SURROGATE'S COURT OF THE STATE OF NEW YORK COUNTY OF DELAWARE

Voluntary Administration Proceeding Estate of

WAIVER AND CONSENT (Funeral Director for Unpaid Funeral Bill)

Deceased.

The undersigned corporation, a creditor of the above named hereby voluntarily appears in the Surrogate's Court of Delaware County, New York, and waives the issuance of notice in this matter, and consents that Voluntary Administration be issued to

or any other person or persons entitled thereto without any notice whatsoever to the undersigned.

	By:		, Funeral Director
	Sign		
	Print Name		
Name of Funeral Home:			
Address:		•	
ACKNOWLEDGMENT			
STATE OF NEW YORK,	COUNTY OF DELAWA	ARE ss:	
On the	_ day of		, 20 , before

me, the undersigned, a notary public in and for said state, personally appeared ________, personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her capacity, and that by his/her signature on the instrument, the individual or the person upon behalf of which the individual acted, executed the instrument.

Notary Public