Iowa Designation of Agent for Body Disposition

As authorized by Iowa Code Section 144C.5 Effective July 1, 2008

I hereby designate _____as my agent for body disposition. My designee shall have the sole responsibility for making decisions concerning the final disposition of my remains and the ceremonies to be performed after my death. This declaration hereby revokes all prior declarations. This designation becomes effective upon my death. My designee shall act in a manner that is reasonable under the circumstances.

I may revoke or amend this declaration at any time. I agree that a third party (such as a funeral or cremation establishment, funeral director, or cemetery) who receives a copy of this declaration may act in reliance on it. Revocation of this declaration is not effective as to a third party until the third party receives notice of the revocation.

My estate shall indemnify my designee and any third party for costs incurred by them or claims arising against them as a result of their good faith reliance on this declaration. I execute this declaration as my free and voluntary act.

IMPORTANT — You **MUST** attach this form to a Durable Health Care Power of Attorney for it to be effective! Also, Iowa law does not allow you to use this document to give your designee specific instructions on what type of funeral, cremation, burial, or ceremony you may want. Therefore it is important that you write these wishes out separately and be sure to share them with your designee.

NOTE — You must have either two witnesses (not including your designee) sign this statement in each other's and your presence, **OR** you must have it notarized.

_____ _____
(your signature) date

_____ _____
(witness one) date

_____ _____
(witness two) date

~OR~

The above individual, either known to me personally or having provided proof of identity, executed this document before me on _____.

_____

(signature of Notary Public)

_____

(county or city)

_____

(date my commission expires)