

RECORD OF FUNERAL



No. _____

Funeral Home _____

DECEDENT'S BIRTH NO.	REGISTRATION DISTRICT NO.	REGISTERED NUMBER
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DECEASED - Name First Middle Last

RESIDENCE Street & Number City, Town, Twp. or Road Dist. No. Inside City (Yes/No)

State County

SEX **DATE OF DEATH** (Month, Day, Year) **SOCIAL SECURITY NO.**

Kind of Business or Industry Usual Occupation

RACE - White, Black, American Indian, Etc. (Specify) **AGE** - Last Birthday (Yrs.) Under 1 Year Mos. Days Hours Min.

DATE OF BIRTH (Month, Day, Year) **PLACE OF DEATH** COUNTY

City, Town, Twp. or Road Dist. No. Inside City (Yes/No)

HOSPITAL OR OTHER INSTITUTION - Name (if not in either, give street and number) IF HOSP. OR INST. indicate DOA, OP/ Emer. Rm., Inpatient (Specify)

BIRTHPLACE (STATE OR FOREIGN COUNTRY) **CITIZEN OF WHAT COUNTRY** **ORIGIN OR DESCENT** (Ital., Mex., Ger., Eng., Cuban, P.R., etc. - Specify)

FATHER - Name First Middle Last

MOTHER - Maiden Name First Middle Last

Married, Never Married, Widowed, Divorced (Specify) Name of Surviving Spouse (If wife, give maiden name)

Wedding Date Spouse's Date of Death

Was Deceased ever in U.S. Armed Forces? (Yes, no, or unknown) (If yes, give war or dates of ser.)

BRANCH OF SERVICE (Army, Air Force, Navy or Marine) (Rank) (Regiment, Company or Command)

Enlisted Discharged

Name of War Serial No.

INFORMANT'S NAME Relationship

MAILING ADDRESS (Street and No. or R.F.D., City or Town, State, Zip)

CAUSE OF DEATH **AUTOPSY** Yes ☐ No ☐

PHYSICIAN

Address

BURIAL, CREMATION, REMOVAL (Specify) **CEMETERY OR CREMATORY - NAME**

LOCATION City or Town State Date (Month, Day, Year)

CEMETERY LOT NO. Owner of Lot

Section Grave No.

Burial Permit No.

Survived By: **Spouse:** City, State

Preceded By:

Organizations/Affiliations:

Flowers Music Death Notices

Vault Funeral Coach Limousine

BEARERS

Obituary Information

The following information will assist us writing an obituary that will exemplify the very essence of your loved one's journey in life.

Occupation: _____ Employer: _____

How many years? _____ Retired? _____ Nickname: _____

Hobbies: (ex. woodworking, quilting, crafts, collecting etc.)

Other Interests: (ex. deer hunting, golfing, fishing, gardening, horseback riding etc.)

Favorites: (ex. loved to wear blue and gray in support of our school, loved football especially the Pittsburgh Steelers etc.)

What are they known for by their family and friends? (ex. Everyone loved her homemade apple pie; People drove from all around to see her holiday light decorations; He always had the most amazing prize tomatoes in his garden; He was always willing to jump right in and help us whenever needed. etc.)

Music/Song Preferences: (Country, Classical, Big Band, Bluegrass, Gospel etc)

Pets: _____

Moments of great joy and/or proud accomplishments (ex. Taking grandchildren on vacation, graduating from college, building your own house, yearly trip with friends etc.)

* Use the back of this form to provide any additional information