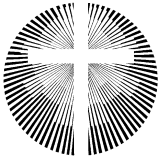


# LIFE INVENTORY



THE UNITED  
CHURCHES

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[www.theunitedchurches.org](http://www.theunitedchurches.org)

What happens when we die? Our Christian faith assures us that death leads to eternal life. Meanwhile, family members, friends and the pastors are sometimes in need of certain information that, if available, could help them deal more sensitively with the loss of a loved one. Therefore I submit the following information. (11/08)

Today's Date \_\_\_\_\_

Name \_\_\_\_\_  
First Middle Maiden Last

Birth Date \_\_\_\_\_ Place of Birth \_\_\_\_\_

Marital/Partner Status: \_\_\_\_\_ Single \_\_\_\_\_ Divorced \_\_\_\_\_ Married/Partnered \_\_\_\_\_ Widowed

Current Address \_\_\_\_\_  
Street Address City, State Zip

Current Phone \_\_\_\_\_; Cell Phone \_\_\_\_\_

Length of Residence at this Address \_\_\_\_\_; E-mail Address \_\_\_\_\_

Spouse's/Partner's Name \_\_\_\_\_  
First Middle Maiden Last

Marriage/Union Date \_\_\_\_\_ Place \_\_\_\_\_  
City County State/Country

Veteran? \_\_\_\_\_ Branch and Rank \_\_\_\_\_  
Years Served \_\_\_\_\_  
Date of Entry \_\_\_\_\_ Date Discharged \_\_\_\_\_

Father's Name \_\_\_\_\_ His Birth Place \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_

Mother's Maiden Name \_\_\_\_\_ Her Birth Place \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_

Next of Kin other than Spouse/Partner (Children, Brothers, Sisters, etc.):

Name	Address/Phone
_____	_____
_____	_____
_____	_____
_____	_____

In Emergency or Death, please notify the following:

Relation	Name	Address/Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____

Attorney's Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_

Name of Durable Power of Attorney: \_\_\_\_\_

Location of Will \_\_\_\_\_

Location of Health Care Directive & Durable Power for Health Care \_\_\_\_\_

**Executor of Will** \_\_\_\_\_

**Community Property Agreement:** \_\_\_\_\_ Yes \_\_\_\_\_ No Location \_\_\_\_\_

**Location of the following:**

**Insurance Policies** \_\_\_\_\_

**Other Valuable Papers** \_\_\_\_\_

**Location of Safety Deposit Box Key** \_\_\_\_\_ **Location of Box** \_\_\_\_\_

**Other Pertinent Information** \_\_\_\_\_

**Memorial or Funeral Service:**

If possible, I would prefer: (check all that apply)

\_\_\_\_\_ Funeral (body present) \_\_\_\_\_ Memorial Service (body not present)

\_\_\_\_\_ Immediate Cremation (with no viewing) \_\_\_\_\_ Cremation after Funeral

Organ Donor: \_\_\_\_\_ Yes \_\_\_\_\_ No

I prefer Services to be held at: (note all that apply)

Church Name \_\_\_\_\_ Location \_\_\_\_\_

Funeral Home \_\_\_\_\_ Location \_\_\_\_\_

Graveside Service \_\_\_\_\_ Location \_\_\_\_\_

Favorite Hymn(s) \_\_\_\_\_

Special Music (solo; instrumental) \_\_\_\_\_

Scripture Verses that have given particular strength and comfort in life, or favorite ones: \_\_\_\_\_

Other Readings: \_\_\_\_\_

The most important accomplishments in my life have been:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Memorial Gifts** – Should anyone care to designate a gift in my memory, I would prefer that it be used as a living memorial by the (Examples: church, heart fund, cancer fund, etc.): \_\_\_\_\_

\_\_\_\_\_ I have made \_\_\_\_\_ I have not made \_\_\_\_\_ I want to make  
a specific bequest to The United Churches of Olympia in my Will.

**Other Information** which might be helpful for use in an obituary, planning of the service, or to summarize what has given meaning or purpose to my life:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**My Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**COPIES FOR:** \_\_\_\_\_ The United Churches of Olympia, given to \_\_\_\_\_

Date \_\_\_\_\_

\_\_\_\_\_ Funeral Director \_\_\_\_\_

Date \_\_\_\_\_

\_\_\_\_\_ Family Member or Friend \_\_\_\_\_

Date \_\_\_\_\_

\_\_\_\_\_ Attorney \_\_\_\_\_

Date \_\_\_\_\_

Sometime I would like to discuss the above with my Pastor. \_\_\_\_\_ Yes, please. \_\_\_\_\_ No, thanks.