Simple Traditions
Cremation and Burial Services
Merchandise Contract and Statement of Goods and Services

Name of Decedent: _____

Next of Kin / Authorizing Agent: _____

FOR MORE INFORMATION ON FUNERAL, CEMETERY, AND CREMATORY MATTERS CONTACT THE DEPARTMENT OF CONSUMER AFFAIRS, CEMETERY & FUNERAL BUREAU, 1625 NORTH MARKET BLVD. SUITE S-208, SACRAMENTO, CA 95834: (916) 574-7870

Merchandise (Specify)

_____ _____
_____ _____
_____ _____
_____ _____
_____ _____
_____ _____
_____ _____
_____ _____
_____ _____
_____ _____
_____ _____
_____ _____
_____ _____

To continue to offer our low-cost cremation service, we require payment in full at the time service is rendered.

Tax _____
Total _____
Amt. Paid _____
Balance _____

The Federal Trade Commission Trade Regulation rule for "Cremation/Funeral Industry Practice" requires certain disclosures and prohibits misrepresentations. The following is a checklist we ask those we serve to read and sign to verify that the Cremation/Funeral disposition arrangements conference was conducted in compliance with the rule.
I made the arrangements for the disposition of the deceased named above and do hereby attest to the following: I was shown/given a general pricelist effective June 2020, prior to discussing prices, services, or merchandise. I was NOT told that embalming is required by law and WAS told that the law does not require embalming except in certain scenarios.
I was NOT told that any law requires a casket for cremation. Direct Cremation requires only composition materials, canvas, fiberboard, or heavy cardboard. I WAS told that State law DOES NOT require the purchase of an outer container/burial container or any of the goods and services I selected except as set forth above.
I confirm that I have examined the above stated items and found them correct and according to the arrangements selected, and that prior to signing this statement, I reviewed and approved a completed copy of this statement. I also confirm that I have that I have been informed of my rights to select services, as I desire.

_____ _____ _____/_____/_____
Signature of Purchaser Relationship Date

This authorization of payment was obtained via telephone by the responsible party, or next of kin:

_____, the _____ (Relationship), who authorized payment over the phone.

I declare under penalty of perjury that the foregoing is true and correct. Executed on: _____/_____/_____, at Carmichael, CA.

_____ _____
Funeral Establishment Representative (Signature) Funeral Establishment Representative (Print)