

Vital Statistics

| Name of Deceased: |
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| Current Location: |
| Legal Residence: |
| Social Security: |
| Highest Level of Education: |
| Veteran: □ Yes or □ No (Specify Years and Branch) |
| Sex: |
| Race/Ethnicity: |
| Marital Status: Never Married Married Widowed Divorced Separated Date of Birth: |
| Usual Occupation: |
| Industry: |
| Name of Last Employer & Location (Prior to Retirement): |
| Birthplace: |
| Father's Name: |
| Mother's Name (Maiden) |
| Place of Burial: |
| Primary Informant Name: |
| Address: |
| State: Zip: |
| Phone Number: |
| Email Address: |
| Immediate Family Members: |
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