



## *Sweet Home Funeral Chapel*

*W*e are pleased to provide you with a complimentary copy of ***My Personal Transition***.

This planning guide is designed to ease the burden on those who will someday be making final arrangements for you. It will provide them with information about yourself, your preferences for your funeral, and the location of your key documents (such as birth certificate, marriage license, and military records).

If you have ever been called upon to help arrange a service, you are aware of how important it is to have a record of personal information. From that experience you may also know that the information, once recorded, needs to be readily available. Therefore, we encourage you to file a copy of ***My Personal Transition*** with your funeral home.

We have designed this guide so that you can complete it by yourself. However, we regularly receive calls and have people drop by with additional questions about definitions, options, or simply because they want to talk to someone about this subject. We welcome you to do the same. 🌻



## 1. Personal History (please print)

First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

Preferred Name \_\_\_\_\_ Maiden Name \_\_\_\_\_

Social Security No. \_\_\_\_\_ Home Phone \_\_\_\_\_ Alternate Phone \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ County \_\_\_\_\_

Resident Since \_\_\_\_\_ Previous City and State \_\_\_\_\_

Birthdate \_\_\_\_\_ Birth Place \_\_\_\_\_ Sex: Male \_\_\_\_\_ Female \_\_\_\_\_

Nationality/Citizenship \_\_\_\_\_ Highest Education Level Completed \_\_\_\_\_

Marital Status \_\_\_\_\_ Marriage Date \_\_\_\_\_ Location \_\_\_\_\_

Spouse's Name (include Maiden Name) \_\_\_\_\_

Father's Name \_\_\_\_\_ Father's Birthplace \_\_\_\_\_

Mother's Name \_\_\_\_\_ Mother's Birthplace \_\_\_\_\_

Father's Address \_\_\_\_\_

Mother's Address \_\_\_\_\_

If a Veteran, Branch of Service \_\_\_\_\_ Serial No. \_\_\_\_\_

Discharge Rank, Date, and Location \_\_\_\_\_

Memberships (church, unions, etc.) \_\_\_\_\_

## 2. Notify the Following (at once to assist at the time of need)

Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_



### 3. Personal Preferences

Preferred Funeral Home \_\_\_\_\_ Phone \_\_\_\_\_

Church Preference \_\_\_\_\_ Phone \_\_\_\_\_

Officiant \_\_\_\_\_ Phone \_\_\_\_\_

Disposition Preference: Burial  Cremation  Deliver  Family Pick-up  Ship  Hold

Other \_\_\_\_\_

Service to be Held at: Mortuary  Church  Chapel  Graveside

Visitation/Friends Calling: Yes  No  Obituary: Yes  No

Newspaper(s) \_\_\_\_\_ Pallbearers to be Selected by \_\_\_\_\_

Casket \_\_\_\_\_ Vault \_\_\_\_\_

Participating Fraternal, Military, or Service Organization \_\_\_\_\_

Flag (if Veteran): Yes  No  Given to: \_\_\_\_\_

Specific Clothing \_\_\_\_\_

Jewelry \_\_\_\_\_ Glasses \_\_\_\_\_ Flowers (type) \_\_\_\_\_

Favorite Music Selections \_\_\_\_\_

Specific Requests to be Performed at Service \_\_\_\_\_

Favorite Literature or Religious Passage/Verse \_\_\_\_\_

Contributions (Name of Charity) \_\_\_\_\_

Cemetery Property Owned: Yes  No  Cemetery \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Location: Space \_\_\_\_\_ Lot \_\_\_\_\_ Vault \_\_\_\_\_ Marker \_\_\_\_\_

Cremation: Niche  Urn  Urn Vault

Additional Requests: \_\_\_\_\_

The preceding information represents my personal preferences for the purpose of assisting my family in making funeral and burial/cremation arrangements at the time of need. I understand that a prearrangement contract between myself and the funeral home (in which the funeral home agrees to provide specific services and merchandise selected and paid for by me) may exist, but I wish to clearly advise my family that this form does not constitute such a contract. As of this date, I would prefer that my family work with (Funeral Home) \_\_\_\_\_ and honor the requests set out above.

Signature \_\_\_\_\_ Date \_\_\_\_\_



## 4. Estate & Financial Information (optional)

Do you have a will? Yes  No  Living Will: Yes  No  Trust: Yes  No

Location \_\_\_\_\_

Attorney or Power of Attorney \_\_\_\_\_ Phone \_\_\_\_\_

Name and Location of Your Bank \_\_\_\_\_

Safe Deposit Box: Yes  No

Location of Birth Certificate \_\_\_\_\_

Location of Marriage License \_\_\_\_\_

Health Insurance Company \_\_\_\_\_ Policy Number \_\_\_\_\_

Life Insurance Company \_\_\_\_\_ Policy Number \_\_\_\_\_

Location of Military Records (DD214) \_\_\_\_\_

Location of Other Records, Deeds, Titles, etc. \_\_\_\_\_

## Final Thoughts

We hope you have found this planning guide helpful. By completing it, your services will be more thoughtful because loved ones will not have to make particularly difficult decisions at an intensely painful time. They will be more memorable because you will have chosen favorite songs and guiding thoughts—in some cases from childhood—of which your loved ones may not be aware. They may be less expensive because there is usually less emotional spending when preferences are expressed in advance. And—if you have filed a copy with us where it is immediately available—your services will be less stressful because family members can spend time supporting one another rather than searching for key documents.

We have these hopes for you:

First, we know from working with families over the years that the most difficult part of preplanning is getting started. We hope, therefore, this planning guide will make getting started easier.

Second, we know the best way to complete an unpleasant task is to do it quickly. We encourage you to set a time frame—two weeks, two months, whatever you want—and pledge it to yourself to have it done by then.

Third, we hope you find this to be a pleasant rather than unpleasant task. We hope you find wonderful old memories of loved ones and friends in old records and photos, and that those memories from yesterday will enrich your life today.

Finally, if we can provide information on the following or other items, we hope you will let us be of service.

- How to estimate Social Security or Veterans benefits.
- How prepaid funeral costs may receive favorable treatment for Medicaid qualification.

**SWEET HOME**  
FUNERAL CHAPEL

1443 Long Street • Sweet Home, OR  
(541) 367-2891

[SweetHomeFuneral.com](http://SweetHomeFuneral.com)