Peter Elberg FUNERALS
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DECEASED & NEXT OF KIN DETAILS

DECEASED DETAILS

Title: ____ Name: _____Gender:_____

Address: _____Post Code: _____

Date of Death: _____ Date of Birth: _____Aged:_____

Place of Birth & Address: _____

Place of Death & Address: _____

Religion_____

Occupation _____

Period of Residence in Australia _____

Marital Status: _____

Date of Marriage/Age_____

Name of Spouse _____

Date of Marriage/Age_____

Name of Spouse _____

Surname of Children	First Name	Date of Birth	F/M
		____:____:____	
		____:____:____	
		____:____:____	
		____:____:____	
		____:____:____	
		____:____:____	
		____:____:____	
		____:____:____	
		____:____:____	

Father's Surname: _____

Given Names: _____ Occupation _____

Mother's (Maiden) Surname: _____

Given Names: _____ Occupation_____

NEXT OF KIN DETAILS

Name: _____ Phone: _____

Address: _____Post Code: _____

Relationship: _____