

SURVIVORS INCLUDE: (PLEASE LIST CITY & STATE IN WHICH THEY LIVE)

Spouse _____ Sons _____

Daughters **(Please include married name)** _____

Parents **(Please include if not deceased)** _____

Number of Grandchildren _____ Number of Great-Grandchildren _____

Brothers **(Please include last name)** _____

Sisters **(Please include last name)** _____

PRECEDED IN DEATH BY: _____

Organist _____ Soloist _____

Songs _____

CASKETBEARERS

1. _____ 2. _____

3. _____ 4. _____

5. _____ 6. _____

HONORARY CASKETBEARERS

1. _____ 2. _____

3. _____ 4. _____

5. _____ 6. _____

INFORMATION NEEDED FOR DEATH CERTIFICATE

Last major occupation of deceased: _____

Deceased's Social Security Number: _____

Education Level (highest grade completed): _____

Name and address of informant: _____

Number of Certified Copies Requested (\$11.00 Each): _____

Number of photo copies requested: _____

If able, please bring clothing (we dress as we did in life, including underclothing – shoes are optional) and a recent picture for the hairdresser and/or newspaper when coming in to make arrangements. Also, if a veteran, please bring in a copy of the discharge. Don't hesitate to call us if you have any questions or concerns, (308) 384-0590

Itemized listing of all jewelry: _____