

CHEROKEE MEMORIAL PARK & FUNERAL HOME



FD 1657 & 1672

There is quite a bit of vital information that is required for the California Death Certificate.

You may fill in the fields directly on this page and print or print the form blank and write in the information by hand.

Select "File" above to print an information sheet.

This will make the information gathering process easier on you and your loved ones.

1. NAME OF DECEDENT --- FIRST (Given)		2. MIDDLE		3. LAST		
4. ALSO KNOWN AS --- Include full AKA --- (FIRST, MIDDLE, LAST)				5. DATE OF BIRTH mm/dd/yyyy	6. AGE Yrs	7. SEX
8. BIRTH STATE/FOREIGN COUNTRY		9. SOCIAL SECURITY NUMBER	10. EVER IN U.S. ARMED FORCES? YES NO UNKNOWN		11. MARITAL STATUS (At Time of death)	
12. EDUCATION (Highest level/degree)		13/14. WAS DECEDENT SPANISH/HISPANIC/LATINO? YES NO		15. DECEDENT'S RACE		
16. USUAL OCCUPATION (Type of work for most of life. DO NOT USE RETIRED)			17. KIND OF BUSINESS OR INDUSTRY (e.g., grocery store, construction, etc.)		18. YEARS IN OCCUPATION	
19. DECEDENT'S RESIDENCE (Street and number or location)						
20. CITY		21. COUNTY/PROVINCE	22. ZIP/POSTAL CODE	23. YEARS IN COUNTRY	24. STATE/FOREIGN COUNTRY	
25. INFORMANT'S NAME, RELATIONSHIP			26. INFORMANT'S MAILING ADDRESS (Street and number or rural route number, city or town, state, ZIP)			
27. NAME OF SURVIVING SPOUSE --- FIRST		28. MIDDLE		29. LAST (Maiden name, if applicable)		
30. NAME OF FATHER --- FIRST		31. MIDDLE		32. LAST	33. BIRTH STATE	
34. NAME OF MOTHER --- FIRST		35. MIDDLE		36. LAST (Maiden name)	37. BIRTH STATE	