

FUNERAL ARRANGEMENTS

NAME _____ HOME PHONE _____

ADDRESS _____ RACE _____ SEX _____

AGE _____ DATE OF BIRTH _____ PLACE OF BIRTH _____ EDU _____

DATE OF DEATH _____ HOUR _____ PLACE _____ COUNTY _____

MARITAL STATUS _____ SURVIVING SPOUSE (WIFE-MAIDEN NAME) _____

SOCIAL SECURITY # _____ OCCUPATION/INDUSTRY _____

NAME OF FATHER _____ NAME OF MOTHER(incl maiden) _____

INFORMANT _____ ADDRESS _____

ATTENDING PHYSICIAN _____ TEL/ADDRESS _____

High School, Universities, Clubs, Societies, Fraternal Orders, Veteran, Church: _____

DATE CAME TO NORMAN _____ FROM _____

MARRIED TO _____ DATE _____ WHERE _____

HUSBAND OR WIFE _____ ADDRESS _____

PARENTS: _____ ADDRESS _____

SONS _____ ADDRESS (City/State) _____

_____ ADDRESS (City/State) _____

_____ ADDRESS (City/State) _____

_____ ADDRESS (City/State) _____

DAUGHTERS _____ ADDRESS (City/State) _____

_____ ADDRESS (City/State) _____

_____ ADDRESS (City/State) _____

_____ ADDRESS (City/State) _____

SISTERS _____ ADDRESS (City/State) _____

_____ ADDRESS (City/State) _____

_____ ADDRESS (City/State) _____

_____ ADDRESS (City/State) _____

BROTHERS _____ ADDRESS (City/State) _____

_____ ADDRESS (City/State) _____

_____ ADDRESS (City/State) _____

_____ ADDRESS (City/State) _____

GRANDCHILDREN _____ GREAT GRANDCHILDREN _____

Preceded in Death by _____

SERVICE INFORMATION

Place of Service: _____

Visitation: _____ Burial: _____ or Cremation: _____

Casket: _____ Urn: _____

Cemetery: _____ Vault _____

Pallbearers: _____

Veteran: _____ Branch of Military: _____ (Please attach a copy of discharge papers (DD 214) for military honors)

Clergy: _____

Organist: _____ Vocalist: _____

Music Selections: (Hymns or Songs) _____

Newspapers used for obituary

Norman Transcript: _____ Photo: _____

Daily Oklahoman Classifieds: _____ Photo: _____

Newspaper: _____ Photo: _____

Newspaper: _____ Photo: _____

Additional Biographical information or special requests. (Obituary text & photo may be attached)
