

Vital Information Register

| Information Pertaining To The Deceased: Legal Name (First, Middle, Last): | |
|--|--|
| Legal Address (Street, Town, State, Zip): | |
| | Date of Birth: |
| Place of Birth: | SSN#: |
| | □Never Married □Separated Education Level: |
| Name of Spouse (Maiden Name): | |
| Father's Name: | Mother's (Maiden) Name: |
| Occupation: | Industry/Business Type: |
| $ \begin{tabular}{lll} \begin$ | □Air Force □Coast Guard □Marines War Served: |
| PLEASE NOTE: DISCHARGE AND SERVICE PAPERWORK ARE | required for military funeral honors. |
| Next Of Kin Information: Informant: | |
| Legal Address: | |
| | Other Phone Nos.: |
| Relation to Deceased: | E-mail Address: |
| Additional Survivors: Children: | |
| | |
| Brothers & Sisters: | |
| | |
| Grandchildren: | |
| | |
| OTHER NOTES_ | |
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| | |
| | eriden ok Avenue |

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