

Cemetery Occupant Information

***Required Information**

***Occupant Name:** _____

***Resident ?:** Yes _____ No _____

Former Address: _____

***Former City:** _____ ***Former State:** _____

Former zip: _____

***Veteran ?:** Yes _____ No _____ ***Service Branch:** _____

Era: _____ (ex. World War I)

***Birth Date:** _____ ***Birth Place:** _____

***Birth State:** _____

***Death Date:** _____ ***Place Of Death:** _____

***Cause Of Death:** _____

***Death Certificate #:** _____

***Burial Date:** _____ **Church/Religion:** _____