

Ohio Department of Health • Bureau of Vital Statistics

**Certificate of Service**

Reg. Dist. No.	State File no.
Primary Reg. Dist. No.	Reg. File No.

Information concerning the burial or other disposition of the remains of a dead human body transported into this state for burial or other disposition.

A Funeral Director is required by law to complete this certificate of service and file it with the local registrar of Vital Statistics of the district in which burial or other disposition is made for a dead human body transported into Ohio for burial or other disposition.

Was the deceased a member or former member of the Armed Forces of the United States?

Yes     No     Unable to ascertain

Only those items in bold need to be completed if the deceased was a non-veteran.

Name of deceased		
Date of death	State or Country of death	
Date of birth	State of birth	
Branch of service	Date of entry into service	
<b>1</b>	<b>2</b>	
Type of separation or discharge from service	Date of separation/discharge	Date of burial
<b>3</b>	<b>4</b>	
Name of cemetery		
Location of cemetery county		
<b>5</b>	township	
village	city	state
Name or number of section in cemetery	Number of lot	Number of grave
<b>6</b>	<b>7</b>	<b>8</b>

Information relative to a deceased veteran may be secured from the Veteran's Discharge Papers

Signature of funeral director	License number	Date signed
Funeral firm name		
Address street number		
City		
State		ZIP
Signature of Registrar		Date signed