



INTERMENT ORDER
TO: ORANGE COUNTY CEMETERY DISTRICT

You are hereby authorized and instructed, *subject to your rules and regulations, to inter the remains of:

First	Middle	Last
Keith	W.	Adamson

LAST RESIDING AT Mission Viejo, CA

IN El Toro Memorial Park Section: EG Block: 26 Lot: 79 Space: 1

- | | | | |
|---|---------------------------|--|---------------------------------------|
| <input type="checkbox"/> ANAHIEM CEMETERY | REQUESTED DAY* <u> </u> | <input type="checkbox"/> REGULAR BURIAL | <input type="checkbox"/> INFANT |
| <input checked="" type="checkbox"/> EL TORO MEMORIAL PARK | REQUESTED DATE* <u> </u> | <input checked="" type="checkbox"/> UPPER BURIAL | <input type="checkbox"/> CREMATION |
| <input type="checkbox"/> SANTA ANA CEMETERY | REQUESTED TIME* <u> </u> | <input type="checkbox"/> LOWER BURIAL | <input type="checkbox"/> ROSE GARDEN* |

*NOT BINDING ON THE DISTRICT

FUNERAL HOME / MORTUARY OCONNORS

LOT OWNER

Adamson, Keith 35266 Camino Capistrano Capistrano Beach CA

I understand the fact that once placed into the Rose garden, the cremated remains are commingled with other remains and cannot be recovered at a later date

_____ (Initials)

Remarks

Staff to service Vault -

I hereby certify that I am the Daughter (Relationship)

of the above named decedent and this is your authority to make disposition of the remains of said decedent as above indicated. I hereby certify and represent that I have the right to make this authorization, that the decedent is eligible for burial in a cemetery in Orange County Cemetery District under the current provisions of the California Health and Safety Code, and I agree to hold Orange County Cemetery District harmless from liability on account of said authorization and interment.

Signature *Kristine Watson*

Next of Kin Name: Kristine Watson Street 26711 Estanciero Drive
 City Mission Viejo State CA Zip 92691
 Phone (714) 231-5853 Alt. Phone _____

BURIAL RIGHT OWNER MUST SIGN IF NOT A RELATIVE:

I hereby certify that I am the owner of the burial rights to the above decedent interment space, and I authorize its use for the interment of the herein named deceased.

Signature _____ Burial Right Owner

Ref. Receipt No. <u>ET2-140749</u>	By <u>bbales</u>	Date <u>01/25/2018</u>
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INTERMENT ORDER

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First Middle Last
Keith W. Adamson

LAST RESIDING AT Mission Viejo, CA

IN El Toro Memorial Park Section: EG Block: 26 Lot: 79 Space: 1

- ANAHM CEMETERY REQUESTED DAY* Saturday REGULAR BURIAL INFANT
EL TORO MEMORIAL PARK REQUESTED DATE* 02/10/2018 UPPER BURIAL CREMATION
SANTA ANA CEMETERY REQUESTED TIME* 12:00 LOWER BURIAL ROSE GARDEN*

*NOT BINDING ON THE DISTRICT

FUNERAL HOME / MORTUARY OCONNORS

LOT OWNER

Adamson, Keith 35266 Camino Capistrano Capistrano Beach CA

I understand the fact that once placed into the Rose garden, the cremated remains are commingled with other remains and cannot be recovered at a later date
(Initials)

Remarks

Staff to service vault, 12 chairs, canopy and table.

I hereby certify that I am the Daughter (Relationship)

of the above named decedent and this is your authority to make disposition of the remains of said decedent as above indicated. I hereby certify and represent that I have the right to make this authorization, that the decedent is eligible for burial in a cemetery in Orange County Cemetery District under the current provisions of the California Health and Safety Code, and I agree to hold Orange County Cemetery District harmless from liability on account of said authorization and interment.

Signature

Next of Kin Name: Kristine Watson Street 26711 Estanciero Drive

City Mission Viejo State CA Zip 92691

Phone (714) 231-5853 Alt. Phone

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I hereby certify that I am the owner of the burial rights to the above decedent interment space, and I authorize its use for the interment of the herein named deceased.

Signature

Burial Right Owner

Ref. Receipt No. ET2-140749 By Kimberly Eazell Date 01/25/2018

INTERMENT ORDER TO STAFF

At-Need Interment Invoice

INVOICE No. ET2-140749

INVOICE DATE January 25, 2018



El Toro Memorial Park
 25751 Trabuco Rd.
 Lake Forest, CA 92630
 (949) 951-8244

RESPONSIBLE PARTY:

Keith W Adamson

35266 Camino Capistrano Capistrano Beach CA 92624

DECEASED NAME

Keith W. Adamson

LOCATION

El Toro Memorial Park Location: Sec:EG Block:26 Lot:79 Space:1

OWNERS

Keith W Adamson Primary 35266 Camino Capistrano Capistrano Beach CA 92624

RECEIPT NO ET2-140749

BURIAL DATE		SERVICE TIME	SERVICE TYPE	FUNERAL HOME / MORTUARY		
				OCONNORS		
ITEM CODE	DESCRIPTION		PRICE	QTY	SUBTOTAL	
75484	Interment Space - Evergreen		\$0.00	1	\$0.00	
75490	Interment Service Fee - Casket - Weekdays		\$700.00	1	\$700.00	
75493	Vault - regular #5		\$278.42	1	\$278.42	

Sales Amount **\$978.42**
 Tax **\$21.58**
Total due \$1000.00

Amount Received **\$1,000.00**
 Balance Due **\$0.00**

AT NEED SALE

Rules & Regulations:

- a) Flowers or items placed on graves will be removed every Wednesday For holiday flower removal schedule, please check bulletin board.
- b) The District nor its employees will not be responsible for lost or stolen flowers or items.
- c) Visiting hours are from 8:00am to 5:00pm. every day of the year
- d) All markers must be placed flush to the surface of the ground. The district no longer allows upright markers.
- e) Please refer to the cemetery bulletin board for current information.

I received a copy of the District's Rules and Regulations.

X

Invoice

INVOICE No. ET2-140842



El Toro Memorial Park
25751 Trabuco Rd.
Lake Forest, CA 92630
(949) 951-8244

INVOICE DATE February 09, 2018
Invoice Status Paid

RESPONSIBLE PARTY:

Kristine Watson

Telephone Number:

LOCATION	DECEDENT NAME
EG - 26 - 79 - 1	Keith W. Adamson

ITEM CODE	DESCRIPTION	PRICE	QTY	SUBTOTAL
75491	Interment Service Fee - Casket - Weekends	\$245.00	1	\$245.00

Total due \$245.00

PAYMENTS			
METHOD OF PAYMENT	PAYMENT REFERENCE	PAID DATE	PAYMENT AMOUNT
Credit Card	141282	2018-02-09	\$245.00

Payments Received **\$245.00**

Balance Due \$0.00