

Funeral and Burial Instructions of

I have completed this document to provide instructions concerning my funeral and burial arrangements and/or requests. I have checked the instructions that apply and have left those that do not apply blank.

I have made funeral and/or burial arrangements with:

Funeral Home: _____

Address: _____

Telephone: _____

Location of my signed agreement: _____

I have not made funeral and/or burial arrangements

I wish to have a funeral, and request that:

The following person(s) make arrangements:

Name: _____

Address: _____

Telephone: _____

The funeral will be held at:

Location: _____

Address: _____

Telephone: _____

The following religious observances will be conducted:

My remains shall be embalmed

There be an open casket

There be a closed casket

A viewing or wake will be held at: _____

The casket should be placed at: _____

The type of casket will be: _____

My burial clothing will be: _____

The following jewelry should be handled as follows: _____

Flowers for my funeral will be: _____

The pallbearers will be: _____

I wish to have a burial, and for the burial request that:

The following person(s) make arrangements:

Name: _____

Address: _____

Telephone: _____

The following religious observances will be conducted:

I will be buried at:

Cemetery: _____

Address: _____

Flowers for my burial will be: _____

I wish to be cremated, and for the cremation I request that:

The following person(s) make arrangements:

Name: _____

Address: _____

Telephone: _____

My cremated remains be:

Placed in a columbarium or mausoleum:

Name: _____

Address: _____

Buried in a cemetery plot:

Name: _____

Address: _____

Retained at the home of:

Name: _____

Address: _____

Telephone: _____

Stored in a house of worship or religious shrine (if local zoning laws allow):

Name: _____

Address: _____

My ashes are scattered (in accordance with local laws)

Location: _____

The religious observances to be conducted will include:

I wish to have a:

- Memorial
- Monument
- Marker

and leave the following instructions:

I wish that the following service(s) take place:

- Funeral Service
- Service at Casket Burial
- Memorial Service
- Service at Disposition of Cremated Remains

and request that:

The following person(s) make arrangements:

Name: _____

Address: _____

Telephone: _____

Service(s) will be conducted by:

Name: _____

Address: _____

Telephone: _____

Flowers for my service(s): _____

Instead of flowers, people donate to the following charities or causes:

The following music be included in the service(s):

The following reading(s) or scripture(s) be included in the service(s):

The following person(s) speak publicly at the service(s):

The following person(s) not speak publicly at the service(s):

To be honored as a veteran by including:

Transportation arrangements to the services will be:

The content, style, length and timing of my service(s) will also include

I would like the following persons to be notified as soon as possible after I pass away:

Name: _____

Address: _____ Telephone: _____

Name: _____

Address: _____ Telephone: _____

Name: _____

Address: _____ Telephone: _____

I have written my obituary, and it may be found at:

I have not written my obituary, but hope that it includes reference to the following:

I would like the following newspapers and organizations to receive notice of upcoming services as soon as possible after I pass away:

Name: _____

Address: _____ Telephone: _____

Name: _____

Address: _____ Telephone: _____

Name: _____

Address: _____ Telephone: _____

Concerning the financial costs of my arrangements:

Arrangements referred to in this document have been prepaid to:

Name: _____

Address: _____

Telephone: _____

To pay for my arrangements, I have set up a joint or pay-on-death account at the following financial institution:

Name: _____

Address: _____

Telephone: _____ Account: _____

Final Instructions

Written instructions concerning donation of my organs and tissues may be found at:

The ethical will I have written that spells out my values and views about life may be found at: _____

My additional wishes or thoughts are:

I direct my chosen agents, family members and/or other responsible persons, to take all steps necessary to carry out the above instructions.

Dated this _____ day of _____, 20____.

Signed: _____

Printed Name: _____