

BROWN MISSIONARY
BAPTIST CHURCH



TO MY LOVED ONES

Living Well / Dying Well

980 STATELINE ROAD EAST
SOUTHAVEN, MISSISSIPPI 38671
BARTHOLOMEW ORR, PASTOR

Dear Brown Member,

It is our prayer that this guide will be a blessing to you and your family.

When the time comes for your journey home, you want to spare your loved-ones stress, worry and indecisiveness.

The LORD told Habakkuk to write it down and make it plain, "Write it down and make it plain."

Pre-planning provides peace of mind and can help ease the emotional burden on your loved ones at the time of loss. It allows you to communicate your wishes to your family by recording your information and preferences in a well-structured written format.

No one likes to think about losing a loved one, but we all know that time will come. For this reason, planning is helpful to your family. It avoids confusion, uncertainty and unnecessary expenses that come from making emotional decisions. It also ensures that your wishes are carried out exactly as you desire.

Share your wishes with a family member, trusted friend, and/or your funeral director. If you do not want to review the guide with a family member, at least, let someone know where it can be located in the event of your death. Your planning guide should be kept in a safe place that is readily accessible to your family. It should not be kept in a safe-deposit box unless someone else has access to your box.

TO MY LOVED ONES

It is my desire that you be spared from anxiety, expense and inconvenience at the time of my death.

In this Memorial Planning Guide, you will find information I have recorded and a plan representing arrangements I made in advance, hoping to relieve you of the burden of these decisions at the time of need. If you give this booklet to a funeral director, everything will be conducted in accordance with my wishes.

Also recorded here are certain vital statistics that will be needed along with a list of important documents you will need.

I certainly hope you find these arrangements satisfactory and they help you retain a warm memory of the wonderful years we spent together.

With Love,

Date _____

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BROWN M. B. CHURCH CEMETERY GUIDELINES

The cost for the opening and closing is \$850.00. You may submit payment prior to funeral payable to Brown Missionary Baptist Church. Burial in cemetery requires at least a concrete box; vaults are allowed.

What BMBC provides for a member's funeral - We will be providing the following: Greeters, Ushers, Condolence, Media Ministry, and Musician/Choir. In order to confirm to the musician/choir, we will need a copy of the program three (3) days before funeral. It can be emailed to my attention.

Below you will find an outline of the recommended order of service:

Processional-----Ministers and Family
Musical Selection ----- BMBC Music Ministry
Scripture Reading: Old Testament
Scripture Reading: New Testament
Prayer
Words of Comfort (*if you prefer*)
Musical Selection -----BMBC Music Ministry
Expressions (*Note: If possible, please appoint no more than 3 people and 2 minutes per person*)
Acknowledgements (*if you prefer*)
Silent Reading of Obituary
Musical Selection- ----- Music Ministry
Eulogy
Recessional

Remains will not be viewed after the eulogy.

You do have the option to omit some of the items from the program. As you prepare your program, it is encouraged to have the service no longer than an hour.

If you are planning to do a slideshow of pictures, please provide me with a CD of no more than 30 pictures and submit it three (3) days before funeral at the Main Campus Welcome Center located at 980 Stateline Road East to the attention of Media. You may also email me the pictures. The pictures must be received by the deadline given; otherwise, we may not be able to play the pictures during the service.

Again, we are praying for you all and may God continue to comfort you during your time of bereavement.

Contact Information:
Mrs. Dana Mister, Chief Administrative Officer
Brown Missionary Baptist Church
980 Stateline Road East - Southaven, Mississippi 38671
662.342.6407 (Office) 901.302.8754 (Mobile)
Email address: dana@brownbaptist.org

"A Church Committed to Exalting the Savior, Equipping the Saints, and Evangelizing the Sinners."

LEGAL DOCUMENTS EVERYONE SHOULD HAVE

1. ***Living Will*** - A living will expresses your preferences about treatments should you be unable to communicate with your family and doctors. If you'd rather not be kept alive by extraordinary means for more than a month, for example, you can make those wishes known. Contrariwise, if you want your life prolonged by any means available, for as long as possible, no matter what your condition, you can make that clear, too.
2. ***Health Care Proxy*** - A health care proxy gives someone else the power to make health care decisions for you if you become incapacitated. Many hospitals provide these forms free of charge.
3. ***A Will*** - Unless you want the state you live in deciding what happens to your possessions, it's important to have a will. If your situation is fairly straightforward, you might be able to create one quickly and inexpensively with software such as Quicken's Will Maker Plus. However, it's often smarter to consult a professional about your situation to ensure that all of your wishes are addressed and that your will conforms with your state's laws. A lawyer can easily prepare a will for you, often for just a few hundred dollars.
4. ***A Durable Power of Attorney*** - This authorizes someone you trust to make financial and legal decisions for you if you can't make them for yourself. Taking this step can be critical, even if you're just unconscious temporarily (say for a few weeks) because of a post-surgery complication. You may need someone to close on a home you're selling, or deal with a credit card company. The paperwork involved is minimal, and the potential value of having this document in place is significant.

L-I-F-E OR FINANCIAL NEEDS ANALYSIS:

By: Clifton Eley

Date: _____

Name(s) _____

_____ **Loans-Mortgage**

_____ **Loans-Vehicles**

_____ **Loans-(Revolving, Credit Cards)**

_____ **Income (7X-10X)**

_____ **Final Expenses**

_____ **Education**

_____ **Total Need**

_____ - (minus) Existing Life Insurance

_____ - (minus) Assets (Savings, C.D.'s, IRA's)

_____ + (plus) Life Insurance for Church

_____ = Net Amount of Life Insurance

Current Life Insurance Carrier _____

SOCIAL SECURITY INFORMATION

A MESSAGE FROM THE SOCIAL SECURITY ADMINISTRATION:

Your funeral director is helping the Social Security Office by giving you this information about Social Security benefits. If the deceased was receiving benefits, you need to contact us to report the death. If you think you may be eligible for survivor benefits, you should contact us to apply for these benefits.

WHO CAN GET SURVIVOR BENEFITS?

Here is a list of family members who can usually get benefits:

- Widows & widowers age 60 or older;
- Widows & widowers at any age if caring for the deceased's child or children who are under the age of 16 or disabled;
- Divorced wives & husbands age 60 or older, if married to the deceased 10 years or more;
- Widows, widowers, divorced wives and divorced husbands age 50 or older, if they are disabled;
- Minor children up to age 18;
- Children age 18-19, if they attend school full-time;
- Children over age 18 if they became disabled before age 22;
- The deceased worker's parents age 62 or older, if they were being supported by the worker.

A SPECIAL ONE-TIME PAYMENT

In addition to the monthly benefits for family members, a one-time payment of \$255 can be paid to a spouse who was living with the worker at the time of death. If there is none, it can be paid to the following:

- A spouse who is eligible for benefits.
- A child or children eligible for benefits.

HOW TO APPLY FOR BENEFITS

You can apply for benefits by telephone, by going to any Social Security office, or by calling 1-800-772-1213.

INFORMATION NEEDED

- Your Social Security number and the deceased worker's Social Security number.
- A death certificate. (Generally, the funeral director provides a statement that can be used for this purpose.)
- Proof of the deceased worker's earnings for the last year (W-2 forms or self-employment tax return).
- Your birth certificate.
- A marriage certificate, if you are applying for benefits as a widow, widower, divorced wife, or divorced husband.
- A divorce decree, if you are applying for benefits as a divorced wife or husband.
- Children's birth certificate and Social Security numbers, if applying for children's benefits.
- Your checking or savings account information, if you want direct deposit of your benefits.

You will need to submit original documents or copies certified by the issuing office. You can mail or bring them to the office. Social Security will make photocopies and return your documents.

A REMINDER

If the deceased was receiving Social Security benefits, checks which arrive after death will need to be returned to the Social Security office. If Social Security checks were being directly deposited into a bank account, the bank needs to be notified of the death, too.

Social Security Administration Toll-Free Phone Number: 1-800-772-1213 – website: www.ssa.gov

VETERAN'S BURIAL BENEFITS

VETERAN'S BURIAL ALLOWANCE

The U.S. Department of Veterans Affairs (VA) furnishes a partial reimbursement of an eligible veteran's burial and funeral costs. When the cause of death is not service-related, the reimbursement is generally described as two payments: (1) a burial and funeral expense allowance, and (2) a plot interment allowance if:

- you paid for a veteran's burial or funeral AND
- you have not been reimbursed by another government agency or some other source, such as the deceased veteran's employer AND
- the veteran was discharged under conditions other than dishonorable.

In addition, at least one of the following conditions must be met:

- the veteran died because of a service-related disability or
- the veteran was receiving a VA pension or compensation at the time of death or
- the veteran was entitled to receive a VA pension or compensation but decided not to reduce his/her military retirement or disability pay or
- the veteran died in a VA hospital or while in a nursing home under VA contract

Service-Related Death: The VA pays an allowance toward burial expenses.

Nonservice-Related Death: The VA will pay an allowance toward burial and funeral expenses and a plot interment allowance. If the death happened while the veteran was in a VA hospital or under contracted nursing care, the cost of moving the deceased may be reimbursed.

HEADSTONES AND MARKERS

- The VA furnishes, upon request, at no charge to the applicant, a Government headstone or marker to mark the unmarked grave of any deceased eligible veteran in any cemetery around the world.
- Flat bronze, granite, or marble markers and upright headstones are available. The style chosen must be consistent with existing monuments at the place of burial.
- Niche markers are also available to mark columbaria used for inurnment of cremated remains.

BURIAL FLAG

Most veterans are eligible for a burial flag. Reservists entitled to retirement pay are also eligible to receive a burial flag. To facilitate receiving veterans' benefits for which you may be eligible, you will need the following when you contact the Veterans Administration Office:

- Proof of the Veteran's Military Service (DD214)
- Service Serial Number
- Certified Copy of the Death Certificate
- Marriage License (if applicable)
- Children's Birth Certificates (if applicable)

HISTORICAL RECORD FOR: _____

Name (First, Middle, Last) _____

Address: _____

City: _____ State _____ Zip Code: _____

Telephone #: _____ Education Level (required by state) _____

Birth Date: _____ Age: _____ Social Security Number _____

Birthplace (City and State): _____

Occupation (previous if retired): _____

Employer (or retired from): _____

Spouse's Name (include maiden): _____

Date of Marriage: _____ Place of Marriage: _____

Father's Name: _____ Birthplace (City and State): _____

Mother's Name: _____ Birthplace (City and State): _____

VETERAN INFORMATION

Are you a veteran? Yes No Service Number: _____

Branch of Service: _____ Rank at Discharge: _____

Enlistment (Date & Place): _____

Discharge (Date & Place): _____

FAMILY INFORMATION

Relation	Name	Address	Phone Number

PRECEDED IN DEATH BY

Relation	Name	Relation	Name

**FUNERAL SERVICE INSTRUCTIONS
AND INFORMATION FOR: _____**

This is information families do not usually discuss – especially the children. Yet, if something happened to you last night, these are the questions your funeral director would be asking your family today:

Would you prefer your service: At the Funeral Home Church Other _____

What is the name of your church? _____

Do you have a favorite minister, priest, bishop, or rabbi? _____

Final Disposition: Burial Entombment Other _____

Do you have a cemetery property? Yes No

Name and location of cemetery: _____

Lot #: _____ Space #: _____

Are there any readings or scriptures that are special to you? (Please list) _____

Favorite hymn or song? _____

What clothing do you prefer? From your current wardrobe New

If you are a veteran, you are entitled to a flag. Yes No

Would you like the flag folded and presented to your family? Yes No

Would you want your flag to drape the casket? Yes No

Would you like to wear jewelry? Yes No

Would you like it removed before burial? Yes No

Would you like to wear your eyeglasses? Yes No

Would you want the casket open during visitation? Yes No

Would you want the casket open during the service? Yes No

Most families prefer to have friends, neighbors, or relatives serve as pallbearers. Who would you prefer to act as pallbearers?

ACTIVE PALLBEARERS

Name	Phone Number

HONORARY PALLBEARERS

Name	Phone Number

NEWSPAPER NOTICES

Your name as it would appear in the newspaper: _____

Which newspaper would you like to be notified: _____

Groups and Organizations you are affiliated with (for obituary): _____

Some families prefer a memorial donation instead of flowers. Which would you prefer?

Memorial Donation Flowers Both

Who would you like donations made to? _____

CHURCH/ORGANIZATIONS

Received Christ at Age: _____ Baptism Date: _____

Name of Church: _____ Pastor: _____

Address: _____ Telephone: _____

City: _____ State: _____ Zip: _____

Date Joined: _____ Total Years Affiliated: _____

List Ministries: _____

Deacon Minister Ordained Installed as Pastor

Name of Previous Church: _____

Pastor: _____

Address: _____ Telephone: _____

City: _____ State: _____ Zip: _____

Date Joined: _____ Total Years Affiliated: _____

List Ministries: _____

Deacon Minister Ordained Installed as Pastor

Name of Present Church: _____

Pastor: _____

Address: _____ Telephone: _____

City: _____ State: _____ Zip: _____

Date Joined: _____ Total Years Affiliated: _____

List Ministries: _____

Deacon Minister Ordained Installed as Pastor

HISTORICAL INFORMATION (OBITUARY)

Education _____ Years _____ Degrees _____

Fraternity/Sorority _____ Years _____ Position Held _____

Military _____ Years _____ Rank _____

Civic or Public Office _____

Special Achievements/Recognition _____

ORGANIZATIONS TO NOTIFY

Name	Telephone Number

PERSONS TO NOTIFY

Relationship	Name	Telephone	Address	City, State, Zip

ESTATE INFORMATION

Will

Do you have a will? Yes No Date of Will: _____

Will Location: _____

Executor: _____

Telephone Number: _____

Address: _____

Attorney: _____

Telephone Number: _____

Address: _____

Additional Remarks: _____

Banking Information

Bank _____

Address _____

Checking Account # _____

Savings Account # _____

CD's Account # _____

Money Market Account # _____

Safety Deposit Box Location _____

Box # _____

Key Location _____

Person to Access Box (other than yourself) _____

Real Estate

Description _____

Deed Location _____

Description _____

Deed Location _____

Description _____

Deed Location _____

Description _____

Deed Location _____

Insurance

Notify the following Insurance Companies and/or other organizations paying death benefits.

Name _____ Policy Number _____

Name _____ Policy Number _____

Name _____ Policy Number _____

Name _____ Policy Number _____

Name _____ Policy Number _____

Location of Policies _____

Additional Remarks _____

PERSONAL PROPERTY LISTING

List all personal property that you would like to give to a specific person. If you make any changes on this page, draw one line through the information that you wish to change and write above it. Initial and date the change.

Person's Name _____

Address _____

Item _____ Description _____

Person's Name _____

Address _____

Item _____ Description _____

Person's Name _____

Address _____

Item _____ Description _____

Person's Name _____

Address _____

Item _____ Description _____

Person's Name _____

Address _____

Item _____ Description _____

Person's Name _____

Address _____

Item _____ Description _____

Person's Name _____

Address _____

Item _____ Description _____

SPECIAL INSTRUCTIONS AND INFORMATION

*This page is provided for you to update your guide.
Your guide should be kept current and each entry should be dated to avoid confusion.*

UPDATE OF SPECIAL INSTRUCTIONS	DATE	YOUR INITIALS

ADDITIONAL INFORMATION

FUNERAL HOME - CONTACT INFORMATION

R. S. LEWIS & SONS FUNERAL HOME

374 VANCE AVENUE

MEMPHIS, TENNESSEE 38126

CONTACT: ANDRE JONES - 901-526-3264

N. J. FORD & SONS FUNERAL HOME

12 SOUTH PARKWAY WEST

MEMPHIS, TENNESSEE 38109

CONTACT: EDGAR MILLER - 901-948-7755

E. H. FORD MORTUARY

3390 ELVIS PRESLEY BOULEVARD

MEMPHIS, TENNESSEE 38116

CONTACT: JOHN FORD - 901-345-9558

CHRISTIAN FUNERAL DIRECTORS

2615 OVERTON CROSSING

MEMPHIS, TENNESSEE 38127

CONTACT: LARON JACKSON - 901-358-0062

SERENITY FUNERAL HOME

1632 SYCAMORE VIEW ROAD

MEMPHIS, TENNESSEE 38134

CONTACT: GLORINETTE LOPEZ - 901-379-0861

M. J. EDWARDS FUNERAL HOME

5494 ELVIS PRESLEY BOULEVARD

MEMPHIS, TENNESSEE 38116

CONTACT: WENDELL NAYLOR - 901-332-3164

HENDERSON FUNERAL HOME

2746 PANOLA STREET

HERNANDO, MISSISSIPPI 38632

CONTACT: CEDRIC HENDERSON - 662-429-9443

JOE FORD FUNERAL HOME

1616 WINCHESTER ROAD

MEMPHIS, TENNESSEE 38116

CONTACT: JOE FORD - 901-345-6075

AFTER LIFE MORTUARY SERVICES

2207 S. LAUDERDALE ST.

MEMPHIS, TN 38106

901-600-3999

CONTACT PERSON: MADELINE LYLES OR DANA TAYLOR

INSURANCE COMPANIES
CONTACT INFORMATION

TONY BLACKMON
SHELTER INSURANCE
2154 GOODMAN ROAD, SUITE 1
HORN LAKE, MS 38637
662-393-0046 (OFFICE)
901-326-6604 (MOBILE)
TBLACKMON@AGENT.SHELTERINSURANCE.COM

CLIFTON ELEY
STATE FARM
2965 N. GERMANTOWN ROAD, SUITE 112
BARTLETT, TN 38133-4055
901-888-6000 (OFFICE)
CLIFTON.ELEY.FOYB@STATEFARM.COM

DOUG BUTLER
LIBERTY NATIONAL LIFE INSURANCE COMPANY
1355 LYNNFIELD ROAD, SUITE 286
MEMPHIS, TN 38119
901-238-4956 (CELL)
DOUGBUTLER7@GMAIL.COM

EUGENE SMITH
PRIMERICA
901-569-0959 (CELL)
ESMITH.52700@PRIMERICA.COM

CRANDALL CRAIGEN
PFS INVESTMENTS
CRANDALL CRAIGEN & ASSOCIATES
6000 POPLAR AVENUE, SUITE 250
MEMPHIS, TN 38119
901-261-5498