MY PERSONAL FUNERAL ARRANGEMENTS MADE WITH MACKEN FUNERAL HOME

1105 12th Street SE, Rochester, Minnesota 55904 -- 507/282-1075

Name:_____ Age:_____ _____
First Middle Last Social Security No.

Street Address:_____ Telephone #:_____
If rural address, please state county and township

Date of Birth:_____ Place of Birth:_____
If married woman, give maiden name:_____
Married, when, where, and to whom:_____
Other marriages:_____
Does husband or wife survive?_____
Father's name:_____ Birthplace:_____
Mother's maiden name:_____ Birthplace:_____
Do parents survive?_____
If yes, please state names and city/state

Surviving childrens names/city/state:_____
_____
_____
_____
_____
_____

Number of grandchildren:_____ Great grandchildren:_____ Great-great grandchildren:_____
Surviving brothers and sisters names/city/state:_____
_____
_____
_____
_____
_____

Preceded in death by:_____
_____

Former places of residence & dates:_____
_____

Occupation:_____ Where employed:_____
If retired, date:_____
Spouse's occupation:_____
Member of church:_____
Clubs/organizations:_____
Veteran?_____
name of war rank serial # enlistment date discharge date

Memorials to:_____
I wish my funeral to be held at:_____
Clergyman preferred:_____
I wish the following music:_____
Organist:_____Soloist:_____
Cemetery to be buried in:_____
Lot, Section & Space # if available

Casket preferred:_____ Vault preferred:_____
Pallbearers:_____

Personal thoughts (special funeral instructions):_____
_____(use back if needed)