



U.S. Coast Guard (MFH)
 Eighth District
 Regional Coordinator
 Base New Orleans

BaseNOLA.MFH@uscg.mil

Work (504)253-4797 | Cell (504)628-5177 | Fax (504)253-4826

MILITARY FUNERAL HONORS (MFH) REQUEST WORKSHEET

FUNERAL INFORMATION				
Date/Time Received:		Honors Desired:		
Placement:		Date of Funeral Honors:	Time of Funeral Honors:	
Name of Deceased: (Last, First, Middle)		Rank:	Branch of Service:	Military Status: Service Years:
SSN:	Birthday:	Date of Death:	Eligibility Verified:	
LOCATION OF FUNERAL SERVICES				
Choose One: <input type="checkbox"/> Cemetery <input type="checkbox"/> Chapel <input type="checkbox"/> Funeral Home <input type="checkbox"/> Other (Explain): _____				
Location Name:			Phone Number:	
Address:			POC Name:	
City, State, Zip				
NEXT OF KIN INFORMATION				
Person to Receive Flag:			Relationship:	
Address:			Phone Number:	
City, State, Zip:			POC Name:	
MORTUARY/FUNERAL HOME INFORMATION				
Name:			Phone Number:	
Address:			POC Name:	
City, State, Zip:			Mortuary to Supply Flag:	
ACTIVE DUTY MEMBERS/CHAPLAIN INFORMATION				
Chaplain Desired:	Choose One: <input type="checkbox"/> Protestant <input type="checkbox"/> Catholic <input type="checkbox"/> Other: _____		Date/Time	
FUNERAL DETAIL INFORMATION (For Funeral Honors Office Use Only)				
Command Assigned:	MFH Leader Name:	Man Hours Per Person:	Date & Time Assigned to Unit:	
Honors Rendered (Choose all that apply): <input type="checkbox"/> Full Detail <input type="checkbox"/> Flag Presentation <input type="checkbox"/> Tape/CD <input type="checkbox"/> Live Bugler <input type="checkbox"/> Other: _____				
Active Duty Names of MFH detail:				
Additional/Amplifying Information:				

MFH Leader, please confirm and reply to me via email when you have made contact with the Funeral Director for any additional information you may need or if anything changes. Upon completion of the MFH, fill out the Funeral Detail Information portion above and return to me via E-mail or Fax.