



City of St. George

Cemeteries Statistic Sheet

Name of Mortuary _____

Open/Close Fee _____

Signature _____

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Cemetery/Lot information:

Name of Cemetery: _____

Lot Location: _____ Name of Lot Owner: _____

Decedent Information:

Name of Deceased: _____ Sex: _____

Home Address: _____ Age _____

City, State, Zip: _____

Date of Birth _____ City, State of Birth: _____

Spouse's Name: _____

Date of Death: _____ City, State of Death: _____

Decedent's Parents:

Father: _____ Mother: _____

Next of Kin:

Next of Kin or informant: _____ Phone: _____

Address: _____

Veteran Information:

Branch Served _____ Rank: _____

Conflict Served:

- WWI WWII KOREAN VIETNAM

Mortuary/Burial Information:

Name of Mortuary: _____ Director: _____

Date of Funeral: _____ Place of Funeral: _____

Date of Burial: _____ Time of Burial: _____

Type of Burial: Infant

Full Casket Cremation

Chapel Graveside

Fee Information:

Fees paid by Mortuary :	Fees paid by Family :
<input type="checkbox"/> Lot <input type="checkbox"/> Burial	<input type="checkbox"/> Lot <input type="checkbox"/> Burial