

Harmony Cremation and Funeral Service



Vital Statistics & Death Certificate Information

Deceased Full Name: _____

Legal Address: _____

Date of Birth: _____ Social Security Number: _____

Place of Birth: _____

Father's Name: _____

Mother's Name (Maiden): _____

Marital Status: _____ Spouse's Name(Maiden): _____

Highest Level of Education: _____ Occupation: _____

Veteran: Yes / No If so, branch: _____

Informant: _____ Relationship: _____

Address: _____ Phone Number: _____

Number of Certified Copies: _____ **First copy is complimentary*

X _____
Informant's Signature

Date