

Blackburn & Sons Vernal Mortuary



Death Certificate Outline

Full Name of Deceased _____

Male ___ Female ___ Date of Death _____

City of Death _____ County of Death _____

Place of Death _____

Social Security # _____

Date of Birth _____ Birth City _____

Birth State _____ Birth County _____

Marriage Status _____ Never Married _____ Married _____ Widowed _____ Divorced

Surviving Husband or Wife (maiden) _____

Marriage Date _____ Place _____

Residence _____

City _____ State _____

County _____ Zip _____

Fathers Name _____

Mothers Maiden Name _____

Physician or Medical Examiner _____

Race _____ Education _____

Usual Occupation (Not Retired) _____

Industry _____

Military _____ Branch _____

INFORMANT _____

Phone # _____ Cell # _____

Address _____

Email Address _____ Relationship _____

15 East 100 North, Vernal, Utah 84078, 435-789-2611 email: info@bvmortuary.com