

No. _____
Office use only



**Oklahoma Funeral Board
Complaint Form**

Please fill out this form as completely as possible. **It is very important that you sign the form.** Please return to the Oklahoma Funeral Board by email, or mail/parcel service at 3700 N. Classen, Ste. 175, Oklahoma City, OK 73118, **email** (please scan signed form and use subject "Complaint"): info@funeral.ok.gov _____

Today's Date: _____

Name of decedent: _____

Date of death: _____

Place of death: _____ City: _____

Name of funeral home employee(s)
that picked up decedent from place of death: _____

Funeral Home: _____

City: _____

Date of funeral/cremation arrangements: _____

Name of funeral home employee that made arrangements: _____

Date of Funeral/Memorial/Graveside: _____

Place of Funeral/Memorial/Graveside: _____

City: _____

Cemetery: _____ City: _____

Please include photocopies of the following. If any were not provided, please mark the line on the right: NOT PROVIDED

- General Price List _____
- Statement of Goods & Services Selected (Contract) _____
- Other authorizations signed (cremation application, embalming authorization, etc.) _____
- Certified death certificate _____

Please note your experience and/or concerns on this page. Additional pieces of paper may be used, if needed.

I state under penalty of perjury under the laws of Oklahoma that the foregoing is true and correct.

Dated this ___ day of _____, **20**___

Signature: _____

'Rtlkpygf 'P co g aaa

Relationship to decedent: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Phone: _____