

Hi I'm Scott Mueller of Mueller Memorial,

I'm aware that no one looks forward to making funeral arrangements. But when that need comes I want you to be prepared to make the best decisions that will help make you, your family member, or friend be remembered in a truly unique and meaningful way.

Planning a funeral isn't something you do every day, so knowing where to start in the planning process can be confusing, especially if you're arranging a funeral at the time of a death.

Grief is a powerful emotion and it can make normally clear-headed people feel a little cloudy. This is why it's so important to have experts you can trust to guide you through.



Planning ahead is easy.

Our goal is to make sure that the decisions you make are in the best interest of you and your family.

That is ALWAYS our priority.

You may have heard about a friend, neighbor, or someone on the news who was taken advantage of by a cremation society or other funeral home. Or maybe the services just didn't do justice to the person who died and their family. We hear these stories too and it breaks my heart when a widow, who went somewhere else, comes to one of our services then tells me she wishes she would've chosen us.

Our entire staff at Mueller Memorial is committed to working at the highest level of integrity to make sure the people we serve get the services they need and deserve, and we want to share some of our planning knowhow with you.

We've created this workbook in conjunction with my book, *What to Know Before You Go: An Insider's Answers to the Most Commonly Asked Questions About Death, Grief and Funerals* (WhatToKnowBook.com) so that you get the opportunity to write down your thoughts and wishes.

This workbook can also help to start a conversation with an aging parent or a spouse of any age about what they would want should the time come.

Use this workbook to share ideas about how your life celebration, party, funeral, or cremation service can best reflect your one-of-a-kind personality.

With my 35+ years of funeral planning I can tell you that the difference is day and night between arranging a funeral that was pre-planned and one that was not. When you plan ahead, there is no confusion or debate amongst spouses and children about "what she would've wanted." That difference is even greater when you have pre-funded a funeral with the funeral home, taking the financial burden of final expenses off of survivors.

It doesn't take much time to fill out the information in this workbook, and it's value in saved uncertainty and family turmoil is immeasurable.

By reading the book and filling out this workbook, you will be informed and prepared to get the very best from our funeral home and services.

We've created these resources to help guide you through the complex practical, financial, and emotional issues that come up when you plan for a death.

If you're in the Twin Cities area and have questions, give us a call at 651-774-9797 and one of our experts will help you get the answers and information you need. If you're out of the area or prefer email, contact us at info@MuellerMemorial.com.

It's never too soon to start planning, and with this workbook we can help you make sure your service is exactly what *you* want.

At Mueller Memorial, we are committed we are to making a terrible situation the very best it can be for you and your family.

I thank you for your time and for your trust,



Scott A. Mueller
Funeral Director & Owner, Mueller Memorial
St. Paul & White Bear Lake
651-774-9797

Vital Information

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ ZIP: _____ County: _____

Date Moved to this address? _____ Inside City Limits: YES NO Phone: (____) _____

Date of Birth: _____ City of Birth: _____ State of Birth: _____

SSN: _____ Race: _____ ☐ Male ☐ Female

Occupation(when you worked, if retired): _____

Employer(when you worked, if retired): _____ Education in Years _____

Marital Status: ☐ Married ☐ Divorced ☐ Widowed ☐ Never Married

If Married or Widowed, Name of Spouse:

First Name: _____ Last/if Wife **MAIDEN** Name: _____ Deceased: YES NO

First Name of Mother: _____ Last **MAIDEN** Name: _____ Deceased: YES NO

First Name of Father: _____ Last Name: _____ Deceased: YES NO

Next of Kin: _____ Phone: (____) _____

Address: _____

VETERANS INFORMATION

Branch of Military _____ Rank: _____

Date of Entry _____ Date of Discharge: _____

Placed of Entry: _____ Place of Discharge: _____

Preferred Type of Disposition: ☐ Burial with Visitation ☐ Burial ☐ Cremation with Visitation ☐ Cremation

Funeral Information

Funeral Home to Be Contacted

Mueller Memorial

Phone Number: 651-774-9797

Select Your Location:

- ☐ 835 Johnson Parkway, St. Paul, MN 55106
- ☐ 4738 Bald Eagle Avenue, White Bear Lake, MN 55110

Contact Name: Scott Mueller or Funeral Director On-Call

Do You Have a Pre-Arrangement with Them? YES NO

Important Choices

Disposition Choice

- ☐ Customary Burial
- ☐ Cremation

Do you want a Visitation?

- ☐ Yes, with Casket Present (with customary burial to follow)
- ☐ Yes, with Casket Present (with cremation to follow)
- ☐ Yes, with Urn Present (after cremation)
- ☐ No Visitation

Burial

Burial of Casket or Ashes

Will You be Buried? (Body in a casket must be buried.) YES NO (No, skip to next page)

If Yes, Which Cemetery? _____

Address _____

Phone Number _____

Do You Own a Burial Plot or Niche? _____

To Whose Name is the Plot Registered? _____

Location of Deed _____

Location of Plot (Number and Section) _____

No Burial

What to Do With the Ashes

If you do not want to be buried, what should be done with your ashes?

(Note: It is illegal to spread ashes in US National Parks or without permission on private property.)

Do you have a personal item that you would like to be used as your urn?

Preparations

Appearance

In What Clothing Would You Like to Be Buried or Cremated? With What Jewelry?

Special Instructions for Hair, Makeup, Etc.

Do you have a Signature Color?

Services

Music

What songs do you want played during your service?

1)

2)

3)

What songs do you NOT want played during your service?

1)

2)

Readings

What quotes, scriptures, or poems do you want read during your service?

- 1) _____
- 2) _____
- 3) _____

Who should read them?

- 1) _____
- 2) _____
- 3) _____

Flowers

Which flowers do you want at your service?

- 1) _____
- 2) _____
- 3) _____

Which flowers do you NOT want at your service?

- 1) _____
- 2) _____

Eulogy

Who should give the eulogy at your service?

- 1) _____
- 2) _____

Who should NOT give the eulogy at your service?

- 1) _____
- 2) _____

Church

Do You Want to Involve a Church? YES NO (NO, skip to the next section)

If Yes,

Name of Church _____

Address _____

Phone Number _____

Your Clergyperson _____

Do you want your Funeral Service held in the Church? YES NO

Alternative Services (Other Than in Church)

What Would You Like Your Type of Service to Be Called?

(e.g. Funeral, Memorial Service, Celebration of Life, Farewell Party...)

Where will your Service to be held? _____

Address _____

Phone Number _____

Reception/Luncheon

Where will your Reception to be held? _____

Address _____

Phone Number _____

Will there be food served? Which of your favorite foods will be served?

What will people drink? Will you have a Signature Beverage?

Unique Ideas

Any Particular Requests of Your Guests

Charitable Donations _____

Special Attire (color, theme, etc.) _____

Contribution to a creative register book _____

Activities

Will there be an activity that celebrates your favorite things? What will it be?

Take-Aways

Will your guests go home with something to remember you by? What will it be?
(e.g Cook book of your recipes, a keychain, bottle opener, music CD)

After Party

When services are done, where should people toast to you? _____

Address _____

Phone Number _____

Additional Notes

Obituary

Placement

Newspaper #1 _____
Newspaper #2 _____
Newspaper #3 _____

Name (as you'd like it to appear)

City you're from:

Preceded in Death By:

Survived By:

Member of/Graduate of :

How You'd Like to Be Remembered

People to Be Notified

Name _____
Relationship _____
Phone Number _____
Address or Email _____

Name _____
Relationship _____
Phone Number _____
Address or Email _____

Name _____
Relationship _____
Phone Number _____
Address or Email _____

Name _____
Relationship _____
Phone Number _____
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Name _____
Relationship _____
Phone Number _____
Address or Email _____

Responsible Parties

Attorney

Name _____
Address _____
Telephone _____

Executor of Estate (a Power of Attorney expires when death occurs)

Name _____
Address _____
Telephone _____

Accountant

Name _____
Address _____
Telephone _____

Financial Advisor

Name _____
Address _____
Telephone _____

Bank Accounts and Assets**Account #1**

Bank Name _____
Address _____
Type of Account _____
Account Number _____
Named on the Account _____
Password _____

Account #2

Bank Name _____
Address _____
Type of Account _____
Account Number _____
Named on the Account _____
Password _____

Account #3 (Bank Accounts and Assets Cont.)

Bank Name _____
Address _____

Type of Account _____
Account Number _____
Named on the Account _____
Password _____

Account #4

Bank Name _____
Address _____
Type of Account _____
Account Number _____
Named on the Account _____
Password _____

Account #5

Bank Name _____
Address _____
Type of Account _____
Account Number _____
Named on the Account _____
Password _____

Loans, Debts, and Credit Cards

Account #1

Institution Name _____
Address or URL _____
Type of Account _____
Account Number _____
Named on the Account _____
Password _____

Account #2 (Loans, Debts, and Credit Cards Cont.)

Institution Name _____
Address or URL _____
Type of Account _____
Account Number _____
Named on the Account _____
Password _____

Account #3

Institution Name _____
Address or URL _____
Type of Account _____
Account Number _____
Named on the Account _____
Password _____

Account #4

Institution Name _____
Address or URL _____
Type of Account _____
Account Number _____
Named on the Account _____
Password _____

Account #5

Institution Name _____
Address or URL _____
Type of Account _____
Account Number _____
Named on the Account _____
Password _____

Account #6 (Loans, Debts, and Credit Cards Cont.)

Institution Name _____
Address or URL _____
Type of Account _____
Account Number _____
Named on the Account _____
Password _____

Account #7

Institution Name _____
Address or URL _____
Type of Account _____
Account Number _____
Named on the Account _____
Password _____

Account #8

Institution Name _____
Address or URL _____
Type of Account _____
Account Number _____
Named on the Account _____
Password _____

Account #9

Institution Name _____
Address or URL _____
Type of Account _____
Account Number _____
Named on the Account _____
Password _____

Account #10 (Loans, Debts, and Credit Cards Cont.)

Institution Name _____
Address or URL _____
Type of Account _____
Account Number _____
Named on the Account _____
Password _____

Account #11

Institution Name _____
Address or URL _____
Type of Account _____
Account Number _____
Named on the Account _____
Password _____

Account #12

Institution Name _____
Address or URL _____
Type of Account _____
Account Number _____
Named on the Account _____
Password _____

Notes:

Insurance and Pensions

Insurance Policy #1

Company Name _____
Policy Number _____
Beneficiary/ies _____
Value of Policy \$ _____
Where is the Policy? _____

Insurance Policy #2

Company Name _____
Policy Number _____
Beneficiary/ies _____
Value of Policy \$ _____
Where is the Policy? _____

Insurance Policy #3

Company Name _____
Policy Number _____
Beneficiary/ies _____
Value of Policy \$ _____
Where is the Policy? _____

Pension #1

Company Name _____
Policy Number _____
Beneficiary/ies _____
Value of Policy \$ _____
Where is the Paperwork? _____

Pension #2

Company Name _____
Policy Number _____
Beneficiary/ies _____
Value of Policy \$ _____
Where is the Paperwork? _____

IRA/401K or Retirement Accounts

Account #1

Company Name _____
Policy Number _____
Beneficiary/ies _____
Location or URL _____
Password _____

Account #2

Company Name _____
Policy Number _____
Beneficiary/ies _____
Location or URL _____
Password _____

Account #3

Company Name _____
Policy Number _____
Beneficiary/ies _____
Location or URL _____
Password _____

Real Estate Property

Primary Residence

Address _____
Mortgage Company _____

Property #2

Address _____
Mortgage Company _____

Property #3

Address _____
Mortgage Company _____

Safe Deposit Box

Safe Deposit Box #1

Bank _____

Address _____

Contact Name _____

Phone Number _____

Name of Box Owner _____

Where is the Key? _____

(Note: Do not keep this workbook in your safe deposit box. By the time your family gains access to the box, it's likely the funeral will already have taken place.)

Important Documents

Last Will and Testament

Where is the Original? _____

Where is the Copy? _____

Date the Will was Drafted _____

Executor of Will _____

Attorney Who Drafted Will _____

Attorney Phone Number _____

Living Will

Do you have a Living Will, Five Wishes, or Healthcare Directive? YES NO

Where is the document located? _____

Birth Certificate

Where is the document located? _____

Marriage Certificate

Where is the document located? _____

Veteran's Discharge Paper (Form DD214)

Where is the document located? _____

(Note: This document is necessary to receive any veterans benefits.)