

*A Personal  
Guide For  
Your Family  
and Loved Ones*

*For:* \_\_\_\_\_



**William Funeral Homes P.C.**  
**Robinson, IL – Oblong, IL – Hutsonville, IL**  
**618-544-3141 – 618-592-4221 – 618-563-4432**

**Pulliam Funeral Homes, P.C.**  
**BIOGRAPHICAL INFORMATION**

Obituary Photo Present At The Time of Arrangements Yes \_\_\_ No \_\_\_ If no needed by: \_\_\_\_\_

Complete Legal Name \_\_\_\_\_

Nickname \_\_\_\_\_ Name line for printed materials \_\_\_\_\_

Of \_\_\_\_\_ Formerly of, if applicable \_\_\_\_\_

Passed away or \_\_\_\_\_

Birth Date \_\_\_\_\_ Age \_\_\_ Day & Date of Death \_\_\_\_\_ Time of Death \_\_\_\_\_

Location of Death (exact location) \_\_\_\_\_

Location of Death: City \_\_\_\_\_ State \_\_\_\_\_ Postal Code \_\_\_\_\_

|                                                                               |  |                         |                      |
|-------------------------------------------------------------------------------|--|-------------------------|----------------------|
| Date of Birth _____                                                           |  | Place of Birth _____    |                      |
| Father's Name _____                                                           |  |                         |                      |
| Mother's Name _____                                                           |  | Maiden _____            |                      |
| Marital Status: _____ Single _____ Married _____ Widowed _____ Divorced _____ |  |                         |                      |
| • Spouse's Name _____                                                         |  | Maiden _____            | Death Date (?) _____ |
| Date of Marriage _____                                                        |  | Place of Marriage _____ |                      |
| Remarks _____                                                                 |  |                         |                      |

Prior Marriages (If Applicable)

|                          |  |                         |                      |
|--------------------------|--|-------------------------|----------------------|
| • Spouse's Name _____    |  | Maiden _____            | Death Date (?) _____ |
| • Date of Marriage _____ |  | Place of Marriage _____ |                      |
| • Remarks _____          |  |                         |                      |

|                        |  |                         |                      |
|------------------------|--|-------------------------|----------------------|
| • Spouse's Name _____  |  | Maiden _____            | Death Date (?) _____ |
| Date of Marriage _____ |  | Place of Marriage _____ |                      |
| Remarks _____          |  |                         |                      |

EMPLOYMENT HISTORY

Most Recent Employer \_\_\_\_\_

Position \_\_\_\_\_ Kind of Business \_\_\_\_\_

Dates Worked \_\_\_\_\_ Location \_\_\_\_\_

If Retired (Year) \_\_\_\_\_ Awards/Honors \_\_\_\_\_

Previous Employer \_\_\_\_\_

Previous Employer \_\_\_\_\_

Previous Employer \_\_\_\_\_





**PRINTED MATERIALS AND PERSONALIZATION**

Registry Book? Yes \_\_\_\_\_ No \_\_\_\_\_

Memorial Folders Quantity \_\_\_\_\_

Standard Folder Cover \_\_\_\_\_ Inside Verse # \_\_\_\_\_

Custom or Tribute Collection Folder Cover \_\_\_\_\_

Inside Verse # \_\_\_\_\_ Back Page Verse or Photo \_\_\_\_\_

Other Notes (Cover wording, etc.) \_\_\_\_\_

Prayer Cards

Description or # \_\_\_\_\_ Prayer \_\_\_\_\_

Acknowledgement Cards

Verse # \_\_\_\_\_ The family of \_\_\_\_\_ Quantity \_\_\_\_\_

Tribute Video Yes \_\_\_ No \_\_\_ Photos Needed By: \_\_\_\_\_

*If photos are to be scanned by Adams Funeral Chapel staff please limit to 35 photos. If photos are arriving digitally either by email, flash drive, or direct upload to website, please limit to 70 photos. If planning to upload directly to Adams Funeral Chapel website, please furnish email address: \_\_\_\_\_*

Photo Boards for Picture Collages Yes \_\_\_\_\_ No \_\_\_\_\_ How Many \_\_\_\_\_

Display Items for the Hutch (Framed Photos, Fishing Rods, Golf Clubs, etc.)

\_\_\_\_\_  
\_\_\_\_\_

**PERSONAL INSTRUCTIONS**

Hairdresser/Barber Needed Yes \_\_\_ No \_\_\_ Name \_\_\_\_\_ Phone \_\_\_\_\_

Clothing Here \_\_\_\_\_ To Be Delivered \_\_\_\_\_ Clothes Needed By (Day/Time) \_\_\_\_\_

Eyeglasses to be worn for viewing? Yes / No Remove & Donate \_\_\_\_\_ Remove & Return to Family \_\_\_\_\_

Jewelry to be worn and/or removed (Refer To Personal Property Receipt Completed By \_\_\_\_\_)

Grooming Instructions (Hair/Beard/Makeup/Nails) \_\_\_\_\_

\_\_\_\_\_

**MERCHANDISE SELECTION**

Casket or Urn

Name or Description \_\_\_\_\_ Product # \_\_\_\_\_

|            |                      |                   |
|------------|----------------------|-------------------|
| Medallions | Product Number _____ | Description _____ |
| or         | Product Number _____ | Description _____ |
| Corners    | Product Number _____ | Description _____ |
|            | Product Number _____ | Description _____ |

Cap Panel \_\_\_\_\_

Vault or Urn Vault

Description \_\_\_\_\_ Color \_\_\_\_\_ Overlay Color \_\_\_\_\_

Full Tent Setup \_\_\_\_\_ Set & Seal Only \_\_\_\_\_ Cremation or Infant Setup \_\_\_\_\_

Notes (Additional Flag, Heat, Etc.) \_\_\_\_\_

# Pulliam Funeral Homes

P.C.



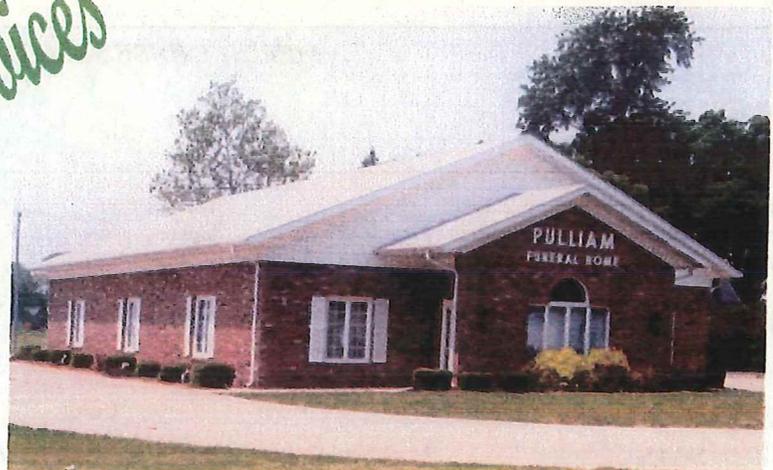
*Robinson, Illinois*

*P*



*Oblong, Illinois*

*And Cremation Services*



*Hutsonville, Illinois*