



Operating out of Black's Funeral Home P.A.  
17324 Sunshine Trail Sabillasville, MD 21780  
**(877)-939-2876**

## **Identification of Deceased**

In accordance with Maryland law (Annotated Code of Maryland Title 5 §502) and the policies of the Cremation Society of Monocacy Valley, the deceased must be properly identified prior to cremation.

I \_\_\_\_\_ of  
(NAME)

\_\_\_\_\_, certify that I am the legal next  
(Legal Address, No PO BOX)

of kin \_\_\_\_\_ or a representative thereof; and attest to and affirm that the  
(Specify Relationship)

deceased person in the care and custody of the Cremation Society of Monocacy Valley is indeed the body of the following individual for whom cremation is being authorized.

Name of Deceased: \_\_\_\_\_

Date of Death: \_\_\_\_\_

Place of Death: \_\_\_\_\_

---

Signature

Date