

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			
Julius	Nicholas	Siksnius			
LAST RESIDING AT Fountain Valley, CA		The second secon			
IN El Toro Memorial Park	Section: NG Block: C	C Lot: 282 Space: 1			
☑ EL TORO MEMORIAL PARK REQUESTED	DAY* Saturday	L INFANT CREMATION ROSE GARDEN*			
FUNERAL HOME / MORTUARY OCON	IORS				
LOT OWNER					
Jones, Robert 1401 Avocado Ave., #505 New	port Beach CA				
I understand the fact that once placed into the Ros commingled with other remains and cannont be red	e garden, the cremated remains are covered at a later date	(Initials)			
Remarks					
Mortuary will bring urn and permit for niche side s	service.				
I hereby certify that I am the Power Of A	attorney	(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: Robert L. Jones	Street 1401 Av	ocado Ave., #505			
City Newport Beach State CA Zip 92660					
Phone(949) 230-7328	Alt. Phone				
BURIAL RIGHT OWNER MUST SIG I hereby certify that I am the owner of the burial right deceased. Signature		and I authorize its use for the interment of the herein named			
	Burlal Right Ov	vner			
Ref. Receipt No. ET2-141224	By bbales	Date 02/08/2018			



ORANGE COUNTY CEMETERY DISTRICT

FIRST CALL PROCESSING CHECKLIST

Staff name:	Decedent: Julius Siksnus
Service Date: <u>Sat.</u> , 2/12/18	Service Time:/OAM
First Call Received: Date: Thus	12/1/18 Time: 4:20PM
Appointment Date: 2hus., 2/8/18	Time: 10:30AM
Date of Birth: 5/1/1932 N	ext of Kin: Robert Jones
Date of Death: 1/3//18 H	Relationship: POA & Friend
Place of Death: Memport Boh,	1401 avocado ane #305
	Newport Beh. 92660
	Phone #: 949 230 - 7328
How did you hear about the cemetery?	here Mortuary: O Conner Dence
Discussed Sales & Interment Process, Location	
,	Location:
Verified Database/Maps/Marked Space sold in	Map Book
Verified that Service Time is Available	Pending – Yes or No:
Number of People Expected For Graveside:	
Review /Confirm Scheduling Time/Day with Fa	mily/Mort. Date:
Collect Payment/Pre-Need PN#	Date:
Family Signed Invoice & Interment Order	
Family Provided with Rules & Set-Up Information	tion
Vault/Bell Liner/Urn Vault Ordered	Ordered (V or L): Clemains
Temporary Marker Printed & Placed on Space	Notes: (wanto to purchase
Paperwork & Name Given to Leadwork/Intern	nent Crew
Confirm location & that Interment Site is Set-u	p

Contact Information			Quick Actions
Contact Type			
The state of the s			
Number of Accounts: 0		No trace and	
Attach Accounts			
ID Name Relationship	Го Purchaser	actions	
First Name Middle	Name Last N	lome	NOTE OF THE PARTY
Robert	Jone		
Address	Jone	3	
1401 Avocado Ave., #105			
Address 2			The state of the s
,			
City	State	Zip	
Newport Beach	CA	92660	
Phone Phone	2	Email	
(949)230-7328			
Activity			
Show 10 ▼ entries	,		
▼ID Name Eve	nt Type Info)	Time
141008 itatro new	User:	itatro added { <u>contact</u> } record	2018-02-01 17:41:11