



LAST POST FUND  
FONDS DU SOUVENIR

# Unmarked Grave Program Preliminary Information Sheet

## Veteran Information:

<b>Surname:</b>	<b>Given Name(s):</b>
<b>Maiden Name/Alias:</b>	<b>Service Number:</b>
<b>Date of Birth:</b>	<b>Place of Birth:</b>
<b>Date of Death:</b>	<b>Place of Death:</b>
<b>Proof of Death:      Yes      No</b>	<b>Proof of Service:      Yes      No</b>
<b>Period of Service:</b>	<b>Religion:</b>
<b>Rank:</b>	<b>Service Unit:</b>
<b>Date of Joining:</b>	<b>Date of Release:</b>
<b>For an Indigenous Veteran, please provide traditional name (if available):</b>	
<b>Remarks:</b>	

## Burial & Grave Marker Data:

<b>Cemetery:</b>	
<b>Address:</b>	
<b>Contact person:</b>	<b>Email:</b>
<b>Phone:</b>	<b>Fax:</b>
<b>Type of Burial: Casket      Cremation      Unknown</b>	
<b>Burial Date:</b>	<b>Owner of plot:</b>
<b>Grave ID (Section, Lot, Grave #, Etc.)</b>	
<b>I confirm there is no permanent marker on the grave site.</b>	

## Applicant Information:

<b>Name:</b>	<b>Relation to Veteran:</b>
<b>Phone:</b>	<b>Email:</b>
<b>Address:</b>	
<b>Date of Submission:</b>	

This information sheet is a tool to assist with gathering information needed for an application under the Unmarked Grave Program. Please complete and return to the Last Post Fund to initiate an official application.

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[www.lastpostfund.ca](http://www.lastpostfund.ca) / [www.fondsdusouvenir.ca](http://www.fondsdusouvenir.ca)