

Sacramento Friends Meeting

FINAL AFFAIRS INFORMATION

Friends: From time to time when a Sacramento Friend is near death or has died, the Meeting receives questions from family or friends who are legally responsible for the Friend's welfare and affairs. By filling out this form, you will make it easier for Meeting to respond if needed.

NAME _____ DATE _____

STREET ADDRESS _____

CITY/STATE _____ ZIP _____

1. An Advanced Health Care Directive is a legal document in which you give instructions for your health care and name persons to make decisions about your health if you are not able. Have you completed an Advanced Health Care Directive? ____ Yes ____ No

a. In your Advanced Health Care Directive, who is specified to make health care decisions for you if you can't make them yourself?

Name _____ Phone _____

Name _____ Phone _____

b. Where is your Advanced Health Care Directive filed? Which HMOs, hospitals, and/or persons have a copy?

Name _____ Phone _____

Name _____ Phone _____

Name _____ Phone _____

2. Persons to notify immediately (next of kin, executor, etc.)

Name _____ Relationship _____

Email _____ Phone _____

Address _____

Name _____ Relationship _____

Email _____ Phone _____

Address _____

Name _____ Relationship _____

Email _____ Phone _____

Address _____

3. Have you completed forms to be an organ donor? _____ Yes _____ No

Where are the forms filed? _____

4. The Sacramento Friends Meeting can help when I die by _____

5. Instructions for a Memorial Meeting for Worship _____

6. Do you want to specify contributions in lieu of flowers? If so, to what organization(s)?

7. Have you made choices for the disposal of your body? _____ Yes _____ No

a. Have you made your choices known to the person(s) responsible for carrying out your wishes? _____ Yes _____ No

b. Funeral Home/Memorial Society contact information _____

c. Preference concerning medical research _____

Research organization contact _____

d. Prefer cremation _____ Yes _____ No

Preference for disposal of ashes _____

e. Prefer burial _____ Yes _____ No

Cemetery information _____

8. The California death certificate asks for parents' full names and state of birth.
