

Decedent Known As	S: (include nickname and	AKA)		
Full Name:				
	First	Middle	L	ast (include Maiden, if applicable)
Residence: Number	er/Street			
Cit	у	State	ZIP	County
Phone/Contact:				_ Inside city limits: □ Y □ N
Age: Da	ate of Birth:	Place of B	irth:	
Social Security Num	nber:	S	ex: 🗆 M	□ F Race:
Education Complete		☐ Secondary ☐ Dip gree: (List degree)	oloma 🗆	I GED □ Some College
		Married <i>Spouse Name:</i> Divorced		e, include Maiden Name and Date of Death)
	nployed □ Ret omemaker □ Dis			
Occupation:		Employer	/ Industry	r:
Father's Name:				□ Preceded in death
Mother's Name: (Incl	ude maiden)			□ Preceded in death
Informant / Next of h Informant Address:	(Person handling arrangements)		Relation:
Cit	ry	State	ZIP	County
Phone:	Cell:	Email:		
Method of Disposition	on: □ Burial □ E	intombment Cremat	tion	
Cemetery Name:				
Cemetery Location:				
Cemetery Deed: П	Y Π N Name/C)wner		



Military Service in the US Armed Forces: ☐ Y ☐ N	Branch: Rank:
DD214 – Honorable Discharge Papers: □ Y □ N □	vate/Location of Discharge
Years Served: War:	Honors/Medals:
Service Number: Enlisted Date:	City/State:
Final Resting in Veterans Cemetery: □ Y □ N Whe	ere:
For information regarding Donel C. Kinnard Memorial State You may complete and application to be pre-qualified as we buried there with the veteran. Although there are minimal charges to the veteran for the lot/niche, open and close, man and are charged by the funeral home depending on the sele	Il as your spouse or a dependent child can also be arges to the spouse or dependent child there are no rker and vault. The casket and services are separate
Memberships of Civic Organizations or Clubs: ☐ Y ☐	1 N
List current or past and name and title if applicable: _	
Additional information regarding work, school, or civic r	elated awards, notoriety or other:
Religious / Church Membership / Affiliation:	
Minister / Priest / Other: Name and Contact:	



FAMILY INFORMATION

IMMEDIATE FAMILY MEMBI	ERS: (Survivors— Parents, spouse, children	n, siblings; husbands and wives may be listed togethe
Relative Name:	Relationship:	From:
Grandchildren:		
Great-Grandchildren:		
Preceded in death by: (Include	name and relationship)	



FUNERAL SERVICE DETAILS

Place of Service: (Other than funeral home)
Visitation: □ Y □ N Notes:
Clothing/Jewelry/Other:
Hairdresser:
Flower Requests:
Military Burial: ☐ Y ☐ N Notes:
Music Selections: (songs, hymns, vocalists, musicians, etc.)
Special Readings: (scripture, poems, quotes, etc.)
Preferred Eulogist/Minister: (conducts funeral)
Pall Bearers:
Special Instructions/Requests: (incl. Organ Donation, Body to Science, etc.)