PLEASE BRING COMPLETED TO APPOINTMENT

Leavitt's Mortuary
Aultorest Memorial Park
"The Difference Is Excellence In Service"

STATE OF UTAH DEATH CERTIFICATE INFO

QTY: _____

Deceased Full Legal Name: _____

Date of Birth: _____

Date of Death: _____

Social Security Number: _____

Birthplace (City and State): _____

Place of Death (County, City, State): _____

Is Deceased a Veteran: _____

Branch of Military: _____

Marital Status (Circle One): Married Married but Separated Never Married
Widowed Divorced Unknown

Surviving Spouse Name (Use Maiden Name): _____

Deceased's Common Occupation: _____

Deceased's Kind of Business or Industry: _____

Deceased's Address: _____

Deceased's Parents Names:

Father: _____

Mother (Use Mother's Maiden Name): _____

Deceased's Ethnicity: _____

Deceased's Highest Education (Circle One): None 8th grade or less 9th-12th grade

GED/H.S. Diploma Some College Associates Bachelors Masters Doctorate

Legal Next of Kin Name: _____

Legal Next of Kin Relation to Deceased: _____

Legal Next of Kin Phone Number: _____

Legal Next of Kin Address: _____

Legal Next of Kin Email Address: _____