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# PEEPLES

LICENSED FUNERAL DIRECTORS:

J. Robert Peebles, Jr.

Jill E. Peebles

Thomas L. Johnston

## *Statistical Information Sheet*

### *Personal Information –*

Name (First, Middle, Last & Suffix) \_\_\_\_\_ Check One: Male Female  
Address \_\_\_\_\_ Inside City Limits: Yes No  
City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Telephone No. \_\_\_\_\_  
Date of Birth: \_\_\_/\_\_\_/\_\_\_ Place of Birth (City & State) \_\_\_\_\_ Social Security No. \_\_\_\_\_  
Married (If Wife, include Maiden Name) \_\_\_\_\_ Date of Marriage \_\_\_\_\_  
Place of Marriage (City & State) \_\_\_\_\_ High School (Highest Grade Attained) \_\_\_\_\_  
Name of High School Attended \_\_\_\_\_ College (Highest Level Attained) \_\_\_\_\_  
Name of Colleges Attended \_\_\_\_\_ Hobbies \_\_\_\_\_  
Fathers Name \_\_\_\_\_ Mothers Name (Including Maiden) \_\_\_\_\_  
Usual Occupation \_\_\_\_\_ Kind of Business \_\_\_\_\_  
Employer \_\_\_\_\_ Retired (Yes or No) Retirement Date \_\_\_\_\_ Years of Service \_\_\_\_\_  
Military Y N Branch \_\_\_\_\_ Serial Number \_\_\_\_\_ Rank \_\_\_\_\_  
Enlistment Date \_\_\_\_\_ Location \_\_\_\_\_  
Discharge Date \_\_\_\_\_ Location \_\_\_\_\_  
Church Affiliation \_\_\_\_\_  
Organizations, Lodges, Public Offices, Education, etc. \_\_\_\_\_  
Newspapers to receive obituary \_\_\_\_\_

### *Funeral Service Selections –*

Type of Service (Church, Chapel, Graveside, Memorial) \_\_\_\_\_  
If Church or Memorial – Place to be Conducted \_\_\_\_\_  
Clergy or Layperson to Preside \_\_\_\_\_ Phone No. \_\_\_\_\_  
Musical Selections (list names of songs, etc.) \_\_\_\_\_  
 Taped  Live If Live, Vocalist Name \_\_\_\_\_ Pianist Name \_\_\_\_\_  
Special Bible Verse, Poem or Quote \_\_\_\_\_  
Masonic/Military/Veteran Request  Flag  Military Honors  Masonic or Eastern Star Honors  
Fraternal Organizations to be involved \_\_\_\_\_  
Clothing Requests \_\_\_\_\_  
Jewelry Requests \_\_\_\_\_ Glasses \_\_\_\_\_  
Additional Requests \_\_\_\_\_

Casket Bearers

\_\_\_\_\_  
\_\_\_\_\_

Honorary Casket Bearers

\_\_\_\_\_  
\_\_\_\_\_

Flower Requests \_\_\_\_\_

Charity Requests \_\_\_\_\_

Cemetery Requested \_\_\_\_\_ City/State \_\_\_\_\_

Section \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_ Unit \_\_\_\_\_ Space \_\_\_\_\_

***Family Members Information –***

Name	Relation	Address	Phone	Email

***Items Needed for the Arrangement Conference:***

Statistical Information on This Form

Military Discharge(s)

Photo ID

Marriage Certificate

Clothing (Full Clothing including undergarments)

Life Insurance Policies

Social Security Card

Birth Certificate

Recent Photograph

Cemetery Papers (Deeds)

We will arrange the services at your request and at the availability of our staff and the cemetery’s schedule. Please consult a member of our staff before scheduling or announcing funeral services to family and friends.

***While Serving Your Family:***

It is our desire that we serve you in ever aspect in you time of need. We will assist you with the following necessary obligations and will supply the necessary forms.

VETERAN’S BENEFITS - SOCIAL SECURITY NOTIFICATION - LIFE INSURANCE CLAIMS  
(These services are at no additional charge.)

***After Service:***

After the funeral service is complete, we will be in touch with you to provide certified copies of the death certificate, complete insurance claims and assist you with any unfinished business.

We will also assist you with the design and purchase of a monument or keepsake. Please call our monument division, **Prestige Monument and Vault Co. at (904) 764-2544** for further information.