

Cook Family Funeral Home

Information Worksheet for Washington State Certificate of Death

1. Legal Name (Include AKA's if any) First Middle Last Suffix					2. Date of. Death
3. Sex (M/F)	4a. Age – Last Birthday	4b. Under 1 Year Months Days	4c. Under 1 Day Hours Minutes	5. Social Security Number	6. County of Death
7. Birthdate		8a. Birthplace (City, Town, or County)	8b. (State or Foreign Country)	9. Decedent's Education	
10. Was Decedent of Hispanic Origin? (Yes or No) If yes, specify.			11. Decedent's Race(s)	12. Was Decedent ever in U.S. Armed Forces?	
13a. Residence: Number and Street (e.g., 624 SE 5 th St.) (Include Apt. No.)				13b. City or Town	
13c. Residence: County	13d. Tribal Reservation Name (if applicable)	13e. State or Foreign Country	13f. Zip Code + 4	13g. Inside City Limits? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk	
14. Estimated length of time at residence.	15. Marital Status at Time of Death Married, Never Married, Divorced, Widowed	16. Surviving Spouse's Name (Give name prior to first marriage)			
17. Usual Occupation (Indicate type of work done during most of working life. (DO NOT USE RETIRED).)			18. Kind of Business/Industry (Do not use Company Name)		
19. Father's Name (First, Middle, Last, Suffix)			20. Mother's Name Before First Marriage (First, Middle, Last)		
21. Informant's Name			Informant's Relationship to Deceased		
23. Informant's Mailing Address				Informant's Phone Number	
49. Name and Address of Physician				Physician Phone Number	
Informant's Signature (I declare the foregoing is true to the best of my knowledge)					
Date:					
To be completed by Funeral Director					
24. Place of Death, if Death Occurred in a Hospital:			Place of Death, if Death Occurred Somewhere Other than a Hospital:		
25. Facility Name (If not a facility, give number & street)		26a. City, Town, or Location of Death		26b. State	27. Zip Code
28. Method of Disposition	29. Place of Disposition (Name of cemetery, crematory, other place)		30. Location-City/Town, and State		
31. Name and Complete Address of Funeral Facility COOK FAMILY FUNERAL HOME 163 Wyatt Way N.E. Bainbridge Island WA 98110				32. Date of Disposition	
50. Hour of Death	36. Autopsy? <input type="checkbox"/> YES <input type="checkbox"/> NO	56. Referred to Medical Examiner? <input type="checkbox"/> YES <input type="checkbox"/> NO	55. ME/Coroner file number		

NOTES: