

← → ↺

🔍 http://

☰

# Submitter's Information

To being, we will need some information about you and the funeral home responsible for your family's services.

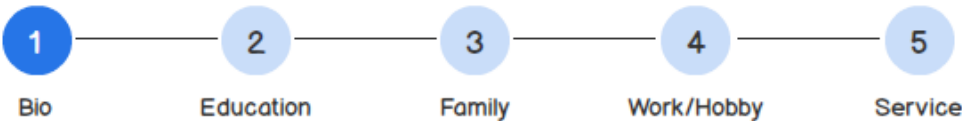
State

▼

Next

# Deceased Information

OK, now we will gather information about your loved one



Upload Picture

First Name

Middle name (or initial)

Last name

Nickname (if any)

1

Place of incident

2

Date of Birth

📅

City of Birth

State of Birth

▼

Date of Death

📅

City of Death

State of Death

▼

Father's first name

Father's last name

☐ Deceased

Mother's first name

Mother's last name

☐ Deceased

1. Dropdown should include Hospital, Home, Nursing Home, Other  
2. Only show if "Other" is selected



1

Bio

2

Education

3

Family

4

Work/Hobby

5

Service

On PageLoad

The default is "Yes".  
If this answer is "Yes", then show "How many years" and "Spouse name"  
The dropdown for "How many years" should be 1 - 70

Is <first name of deceased> married?

Yes

No

How many years?

1

Spouse first name

Spouse last name

Does <first name of the deceased> have kids?

Yes

No

How many?

2

Child 1 First name

Child 1 last name

Deceased

Married

Child 1 Spouse First name

City

State

Child 2 First name

Child 2 Last name

Deceased

Married

City

State

Does <first name of the deceased> have brothers/sisters?

Yes

No

How many?

2

First Name

Last name

Deceased

Married

Spouse First Name

City

State

First Name

Last name

Deceased

Married

City

State

Does <first name of the deceased> have close friends?

Yes

No

How many?

2

First Name

Last name

First Name

Last name

Previous

Next

1

Bio

2

Education

3

Family

4

Employment

5

Service

How many places have <deceased name> work?

2

1

Company Name

City

State

Number of years

10

Did <deceased name> retire from <Company name>?

Yes

●

No

2

Company Name

City

State

Number of years

25

Did <deceased name> retire from <Company name>?

●

Yes

No

Did <deceased name> have any hobbies?

●

Yes

No

Is there additional information you would like included in the obituary?

●

Yes

No

Previous

Next

Since 2 was selected, then we have two groups of information presented 1 & 2

If 3 were selected, then we would have 3 groups of informatino shown

←

→

↺

≡

Service Information

1

Bio

2

Education

3

Family

4

Work/Hobbie

5

Service

Location of service

Church/Funeral Home

City

State

Name of Minister

Day of service

Time of service

Viewing

Church/Funeral Home

City

State

Start Time

End Time

Repass

Church/Funeral Home

City

State

Previous

Submit