



Lexington (859) 237-7227
 Frankfort (502) 233-7788
 Versailles (859) 340-3327

Funeral Information Record

DECEDENT INFORMATION									
Name of Deceased – First			Middle			Last			
Social Security Number		Marital Status		Sex	Race		Hispanic Origin or Ancestry: If Yes, Country of Origin:		
Residence of Record			City		In City Limits?	County		State	Zip Code
Date of Birth			City			State/Country		U.S. Citizen?	
Armed Forces Branch		Service Number		Honorable Discharge?		Date Entered		Date Separated	
Usual Occupation				Education Completed Elem – High School _____ years College _____ years			Highest Degree Attained		
Kind of Business or Industry			Employer			City		No. of Years in Industry	

Decedent's Spouse (First, Middle, Maiden, Last)		Living?	Email	
Decedent's Mother's Name (First, Middle, Maiden, Last)		Living?	Decedent's Father's Name (First, Middle, Last) Living?	

Hobbies/Interests	
Memberships (Church/Civic)	

INFORMANT INFORMATION				
Name of Informant – First		Middle		Last
Street Address			City	State Zip Code
Telephone		Relationship to Deceased		Email Address

[illegible]