



# REBELLO

FUNERAL HOME AND CREMATORY

*Trusted Most...Since 1924*

## RELEASE AUTHORIZATION

I, \_\_\_\_\_, authorize the release the body of  
*(undersigned)*

\_\_\_\_\_, my \_\_\_\_\_  
*(Name of Decedent) (relationship)*

along with any of their personal belongings to the REBELLO FUNERAL HOME, INC.,  
901 Broadway, East Providence, Rhode Island and/or its agents. I hereby certify that I  
am a relative or legal representative of the decedent and am legally authorized or  
charged with the responsibility for such burial and/or other disposition.

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Address*

\_\_\_\_\_  
*City/Town, State, Zip Code*

WITNESS:

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

John E. Rebello, Jr.—President    John E. Rebello, III—Secretary/Treasurer    Claire Munroe Rebello—Vice President

[www.rebellofuneralhome.com](http://www.rebellofuneralhome.com)

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