

District V Medical Examiner
Citrus, Hernando, Lake, Marin and Sumter Counties
809 Pine Street
Leesburg, FL 34748

Ph # (352) 326-5961
Fax # (352) 365-6438

RELEASE AUTHORIZATION

The undersigned hereby authorize

District V Medical Examiner

Name of Institution or Person

To release the body of

Name of deceased

To: Marvin Cl Zanders Funeral Home, Inc., 232 W. Michael Gladden Blvd, Apopka, Florida 32703

Phone: (407) 886-3388 Fax: (407) 886-5656 and/or its agents.

I (we) hereby represent that I am (we are) of the same and nearest degree of relationship to the deceased and/or are legally authorized or charged with the responsibility for such burial and/or other disposition

Name (Print)	Name (Signature)	Relationship
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Witness: _____

Date: March 31, 2018