



DEATH CERTIFICATE INFORMATION FORM

We wish to express our sincere sympathy and our appreciation for your trust in us. It is our purpose to give thoughtful service, and if in doing so we have helped to lighten your burden, our purpose has been accomplished.

The following information is required on the legal death certificate. Please complete it precisely the way that you would like it to appear on the document as it pertains to the deceased. Please print clearly.

Name of Deceased	Gender
Social Security Number	Age
Date of Birth	Place of Birth
Address of Residence	
Marital Status	Surviving Spouse (maiden name)
Ever in U.S. Armed Forces	
Father's Name (First, Middle, Last)	Birthplace (State or Foreign Country)
Mother's Name (First, Middle, Maiden)	Birthplace (State or Foreign Country)
Next of Kin Name	Next of Kin Relationship
Next of Kin Address	
Decedent's Occupation (before retirement)	Kind of Business/Industry (before retirement)
Decedent's Race	Decedent of Hispanic Origin
Highest Level of Education (Degrees Earned)	

Please bring the following items when you come for your arrangement conference:

- If deceased is a veteran, copies of military discharge paperwork. (DD-214)
- Photographs for obituaries, memorialization, hair styling and/or cosmetics.
- Clothing for deceased to wear.
- NOTE: Prior to confirming the time and date for services, please allow us to visit with you.