

## SURVIVORS

### *Children*

Name, spouse, city and state for all  
surviving children (*list oldest first*)

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Number of grandchildren: \_\_\_\_\_

Number of great-grandchildren: \_\_\_\_\_

### *Siblings*

Name, spouse, city and state for all  
surviving siblings:

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## PRECEDED IN DEATH

Name

Relationship

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
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## SPECIAL NOTES

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# *Personal Arrangement Guide*

Martin-Grau Funeral Homes, Inc.

563-568-3162

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

Maiden Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

### **LIFE HISTORY**

*(Information needed for the Death Certificate)*

#### ***Birth***

Date of Birth: \_\_\_\_\_

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

Parents: Father: \_\_\_\_\_

Mother (maiden name): \_\_\_\_\_

#### ***Marriage***

Marriage: Spouse: \_\_\_\_\_

Date: \_\_\_\_\_

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

#### ***Education***

Schools or College Attended: \_\_\_\_\_

\_\_\_\_\_

Highest Grade Completed: \_\_\_\_\_

#### ***Military Service***

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

Date served: \_\_\_\_\_

### ***Occupations & Places Lived***

Occupations Held: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Places Lived (Approximate Dates): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

#### ***Organizations***

Lodges, Clubs, Organizations belonged to:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Church Membership: \_\_\_\_\_

\_\_\_\_\_

Baptism, Confirmation (if known): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Special events, memories of family or  
activities not listed previously.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### **INFORMANT**

Person with legal rights to handle funeral  
arrangements:

Name: \_\_\_\_\_

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

\_\_\_\_\_

Phone Number: \_\_\_\_\_

Relationship: \_\_\_\_\_

### **SERVICE ARRANGEMENTS**

Minister: \_\_\_\_\_

Scripture: \_\_\_\_\_

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

I would like the following to serve as  
pallbearers

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### **DISPOSITION**

Cemetery: \_\_\_\_\_

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

Has a headstone or marker been placed at  
the cemetery? \_\_\_\_ yes \_\_\_\_ no

Choice of casket would be: \_\_\_\_\_

Type of burial vault: \_\_\_\_\_

Type of marker: \_\_\_\_\_