


NORTHLAKE
FUNERAL HOME

140 E. North Ave - Northlake, IL 60164 | 708-562-0044 | information@northlakefuneral.com

INFORMATION NEEDED TO COMPLETE STATE OF ILLINOIS DEATH CERTIFICATE

- **PLEASE PRINT LEGIBLY**
- **PLEASE FILL IN ALL BLANKS**
- **IF INFORMATION IS MISSING, "NOT AVAILABLE" WILL APPEAR ON DEATH CERTIFICATE**

NAME OF DECEASED: _____
FIRST MIDDLE LAST

PLACE OF DEATH: _____ T.O.D. _____ DATE: _____
M.D. _____ PH: _____ FAX _____

ADDRESS: _____

SEX M F RACE: _____ HISPANIC Y _____ N SOCIAL SECURITY NO. _____

DATE OF BIRTH: _____ AGE _____ VETERAN Y N BRANCH _____

CITY AND STATE OF BIRTH: _____

MOTHER'S NAME _____
FIRST MIDDLE MAIDEN

FATHER'S NAME _____
FIRST MIDDLE LAST

SCHOOLING _____ OCCUPATION: _____ INDUSTRY _____

MARITAL STATUS (CIRCLE ONE): MARRIED WIDOWED DIVORCED NEVER MARRIED

SPOUSE: LIVING /DECEASED _____
FIRST MIDDLE (MAIDEN NAME IF WIFE)

RESIDENCE ADDRESS: _____
STREET

CITY STATE ZIP CODE COUNTY

CEMETERY: (name, city, state) _____

LEGAL NEXT OF KIN

INFORMANT NAME: _____ RELATIONSHIP _____

RESIDENCE: _____
STREET CITY ST ZIP

CONTACT INFORMATION INCLUDING EMAIL ADDRESS

X _____
(INFORMANT'S SIGNATURE) DATE

CERT. COPIES