

N.F. Walker of Queens Funeral Home

87-34 80th St., Woodhaven, NY 11421

(718) 296-4343 Fax: (718) 521-0821 Website: WALKERNF.COM

VITAL STATISTICAL INFO NEEDED TO COMPLETE THE DEATH CERTIFICATE

DECEDENT INFORMATION:

- 1) Full Name _____
- 2) Place of death _____ 3) Date of death _____
- 3-A) Decedent's street address _____
- 3-B) City _____ 3-C) State _____ 3-D) Zip code _____
- 4-A) Date of birth _____ 4-B) Age _____
- 4-C) Place of birth (City & state or foreign country) _____
- 5) Social Security# _____
- 6) Father's Name _____
- 7) Mother's Name (include mother's maiden name) _____
- 8-A) Was the decedent of Hispanic or Haitian origin? Yes (complete 8-B) below or No
- 8-B) If "Yes" to questions 8-A, please specify: Haitian Cuban Mexican
 Puerto Rican Other (specify) _____
- 9) Race: African-American/Black Caucasian/White American Indian or Alaska Native
 Asian Native Hawaiian or other Pacific Islander Other _____
- 10) Marital status: Single/Never Married Married/separated Widowed Divorced
- 11) If married, name of surviving spouse (include maiden name) _____
- 12-A) Last occupation (Do NOT enter "retired") _____
- 12-B) Type of business _____
- 12-C) Last employer _____
- 13) Highest Education: 8th grade or less 9-12th (no diploma) high school grad or GED
 Some college credits (no degree) Associates degree Bachelors degree Masters degree
 Doctorate or other professional degree
- 14-A) U.S. Armed Services Service? Yes No 14-B) If "Yes", branch of service _____
- 14-C) If veteran, dates of service _____ 14-D) Rank _____

INFORMANT INFORMATION

- Full Name _____
- Relationship to the decedent _____
- Street address _____
- City _____ State _____ Zip Code _____
- Telephone (include area code) _____