



Vital Statistics Record

Name: _____
First Middle Last

Date of Birth: _____

Place of Birth: _____

Social Security Number: _____

Race: _____

Hispanic/Spanish/Latino: No Yes. Specify: _____

Military Service: No/Yes

Branch: _____ Rank: _____ Years: _____

Marital Status (Circle one): Married / Widowed / Divorced / Never Married

Years of Education : _____ Degree Earned: _____

Occupation (Prior to retirement): _____

Type of Industry/Business: _____

Employer: _____

Years in Occupation: _____

Residence: _____

Street Address City, State Zip Code County

Number of Years Residing in County: _____

Spouse: _____

First Middle Maiden/Last

Father: _____

First Middle Last

Father's Place of Birth: _____

Mother: _____

First Middle Maiden Name

Mother's Place of Birth: _____