

# **Guidance at the Time of Death**

Name:			

Date:

# Table of Contents

Introduction	1
Decisions regarding a funeral or memorial service	2
Decisions regarding the disposition of my body	10
Memorial Contributions	12
Signatures & Witnesses	12
Other helpful information for funeral or memorial service	13
Arrangement for care of my children	13
Autobiographical information to help with notification, obituary, memorial	14
Information for obituary and memorial	17
Information for survivors	18
Important contacts	19
Financial information	20
Notifications	24

#### Introduction

This booklet is intended to help you think about and plan for the event of your death. Most of us are uncomfortable thinking of death, much less planning for it, but making some decisions now can ease the transition for those you love and leave behind. Providing a record of your wishes can help your family and friends feel they have said a last good-bye in a way that would please you. And leaving a record of your last wishes can help assure that people know how you would like to be remembered and honored.

If you wish, the Meeting office will keep a record of your wishes regarding the disposition of your body and the kind of funeral or memorial you desire. But you may also keep this booklet (or copies) to give to your spouse, your partner, your children, your executor, or anyone else you wish.

This booklet also gathers information which will be helpful in preparing your obituary and memorial. And it contains a section in which you can record the financial and material information which will be needed to settle your estate. We will keep a copy of this financial information in the office, if you feel that it will be helpful to your family that we do so. (If you would like us to keep a copy, we would prefer that you give it to us in a sealed envelope.) In most cases, though, it would be more helpful for you to leave this information with those who will be in charge of administering your financial affairs and settling your estate.

# Decisions regarding the disposition of my body, and a funeral or memorial service

Immediately after your death, your survivors will have a number of decisions to make regarding the disposition of your body. Would you like to be buried, cremated, or donate your body? If you would like to be buried, do you also want to be embalmed? (Most states do not require that a body be embalmed, and no states require that a body be embalmed in the first 24 hours after death.) Would you like people to have a chance to see your body before its final disposition? If so, do you want to restrict viewing to only close family and friends, or would you like a public viewing?

In addition to questions about the disposition of the body, your survivors will have questions about how to recognize your passing and honor your life. A brief description of some terms and practices may be useful here:

A worship service with the body present is referred to as a funeral service. A worship service where the body is not present is a memorial service. Burial, cremation, and inurnment (in which an urn containing your ashes is buried at a grave site or is placed in a columbarium) may take place after a funeral and/or visitation.

Practice among Friends varies widely, but most Friends choose a memorial service rather than a funeral. Some Friends choose immediate burial, in which the body is buried as quickly as possible, without embalming. Others choose a memorial service, but with a viewing at a funeral home prior to the service.

A Friends memorial service may be programmed or unprogrammed. In a programmed service, the pastor or other officiant will lead attenders in hymns and readings, deliver a eulogy, and perhaps a sermon as well. Most often there is also a time of open worship, in which those gathered have a time to speak of their own memories of you, or to speak of how our death will affect their lives. In an unprogrammed memorial service, someone explains what will happen, and the entire time is given to open worship in which all those gathered have the opportunity to speak.

Those who survive will have to decide what kind of service to have, and the time frame within which to hold the service. Should it be within a day or two of your death, or should they give people more time to travel? A funeral often must happen within a week or so, but a memorial service may follow your death by weeks.

As you think of your preferences in these matters, think also of those who will be charged with carrying them out. Your memorial or funeral may represent your last wishes, but it also serves the living. The questions that follow are intended as a starting place to help you think through your wishes regarding the disposition of your body and the service(s) which acknowledge and celebrate your death and life. There are many options, and these questions are intended as a starting place for your thinking. If there are club or organizational traditions which you would like to have included in your observance, please mention them. There is also a page included for any additional instructions.

#### My desires regarding a memorial service, funeral, or other recognition of my death

I prefer

A. A conventional funeral arranged by a funeral director.

(Please continue on page 5, then page 10.)

- B. A programmed Friends memorial service, or a funeral with time for open worship.(Please continue on page 4, then page 10.)
- C. An unprogrammed Friends memorial service.

(Please continue on page 7, then page 10.)

D. A Friends memorial service with private service earlier.

(Please continue on page 8, then page 10.)

E. Some other arrangement.

(Please continue on page 9, then page 10.)

#### A) Conventional funeral arranged by a funeral director

1. My preference for funeral director or funeral home:

Name:

Address:

\_\_\_\_\_ I have already made arrangements with the above.

\_\_\_\_\_ Someone will have to make arrangements with the above.

2. Place that you wish funeral to be held:

3. Person whom you would like to conduct the funeral:

4. Person whom you would like to deliver a eulogy:

\_\_\_\_\_ I have already asked him/her to deliver the eulogy.

\_\_\_\_\_ I have not asked him/her to deliver the eulogy.

- 5. If you desire a sermon, as well, person whom you would like to deliver the sermon:
- 6. Special preferences for music or readings:
- 7. Preferences for pallbearers (usually there are six):

#### B) A programmed Friends memorial service, or a funeral with time for open worship

1. My preference for funeral director or funeral home:

Name:

Address:

\_\_\_\_\_ I have already made arrangements with above.

\_\_\_\_\_ Someone will have to make arrangements with above.

2. Place that you wish funeral or memorial service to be held:

3. Person whom you would like to conduct the funeral or memorial service:

4. Person whom you would like to deliver a eulogy:

\_\_\_\_\_ I have already asked him/her to deliver the eulogy.

\_\_\_\_\_ I have not asked him/her to deliver the eulogy.

5. If you desire a sermon as well, person whom you would like to deliver the sermon:

- 6. Special preferences for music or readings:
- 7. Preferences for pallbearers (usually there are six):

#### C) An unprogrammed Friends memorial service

- 1. The disposition of my body will be arranged by:
- 2. I would like the memorial service to be held at this place:

within what amount of time from your death?

- D) A Friends memorial service with private service earlier
- 1. The disposition of my body will be arranged by:
- I would like the memorial service to be held at this place:
  within what amount of time from your death?
- 3. I would like the private service to be held at this place: within what amount of time from your death?
- 4. I would like these people to be included in the private service:
- 5. I would like this person to conduct the private service:
- 6. I \_\_\_\_\_would \_\_\_\_\_would not like a eulogy delivered at the private service.
  - I would like\_\_\_\_\_\_to deliver the eulogy.

\_\_\_\_\_ I have already asked him/her to deliver the eulogy.

\_\_\_\_\_ I have not asked him/her to deliver the eulogy.

- I \_\_\_\_\_ would \_\_\_\_\_ would not like a sermon delivered at the private service.
  I would like \_\_\_\_\_\_ to deliver the sermon.
- 8. Special preferences for music or readings at the private service:

E) This is how I would like my death recognized and life commemorated:

#### F) Additional Instructions

## **Decisions regarding the disposition of my body** (check all that apply):

- I prefer that my body be disposed of in the simplest manner possible.
- I prefer that my body not be embalmed except as specifically required by law.
- I prefer any service prior to cremation or burial to be private.
- I prefer that my body not be displayed at a public funeral or visitation.
- I prefer an open casket at a public funeral or visitation.
- I would like immediate burial, before any viewing of the body.
- I would like immediate burial, after private viewing of the body immediately after death.
- I would like immediate cremation.
- I would like cremation after a viewing of the body.

This is what I would like for the disposition of my cremated remains:

- I would like my memorial or funeral to follow closely upon my death.
- I would like my memorial, or funeral to take place some time after my death so that distant family and friends may arrange to attend.

- I would like my body or remains to be buried.
  - I have already made arrangements with a cemetery.

Name & address of cemetery:

Plot number: \_\_\_\_\_

Deed to my cemetery plot can be found (where?):

— I have not made arrangements with a cemetery.

I \_\_\_\_\_ would \_\_\_\_\_would not like a grave marker.

If yes, I would like the inscription to read:

I have given or bequeathed my whole body to this organization:
 Name, address, and telephone number of contact person:

Donation authorization card can be found (where?):

I have given or bequeathed my eyes to this organization:
 Name, address, and telephone number of contact person:

Donation authorization card can be found (where?):

Other gifts or bequeathals of a similar nature:

# Memorial contributions

I \_\_\_\_\_ would \_\_\_\_\_ would not like flowers,

\_\_\_\_ Memorial gifts may be made to these organizations:

## Signatures & Witnesses

Dated	Signed						
I/We, the undersigned next of kin to							
do hereby consent to the arrangements as specified above, in the event of his/her death.							
Dated	Signed						
Witness:		Date:					
Witness:		Date:					

## Other helpful information for funeral or memorial service

Mortuary bills will be assumed by:

Burial insurance? \_\_\_\_Yes \_\_\_\_No

If Yes, give company name and address and policy Number

My estate? \_\_\_\_Yes \_\_\_\_No

If yes, person to contact

If death occurs outside the State of my residence, my wishes for the disposition of my body:

## Arrangement for care of my children

Provision is made in my will \_\_\_\_\_Yes \_\_\_\_No

Requests: (this is not legally binding):

In event of death away from home

Copies of this statement with:

1. Cincinnati Friends Meeting

2.

3.

## Autobiographical information to help with notification, obituary, memorial

Note: Items with \* are (naturally) to be filled in by survivor. Items with # are required for completing the death certificate.

#Full legal name:

Address:

Telephone:

Spouse:

Additional information on contacting spouse (work phone number, cell phone number, etc.)

Next of kin other than spouse:

Also please notify (please provide name, contact information, relationship):

\*Date of death

\*Where died

#Date of Birth

#Birthplace

#Mother's maiden name:

Mother's hometown:

Surviving? \_\_\_\_Yes \_\_\_\_No

Address if living:

Father's name:

Father's hometown:

Surviving? Yes No

Address if living:

Sisters' and brother's names, addresses and phone numbers, surviving or deceased:

Children's names, addresses and phone numbers, surviving or deceased:

Other survivors

## Information for obituary and memorial

I would like \_\_\_\_\_\_to write my obituary.

Career(s)

Religious affiliation

Education

Special achievements/recognitions

Military service (include dates)

Other affiliations

Office(s) held

#### **Information for survivors**

Experience has shown that most or all of the following information in this section will be needed by survivors within 24-48 hours after a person's death. This form should be filled in to assist survivors who are designated to handle all necessary legal, social, and personal details. Once filled in, this form should be updated (with date notations) as often as necessary.

After the work is completed, a close friend or relative should be told where this document is located. It is a guide to let survivors know where everything of importance can be found.

Date:

Social Security number:

Location of:

Will

Trust documents

Safe deposit box

#### Location

Box number

List of contents is in

Key(s) are in

Bank books/check books

Birth certificate

Marriage certificate

Veteran's papers

Other valuable, pertinent papers

#### **Important contacts**

List names, addresses, and telephone numbers for the next items:

My primary physician(s)

Personal representative (Executor) Attorney(s)

Trust officer(s)

Banker(s)

Other

## **Financial information**

(We will keep this information in the office if you would like, but it is intended for the use of your family and heirs. Feel free to detach this section and store it with other important papers. If you would like us to keep it in the office, please enclose it within a sealed envelope.)

Insurance policies (including the company name, policy number, agent, and telephone)

Home

Life

Car(s)

Medical

Health

Other

(State where all or each of these policy papers are located.)

Bank accounts (including name and address of institution and account number)

Checking

Savings

Others

Investments (including name of company, account number, name of broker/agent, and phone)

Retirement plans (including holding organization, address, and account number)

401K

IRA

KEOGH

Other

Retirement plan papers are located in

Social Security papers are located in

Other

## Credit Cards (including card number and issuing agency)

VISA

Master Card

Other

## Financial services (including name and telephone number)

**Financial Advisor** 

Tax Preparer

Accountant

Current and past tax records are located in

Property owned (including address and mortgage holder, if any)

Home

Other

Location of property deeds/titles, etc.

I live \_\_\_\_\_ do not live \_\_\_\_\_ in a rented/leased home

The address is

The landlord's name and address is

Automobiles (including make/model, year, registration no., and name of co-owner, if any)

Ownership/registration papers for automobiles are located in

Military service records (for claiming Veterans' benefits):

Branch

Military I.D. No.

Served from to

Electronic Bank Transfers (including name and address)

Direct Bank Deposit(s)

Automatic Bank Payments)

#### Services to terminate (with service ID number) Telephone

Electric

Water/sewer

Gas

Cable TV

Post Office

#### <u>Subscriptions and memberships to cancel</u> (with name and address of publication)

Newspapers

Magazines

Digital

#### <u>Other</u>

I have \_\_\_\_\_ have not \_\_\_\_\_ hidden some valuables in my house, or elsewhere.

The following person\* knows about them and should be contacted to retrieve them.

(\*Be sure to let this person know to whom these items should be given, if they are designated.)

The following personal possessions should be given to the following people (list the item, its location, and the name and address of recipient).

## **Notifications**

The following friends, relatives, and organizations should be notified within a week or so of my death (give names and addresses). My personal address book for others to be notified can be found in

Name and address of school, college, or club