

**PREPARING FOR DEATH:  
A Resource Guide  
(Forms and Checklist only)**

**First Mennonite Church  
101 S. Jackson Street  
Bluffton, Ohio 45817  
419-358-5766**

**Sample 1**  
**Living Will Declaration**  
**(Complete form inserted in this booklet)**

Declaration made this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

I \_\_\_\_\_ being at least eighteen (18) years old and of sound mind, willfully and voluntarily make known my desires that my dying shall not be artificially prolonged under the circumstances set forth below, and I declare:

If at any time my attending physician certifies that: (1) I have an incurable injury, disease or illness; (2) my death will occur within a short period of time; and (3) the use of life-prolonging procedures would serve only to artificially prolong the dying process, I direct that such procedures be withheld or withdrawn, and that I be permitted to die naturally with only the performance or provision of any medical procedure or medication necessary to provide me with comfort care or to alleviate pain, and if I have so indicated below, the provision of artificially supplied nutrition and hydration. (Indicate your choice by initialing or making your mark before signing this Declaration):

\_\_\_\_\_ I wish to receive artificially supplied nutrition and hydration, even if the effort to sustain life is futile or excessively burdensome to me.

\_\_\_\_\_ I do not wish to receive artificially supplied nutrition and hydration, if the effort to sustain life is futile or excessively burdensome to me.

\_\_\_\_\_ I intentionally make no decision concerning artificially supplied nutrition and hydration, leaving the decision to my health care representative.

In the absence of my ability to give direction regarding the use of life-prolonging procedures, it is my intention that this declaration be honored by my family and physician as the final expression of my legal right to refuse medical or surgical treatment and accept the consequences of the refusal.

*(Example of other instructions that may be added)*

It is my wish that, at the time of my death, any of my body organs that are usable (and desired by organ donation facilities) be made available for donation.

I understand the full import of this declaration.

_____	_____	_____
Signature	Date	
_____	_____	_____
City	State	County

The declarant has been personally known to me, and I believe him/her to be of sound mind. I did not sign the declarant's signature above for or at the direction of the declarant. I am not a parent, spouse or child of the declarant. I am not entitled to any part of the declarant's estate or directly financially responsible for the declarant's medical care. I am competent and at least eighteen (18) years old.

Witness \_\_\_\_\_ Date \_\_\_\_\_

Witness \_\_\_\_\_ Date \_\_\_\_\_

## **Local Information for Funeral Planning**

### **Services offered by the funeral director**

1. Clients may choose the services they desire from the funeral director. Costs for various services are itemized.
2. Pre-arrangement of funeral home services is possible, either selected services or complete funeral arrangements.

### **Viable options for body disposal**

1. Burial
2. Cremation
3. Donating the body for medical research. (This must be pre-arranged; see pages 22-23.)

### **Timing for disposition of the body**

1. If death is natural and the family chooses burial, it can be arranged after proper filing of the death certificate, having secured a physician's signature and a burial permit.
2. If a death is accidental or a homicide, the coroner will be notified and may order an autopsy. This investigation does not usually delay the process of funeral arrangements. There is no charge to family for a mandated autopsy.
3. Is an autopsy desired? Autopsies may be done when there is a sudden or unexplained death, or the family wants specific disease information for the family medical history. The decision can be communicated to the doctor or the funeral home. If the death occurs in the hospital, the decision should be made before the body is taken from the hospital. There may be a charge to the family for this.

### **Embalming**

1. If there is no viewing, embalming is not required in Ohio in most circumstances.
2. If the body is transported interstate, embalming is required.
3. If the body needs to be held over 24 hours for any reason, either embalming or refrigeration is needed.

### **Burial plots**

1. Plots can be pre-arranged and paid for, or they can be purchased at the time of death by the funeral director or family.
2. Bluffton has two cemeteries: Maple Grove and Ebenezer. In addition, Pleasant Ridge in Pandora and Clymer in Mt. Cory are also available. Costs and requirements are very similar (with the exception that burial plots in Ebenezer Cemetery have a minimal fee of \$150 to members of First Mennonite Church).
  - a. The cost of a plot includes the plot and perpetual care.
  - b. Most cemeteries require a vault (additional cost).
3. An interment fee is charged for opening and closing the grave.

## **Cremation**

1. Chiles-Laman offers cremation services. There are also crematories in Cridersville and Van Wert.
2. The body must be held 24 hours before cremation in Ohio (to avoid destroying evidence of foul play).
3. Embalming is not required if there is no public viewing.
4. A casket is not necessary, but some type of container is required. The crematory or funeral home has inexpensive containers. One can rent a casket from a funeral home for viewing prior to a cremation.
5. The funeral director takes care of the documents required for cremation:
  - a. Death certificate
  - b. Authorization permits
  - c. Notification of Social Security
6. The funeral director can make all arrangements.
7. The funeral director or family and friends can transport the body to the crematory.
8. Although it depends on one's choices regarding viewing, embalming and use of rented casket and mortician services, in general, direct cremation is less expensive than the usual viewing and earth burial practices. However, viewing is possible and then cremation may follow the funeral service.
9. Ashes are returned to the family in a container.
  - a. The state of Ohio permits ashes to be scattered. If they are scattered on private property, the permission of the property owner is required. If they are scattered on one's own property, no permit is needed.
  - b. Ashes can be buried at a cemetery. Some cemeteries may require a small vault. The First Mennonite Church casket committee may build a small wooden box for burial of ashes.
  - c. Urns are available from the funeral director.

## **Death Certificate**

A physician and the funeral director sign the death certificate. It is filed with the County Health Department. Copies are available through the funeral director. Additional copies, if needed, can be purchased later from the Health Department.

## **Body or Organ Donation**

### **Donating the body for medical education or research**

If you plan to donate your body for medical research, you must make arrangements in advance with a medical school. (The funeral director can provide the necessary information, including the registration form from the medical school. A fee is charged at the time of registration.) The medical school will keep a copy of the forms in their file, and you will keep a copy. At the time of death, the funeral director will make the arrangements.

After the research is completed, the body is cremated. The medical school will bury or return the ashes, as you prefer.

If you donate your body for research, it is still possible and appropriate to have a memorial service.

### **Donating organs for transplants**

It is best to document one's desire to donate acceptable organs before death. In Ohio the front of the driver's license has a place to indicate your desire to donate organs. Since July 2001 this declaration on one's driver's license is legally binding. A registry is maintained of all drivers desiring organ donation. Complete information is available in *Faithful Decisions: Organ and Tissue Donations*, a resource kit from Life Connections of Ohio, available in the First Mennonite Church library.

Since suitable circumstances for major organ donation (heart, lung, liver and kidney) arise from the sudden death of otherwise healthy people, discussions between medical personnel and families allowing for organ donation will occur rapidly.

Prior signed statements from victims are not mandatory if family members are unified in their desire to give someone else life out of their own tragedy. While major organ donation may require a decision before brain death is certified, other organs, such as skin, bone and eyes, can be donated within the hours after death. Gifts of body parts can be a source of hope and comfort to families in otherwise tragic circumstances.

Currently, in Ohio, hospitals are required to notify an organ procurement organization (OPO) of every death occurring in the hospital. Only if the OPO determines that the body may have organs suitable for donation is the family then approached. It is possible to have a conventional viewing and funeral after the removal of body parts.

## Checklist of Steps to Take

### Following a Death

- \_\_\_\_\_ Call a pastor or church office. (The pastor will be a support and resource for you in completing the next steps.)
- \_\_\_\_\_ Call a funeral home to set an appointment to make arrangements for care of the body and its burial.
- \_\_\_\_\_ Call all significant people to inform them of the death.
- \_\_\_\_\_ In consultation with pastor and funeral home, set day, time and location for funeral/memorial service. (The service usually takes place three days after the death. This allows one day for the announcement to appear in the newspaper and another day for visitation. The service can be later for several reasons such as accommodating persons traveling from a distance.)
- \_\_\_\_\_ Set visitation day, time and location. (Visitation usually happens the day before the service. It can be held at the funeral home or at the church.) Possible times: 2-4 p.m. and 6-8 p.m.; 2-5 p.m.; or 5-8 p.m.
- \_\_\_\_\_ Decide the type of service
- \_\_\_\_\_ Funeral Service. The body is present in the service. A brief graveside service and burial follow the funeral service.
- \_\_\_\_\_ Memorial Service. A graveside or interment of ashes is done with the family at another time.
- \_\_\_\_\_ Preparation for the funeral home
- \_\_\_\_\_ Biographical Information Sheet (If one has not already been completed, you may want to complete the one on pages 28-30 before going to the funeral home.)
- \_\_\_\_\_ Bring set of clothes
- \_\_\_\_\_ Social Security Number
- \_\_\_\_\_ Military discharge papers, if applicable
- \_\_\_\_\_ Picture for newspaper if you desire

- \_\_\_\_\_ Number of death certificates needed (Copies are needed for each occasion where proof of death is required, mainly when assets are transferred by designation of beneficiaries, e.g. stocks, bonds, life insurance policies, and transfer of property.)

### At the funeral home

- \_\_\_\_\_ Finalize hours of visitation and service
- \_\_\_\_\_ Give biographical information
- \_\_\_\_\_ Choose casket or container for cremains (or an FMC crafted container)
- \_\_\_\_\_ Choose memorial cards (optional)
- \_\_\_\_\_ Choose flowers (optional)
- \_\_\_\_\_ Give any instructions for burial service if you have special preferences:
  - \_\_\_\_\_ Do you want to be present while casket is lowered?
  - \_\_\_\_\_ Do you want to place flowers on casket?
  - \_\_\_\_\_ Do you want to shovel dirt on casket?
- \_\_\_\_\_ Number for meal following service (Include family, close friends and persons traveling from a distance. The congregation provides this meal.)

### Plan service with pastor

- \_\_\_\_\_ hymns
- \_\_\_\_\_ scriptures
- \_\_\_\_\_ persons to be involved
- \_\_\_\_\_ music
- \_\_\_\_\_ remembrances
- \_\_\_\_\_ printed order of service

- \_\_\_\_\_ At visitation decide on arrangement of family members (family in one receiving line or scattered throughout the room) display of pictures and/or other items

## Biographical Information

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Birth date: \_\_\_\_\_

Birth place: \_\_\_\_\_

Father's Name: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Current Church membership: \_\_\_\_\_

Spouse's name: \_\_\_\_\_

Place and date of marriage: \_\_\_\_\_

Children:

Name	Birth Date	Address/Phone
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_____	_____	_____
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_____	_____	_____
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_____	_____	_____
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_____	_____	_____
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Siblings:

Birth Date:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Main occupations or employers: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date retired: \_\_\_\_\_

Education:

High School \_\_\_\_\_

College \_\_\_\_\_

Other \_\_\_\_\_

Membership in clubs, significant organizations,  
or voluntary service: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Suggestions for Funeral Arrangements**

Location of will and other important papers:

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

Persons and organizations to be contacted:

Name	Address/Phone
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Newspapers to be notified: \_\_\_\_\_

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

*Copies of this form can be shared with survivors and filed in the church office.*

Date \_\_\_\_\_

For the sake of your survivors, you may wish to write your preferences for a funeral service. Copies of this form can be shared with survivors and filed in the church office.

1. I \_\_\_ do/ \_\_\_ do not have arrangements with a funeral home.

Funeral home preference: \_\_\_\_\_

2. My preference is:

- \_\_\_\_\_ embalmed and buried at \_\_\_\_\_ cemetery
- \_\_\_\_\_ burial without embalming or viewing
- \_\_\_\_\_ cremated: \_\_\_ ashes scattered, \_\_\_ ashes buried, or  
\_\_\_\_\_ ashes returned to family
- \_\_\_\_\_ donate body for medical research

3. I prefer to have visitation or calling at:

- \_\_\_\_\_ the church with an
  - \_\_\_\_\_ open casket,
  - \_\_\_\_\_ closed casket,
  - \_\_\_\_\_ no casket.
- \_\_\_\_\_ funeral home with an
  - \_\_\_\_\_ open casket,
  - \_\_\_\_\_ closed casket,
  - \_\_\_\_\_ no casket.

4. Service preference relating to place, funeral/memorial service and burial:

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

5. \_\_\_\_\_ I want a funeral at minimal cost.  
\_\_\_\_\_ I leave the financial arrangements to my survivors' discretion.

6. These scriptures and writings have been meaningful to me:

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7. These hymns and songs are some of my favorites:

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8. I would like, if possible:

a. the following persons to assist in the service:

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b. I would suggest the following persons as pallbearers:

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9. I suggest memorial gifts to be designated for:

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10. Other preferences or requests:

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Name: \_\_\_\_\_

Date: \_\_\_\_\_

### Suggested Scriptures and Hymns

Many scriptures and hymns may be appropriate to include in a funeral or memorial service. The ones suggested here are not exhaustive but suggest areas of thought a family might choose.

#### Scriptures:

Psalm 23 "The Lord is my shepherd..."

Psalm 46 "God is our refuge and strength..."

Psalm 84:1-4; 10-12 "How lovely is thy dwelling place..."

Psalm 90 "Lord, you have been our dwelling place..."

Psalm 91 "You who live in the shelter of the Most High..."

Psalm 121 "I lift mine eyes to the hills..."

Psalm 139:1-18 "O Lord, you have searched me..."

Isaiah 40 "Comfort, O comfort my people..."

Isaiah 43:1-3 "Do not fear, for I have redeemed you..."

Matthew 11:28-30 "Come to me, you that are weary and are carrying heavy burdens..."

John 11 "I am the resurrection and the life..."

John 14 "Do not let your hearts be troubled..."

Romans 8 "There is therefore now no condemnation..."

I Cor. 15 "But thanks be to God, who gives us the victory..."

II Cor. 5 "...we have a building from God..."

Phil. 1:21 "For to me, living is Christ, and dying is gain."

I Thes. 4:13-18 "But we do not want you to be uninformed..."

"Therefore, comfort one another..."

I Thes. 5:1-11 "Therefore encourage one another..."

II Tim. 4:6-8 "I have fought the good fight..."

I Peter 1:22f "You have been born anew, not of perishable but of imperishable seed..."

I John 3:1-3 "...that we should be called children of God..."

Rev. 14:13 "...Blessed are the dead who from now on die in the Lord..."

Rev. 21:1-4 "...he will wipe every tear from their eyes. Death will be no more..."

Rev. 22:1-5 "...the Lord God will be their light..."

## Hymns:

(Hymn numbers come from *Hymnal: A Worship Book*.)

H 37 Praise to the Lord, the Almighty  
H 59 Sing praise to God who reigns  
H 62 Who is so great a God  
H 71 Joyful, joyful, we adore thee  
H 114 In thee is gladness  
H 118 Praise God from whom  
H 121 Holy God, we praise thy name  
H 143 Amazing grace!  
H 203 Break forth, O beautiful heavenly light  
H 263 The strife is o'er  
H 275 Lift your glad voices  
H 303 Come, gracious Spirit  
H 327 Great is thy faithfulness  
H 328 O God, our help in ages past  
H 332 Blessed assurance  
H 336 When peace like a river  
H 352 Gentle Shepherd, come and lead us  
H 366 God of grace and God of glory  
H 377 Healer of our every ill  
H 412 We shall walk through the valley  
H 425 Come, come ye saints  
H 486 God of our life  
H 491 Softly and tenderly Jesus is calling  
H 526 In the rifted Rock I'm resting  
H 545 Be thou my vision  
H 553 I am weak and I need thy strength  
H 576 If you but trust in God  
H 577 O love that will not let me go  
H 580 My life flows on  
H 581 Take thou my hand, O Father  
H 589 My Shepherd will supply my need  
H 592 Love divine, all loves excelling  
H 593 O Power of love  
H 596 And I will raise you up  
H 599 He leadeth me  
H 606 Oh, have you not heard  
H 614 In the bulb there is a flower  
H 616 Children of the heavenly Father

## Sing the Journey

STJ 27 God of the Bible  
STJ 44 The love of God  
STJ 46 O breathe on me, O breathe of God  
STJ 73 The Lord lift you up  
STJ 76 The Lord bless you and keep you  
STJ 95 I want to walk as a child of the light  
STJ 98 All will be well  
STJ 103 Why should I feel discouraged

## Sing the Story

STS 49 I will come to you in the silence  
STS 92 Sing with all the saints in glory  
STS 99 The Lord's my Shepherd  
STS 121 Nothing is lost on the breath of God

## Voices Together (insert, 2020)