"PRE-ARRANGEMENT FORM"

AMIS Memorial Chapel, Ltd.

#8 Khyber Pass, Warwick, Bermuda WK 03 Mailing Address: P.O. Box WK 300, Warwick WK BX, Bermuda Tel: (441) 236-0155 ~ Fax: (441) 236-4845 amismemorial@logic.bm

	NON-PAYMENT []
NAME (LAST NAME)	DETIL KKY. NEWSPAIN Mills I. Secondary, Secondary, Gemachildren, Money
GIVEN NAME (S)	Transmitter and the second of the second
DATE OF BIRTH	PLACE OF BIRTH
SEX	
NATIONALITY	
Husband or Wife of Deceased	
TRADE, PROFESSION OR OCCUPATION OF DECE	EASED
Names of Parents:	
Father	
1 ather	
Mother (include maiden name)	and a start of the
Mother (include maiden name) PLACE OF INTERMENT	and a start of the
Mother (include maiden name) PLACE OF INTERMENT NEXT OF KIN & RELATIONSHIP:	and a start of the
Mother (include maiden name) PLACE OF INTERMENT NEXT OF KIN & RELATIONSHIP:	and a start of the
Mother (include maiden name) PLACE OF INTERMENT NEXT OF KIN & RELATIONSHIP: (Name, Address & Tel. #)	Grave
Mother (include maiden name) PLACE OF INTERMENT NEXT OF KIN & RELATIONSHIP: (Name, Address & Tel. #) (Name, Address & Tel. #)	GRAVE
Mother (include maiden name) PLACE OF INTERMENT NEXT OF KIN & RELATIONSHIP: (Name, Address & Tel. #) (Name, Address & Tel. #)	Grave

CHURCH:CLERGY:			
DATE OF FUNERAL	VIEWING: Family		
VIEWING (S) - Funeral Home: []	Other: []	Church: []	
HYMNS			
Special Music			
Obituary			
(Wife/Husband, Children, Daughter & Son-in-law,	Grandchildren, Mother, Father, Siste	ers, Brothers, Aunts, Uncles, In-laws, etc.)	
	STRUCTIONS FOR F		