

INFORMANT WORKSHEET

DECEDENT'S PERSONAL INFORMATION

FIRST NAME		MIDDLE NAME			LAST NAME	
SEX	RACE	HISPANIC ORIGIN (YES or NO; Specify)		DATE OF BIRTH	AGE	
COUNTRY OF BIRTH		STATE OF BIRTH	EDUCATION		MARITAL STATUS	
SURVIVING SPOUSE FIRST NAME		MIDDLE NAME			LAST NAME (MAIDEN)	
SSN	OCCUPATION			INDUSTRY		
ARMED FORCES?	ENTRY DATE	DISCHARGE DATE		CITIZEN OF WHAT COUNTRY		
	MONTH DAY YEAR	MONTH DAY YEAR				

RESIDENCE (LAST KNOWN)

COUNTRY	STATE	COUNTY	CITY/TOWN		
ADDRESS			APT NO	IN CITY LIMITS?	

PARENTS

FATHER / PARENT FIRST NAME	MIDDLE NAME		LAST NAME		
MOTHER / PARENT FIRST NAME	MIDDLE NAME		LAST NAME (MAIDEN)		

INFORMANT

INFORMANT NAME	MIDDLE NAME	LAST NAME		INFORMANT RELATION
INFORMANT MAILING ADDRESS				
INFORMANT STATE	INFORMANT CITY			INFORMANT ZIP
INFORMANT PHONE				

DISPOSITION INFORMATION

BURIAL, CREMATION, REMOVAL, OTHER	CEMETERY OR CREMATORY - NAME
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I certify that the information listed is correct:

Informant's Signature

Date

