



**ARIZONA STATE BOARD OF  
FUNERAL DIRECTORS AND EMBALMERS**

1740 West Adams Street , Suite 3006  
PHOENIX, ARIZONA 85007  
Phone: (602) 542-3095  
www.funeralboard.az.gov

**Professional Endorsement**

Pursuant to R4-12-202 (C) (1) (e)

Date: \_\_\_\_\_

I, \_\_\_\_\_, hereby state that I am a licensed funeral director duly licensed in the state of \_\_\_\_\_.

My license numbers and dates of issue are: \_\_\_\_\_.

I have personally known the individual listed below for \_\_\_\_\_ years and do hereby attest to the applicant's good character, reputation, and professional ability; and recommend for the Board's approval of the named applicant.

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Address of applicant: \_\_\_\_\_

E-Mail Address of applicant: \_\_\_\_\_

Duly acknowledged, subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_

Notary Republic: \_\_\_\_\_