

BIOGRAPHICAL INFORMATION

Length of residence (in present community): _____

Former place of residence (if to be noted in obituary): _____

Church Membership: _____

Clubs, Organizations, Hobbies, Interests,
etc. _____

FAMILY LIST

SONS: _____
Name and spouse, if any Place of residence - City and State

DAUGHTERS: _____
Name and spouse, if any Place of residence - City and State

BROTHERS: _____
Name and spouse, if any Place of residence - City and State

SISTERS: _____
Name and spouse, if any Place of residence - City and State

GRANDCHILREN (number) _____ GREAT-GRANDCHILDREN (number) _____

PLEASE LIST ANY IMMEDIATE FAMILY MEMBERS THAT HAVE PRECEDED IN DEATH:

_____ name _____ relationship _____

CEMETERY INFORMATION

NAME OF CEMETERY: _____

City, Village or Township AND State _____:

LOT: _____(if known) BLOCK: _____(if known) SECTION: _____

IS THERE A MONUMENT WITH YOUR NAME ON IT – Yes _____ No _____

Yes _____ No _____ DO YOU NEED TO PURCHASE CEMETERY LOT?

Yes _____ No _____ DO YOU NEED TO PURCHASE CEMETERY MONUMENT?

PREPLANNED SERVICE DETAILS

Place: _____

Clergy: _____

Music:

Organist/Pianist: _____

Songs: _____

Soloist: _____

Pallbearers: _____

Honorary Pallbearers: _____

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Visitation the night before? Yes _____ No _____

Visitation the day of service? Yes _____ No _____

Rosary/Prayer Service night before? Yes _____ No _____

If Yes, done by whom? _____

Memorials to be given to: _____

Lunch after the Service? Yes _____ (by whom: _____) No lunch: _____

MEMORANDA

Please provide any other information that you would like included in the obituary or that you would like us to know about your wishes for funeral services on the back side of this form.