



One North Causeway, New Smyrna Beach, Florida 32169
 2185 North Park Avenue STE 1, Winter Park, Florida 32789
24- Hour Telephone (877) 410 - 2424
 Fax (386)428-8092
 www.baldwincremation.com

Information Worksheet

Please note this information is used to prepare the death certificate, notify Social Security, notify Veterans Administration, obituary creation and other forms required by law. **Please Do Not Abbreviate or use Initials.**

_____/_____
 Full Name (First, Middle, Last, Suffix) Sex

_____/_____/_____
 Date of Birth Social Security Number Birthplace (City, State, Foreign Country)

_____/_____
 Marital Status (Married, Widowed, Divorced, Never Married) Spouse's Name (First, Middle, Maiden)

_____/_____
 Residence Address (Street, City, State, Zip Code, County) Inside City Limits

_____/_____
 Usual Working Occupation (Type of work during working life) Kind of Business / Industry

_____/_____/_____
 Race Of Hispanic Origin (Circle) YES NO If Yes, Specify What Country

_____/_____/_____
 Education Level (Specify highest degree or level of school completed) School or College Degree Obtained

_____/_____/_____/_____
 Military Service Branch War Served Rank Achieved VA Claim or Serial Number

_____/_____
 Father's Name (First, Middle, Last, Suffix) Mother's Name (First, Middle, Last, Suffix)

_____/_____/_____
 Informant's Name Relationship Phone Number

 Informant's Mailing Address

_____/_____/_____
 Moved to Central Florida From Date Moved Religion / Church Affiliation

 List Affiliations with Clubs, Organizations and Civic Groups

