



# YOUR MEMORIAL GUIDE | Pacific Cremation Services | FD 2241

22772 Centre Drive, Suite 130, Lake Forest, CA 92630 | Main (949) 382-7782 | Fax (949) 600-8466

## A VITAL STATISTICS

Full Name \_\_\_\_\_  
First Middle Last

Address \_\_\_\_\_

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

Years in County \_\_\_\_\_ Cell Phone (\_\_\_\_\_) \_\_\_\_\_

Home/Other Phone (\_\_\_\_\_) \_\_\_\_\_

Email \_\_\_\_\_

Birthplace \_\_\_\_\_  
City State/Country

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Sex  Male  Female

Social Security Number \_\_\_\_\_

Usual Occupation \_\_\_\_\_ Years \_\_\_\_\_

Type of Business \_\_\_\_\_

Highest Education \_\_\_\_\_ Years \_\_\_\_\_

Ancestry/Race \_\_\_\_\_

Marital Status \_\_\_\_\_

Name of Spouse \_\_\_\_\_  
 Deceased First Last Maiden

Father's Name \_\_\_\_\_  
 Deceased

Father's Birthplace \_\_\_\_\_  
State/Country

Mother's Name \_\_\_\_\_  
 Deceased Maiden

Mother's Birthplace \_\_\_\_\_  
State/Country

## B PLAN SELECTED

- Direct Cremation (no ceremony)
- Cremation with Unattended Scattering at Sea
- Chartered Memorial at Sea

## C DISPOSITION & RECEIPT OF REMAINS

**Disposition of Remains**

Burial at \_\_\_\_\_  
 City & State \_\_\_\_\_

Cemetery Property Owner \_\_\_\_\_  n/a

Scatter at Sea off the coast of \_\_\_\_\_  
 By PCS  By Family

Retain at Residence of \_\_\_\_\_

\_\_\_\_\_

**Receipt of Remains**

Family Member to Pick-up from PCS \_\_\_\_\_

Deliver to  Mail to

Name & Address: \_\_\_\_\_

\_\_\_\_\_

## D SPECIAL INSTRUCTIONS

Newspaper(s) for Obituary Notice \_\_\_\_\_

\_\_\_\_\_

Number Death Certificate(s) ordered \_\_\_\_\_

Other \_\_\_\_\_

\_\_\_\_\_

## E MILITARY RECORD

Branch \_\_\_\_\_ DD-214 Requested  Yes  No

## F PERSONS TO BE RESPONSIBLE

### Next of Kin

1. Full Name \_\_\_\_\_

Relationship \_\_\_\_\_

Address \_\_\_\_\_

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

Telephone \_\_\_\_\_

### Additional Informant

2. Full Name \_\_\_\_\_

Relationship \_\_\_\_\_

Address \_\_\_\_\_

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

Telephone \_\_\_\_\_

### Additional Family Members

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Grandchildren \_\_\_\_\_ Great-Grandchildren \_\_\_\_\_

## G SIGNATURES

Signature \_\_\_\_\_ Date \_\_\_\_\_

Completed by \_\_\_\_\_