



MEMORIAL GUIDE

For final wishes and requests

Revised 12/2023

Dear family and friends,

This booklet is an outline of my final wishes. I have included information about my funeral arrangements, people to notify and financial and legal information which you will need to settle my estate. I have also included personal information I would like you to know.

It is my hope this record will help you in making decisions on my behalf and provide you with some peace of mind.

VITAL STATISTICS

Full Name _____

Address _____

City _____ State _____ County _____

Date of birth _____ Place of birth _____

Occupation (or retired from) _____

Employer _____ Supervisor _____

Employer address/phone _____

Education (schools & degrees) _____

MILITARY SERVICE

Branch of service _____ Years of service _____

Rank _____ MOS or Rating _____

Date/place of enlistment _____

Date/place of discharge _____

Service in war zone (Y/N) War Zone _____

PERSONAL INFORMATION

Name of spouse _____

Date of marriage _____ Place of Marriage _____

How we met _____

Names of my Children _____

Names of my Grandchildren _____

Names of Brothers/Sisters _____

Special Friends _____

Career Highlights _____

Hobbies _____

Lodge or Other Organization Involvement _____

Achievements _____

FAVORITE THINGS

Song _____ Movie _____ Color _____

Book _____ Poem _____

Quotation _____

Activities _____

Memories _____

FAMILY NOTIFICATION

Father's Name _____

Father's Address/Phone _____

Mother's Name _____

Mother's Address/Phone _____

OTHER FAMILY/FRIENDS NOTIFICATION

Name _____ Relationship _____

Address/Phone _____

Name _____ Relationship _____

Address/Phone _____

Name _____ Relationship _____

Address/Phone _____

NOTIFICATION OUTLETS/CONTENTS

Newspapers or publications to be notified _____

Information to include in announcements (check all that apply)

- | | | |
|---|---|--|
| <input type="checkbox"/> Spouse's name | <input type="checkbox"/> Date of Marriage | <input type="checkbox"/> Names of brothers/sisters |
| <input type="checkbox"/> Names of Children | <input type="checkbox"/> Names of Grandchildren | <input type="checkbox"/> Birthdate/Birthplace |
| <input type="checkbox"/> Education Highlights | <input type="checkbox"/> Career Highlights | |
| <input type="checkbox"/> Affiliations/Other | _____ | |

FUNERAL INSTRUCTIONS

Name of mortuary _____

Address/Phone _____

Location of service (Circle choice) Church Funeral Home Private Home

Address/Phone _____

Church denomination _____

Check remains choice Earth Burial Cremation Mausoleum

Eligible for military funeral honors (Y/N) Unit to contact _____

Name/location of cemetery _____ Reserved facilities (Y/N)

Person in charge of final arrangements _____

Relationship _____ Phone _____

Requested Pallbearers

Name _____ Phone _____

Name _____ Phone _____

Name _____ Phone _____

Name _____ Phone _____

Requested Music _____

Requested Readings _____

Burial wardrobe _____ Glasses (on/off) Jewelry (on/off)

In lieu of flowers, donations to following organizations _____

Special requests _____

IMPORTANT DOCUMENT LOCATION

Document	Location
Last Will & Testament	_____
Birth Certificate	_____
Marriage Certificate	_____
Banking information	_____
Stock/Bond Certificates	_____
Mortgage Papers	_____
Pension information	_____

INSURANCE INFORMATION

Type	Company	Policy Information	Location
Life	_____	_____	_____
Medical	_____	_____	_____
Automotive	_____	_____	_____
Other	_____	_____	_____

LEGAL INFORMATION

Attorney's Name _____

Address/Phone _____

Executor's Name _____ Relationship _____

Address/Phone _____

LIFE REVIEW

My Greatest Accomplishment in Life _____

My Greatest Inspiration in Life _____

One Thing I've Learned in Life That I Wish To Pass On To My Family And Friends

I Want My Family To Remember Me For _____
