



		Date created:
Loss of a Loved	One - Contacts	Name:

This is a "starter list" of who to contact after the loss of a loved one. Don't be afraid to ask for help at any time.

Who Can Help: Consider asking a family member or friend to help you with phone calls and arrangements.

Immediately	
Coroner Name/Org. Phone Number E-Mail Date/Time contacted	Phone Number
Medical Examiner Name/Org. Phone Number E-Mail Date/Time contacted Attending Physician Name/Org. Phone Number E-Mail Date/Time contactedl	Funeral Home Director Name/Org. Phone Number E-Mail Date/Time contacted Other Name/Org. Phone Number F-Mail
Family Mother(s) Name/Org. Phone Number E-Mail Date/Time contacted	Phone Number E-Mail
Father(s) Name/Org. Phone Number E-Mail Date/Time contacted	Spouse Name/Org. Phone Number E-Mail
Sibling Name/Org. Phone Number E-Mail Date/Time contacted	Child Name/Org. Phone Number E-Mail
Sibling Name/Org. Phone Number E-Mail Date/Time contacted	Child Name/Org. Phone Number E-Mail
Sibling Name/Org. Phone Number E-Mail Date/Time contacted	Child Name/Org.





Family continued	Extended Family	
Child Name/Org. Phone Number	Mother-In-Law Name/Org. Phone Number	
E-IVIAII	L-IVIAII	
Date/Time contacted	Date/Time contacted	
Paternal Grandfather Name/Org. Phone Number	Father-in-Law Name/Org.	
E-Mail	E-Maii	
Date/Time contacted	Date/Time contacted	
Paternal Grandmother Name/Org. Phone Number	Sibling-in-Law Name/Org.	
Phone NumberE-Mail	Phone NumberE-Mail	
Date/Time contacted		
Maternal Grandfather Name/Org.	Sibling-in-Law	
Priorie Number	Phone Number	
E-Mail	E-Mail	
E-Mail	E-Mail	
Maternal Grandmother Name/Org.	Aunt Name/Org.	
Phone Number	Phone Number	
E-Maii	E-IVIAII	
Date/Time contacted	Date/Time contacted	
Other Name/Org.	Aunt Name/Org.	
Phone Number	Phone Number	
E-Mail	E-Mail	
Date/Time contacted	Date/Time contacted	
Other Name/Org.	Uncle Name/Org	
Phone Number	Phone Number	
E-Mail	E-IVIAII	
Date/Time contacted		
Other Name/Org.	Uncle Name/Org.	
Phone Number	Phone Number	
E-Mail	E-Mail	
Date/Time contacted	Date/Time contacted	
Other Name/Org.	Cousin Name/Org.	
Phone Number	Phone Number	
E-Mail	E-Maii	
Date/Time contacted	Date/Time contacted	





Extended Family continued	Work	
Cousin Name/Org Phone Number	Boss Name/Org. Phone Number	
E-Mail	E-Mail	
Date/Time contacted	Date/Time contacted	
Cousin	Coworker	
Name/Org.	Name/Org.	
Phone Number	Phone Number	
E-Mail	E-Mail	
Date/Time contacted	Date/Time contacted	
Other	Coworker	
Name/Org.	Name/Org	
Phone Number	Phone Number	
E-Mail		
Date/Time contacted	Date/Time contacted	
Other	Union Contact	
Name/Org.	Name/Org.	
Phone Number	Phone Number	
E-Mail	E-Mail	
Date/ Firme contacted		
Friends	Pension Funds	
	Name/Org.	
Friend	Phone NumberE-Mail	
Name/Org.	Data The second and	
Phone Number		
E-Mail	Fraternal/Civic Organization	
Date/Time contacted	Name/Org.	
Friend	Phone Number	
Name/Org.	E-Mail	
Phone Number		
E-Maii	Otner	
Date/Time contacted	Name/Org.	
Friend	Phone Number	
Name/Org.	E-Mail	
Phone Number	Date/Time contacted	
E-Mail	Other	
Date/Time contacted	Name/Org.	
Friend	Phone Number	
Name/Org.	E-IVIAII	
Phone Number	Date/Time contacted	
E-Mail	Other	
Date/Time contacted	name/Org.	
	Phone Number	
	E-Mail	
	Date/Time contacted	





Administration	Ulility Company	
Executor of Estate	Name/Org.	
Name/Org.	Phone Number	
Phone Number	E-Mail	
E-Mail		
Date/Time contacted		
Accountant	Name/Org.	
Name/Org.	Phone Number	
Phone Number		
E-Mail	Date/Time contacted	
E-Mail Date/Time contacted	Other	
Attorney		
Name/Org.	Phone Number	
Phone Number	E-Mail Date/Time contacted	
E-IVIAII		
Date/Time contacted	O Circle	
Bank		
Name/Org.	Priorie Number	
Phone Number		
E-Mail	——— Date/Time contacted	
Date/Time contacted	Otner	
Credit Card Company	Name/Org.	
Name/Org.	Phone Milmher	
Name/OrgPhone Number	E-Mail	
E-Mail	Date/Time contacted	
E-Mail	Services Services	
Insurance Agent		
Name/Org.	Name/Org.	
Phone Number	Phone Number	
E-Maii	E-Mail	
Date/Time contacted	Date/Time contacted	
Landlord	Cemetary	
Name/Org.	Name/Org.	
Phone Number	Phone Number	
E-Mail	E-Mail	
Date/Time contacted	Date/Time contacted	
Post Office	After-service Reception Location	
Name/Org.	Name/Org.	
Phone Number		
E-Mail	E-Mail	
E-Mail	Date/Time contacted	
Social Security Administration (SSA)	Caterer	
Name/Org.	Name/Org.	
Phone Number	Phone Number	
E-Mail	E-Mail	
Date/Time contacted	Date/Time contacted	





Services continued	Other	
Musician #1	Name/Org.	
Name/Org.	Phone Number E-Mail	
Phone Number	E-Mail Date/Time contacted	
E-Maii		
Date/Time contacted		
Musician #2	Name/Org. Phone Number	
Name/Org.	Phone Number E-Mail	
Phone Number	Date/Time contacted	
E-Mail	-	
Date/Time contacted	Name/Org.	
Florist	Phone Number	
Name/Org.	E-Mail	
Phone Number	Date/Time contacted	
E-Mail		
	For Guests	
Dry Cleaners Name/Org	Child Care	
Name/Org. Phone Number	Name/Org.	
E-Mail	Phone Number	
Date/Time contacted	E-Mail Date/Time contacted	
Hairdresser		
Name/Org.	Airline(s)	
Phone Number	Name/Org. Phone Number	
E-Mail	F-Mail	
Date/Time contacted	Date/Time contacted	
Newspaper(s) for Obituaries	Hotel(s)	
Name/Org. Phone Number	Name/Org.	
Phone Number	Phone Number	
E-Mail	E-Mail	
Date/Time contacted	Date/Time contacted	
Memorial Fund	Taxi(s) (to pick up guests)	
Name/Org.		
Phone Number	PHONE MITTHER	
Date/Time contacted	E-Mail Date/Time contacted	
Printing Services (for programs)		
Name/Org.	Car Rental Agency	
Phone Number	Name/Org. Phone Number	
L-IVIAII	L Moil	
Date/Time contacted	E-Mail Date/Time contacted	
Hearse/Limo	Car Rental Agency	
Name/Org.	Name/Org.	
Phone Number	Name/Org. Phone Number	
E-Mail	E-Mail	
Date/Lime contacted	Data/Time contacted	