

A DIVISION OF GENERATIONS FUNERAL SERVICES & CREMATORIUM INC.

CONTRACT NUMBER:

VITAL STATISTICS

LEGAL LAST NAME:

FULL LEGAL GIVEN NAMES:

KNOWN AS:

GENDER:

DATE OF DEATH:

PLACE OF DEATH:

SOCIAL INSURANCE NUMBER:

DATE OF BIRTH:

AGE:

PLACE OF BIRTH:

LEGAL MARITAL STATUS:

(IF MARRIED, WIDOWED OR DIVORCED)

HUSBANDS FULL LEGAL NAME

TYPE OF BUSINESS:

OCCUPATION:

USUAL RESIDENCE:

(FULL LEGAL NAMES, MAIDEN NAME)

MOTHER:

BIRTHPLACE:

(FULL LEGAL NAMES)

FATHER:

BIRTHPLACE:

RESPONSIBLE NEXT OF KIN

INFORMANT:

COMPLETE ADDRESS:

TELEPHONE / CELL: