



1100 S. Van Dyke  
Bad Axe, Michigan 48413  
(989) 269-9521

### PERMIT FOR REMOVAL OF BODY

DATE: \_\_\_\_\_

MCLAREN THUMB REGION is hereby given permission to deliver the body of:

Name of Patient: \_\_\_\_\_

To: \_\_\_\_\_ (Undertaker)

Witness: \_\_\_\_\_

Time of Death: \_\_\_\_\_

Signed: \_\_\_\_\_

Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Permission is hereby given to embalm body and prepare for burial.

Signed: \_\_\_\_\_

WHITE COPY (Original) – Undertaker

Relationship: \_\_\_\_\_

CANARY (Copy) – Medical Center

060.237.12-18



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