McClure-Schafer-Lankford Funeral Home

314 Fourth Street • Marietta, Ohio 45750 • 740-373-9232

	Biogra	aphical	Information			
Legal Name						
Nick Name(s)			Social Security Number			
Street Address						
City	State Zip		Zip			
Sex: Male Female Race/Nat	Race/Nationality				US Citi	zen
Date of Birth	Birth			Yes	No	
Father Name						
Mothers Name (Use Maiden Name)						
High School		Year Graduated or Highest Grade Completed				
Additional Education - List Places Attended / Degr	ress / Honors	and Year Co	mpleted			
Marital Status		Spouse				
Date of Marriage		Maiden Name of Wife if Applicable				
Place of Marriage		If Widowed Give Date				
Other Marriage Information			•			
Place of Employment				Retired _	No	Yes
Usual Occupation				Year Retii	red	
Kind of Business			Number of Years Employed			
Previous Work History						

Veterian _	No _	Yes	Branch of Service	
Date of En	try into	Service		Date of Discharge from Service
Honors / C	ommen	dations		•
Membersh	ips & Ho	obbies		
				Family
			Survivors - Give Name (sp	ouse) & place of Residence & Relationship
			_	
		,		
			Prec	eded in Death
			_	

Final Arrangements
Type of Service
Traditional Funeral Mass of Christian Burial Graveside Service Memorial Service None
Place of Service
Clergy
Music Selections
Organist Soloist/Singers
Special Instructions
Place of Visitation
Special Services Military Rites Masonic Eastern Star Elks Eagels Moose
Other
Final Disposition
Burial Entombment Cremation Private Family Medical School Donation
Name of Cemetery
Location of Cemetery (City & State)
Grave Location - Section Lot Grave Number
Memorial Contributions
in Lieu of Flowers In Addition to Flowers
Special Notes