

# Memorial Services of Iowa

*"Defined by our services -  
Directed by those we serve."*



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## Vital Statistics Form for Person Needing Funeral or Cremation Arrangements

First Name	Middle Name	Last Name	Maiden Name
Legal Residence [Street Address]			In City Limits: <input type="checkbox"/> Yes <input type="checkbox"/> No
County	State	Zip	Sex: <input type="checkbox"/> M <input type="checkbox"/> F
Date of Birth	City of Birth	State/Country of Birth	U.S. Citizen: <input type="checkbox"/> Yes <input type="checkbox"/> No
Soc. Sec. #	Education [Years Completed]	Race	Hispanic: <input type="checkbox"/> Yes <input type="checkbox"/> No
Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Never Married	<input type="checkbox"/> Divorced <input type="checkbox"/> Widowed	Veteran: <input type="checkbox"/> Yes <input type="checkbox"/> No [Include copy of discharge papers]	<input type="checkbox"/> Army <input type="checkbox"/> Air Force Branch: <input type="checkbox"/> Navy <input type="checkbox"/> Marines <input type="checkbox"/> Coast Guard
Type of Occupation	Kind of Industry		
Name of Spouse - First	Middle Name	Last Name	Maiden Name
			Check if Deceased <input type="checkbox"/>
Name of Father - First	Middle Name	Last Name	
			Check if Deceased <input type="checkbox"/>
Name of Mother - First	Middle Name	Last Name	Maiden Name
			Check if Deceased <input type="checkbox"/>
Next of Kin - First	Middle Name	Last Name	Relationship
Address	City	State	Zip
Phone:			
Church Membership/Affiliation			

- Additional Information on Back -

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Newspapers to List Obituary

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Additional Notes

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### Persons to contact for information and instructions

Name:	Relation:	Phone:
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Address:	City, State, Zip:	Email:
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Name:	Relation:	Phone:
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Address:	City, State, Zip:	Email:
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Name:	Relation:	Phone:
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Address:	City, State, Zip:	Email:
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\*The information provided must be accurate, as it will be used on legal documents to be filed with various government agencies.\*

### What the funeral home may need from you:

- Copy of Military Discharge Papers (Form DD-214)
- Cemetery Deed or Lot Descriptions
- If viewing is desired, complete set of clothing, including under garments.
- Photos for obituary and service bulletins - these are also helpful to assist technicians with appearances and hairstyle
- Jewelry and glasses