

## Funeral Arrangements

Name: \_\_\_\_\_

Social Security No. \_\_\_\_\_ Veteran \_\_\_\_\_ War \_\_\_\_\_ Branch \_\_\_\_\_

Armed Service Serial No: \_\_\_\_\_ VA Discharge Papers: \_\_\_\_\_

Church for your wake and funeral service: \_\_\_\_\_

\_\_\_\_\_

Your choice of funeral director: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Cemetery: \_\_\_\_\_

Do you own a plot? ☐ Yes ☐ No

Homilist for Funeral Mass: \_\_\_\_\_

Homilist for Vigil Mass: \_\_\_\_\_

Next of Kin (relationship, address, and phone): \_\_\_\_\_

\_\_\_\_\_

Who is the Executor of your estate? (address and phone) : \_\_\_\_\_

\_\_\_\_\_

Where are your important papers kept? \_\_\_\_\_

If there is a strongbox or safety deposit box, where is the key kept? \_\_\_\_\_

Do you have a recent photo on file? \_\_\_\_\_

Do you have a copy of your will on file at the Chancery? ☐ Yes ☐ No

Any special requests? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature of Priest: \_\_\_\_\_ Date: \_\_\_\_\_

You may wish to return this sheet in a sealed envelope to be opened at time of death.