

Family Check List

REMOVAL

- _____ 1. Pick up clothing
- _____ 2. Pick up picture
- _____ 3. Other _____

FUNERAL HOME

- _____ 1. Death certificate info: (Birth cert., SS card, VA and Insurance, etc.)
- _____ 2. Obituary Info: (List of survivors, their spouses and children, clubs, organizations, employment, special interests and hobbies)
- _____ 3. Out of State papers _____
- _____ 4. In lieu of flowers (Donations to _____)
- _____ 5. Provide clothing (All normal clothing, underclothes, shoes, etc.)
- _____ 6. Valuables: Please bring all valuables in at time of viewing
- _____ 7. Sign necessary authorization forms (removal, embalming, cremation, etc.)
- _____ 8. Visitation: Place _____ Times _____ # of Days _____
- _____ 9. Funeral Service: Place _____ Time _____
- _____ 10. Minister _____ Phone _____
 _____ Family to contact _____ Funeral Director to contact _____
- _____ 11. Music: Visitation – FH. _____ Background Music _____ Family Provided
 _____ Funeral Home to provide _____ Service: Tape/Vocalist
- _____ 12. Honorarium: Bring to Visitation
- _____ 13. Pallbearers: Staff or Family
- _____ 14. Cemetery: _____ (grounds/mausoleum)

CREMATION

- ___ 1. Authorizations
- ___ 2. ID. Viewing-immediate family Only 15 minutes ___ Y ___ N
- ___ 3. Type of Casket _____
- ___ 4. Type of Urn _____
- ___ Type of Casket _____ Type of Urn _____ Disposition of ashes _____

TRANSPORT OUT OF STATE

- ___ 1. Out of State Funeral Home: Name: _____
 Address: _____
 Ph: _____
 Fx: _____
- ___ 2. Other _____

A FAMILY OWNED SERVICE COMPANY
WHERE YOUR FAMILY'S SATISFACTION COMES FIRST

MERCHANDISE

- Register Book
- Prayer Cards: # _____
- Card/# _____ Prayer Amt. _____
- Memorials: Prayer/Photo # _____ Amt. _____
- Thank You Cards _____ Amt. _____
- Casket _____
- Vault _____
- Flowers _____
- Florist _____
- Monument _____
- Flag
- Gloves
- Crucifix
- Rosary
- Other

RESIDENCE

- Coffee Maker Door Wreath
- Coffee Cups Guest Book
- Coffee Greeter
- Ice Chairs Other _____

VISITATION DAY

(Family to arrive 1 hour prior to Guests)

- 1. Set up Chapel or Parlor
- 2. Flowers
- 3. Displays (Pictures, etc.)
- 4. Memorials
- 5. Service Time _____
- 6. Flag draped or folded
- 7. Review service with Family

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DAY OF SERVICE

- 1. Time of Pick-up _____
- 2. Place of Pick-up _____
- 3. Time to meet at Church or Chapel _____
- 4. Family to gather in Chapel or Private Room Y N
- 5. Family to meet with Minister for prayer Y N
- 6. Pallbearers to sit together or with family
- 7. Casket opened or closed
- 8. Family to remain in Chapel for closing of casket _____ Y _____ N
- 9. Make announcement at Chapel or cemetery or both
- 10. Family to exit Chapel first or last _____
- 11. Who receives:
Crucifix _____
Flag _____
Pouch _____
- 12. Will family stay for lowering of casket Y N
- 13. Family pouch given at cemetery _____ or delivered _____
- 14. Disposition of Flowers
- 15. Family gathering after service: Place: _____

HONORARIUMS

List of Donations to be made to (not service charges):

PRIEST - Wake - \$35 to \$75 _____

Funeral Mass - **\$85** to \$100 _____

Committal - \$35 to \$100 _____

MINISTER - Church - \$75 to \$100 _____

Committal - \$35 to \$100 _____

RABBI -\$250to \$450 _____

ORGANIST - \$35 to \$50 _____

VOCALIST - \$35 to \$50 _____

SERVER (Catholic) \$35 to \$50 _____

DEPUTY ESCORT -\$65 TO \$100 _____

HONOR GUARD - \$75 to \$100 _____

HAIR DRESSER - \$50 to \$75 _____

Other _____

Other _____

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