RENAISSANCE FUNERAL HOME ARRANGEMENT WORKSHEET

Deceased Full Lega	l Name:		
			Race:
Date of Death:			
City and State of Do	eath:		
Facility Name:			
Doctor's Name:			
Date of Birth:			
City and State of Bi	rth:		
Marital Status: Mar	rried or Never	Married or Widowed or Divorced	Organ Donor: Yes or No
Surviving Spouse (<i>j</i>	f wife, include Maia	den Name):	
			Honor Guard? Yes or No
Occupation:			
Kind of Business: _			
Residence Address:			
Is the Residence ins	ide city limits: Y	Ves or No Education Level:	
Father's Full Name:	:		
Mother's Full Name	e Maiden:		
Survivors:	Name		Relationship to Deceased

Informant Information
Informant's Name:
Informant's Address:
Informant's Phone Number: Other Info:
Funeral Arrangements
Place of Disposition:
Number of Death Certificates:
Date of Visitation:
Place of Visitation:
Time of Visitation:
Date of Service:
Place of Service:
Time of Service:
Method of Disposition: Burial or Cremation Hearse: Yes or No Limousine: Yes or No
Cantor: Yes or No Musician: Yes or No Instrument:
Honorarium: Yes or No Pastor's Name:
Pallbearers for Funeral and/or Casket Burial: Family (Honorary) or Funeral Home (Hired)
Music/Songs:
Newspapers: Picture: Yes or No
Donations:
Type of Casket or Urn:
Type of Vault:
Type of Acknowledgment Cards:
Type of Prayer Cards:
Type of Memorial Folders:
Flowers:Register Book: Yes or No
Ship-In/Out Location and Airline: