

Garden City Funeral Home

Informational Worksheet for the Montana Death Certificate

1. Decedent's Name (First, middle, last) _____.
2. Sex : Female Male
3. Actual or presumed date of death: _____
Month Day Year
4. Decedent's Social Security Number: _____ - _____ - _____
5. Hour of Death: _____ A.M. / P.M. / Military
6. Decedent's date of birth: _____
Month Day Year
7. Decedent's Age: _____
8. Place of death: Hospital (if yes) inpatient or ER/Outpatient
 Nursing home/Long term care Residence
 Other (please specify) _____
9. Facility Name (if not institution, give address) _____
_____, _____, _____ City limits _____
City State Zip code yes/no
10. Decedent's Marital Status: Single (Never married) Married Widowed
 Divorced Unknown
11. Surviving Spouses Name (Maiden) _____
12. Decedent's Birth Place: _____, _____
City State
13. Decedent's Occupation (Work done for most of life) _____
14. Business/Industry _____
15. Was Decedent ever in U.S. Armed Forces: Yes No (If Yes) Branch _____
16. Decedent's Usual Address: _____, _____, _____
City State Zip Code
17. Decedent's Highest level of education: 8th grade or less 9th-12th no diploma
 High school grad or GED Associate Degree Bachelor Degree Master Degree
 Doctorate

Death Certificate worksheet continued:

18. Decedent's Father's name: _____

19. Decedent's Mother's name (Maiden): _____

20. Is decedent of Hispanic Origin Yes No

(if yes, check box that best describes the decedent's Spanish/Hispanic/Latino origin)

Mexican/Mexican American/Chicano Cuban

21. If other than Hispanic/Spanish/Latino decent please indicate what decedent considers him/herself:

White African American/Black Chinese Japanese Native Hawaiian

Asian Indian Filipino Korean Samoan Vietnamese

Native American Specify Tribe _____

If other than any of the above please specify _____

22. Informant/Next of Kin Name: _____

23. Relationship: _____

24. Informant/Next of Kin address: _____

25. Informant/Next of Kin Phone: (H) _____ (Cell) _____

26. Please list any other pertinent information below (i.e. Decedent will be sent out of state for burial):

Please fill out worksheet to the best of you knowledge and bring with you at time of arrangement