FOR FUNERAL DIRECTOR USE DURING COVID-19 STATE OF EMERGENCY

Obtaining Signature(s) Online in Lieu of Face-to Face Funeral Arrangements

During the COVID-19 State of Emergency, you may be unable to meet with next of kin face-to-face to obtain necessary signatures for funeral arrangements. The NJSFDA recognizes this challenge and has reviewed possible options to obtain needed signatures on your funeral home documents electronically (also known as E-signatures).

Our recommendation is to use a web-based product called DocuSign during this crisis. DocuSign provides full security of your documents throughout the signature process. And best of all, you can continue to use the fillable PDFs, provided by us, that many members already use. **Please see page 2 for helpful illustrations in utilizing your forms, according to your classification (NJSFDA Member, Thanexus, Inc. Shareholder or Funeral Matters subscriber).**

While this work around has not been officially recognized by a regulatory board or state official as of publication, we highly recommend that members consider utilizing this temporary procedure as a means for documenting interaction with the individual(s) with right to control and complying with the applicable laws and regulations concerning signatures.

Funeral homes should communicate directly with individual cemeteries and crematories to confirm their individual temporary process for securing authorization signatures on their paperwork when in-person meetings with the appropriate next-of-kin cannot be held.

When the individual(s) with right-to-control have email access but not the ability to print or scan paperwork that requires their signature in order for funeral homes to proceed with arrangements, this document outlines a temporary and recommended process in an attempt to satisfy the signature requirements established in N.J.S.A. 45:7-95, N.J.S.A. 45:7-85, and N.J.A.C. 13:36-1.9 as follows:

This document and electronic process is only to be utilized during the restrictions currently instituted by the State of New Jersey during the COVID-19 pandemic.

FIRST – Sign up for a DocuSign* account. This is done one time and once done, you are ready to use this product for your document signing needs. This will be your most time-consuming exercise (purchasing a subscription and preparing your specific funeral home documents as templates).



https://www.docusign.com

SECOND – Secure required signatures from the individual(s) with right to control using DocuSign for each arrangement.

*This is a service that is suggested by the New Jersey State Funeral Directors Association, Inc. during the 2020 COVID-19 pandemic. We do not receive any compensation or payments for endorsing this product.

NJSFDA Membership:

If you are not already using our pdfs with fillable form fields you can retrieve them here (*See Page 3 for more details*):



NJSFDA

Forms

About NISEDA

Thanexus, Inc.:

Shareholders have **ALL** their current authorization forms in their possession to date. If you are in need of retrieving them again please contact the Thanexus Marketing.

Jill Materia jmateria@njsfda.org

Funeral Matters:

Subscribers can continue to use the Funeral Matters "tool" to create their Statement of Funeral Goods and Services Selected, saving it as a pdf. The other authorization forms that you may need should be in your possession to date. If you are in need of retrieving them again please contact:

Jill Materia jmateria@njsfda.org



Please read this helpful document before you begin.

IMPORTANT:

• You will need Adobe Acrobat Reader at the minimum to utilize your forms, **DO NOT USE YOUR BROWSER**. If you are creating your pdf through a browser, all functions will not operate correctly, like your calculations and saving your entries.

• Sign up for a DocuSign account.

• Managers-of-the-Day can continue to assist you with regulatory questions/inquiries, **BUT** not your individual device (computer, tablet, etc.) problems.

Before you begin the DocuSign process you should prepare templates and organized folders for your arrangements.

It is a good idea to make sure you have all your Authorization Forms in one place. You can locate these forms by "clicking" the **Forms button** on our home page or directly via **www.njsfda.org/forms**. Log-in to the website is necessary to access all forms.

Make a folder on your desktop with all your templates: **_MY_AUTHORIZATION_FORMS_TEMPLATES** (See illustration below).

You can prepare all of your necessary information in these pdf(s) that you encounter every time and save in _MY_FUNERAL_HOME_ARRANGEMENTS. See illustration below.

It is best to be organized now before you proceed. *See illustrations below for organizational suggestions*. Then when you begin making arrangements you can save your documents in a similar way. Now you will be prepared for the process.

Funeral Home Authorization Form Templates (on your desktop/hard drive)



Funeral Home Authorization Forms for Arrangements You Have Completed (on your desktop/hard drive)

MY_Funeral_Home_A	RRANGEMENT	S	
	₩ ~ * ~		
View G	Group Action	Share Edit Tags	Path
Name			^
Anne_Brown_3_	_21_20		
A_Brown_Co	onsent_for_Servi	ces.pdf	
A_Brown_Re	elinquishment_Ri	ght_to_Control_Fun	eral.pdf
A_Brown_SF	FGSS.pdf		
🕨 🚞 Jane_Johnson_3	3_21_20		
🔻 📄 John_Jones_3_1	18_20		
🛃 J_JonesCon	nsent_for_Service	es.pdf	
🛃 SFGSS.pdf			
Mary_Smith_3_2	27_20		

Step 1: Docu Sign Account Creation

- Go to https://www.docusign.com/ to create an account.
- Click the **"Login"** link at the top right corner of the page.
- Create an account with the **"No account? Sign up for free"** *as illustrated.*

IMPORTANT: You can try DocuSign for **free for 30 days** with a **limit of five** (5) envelopes*.

After 30 days you must upgrade to a paid version (See illustration of pricing options on Page 13).

You will need to make this determination for your individual business needs.

**Envelope*=One (1) complete set of documents, needed for one (1) arrangement, emailed to all the necessary individuals.

• You will now be asked to fill out a brief form, with the information *as illustrated*.



Try Do	bcuSign	free for 30 days
	First Name First name required	Last Name
	Phone	Job Title
	Industry	
	Select One GET No obligation,	STARTED no credit card required
	By clicking the 'Get Start Terms & Condi	of button above, you agree to the ions and Privacy Policy.
	BUY NO	W & SAVE 10%

- You will also be asked to provide your Funeral Home information.
- Once you've created an account, you will receive an account activation email. Click "Activate" and you will be able to access your DocuSign account.

Company	Company Size	
	Select One	•
Select One		•
Select One		•
Select One	rations? (CRM, ERP, etc)	•
Country		

Step 2: Using DocuSign

• Before uploading, first complete all your form field PDFs, making sure that you fill in everything that is required since there will be no changes after each set of arrangement documents are uploaded to DocuSign and are signed. Save your PDFs for your recordkeeping. You **DO NOT** have to enter the **date**, since DocuSign will automatically place it in the date field.

If you need help on how and where to find and download the forms and also how to organize them please refer to pages 2-3 of this document

• When you log in to DocuSign, you have the option of dragging and dropping one (1) or more files (e.g.; pdf, doc, etc. versions of your SFGSS, Consent for Services, Authorization for Cremation (where applicable), Contract/Promissory Note, work copy of the EDRS draft death certificate, and any ancillary documents including cemetery/crematory and funeral home specific paperwork) into DocuSign, to upload them, *as illustrated below*:

Your signature (Funeral Director)	DocuSigned by: 5A2A5867498945D	O Action Required	O Waiting for Others	D Expiring Soon	Brief for all your other documents.
will be here.					
		Drop documents here to get started			
		START NOW			
	i			i	

• Once your documents are uploaded, click the **"NEXT"** button to proceed.

The document(s) you uploaded.	Add Documents	Use a template 🗮 🎫	
	Description Consent-for-Services-10-21-19.pdf	I	
	Cremation-Authorization-10-21-19.pdf 2 pages	1	
	Pdf Pages Reasonable-Attempt-to-Notify-10-21-19.pdf	I	
	SFGSS-AllFields-NO-Signatures.pdf 1 page	I	
	Drop your files here or UPLOAD *		
		I'm the only signer NEXT	Leave this box
			-UNCHECKED since
			you will always have more than

one (1) signer.

• Next you will be able to add recipients to your document. These are the individuals who will be **required to sign** the document. You may add additional recipients by clicking the **"Add Recipients"** button.

	Add Recipients	
Your name as a Funeral Director will be here, but you should add yourself to the recipients as well since so you can sign the document.	SENDER RECIPIENTS Set signing order View Name * Email *	Import bulk list
	ADD RECIPIENT Once an envelope has been routed to all recipients, and documents signed, each recipient will get	a completed copy BACK NEXT

- It's important to create the **"order of receipt"** Doing this will prevent the signature process from advancing until it's been signed by **EACH** person in the sequence you want.
- To do so, check the box **"Set signing order"**. Then place a number to the right of each recipient, denoting the order of receipt and signing:

	Add Recipients	
	() SENDER	
You as the Funeral		
Director will be one of	Set signing order View	Import bulk list
the recipients to sign	Name *	MORE T
the document, it's	1 Email *	
your choice to be the	The second second second	
first or last signer.		
We recommend	Name * 🖉 NEEDS TO SIGN 🔻	MORE V
that you be the	2 Email *	
first signer.		If you have an
If you are the last	Name *	administrative employee
ii you are the last		who needs a copy of this
signer you will not	S Email *	you can change the
get any notifications		"Needs to Sign"
UNTIL the signer	* ADD RECIPIENT V	to
before you has	. Once an envelope has been muted to all recipients, and documents signed, each recipient will net a co	"Receives a Conv"
completed their turn.		necences a copy .
	BA	ICK NEXT

REMINDER: The number of signers can't be more than the number of signers needed on the form(s) you're uploading (example: the SFGSS has only two (2) signers, one of them is you. Some necessary forms may have two (2) signers while others may have multiple signers).

• Once you've added your recipients, you are now ready to proceed. Click **"NEXT"**:

	anage PDF form field data
Wh	at would you like to do?
0	Assign to:
	Select Recipient 🔻
	Keep PDF form data
Ō	Delete data
edi Lea	ted. Im More
	000-00000-000

• Click **"CONFIRM"**, here you will see your document and standard fields that you can use in the signing, initialing, etc. of your document.

Name of person signing.

If more than one Funeral Director, there will be a drop down menu. Choose (one) 1 at a time.

Drag and drop the **Signature** or **Initials** where you need to sign, and where you'll need the consumer to sign.



IMPORTANT: Only first next-of-kin needs to initial if there is more than one (1) next-of-kin.

	•	ちさ 百日 112% -	SHORTCU
With the "Standard Fields" section to the left of the screen, you can simply drag and drop from here onto your document. Here are two examples of this (the yellow, blue and purple fields represent different individuals who will sign and/or initial these forms).	Q. Search Fields X Standard Fields Image: Signature Image: Signature <tr< td=""><td><text><text><text><text><text><text><text></text></text></text></text></text></text></text></td><td>Documents Consent-for-Services Pages: 2</td></tr<>	<text><text><text><text><text><text><text></text></text></text></text></text></text></text>	Documents Consent-for-Services Pages: 2
TIP: When dragging the small tags for signature and/or initials, align the small line of the tag with the line	Appore Decline	ACORES Sources, exerce op Training Madeata Training Madeata Marcel Of Indetes, (MICTOR 4) MITTADO Amoral Of Indetes, (MICTOR 4) MI	Right-to-Control-Law • SFGSS-AFields-NO • Pages 1 BACK NEXT

• Once you are done adding all the necessary Signatures and/or Initials on all of your PDFs, click **"Next"**. You'll be prompted with **"Review and Send"**. This is where you can enter an **email message** to the recipient(s) of your document. We would recommend at minimum, **"Important Documents from XYZ Funeral Home."**

Also, you will have the **option of sending automatic reminders** (in case recipients have not completed their part in the process).

	Review and Send	SUMMARY OPTIONS		
TIP: Insert an obvious email subject since this will be the	Message to Recipients Email Subject Please DocuSign: Joe Doe Funeral Arrangements Paperwork Characters remaining: 45 Email Message	Documents Edit Consent-for-Services-10-21-19.pdf Cremation-Authorization-10-21-19.pdf Reasonable-Attempt-to-Notify-10-21-19.pdf Relinquishment_Right_to_Control_Funeral_10_19.pdf Right-to-Control-Law-10-21-19.pdf SFGSS-AllFields-NO-Signatures.pdf		
easier to manage later.	Please sign the documents as soon as you can so we can proceed with the arrangements Characters remaining: 9916	Recipients Edit Needs to Sign		
You can set the auto reminders	Send automatic reminders every day	2 Needs to Sign		
those who HAVE NOT signed.	Add Private Messages PREVIEW BACK SEND	3 Needs to Sign		
		4 CC Receives a Copy		
		Once the envelope is completed, all recipients will receive a copy of the completed envelope.		

Step 3: Recipients Signature

• Your recipients will receive an email with a link to the document they will be signing. *Illustrated below:*



• The first step in the signature process is agreeing to the **"Electronic Record and Signature Disclosure"**. After checking the agreement box, the recipient will be able to continue.

Please agree to	Prose read the Electronic Record and Signals	rm Disclosure aturos.		CONTINUE OTHER ACTIONS •
Please agree to use electronic records and signatures and CONTINUE .	Power mark the Exclosed_Phones and Separate	A Dispersion of the second of	Mark and construction Type provides a series of the close of the clos	CONTINUE OTHER ACTIONS -
		S S Preferitional Services TOTAL: S	Torrat or Enrolating Changes (IV & Packing Service) 5 Consectority of Enrolating Changes	

ST

• Now your recipients can sign and/or initial. After they've clicked **finish the process**, it is now complete. An email will be sent to you the initiator and the recipients of the document.

You, and your consumers, have two (2) options to sign, either by scrolling down until you find the **Sign** or **Initial tags**, or by clicking **"START"** or **"NEXT"** and DocuSign will bring you exactly to where the signatures are to be signed.

Note::::::::::::::::::::::::::::::::::::	live arrange for the funeral and						
The second problem of the statement of the decodent. This form alone does not itself constitute a cremation authorization. If cremation services are selected, sur funceal home requires that a Cremation Authorization Addendum MUST be completed, signed and attached to this Consent for Services form in order to authorize cremation. Initial for services form in order to authorize cremation. Initial for services form in order to authorize cremation. Initial for services form in order to authorize cremation. Initial for services form in order to authorize cremation. Initial for services form in order to authorize cremation. Initial for services form in order to authorize cremation. Initial Initial for services form in order to authorize cremation. Initial for services form in order to authorize cremation. Initial for services form in order to authorize cremation. Initial Initial for services form in order to authorize cremation. Initial Initial for services of and from any and all claims, demands, causes of action, and buits of every kind, nature and description, in inve or egality, including any legal fees, costs, and expenses of lifigation, arising as a result of, based upon or connected will initial i	disposition of the remains of the decedent by means other	er than crem	nation.			Initial	
In addition, I anywe are aware of no objection to these arrangements by any spouse, civil union or registered domesic partner, child, parent, or sibling specified, whose right to control disposition supersedes mine/ours as established by NJ.S.A. 45:27-22. In this provide the companying statement of Funeral Goods and Services Selected. In this provide the companying statement of Funeral Goods and Services Selected. In this provide the companying statement of Funeral Goods and Services Selected. In this provide the companying statement of Funeral Goods and Services Selected. In this provide the companying statement of Funeral Goods and Services Selected. In this provide the companying statement of Funeral Goods and Services Selected. In this provide the companying statement of funeral Goods and Services Selected. In this provide the companying statement of the terms of the discosition of the decodent, of any other action provide the provide provide the provide provide the subtriviation, including the failure to properly identify the decodent or the human remains transported to the Funeral Home, function of the statements were made to induce the funeral Home, its officers, agents or employees, pursuant to this authorization, excepting only acts of willing provide the statements were made to induce the funeral Home function or a separate sheet. The provident complete information, and statements contained to this function agent(s). (Additional names may be attached, with complete information, and statements were provision initialed by the subtrizing agent(s). (Additional names may be attached, with complete information, and statements contained to the provident contained to the funce of the statement were read and understand the provisions contained in this form, actionvelodging and agreeing with every provision initialed by the subtrizing agent(s). (Additional names may be attached, with complete information, and statements were readive include the funce of the fu	cremation and disposition of cremated remains of the dec a cremation authorization. If cremation services a Cremation Authorization Addendum MUST be con for Services form in order to authorize cremation.	cremation and disposition of cremated remains of the decedent. This form alone does not itself constitute a cremation authorization. If cremation services are selected, our funeral home requires that a Cremation Authorization Addendum MUST be completed, signed and attached to this Consent for Services form in order to authorize cremation.				Initial	Initial Initial
IVWe authorize this Funeral Home to perform the funeral arrangements of the decedent in accordance with the terms outline in the accompanying Statement of Funeral Goods and Services Selected. Initial Initial Initial As the Authorizing Agent(S), I/we hereby agree to indemnify, defend, and hold harmless the Funeral Home, its officers, agents, and employees of and from any and all claims, demands, causes of action, and suits of every kind, nature and description, in law or equity, including the failure to properly identify the decedent or the human remains transported to the Funeral Home, taims brought by any other person(S) claiming the right to control the disposition of the decedent, or any other action performed by the Funeral Home, its officers, agents or employees, pursuant to this authorizator, excepting only acts of wills. Signature of Authorizing Agent(S). Initial Signature of Authorizing Agent(S), the undersigned warrant that all representations and statements contained on this form are true and correct, that these statements were made to induce the Funeral Home to arrange for the final disposition in the decedent, and that authorizing agent(S). (Additional names may be attached, with complete information, on a separate sheet.) Executed at (funeral Home). Initial MAME Initial ADDESS (inter, dip issue, dep) Initial ADDESS (inter, dip issue, dep) Initial Initial Initial	In addition, I am/we are aware of no objection to these arran child, parent, or sibling specified, whose right to control disp	In addition, I am/we are aware of no objection to these arrangements by any spouse, civil union or registered domestic partner, child, parent, or sibling specified, whose right to control disposition supersedes mine/ours as established by N.J.S.A. 45:27-22.					Initial
Indemnification As the authorizing Agent(s), live hereby agree to indemnify, defend, and hold harmless the Funeral Home, its officers, agents, induding any legal feet, costs, and expenses of litigation, aring as a result of, based upon c connected with har or equity, including the failure to properly identify the decedent to the human remains transported to the Funeral Home, bit officers, agents or equity, including the failure to properly identify the decedent to the human remains transported to the Funeral Home, bit officers, agents or employes, pursuant to this authorization, excepting only acts of will will well wells and correct, that these statements were made to induce the Funeral Home to this authorization, or as genter statements were made to induce the Funeral Home to arrange for the final disposition of the decedent, and that and correct, that these statements were made to induce the Funeral Home to arrange for the final disposition of the decedent, and that authorizing agent(s). (Additional names may be attached, with complete information, on a separate sheet.) Executed at (Funeral Home) anytown funeral home this 20 day of september 20 20	I/We authorize this Funeral Home to perform the funeral arra in the accompanying Statement of Funeral Goods and Service	angements o ices Selected	of the dece	dent in accordanc	e with the terms outlin	ned Initial	<u>+</u>
NAME DATE John Doe 3/28/2020 ADDRESS (siner, dp) siner, dp) 3/28/2020 any street Image: Siner, dp) siner, dp) TELEPHONE NUMBER RELATIONSHIP TO DECEDENT Joe Doe Son ADDRESS (siner, dp) siner, dp) SiCNATURE Joe Doe SiCNATURE ADDRESS (siner, dp) siner, dp) SiCNATURE any avenue TELEPHONE NUMBER TELEPHONE NUMBER RELATIONSHIP TO DECEDENT (456) 789-1234 son	Indemnification As the Authorizing Agen(s), I/we hereby agree to indemnify and employees of and from any and all claims, demands, c law or equily, including any legal fees, costs, and expenses this authorization, including the failure to properly identify Home, claims brought by any other person(s) claiming the r performed by the Funeral Home, its officers, agents or empli- negligence. Signature of Authorizing Agent(s) By executing this form, as the Authorizing Agent(s), the under and correct, that these statements were made to induce the the undersigned have read and understand the provisions of authorizing agent(s). (Additional names may be attached, w Executed at (Funeral Home) anytown funeral home	y, defend, ar causes of act s of litigation y the deced right to cont loyees, pursu- ersigned war Funeral Hon ontained in t <i>i</i> th complete	nd hold har tion, and su n, arising as lent or the trol the disp anat to this rrant that al me to arrang this form, a e informatie	mless the Funeral its of every kind, a result of, based human remains to solition of the de authorization, exc I representations a ge for the final dis knowledging and on, on a separate s this 20	Home, its officers, ag nature and descriptio d upon or connected transported to the Fu edent, or any other ac epting only acts of wi and statements contain sosition of the body o agreeing with every p heet.) day of <u>Septem</u>	ents, n, in with neral ttion liful Initial ned on this fo f the deceder provision initia	m are true tt, and that aled by the 20 20
John Doe 3/28/2029 ADDRSS (sime; dig; siste; zig) any street TELEPHONE NUMBER RELATIONSHIP TO DECEDENT Joe Doe SIGNATURE ADDRSS (sime; dig; siste; zig) any avenue TELEPHONE NUMBER RELATIONSHIP TO DECEDENT (456) 789-1234 son	NAME	SI	IGISIgnIRE			DATE	
TILEPHONE NUMBER RELATIONSHIP TO DECEDENT 100 D00 SIGNATURE Job D00 SIGNATURE ADDRESS (unret, dig, state, zight) any avenue SIGNATURE TILEPHONE NUMBER RELATIONSHIP TO DECEDENT (456) 789-1234 Son	ADDRESS (street, city, state, zip) any street		<u> </u>			5/28/202	
NAME SIGNATURE DATE Joe Doe Joe Doe DATE ADDRESS (unre, city) any avenue any avenue	TELEPHONE NUMBER (123) 456-7890	son	IP TO DECED	ENT			
ADDRESS (<i>linec</i> , <i>cigi</i> , <i>sale</i> , <i>cigi</i>) any avenue TELEPHONE NUMBER (456) 789-1234 Son	NAME DATE DATE DATE ADDRESS (kinet, zijk inter, zijk) and avenue					DATE	
TELEPHONE NUMBER RELATIONSHIP TO DECEDENT (456) 789-1234 son							
	TELEPHONE NUMBER (456) 789-1234	RELATIONSH SON	IP TO DECED	ENT			

Sample signed by the **First** recipient and then being sent to the **Second** recipient.

	Executed at (Funeral Home) anytown funera	I home this 20	day of september 20_20
	NAME John Doe	SIC Dist Life of by:	DATE 3/28/2020
	ADDRESS (street, city; state, zip) any street	9E97684DFAA145D	
NEXT	TELEPHONE NUMBER (123) 456-7890	RELATIONSHIP TO DECEDENT SON	
	NAME Joe Doe	SICKSIgnit	DATE 3/28/2020
	ADDRESS (street, city, state, zip) any avenue		

• When the first signer clicks the **"FINISH"** button, an email goes to the next signer and then the next, until all the signers finish. Then an email will be sent to all the participants with the final document(s) attached.

	Punctat Ceremony Memorial Service Use of Equipment and Staff for: Graveside Service (Including accompaniment of premains to place of final dop Funeral Service Off Premises Sheltering of Remains Other:	s suition) \$ \$ \$ \$	described below: [] 1. Crematory requires container to su [] 2. Your cemetery requires an outer bu [] 3. Other: REASON FOR EMBALMING [] Other I have prepared the above Statement of Func-	r to surround the remains; uter burial container; or her of Funeral Goods & Services Selected:	
	Other Staff and Related Facilities TOTAL:	\$	PRINT NAME OF PRACTITIONER:	N.J. Lic. No.:	
	III. transportation		Stranting of Reacting and	Date	
	Transfer of Remains to Funeral Home	\$ 600.00	X Docusig No by	3/26/2020	
	Limousine(s)	5	I brue reachand consisted a copy of the Stater	ment of Funeral Goods &	
	Other:	s	Services Selected:		
		\$	PRINT NAME OF CONSUMER MAXING ARRANGEMENTS:		
		\$	Consumer name	L Dum:	
	Transportation TOTAL:	<u>\$</u> 600.00		WATE.	
	optional packaged services		RELATIONSHIP TO DECEDENT:		
	Direct Cremation	\$	son		
	Immediate Burial	\$	STREET ADDRESS:		
	Forwarding Remains	\$	123 any street		
	Receiving Remains	\$	Criv:	STATE: ZIP:	
	(If you select an optional package, see General Price List for a	ist of included services.)	anytown	NJ 12345	
	Optional Packaged Services TOTAL:	5	© 2019 THANEXUS*, INC. ALL RIGHTS RESERVED.		
	SFGSS-AllFields-NO-Signature	s.pdf		1 of 1	
Reference click EINISH review					
		EIN	JISH		
your document(s) that all is correct					
your document(s) that all is conect.					



Save a Copy of Your Docum	ent 🕹 👻 🖶 🗧
Sign up for a FREE DocuSign account today and	sign all your documents electronically.
Eməil mlouca11@hotmail.com	Electronically sign any document.
Password	Get signatures from others.
Confirm Password	Sign on the go with DocuSign Mobile!
Country	
select 🔻	
By clicking the 'SUBMIT' button, you agree to the Terms & Conditions C ⁴ and Privacy Policy C ⁴ .	
NO THANKS	

TIP: For consumers, no need to create an account since they will receive an email with all the documents once signed by everyone. Once all individuals are done signing the documents, each of them will get this email with all the documents attached.



• The Sender (Funeral Director) will get the same email, and can also manage all the files from the **"Manage"** tab in DocuSign. *Illustrated on the next page:*

Managing the Process

Completed	
HOVE HORE +	
Recipients	T:: W
V 100 100	Signed on 9/24/2020 12-11-11 pm Signed in location
✓ == == =	Z Signed on 32542000 (12 st 50 pm Signed in location
×	 Signed on 9/24/2020 12-51-40 pm Signed in location

START NOW	Inbox	Q, Search Inbox and P	olovis 🗄 Filtres
ENVELOPES	Subject	Status	Last change
the intex	□ ✓ Please DocuSign: Signed part 1,per To	Completed	3/24/2020 03:35:42 pm HOVE *
C) Drats			
Powerforms			
QUICK VIEWS			
Action Required Waiting for Others Logoring Scon			
Completed			
FOLDERS +			

START NOW	Sent	Q, Search Sent and Fo	durs	E FILTERS
VELOPES	Subject	Status	Sect	
Induce Sent	O Please DecuSign: SFG55-Altificities-Signatures.pdf To	Waiting for Others	3/25/2020 08:19:54 am	RESEND *
Draffs Doleted	V Please Docutign: Signed part 1 pdf	Completed	3/24/2020 03:35:42 pm	HOVE *
Powerforms	Press Doubligh SP055-UPstatu Signatures pdf	Completed	5/24/2020 03:00:18 pm	HOVE Y
Action Required	Peace Doublight Objective.Coox	Completed	3/24/2020 12:11:52 pm	HOVE +
Waiting for Others Expring Scon	□ ✓ Presse DoeuSign: Objective.doox To	Completied	3/24/2020 11.53.05 am	NOVE *
Completed Authonication Failed				



Frequently check your **"Manage tab"** to see the progress of your document signing.

TIP: If one of your recipients did not get their email, check if it's their turn, if not the individual before them will have to sign first. You can re-send from your manage tab.

Only the individual who has not signed will receive this re-send. When or if you need to upgrade to the paid version of DocuSign, monthly and annual pricing options are available. (The free 30 days trial is limited to 5 envelopes.)



Annual option - fee shown is per month and 12 months will be charged in advance.

Bulk Send

In Conclusion

Rigorous documentation and recordkeeping will be key for funeral director compliance during this State of Emergency.

In addition, licensees may want to consider keeping additional notes in the files that are not required by regulation. Notes should include dates and times of telephone calls or voicemails, copies of emails and text messages. This may be considered going above and beyond, but a court of law might look at this to determine how a reasonable and prudent funeral director conducted business during a state of emergency.

> Although Managers-of-the-Day (MODs) are working remotely and are available Monday through Friday from 9 a.m. to 5 p.m. to assist you, **please do not contact a MOD regarding specific DocuSign** OR **individual computer hardware/software questions** as they are focused on funeral specific member and government authority issues during this state of emergency.



www.njsfda.org T: 732.974.9444 • F: 732.974.8144