

# PREARRANGEMENT BOOK



## POWLES STATION FUNERAL HOME

YOUR PILLAR  
*of* STRENGTH  
IN A TIME OF NEED

913 West Main Street • P.O. Box 248 • Rockwell, NC 28138  
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# RECORD OF VITAL STATISTICS

Full Legal Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Sex: \_\_\_\_\_ Race: \_\_\_\_\_ Citizen of: \_\_\_\_\_

Birthdate: \_\_\_\_\_

Place of Birth: \_\_\_\_\_

Single ☐ Married ☐ Widowed ☐ Divorced ☐

Name of Spouse: \_\_\_\_\_

(If wife, maiden name): \_\_\_\_\_

Date Married: \_\_\_\_\_ Place Married: \_\_\_\_\_

If Spouse is Deceased, Date: \_\_\_\_\_

## ***Education***

0-12 # of Years: \_\_\_\_\_ College # of Years: \_\_\_\_\_

Social Security #: \_\_\_\_\_

Occupation and Employer: \_\_\_\_\_

Location of Employer: \_\_\_\_\_

Date of Retirement: \_\_\_\_\_

Mother's Name (include maiden): \_\_\_\_\_

Father's Name: \_\_\_\_\_

If Veteran, Dates of Service: \_\_\_\_\_

# BIOGRAPHICAL INFORMATION

Fraternal, Service, Social, and Union Membership: \_\_\_\_\_

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Political Positions Held: \_\_\_\_\_

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Other Boards Served on: \_\_\_\_\_

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Special Recognitions: \_\_\_\_\_

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# BIOGRAPHICAL INFORMATION

## *Education*

High School Attended: \_\_\_\_\_

Dates: \_\_\_\_\_

Year of Graduation: \_\_\_\_\_

College Attended: \_\_\_\_\_

Dates: \_\_\_\_\_

Year of Graduation: \_\_\_\_\_

Degree: \_\_\_\_\_

College Attended: \_\_\_\_\_

Dates: \_\_\_\_\_

Year of Graduation: \_\_\_\_\_

Degree: \_\_\_\_\_

## *Church Membership Or Affiliation/Activities*

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## *Employment*

Place of Employment: \_\_\_\_\_

Position: \_\_\_\_\_

Place of Employment: \_\_\_\_\_

Position: \_\_\_\_\_

# SERVICE ARRANGEMENTS

## *Clergyman Or Layperson*

Name(s): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone Numbers: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Music: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Scripture/Reading Selections: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Flower Preference: \_\_\_\_\_

\_\_\_\_\_

## *Memorial Donations*

In Lieu of Flowers:    Yes ☐            No ☐

Name of Charity: \_\_\_\_\_

# SERVICE ARRANGEMENTS

Lodge or Military Service: \_\_\_\_\_

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Other Personal Requests-Contacts: \_\_\_\_\_

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Additional Information/Contacts: \_\_\_\_\_

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# SERVICE ARRANGEMENTS

## *Service Type Desired*

Traditional ☐      Cremation ☐

## *Visitation*

Night Before Service ☐      Day of Service ☐

Location of Visitation: \_\_\_\_\_

Hours: \_\_\_\_\_

## *Service Information*

Location: \_\_\_\_\_

Time of Service: \_\_\_\_\_

Location of Burial: \_\_\_\_\_

## *Cemetery Information*

Address of Cemetery: \_\_\_\_\_

\_\_\_\_\_

Telephone Number: \_\_\_\_\_

Plot in Whose Name: \_\_\_\_\_

## *Cremation*

Disposition of Ashes: \_\_\_\_\_

\_\_\_\_\_

# FAMILY RECORD

## Children

Number of **Daughters**: \_\_\_\_\_

Names and Locations: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Number of **Sons**: \_\_\_\_\_

Names and Locations: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Number of **Grandchildren**: \_\_\_\_\_

Number of **Great Grandchildren**: \_\_\_\_\_

Number of **Great Great Grandchildren**: \_\_\_\_\_



# FAMILY RECORD

## *Siblings*

Number of **Sisters**: \_\_\_\_\_

Names and Locations: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Number of **Brothers**: \_\_\_\_\_

Names and Locations: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Additional Family Members and Relationship: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# VETERAN'S SERVICE RECORD

Full Name of Veteran: \_\_\_\_\_

Pension or V.A. Claim No.: \_\_\_\_\_

Service Serial No.: \_\_\_\_\_

Date Entered Service: \_\_\_\_\_

Branch of Service: \_\_\_\_\_

Grade or Rank: \_\_\_\_\_

Name of Organization: \_\_\_\_\_

Co. - Reg. - Div.: \_\_\_\_\_

Name of War/Conflict: \_\_\_\_\_

Date of Discharge: \_\_\_\_\_

Place of Discharge: \_\_\_\_\_

Decorations: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Medal of Honor Recipient: Yes ☐ No ☐

Flag Request: Draped on Casket ☐ Not Draped ☐

Military Graveside Rites: Yes ☐ No ☐

Additional Military Information: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## ADDITIONAL NOTES