

AlbuquerqueCremations.com

Vital Record Information

Section I – All information in this section is about the deceased

Legal Name: _____
(First, Middle, Last, Suffix)

If Female, maiden name: _____ Sex Male Female

Social Security Number: _____ Age: _____ Date of Birth: _____

Place of Birth: _____ Was Decedent in armed forces Yes No
(City, State, Country)

Address: _____
(Street, Apt #, City, State and Zip)

Marital Status: Married Divorced Never Married Widowed Unknown

Name of Surviving Spouse (If wife, give maiden name): _____

Which best describes the decedents level of education (please check one): 8th grade or less
 9th-12th grade no diploma High School Graduate or GED some college, no degree
 Associate degree Bachelors degree Masters degree Doctorate

Race: White Black/African American American Indian (Tribe:)
 Asian Japanese Korean Filipino Other-Specify _____

Is decedent Hispanic: Yes No

If yes which best describes origin: Spanish/Hispanic Latino Mexican/Mexican American
 Puerto Rican Cuban Other, Specify _____

Primary Occupation: _____ Industry: _____
(Ex. Laborer) (Ex. Construction)

Fathers full name: _____

Mothers full name including maiden name: _____

Place of Disposition (Name of Cemetery/Crematory or Other Place) _____

Section II – All information in this section is about the person making arrangements

Legal Name: _____
(First, Middle, Last, Suffix)

Address: _____
(Street, Apt #, City, State and Zip)

Relationship to deceased: _____ Phone #: (____) _____