

### Vital Records Information

One of the services we will be providing for you is preparing, filing, and securing certified copies of the death certificate. The following is a list of information we are required to report. To save you time when we get together, you may choose to gather this information in advance. If you do, please bring this form with you or you may fax or email it back to us in advance of our meeting. Please print clearly.

Fax: 903-693-2340

Email: [jimersonlipsey@yahoo.com](mailto:jimersonlipsey@yahoo.com)

Legal Name (First, Middle, Last): \_\_\_\_\_

Date of Birth: \_\_\_\_\_ City & State or Country of Birth: \_\_\_\_\_

Name on Social Security Card if different: \_\_\_\_\_

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

Current Marital Status:  Married  Widowed  Divorced  Never Married

Surviving Spouse (First, Middle, Last, Maiden): \_\_\_\_\_

Residence Street Address: \_\_\_\_\_ Apt. #: \_\_\_\_\_

City or Town: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Is Residence inside the City Limits:  Yes  No

Father's Name (First, Middle, Last): \_\_\_\_\_

Mother's Name (First, Middle, Maiden): \_\_\_\_\_

Highest Education Completed: \_\_\_\_\_

Race:  White  Black or African American  Other (specify): \_\_\_\_\_

If of Hispanic Origin:  Spanish, Hispanic/Latino  Mexican, Mexican

American/Chicano  Puerto Rican  Cuban  Other (specify): \_\_\_\_\_

Ever in Armed Forces:  No  Yes (If possible, please bring Form DD 214/ Military

Discharge Document with you) If yes, what Branch: \_\_\_\_\_ Years of Service \_\_\_\_\_

Ever a Peace Officer in Texas: \_\_\_\_\_

Usual Occupation: \_\_\_\_\_ What Industry: \_\_\_\_\_

How Many Certified Death Certificates will you need us to order for you? \_\_\_\_\_

(\$21 for the first DC and \$4 for each additional copy thereafter. Black and white copies are free)

Name of Person making the Funeral Arrangements: \_\_\_\_\_

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

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