEMENT OF APPLICANT I hereby acknowledge as applicant that the proposed disposition stated herein is one of the dispositions authorized by Section 103055 of the Health and Safety Code, and was authorized pursuant to Section 7100 of the Health and Safety Code.		9A. AMOUNT OF FEE PAID 11.00		9B. DATE PERMIT ISSUED 02/15/2006		9C. SIGNATURE OF LOCAL REGISTRAR ISSUING PERMIT B. Sharer		FAX AUTH #			
PERMIT AUTHORIZATION OF LOCAL REGISTRAR ANY CHANGE IN DISPOSITION REQUIRES A NEW PERMIT TO SHOW FINAL DISPOSITION		9D. ADDRESS OF REGISTRAR OF DISTRICT OF DEATH — IF DEATH OCCURRED IN CALIFORNIA 7001 E Parkway #650 Sacto CA 95823		9E. ADDRESS OF REGISTRAR OF DISTRICT OF DISPOSITION — IF DISPOSITION IS TO OCCUR IN ANOTHER DISTRICT IN CALIFORNIA							
10. AUTHORIZED DISPOSITION(S) CHECK APPLICABLE ITEMS ☐ A. BURIAL (INCLUDES ENTOMBMENT) ☒ B. CREMATION ☐ C. DISPOSITION OF CREMATED REMAINS OTHER THAN IN A CEMETERY						FOR CORONOR'S USE ONLY ☐ I. DISPOSITION PENDING — REMAINS LOCATED AT (Name and Address)					