

# Biographical Record

Name: \_\_\_\_\_ Phone Number \_\_\_\_\_

Address, City, Zip Code: \_\_\_\_\_

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

Father's Name \_\_\_\_\_

Mother's Maiden Name: \_\_\_\_\_

Education: Elementary (Years) \_\_\_\_\_ Secondary (Years): \_\_\_\_\_

Marital Status: (X) M \_\_\_\_\_ D \_\_\_\_\_ S \_\_\_\_\_ W \_\_\_\_\_ Name of Spouse \_\_\_\_\_

Occupation(s) \_\_\_\_\_

Kind of Business \_\_\_\_\_ Position Held \_\_\_\_\_ Years \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Church Affiliation: \_\_\_\_\_

Groups, Club, Organization, Lodge, Hobbies \_\_\_\_\_

---

Military Information: Service Number \_\_\_\_\_ War Served \_\_\_\_\_

Entered Service Date and Place: \_\_\_\_\_

Discharged Date and Place \_\_\_\_\_

Branch of Service, Grade and Rank: \_\_\_\_\_

Requesting Military Honors at Cemetery: \_\_\_\_\_

Family Members: Names, City and State (Children, Grandchildren, Great Grandchildren, Brothers, Sisters)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

---

---

---

Preceded in Death by:

---

---

---

---

---

**Service Instructions and Information:**

Place of Services: Church \_\_\_\_\_

Clergyman \_\_\_\_\_

Special Music Request, Readings:

---

---

Casket Pall Bearers: (If Available):

---

---

---

Cemetery/ Mausoleum: Information: Name: \_\_\_\_\_

Location, City: \_\_\_\_\_

Grave Description: Section \_\_\_\_\_ Lot No. \_\_\_\_\_ Space \_\_\_\_\_

Marker Installed \_\_\_\_\_ Purchased from: \_\_\_\_\_

Memorial Donations: \_\_\_\_\_

Special request for Clothing, jewelry, picture:

---

I, \_\_\_\_\_, have given the preceding information to be filed in the funeral home in order to avoid placing all responsibility on family members at the time of my death. Merle E. Wood Funeral Home, 215 West 25<sup>th</sup> Street, Erie, PA 16502.

**Important Information for Family (For personal use not for the Funeral Home)**

Local Contacts to be Notified at need:

---

---

Will: \_\_\_\_\_ Attorney \_\_\_\_\_

Safety deposit box at: \_\_\_\_\_

Executor of Estate: Name and Address: \_\_\_\_\_

Doctor's Name: \_\_\_\_\_

Insurance Policy: \_\_\_\_\_

Bank Accounts: \_\_\_\_\_

Real Estate: \_\_\_\_\_

Automobile: \_\_\_\_\_

Stocks, Bonds, Retirement Accounts: \_\_\_\_\_

Veteran Discharge (DD214): \_\_\_\_\_

The Funeral Director handles the details associated with the death certificate and the burial permit and will obtain certified copies of the death certificate, which may be required for settling financial related accounts. The Merle E. Wood Funeral Home, also files the claim papers for the Social Security Administration:

## **Social Security Administration Benefits for Survivors**

Social Security protects the family of a deceased worker. Survivor benefits help ease the financial burden that sometimes follows a worker's death by providing the family with a continuing cash income.

### **ELIGIBILITY**

The deceased worker must have credit for work covered by Social Security, ranging from 1 ½ to 10 years depending on his or her age at death.

### **WHO MAY RECEIVE MONTHLY BENEFITS:**

A widow or widower at 60 or older (50 if disabled) .

A divorced widow or widower at 60 or older (50 if disabled) if the marriage lasted 10 years.

A mother or father caring for the deceased worker's entitled child who is under 16 or disabled.

Unmarried children up to 18 (19 if they are attending a primary or secondary school full time).

Children who were disabled before reaching 22, as long as they remain disabled.

Dependent parent or parents 62 or older.

### **LUMP-SUM DEATH PAYMENT**

A one-time payment of \$255 is paid in addition to the monthly cash benefits described above.

The lump-sum death payment (LSDP) is paid in the following priority order:

To a surviving spouse who lived in the same household as the deceased person at the time of death. If the LSDP is not payable in this manner, it can be paid to:

A surviving spouse eligible for or entitled to benefits for the month of death.

A child or children eligible for or entitled to benefits for the month of death.

The LSDP cannot be paid if there is no eligible spouse or child.

You must apply in order to receive benefits. You can apply at the any Social Security office and , if you wish, you can apply by telephone. The phone number of you local Social Security office is listed in you phone book under “Social Security Administration or “U.S. Government.”

Fact Sheet No 17, U. S. Department of Health and Human Services

SSA Publication No 05-10034 May 1989

Erie Social Security Phone Number:814-452-6696

National SSA Phone Number1-800-772-1213