



AUTHORIZATION

Date:201...a.

Whoever it may concern,

With following, I (*name of authorizer*),
born(*date*) in (*place of birth*),
with (*Passport/ID number*), issued (*date*),
valid till (*date*), as the (*relation with deceased*),
of late (*name of deceased*),
born..... (*date*) and died (*date*),
will authorize OÜ Tallinna Matusebüroo, Paldiski mnt 68, 10617 Tallinn, Estonia, to represent
one in organizing all necessary documentation and other arrangements regarding ones
repatriation of late kin.

Signed by