

## Rhode Island Funeral Planning Agent Designation Form\*

I \_\_\_\_\_, as a principal as defined in R.I.Gen.Law §5-33.3-2(b) do hereby name and designate (please print) \_\_\_\_\_ as my primary funeral planning agent, or if he/she is unwilling or incapable, (please print) \_\_\_\_\_ as my alternate funeral planning agent, who shall have the sole responsibility and authority to make any and all arrangements and decisions regarding my funeral preparation and planning, burial or disposition of my remains, including cremation, upon my death, pursuant to the provisions of Chapters 33.2 and 33.3 of Title 5 of the Rhode Island General Laws. By signing this document, the aforementioned agent(s) agree to ensure payment for all outstanding expenses related to my funeral. The agent further certifies that if he/she is a non-relative to the agent, then he/she is the only non-relative for whom the agent is serving as a funeral planning agent. This document shall revoke and make null and void any and all previous designations of a funeral planning agent.

Printed Name of Principal	Date
Signature of Principal	
Printed Address of Principal	

Printed Name of Primary Agent	Date
Signature of Primary Agent	
Printed Address of Primary Agent	

Printed Name of Alternate Agent, if applicable	Date
Signature of Alternate Agent, if applicable	
Printed Address of Alternate Agent	

Printed Name of Witness	Date
Signature of Witness	
Printed Address of Witness	

State of \_\_\_\_\_ County of \_\_\_\_\_

On this \_\_\_\_ day of \_\_\_\_\_, 20 \_\_, before me, the undersigned notary public, personally appeared (please print) \_\_\_\_\_, personally known to me or proved to me through satisfactory evidence of identification, which was

\_\_\_\_\_, to be the person whose name is signed on this document as the Principal, and acknowledged to me that he/she signed its voluntarily and for its stated purpose.

\_\_\_\_\_  
Notary Signature and Seal of Notary

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Notary Name

Commission Identification Number \_\_\_\_\_ Commission Expires: \_\_\_\_\_

\*Pursuant to Chapter 33.3 of Title 5 of the Rhode Island General Laws, any individual who is at least eighteen (18) years of age and of sound mind is allowed to designate a primary funeral planning agent and an alternate agent, if desirable, who has the authority and responsibility to make all funeral arrangements as described in R.I.Gen.Laws §5-33.3-2(a). This form may be used to designate an agent.