

**PERSONAL GUIDE AND INFORMATION SHEET
FOR YOUR FAMILY AND FUNERAL DIRECTOR**

Name _____

Address _____

Next of Kin or Personal Representative _____

Address _____

When the time comes for my life to be remembered, I would like for my body to be cared for by _____ Funeral Home located at _____.

It is my wish to let family and friends gather for a visitation period that is scheduled

- _____ according to my family's wishes
- _____ just prior to funeral ceremony
- _____ for one or two days prior to funeral ceremony
- _____ privately for family and close friends only
- _____ prefer no visitation period at all

It is my wish to be

- _____ buried at _____ Cemetery (Section _____, Lot # _____, Grave _____)
- _____ buried next to my _____ at _____ Cemetery
- _____ cremated and my ashes be buried at _____ Cemetery
- _____ cremated ashes returned to my family or personal representative for further disposition at a later date
- _____ other _____

It is my wish that the expenses for my funeral arrangements

- _____ be paid for, or pre-paid, by my own bank assets
- _____ be paid for by insurance policy issued by _____ Insurance Co. (the named beneficiary of this policy is _____)

It is my wish that the funeral merchandise selected on my behalf be

- _____ similar in value to what was chosen for my _____ (relationship), _____ (name)
- _____ kept to minimum cost
- _____ selected according to the desires of my family or personal representative

It is my wish that expressions of sympathy be

_____ not noted in my obituary notice

_____ given to my family in care of the funeral home for use toward my funeral expenses

_____ directed to _____ charity or charities; or as so desired by my family

For the sake of my obituary notice, the following information is provided

Work History...

Position _____

Company _____

Retired: _____ yes _____ no _____ how many years

Professional and/or religious memberships include

The following is a list of living members of my immediate family (spouse, parents, children, brothers, sisters, etc.) that are to be included in my obituary.

Your Funeral Home will also need your

Date of Birth _____ Place of Birth _____

Social Security # _____

Father's Name _____

Mother's Name _____ Her Maiden Name _____

Veteran's papers (Discharge and DD214) – Branch of Service _____

Ratterman Funeral Homes - Louisville, Kentucky

Dignity, Comfort and Friendship ... As Life Continues