

Funeral Service Worksheet

Deceased Name _____ Maiden Name _____

Address _____ Zip _____

Birth date _____ Birth place _____ Age _____

Social Security Number _____ Date of Death _____

Place of Death _____ Inpatient? _____ ER? _____

Physician to sign _____ Phone _____

O c c u p a t i o n M o s t o f l i f e

Employers: _____

Marital Status: Never Married Married Separated Divorced Widow/er

Surviving Spouse _____ Maiden Name _____

When Married _____ Where Married _____

Father's Full Name _____

Mother's Full Name _____ Maiden _____

High School Attended _____ Where _____ Graduate _____

College Attended _____ Where _____ Degree _____

Veteran (Y/N) _____ Branch of Service _____ Rank _____

H o n o r a b l e D i s c h a r g e _____ M i l i t a r y D u t y

Informant Name _____ Relationship _____

Informant Address _____ **Zip** _____

Informant Relationship _____ **Informant Phone** _____

Church Affiliation _____

Positions Held _____

Hobbies, Talents, Awards _____

Preceded in Death by _____

Survivors: Spouse _____

Parents _____

Children _____

Siblings _____

Grandchildren _____

Pallbearers _____

Honorary Pallbearers

Funeral Site _____ **Cemetery** _____

Checklist for Funeral Home

Clothing: Suit, shirt, tie, clean underwear, t-shirt, socks or Dress (3/4 or long sleeve, high neckline) panties, bra, panty hose or knee highs, jewelry, makeup, wig, favorite cologne or aftershave.

Picture: Clearly focused, preferably close up with a pleasant expression or smile. Please use a recent (within ten years) photo for newspaper and obituary front. Other pictures of happy times and family for memory board or DVD's. DVD's need 30-45 pictures. Picture counts of 50 or more are an additional charge.

Insurance information: Bring the policy itself or receipts with name of company, policy number and a phone number if possible.

Veterans discharge paper (DD214)

Cemetery information : If the deceased has cemetery property or a pre-arranged service, bring deed or contract information

