

FUNERAL ARRANGEMENTS		DATE
LAST NAME - FIRST NAME - MIDDLE NAME OF DECEASED VETERAN WINDO, William Anthony		Nov. 3, 1955
CHECK, IF GOVERNMENT FUNERAL IS DESIRED <input type="checkbox"/> GOVERNMENT FUNERAL		CLAIM NO. C.
I wish to accept the funeral services provided by the Government and authorize the following arrangements to be made:		
RELIGIOUS PREFERENCE <input type="checkbox"/> PROTESTANT <input checked="" type="checkbox"/> CATHOLIC <input type="checkbox"/> JEWISH	PLACE OF SERVICE (If local interment) VA Chapel, Los Angeles, Calif.	TIME OF SERVICE 10:00 A.M. Thursday
RELIGIOUS SERVICE TO BE CONDUCTED BY <input checked="" type="checkbox"/> VA CHAPLAIN <input type="checkbox"/> FAMILY CLERGYMAN <input type="checkbox"/> OTHER		DATE OF SERVICE Nov. 3, 1955
NAME AND ADDRESS OF CEMETERY OR CREMATORY VA Cemetery, Los Angeles, Calif.		TIME OF INTERMENT OR CREMATION
		DATE OF INTERMENT OR CREMATION
CHECK SHIPMENT FOR OUT OF TOWN <input type="checkbox"/> EXPRESS <input type="checkbox"/> BAGGAGE <input type="checkbox"/> HEARSE <input type="checkbox"/> AIRFREIGHT	IS ESCORT DESIRED? <input type="checkbox"/> YES <input type="checkbox"/> NO <i>(If "yes", give name, address and relationship.)</i>	DATE OF SHIPMENT
		TIME OF SHIPMENT
CITY AND STATE TO WHICH REMAINS (CREMATED) ARE TO BE SHIPPED	NAME AND ADDRESS OF CONSIGNEE	
CLOTHING <input checked="" type="checkbox"/> PERSONALLY OWNED <input type="checkbox"/> FURNISHED BY GOVERNMENT	IF CLOTHING IS FURNISHED BY GOVERNMENT, SPECIFY TYPE (<i>Gray suit, etc.</i>) VA shirt -	
ITEMS OF PERSONALLY OWNED CLOTHING FURNISHED (<i>List</i>) Suit, tie, underwear, etc.	TYPE OF CASKET VA	
SPECIAL ARRANGEMENTS		
MUSIC BY <input checked="" type="checkbox"/> VA <input type="checkbox"/> FAMILY <input type="checkbox"/> NONE	SELECTIONS DESIRED Organ only	FLOWERS
PALLBEARERS <input checked="" type="checkbox"/> VA <input type="checkbox"/> FAMILY <input type="checkbox"/> HONORARY	NAME OF ORGANIZATION(S) PARTICIPATING	
CASKET IN SLUMBER ROOM <input checked="" type="checkbox"/> OPEN <input type="checkbox"/> CLOSED	CASKET IN CHAPEL <input checked="" type="checkbox"/> OPEN <input type="checkbox"/> CLOSED	ACCOUTERMENT (<i>Jewelry, etc.</i>) <input type="checkbox"/> REMOVED <input type="checkbox"/> INTERRED
RELATIVE(S) ATTENDING FUNERAL Brother - Jerome S. Reider, 506 Chapala Drive, Pacific Palisades, Calif.		
NAME OF RECIPIENT OF INTERMENT FLAG Brother-as above		
CHECK, IF PRIVATE FUNERAL IS DESIRED <input type="checkbox"/> PRIVATE FUNERAL		
I do not wish to accept Government funeral services and I desire that the remains of the deceased named above be released to the following funeral home:		
NAME OF FUNERAL HOME	ADDRESS OF FUNERAL HOME (<i>Street, city, state</i>)	
PLACE OF INTERMENT OR CREMATION (<i>Name and address of cemetery or crematory</i>)		
I have had explained to me that it is my privilege to accept funeral services provided by the Government for the deceased named above, or that I may engage my own funeral director for private funeral and that a Government burial allowance is authorized not to exceed one hundred and fifty dollars (\$150.00) plus certain costs of transportation. Further, that I have read and understand the foregoing statements; and arrangements made for the disposition of the remains of the deceased are consistent with my wishes.		
SIGNATURE AND TITLE OF EMPLOYEE CIRO M. PULSIFERSON, Funeral Clerk,	SIGNATURE OF RELATIVE (<i>Or acting authority</i>) AND RELATIONSHIP	
NAME OF STATION VA Center, Los Angeles, Calif.	ADDRESS OF RELATIVE (<i>Or acting authority</i>) Brother-as above	TELEPHONE NO.