Simple Traditions Cremation & Burial

Statistical Information of Decedent

Note: The following information is required to complete the certificate of death and is kept confidential.

NAME: Click or tap here to enter text.

Please Include First, Middle, Last

ADDRESS: Click or tap here to enter text.

Please include Street, City, State, Zip Code

YEARS IN COUNTY (Where they lived): Click or tap here to enter text.

DATE OF BIRTH: Click or tap here to enter text.

STATE OF BIRTH: Click or tap here to enter text.

SOCIAL SECURITY: Click or tap here to enter text.

RACE / ETHNICITY: Click or tap here to enter text.

Hispanic: Yes  / No  Military Service: Yes  / No

MARITAL STATUS: Choose an item.

SURVIVING SPOUSE: Click or tap here to enter text.

Please Include First, Middle, Last (Maiden)

EDUCATION (Highest Level/Degree): Choose an item.

OCCUPATION (Present or before Retirement): Click or tap here to enter text.

KIND OF BUSINESS: Click or tap here to enter text.

YEARS IN OCCUPATION:Click or tap here to enter text.

NAME OF FATHER: Click or tap here to enter text.

Please Include First, Middle, Last

STATE OF FATHER’S BIRTH: Click or tap here to enter text.

NAME OF MOTHER: Click or tap here to enter text.

Please Include First, Middle, Last (Maiden)

STATE OF MOTHER’S BIRTH:Click or tap here to enter text.

**Today’s Date**: Click or tap here to enter text. **Initials After Proofing**: Click or tap here to enter text.

INFORMATION FOR NEXT OF KIN / AUTHORIZING AGENT

NAME: Click or tap here to enter text. RELATIONSHIP: Click or tap here to enter text.

ADDRESS: Click or tap here to enter text.

Please include Street, City, State, Zip Code

PHONE: Click or tap here to enter text. E-MAIL: Click or tap here to enter text.

ALTERNATE CONTACT

NAME: Click or tap here to enter text. RELATIONSHIP: Click or tap here to enter text.

PHONE: Click or tap here to enter text. NOTES: Click or tap here to enter text.