Decedent's Personal Information:																			
First Name:			Middle Last Name:																
rtuinor				**A court ord	er may be requ		cedent's Name once the Death Certificate has been filed IF THE CORRECTION CHANGES THE PRON												
Date of Death:				Hour:		County:				City:									
	Death (Re Hospital/Fa											Inpat (Y or		ER (Y or			CO se #:		
Sex (M or F):		Race:			C)riain	If "Yes", Specify:						Date of Birth:					Age:	
give Pro	Birth (If bo vince. Oth of the Cou	erwise,	se, give								Citizen of Which Country:						Education (# of Years):		
Social Security #:		-		-		Marital Status (Married, Widowe Divorced, Never Married):	*	REQUI Statu	RED to s AFTE	RDER MAY BE correct Marital ER the Death as been filed**	Spouse (If wit	viving e's Name fe, give EN name):							
Deceder Occupat							Industry:								-				D and will be
Decedent's PHYSICAL Residence:																			
Street & Number:																			
City:								County:						P	State/ Province:		ZIF Cod		
Decedent's Father's First & Last Name (Even if deceased):									Decedent's Mother's First & MAIDEN Name (Even if deceased):										
Is Decedent a Veteran (Y or N)?		F	f "YES", C Provide Dis aperwork (scharge	of a Flag Form.	e picked up at any US Post Office with . McDermott's Funeral & Cremation for Church or Chapel service arrange				vice only Decedent (Over 200 lbs.=				See Approximate Frame informati below				rmation	
								Informa	nt's Ir	nformation:									
Informant's Name: Relationship to Decedent:																			
MAILING Address:	Street/PO Box:								н			•		w					
	City:							Phone Email							F				
	State/ZIP	:							E										
Certifi (Includin	L # of Dec cates Nee g the 1 Pro ierge Pack	ded o <i>vided</i>		Death Certifica to:	_	Informant (X) neral Home(X) Insurance (X)	Oth	er:											
If McDermott's Staff is procuring Death Certificates, we provide them to INFORMANT OR RECEIVING MORTUARY ONLY either by local delivery AT TIME OF DELIVERY OF CREMATED REMAINS, or USPS Priority Mail (\$15) or Express Mail (\$50) for tracking purposes. We DO NOT use regular mail as they are not trackable. We do not provide local delivery if the cremated remains have already been delivered. McDermott's is NOT RESPONSIBLE and will NOT REIMBURSE FOR or REPLACE Certificates that have been lost in the mail.																			
Approximate Time Frame for Cremation Completion (NOT GUARANTEED): WORKING DAYS from Date of FINALIZATION (All necessary signatures received AND Payment finalized) Approx. Date of Completion (NOT GUARANTEED):																			
Decedent's Disposition:																			
Cremation:			Burial:			Remova	Removal/Burial			Removal/Cremation:			D	Anatomical Donation/Cremation:					
Cemeter	y/	McE)ermo	ott's (Crema	atory c	emetery/	_		Las	s Ve	egas			Cemeter		⊐	Nev	ada
Name: Other		her:					ematory City:	Othe	r:						Crematory State/Country:			er:	
"I have reviewed all the information on this form, and it is correct and satisfactory. I understand this form will be used to produce a Death Certificate. I understand information given AFTER the date signed may not be able to be added to the Death Certificate without an Affidavit for Correction. By signing/filling in my name below and emailing/giving this document to McDermott's Funeral & Cremation Service, I accept responsibility for any payment required to correct the Death Certificate due to incorrect information being given. I also acknowledge that the time frame to complete Disposition has been explained to me and agree that the time frame given is NOT A GUARANTEE.																			
Signature:															Dat	e:			