



DECEASED NAME (first, middle, last) _____

NAME AT BIRTH (maiden, or other name used for personal business include AKA's if any) _____

GENDER _____ **DATE OF BIRTH** _____ **SOCIAL SECURITY NUMBER** _____

OCCUPATION (kind of work during most of working life, do not use retired) _____

TYPE OF BUSINESS/INDUSTRY _____

CURRENT RESIDENCE ADDRESS (street and number) _____

CITY (specify city, village, or township) _____ **STATE** _____ **ZIPCODE** _____

BIRTHPLACE (city and state or foreign country) _____

MARITAL STATUS: MARRIED _____ **NEVER MARRIED** _____ **DIVORCED** _____ **WIDOWED** _____

SURVIVING SPOUSE (maiden name) _____

ANCESTRY (ex: English, Irish, etc) _____

RACE _____ **HISPANIC ORIGIN:** Yes or No **U.S. ARMED FORCES MEMBER:** Yes or No

EDUCATION (highest grade completed or number years in college/degree) _____

FATHER'S NAME (first, middle, last) _____

MOTHER'S NAME (first, middle, maiden) _____

INFORMANT'S NAME & RELATIONSHIP _____

STREET ADDRESS _____

CITY _____ **STATE** _____ **ZIPCODE** _____

PHONE _____ **EMAIL** _____