



# FUNERAL Choices

## CREMATION & BURIAL

Name of Deceased (First, Middle, Last) + Maiden Name if Female

\_\_\_\_\_

Date of Birth \_\_\_\_\_ Birthplace (City and State or Country) \_\_\_\_\_

Social Security# \_\_\_\_\_

Decedent's Residence Address \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Country of Citizenship \_\_\_\_\_ (if immigrated to us how long lived in U.S.) \_\_\_\_\_

Veteran of U.S. Armed Forces  Yes  No Branch \_\_\_\_\_

Race of Decedent (Check one or more)  American Indian/Alaskan Native (specify) \_\_\_\_\_

White  Black or African American  Filipino  Korean  Other Pacific Islander(Specify) \_\_\_\_\_

Asian Indian  Chinese  Samoan  Vietnamese  Other Asian (Specify) \_\_\_\_\_

Native Hawaiian  Guamanian or Chamorro  Japanese  Unknown  Other \_\_\_\_\_

Usual or Last occupation (Do Not List Retired) \_\_\_\_\_

Kind of Industry \_\_\_\_\_

Highest Level of Education(Completed) Elem/Secondary (0-12) # \_\_\_\_\_  H.S. Diploma  GED Years of College# \_\_\_\_\_

Associate Degree  Bachelor's Degree  Master's Degree  Doctorate/Professional  Unknown

Marital Status:  Married  Never Married  Married but Separated  Widowed  Divorced

If married, separated, widowed: Name of Spouse \_\_\_\_\_

Spouse's Maiden Name if Female \_\_\_\_\_

Full Name of Decedent's Father \_\_\_\_\_

Full Name of Decedent's Mother \_\_\_\_\_ Maiden Name \_\_\_\_\_

### Name of Informant

Person providing this Vital Statistical information \_\_\_\_\_

Informant Phone Number \_\_\_\_\_

Relationship to decedent \_\_\_\_\_

Complete Address: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

#### Funeral Choices of Chantilly

14522L Lee Rd  
Chantilly, VA 20151  
(703) 378-6896

#### Old Town Funeral Choices

1205 Belle Haven Rd  
Alexandria, VA 22307  
(703) 465-1800

