## Riaz-ul Jannah

## **South Carolina Upstate Private Muslim Cemetery**

A unit of Islamic Societies of Greenville, Spartanburg & Clemson (Only for Muslim residents of Anderson, Cherokee, Greenville, Laurens, Oconee, Pickens and Spartanburg counties)

Date of Burial:///	Grave lo	Grave lot number					
Bu	ırial Record						
ame of Deceased							
(Last Name)	(First Name)	(Middle Name)					
ex (F/M)							
ate of Birth//	Date of Death	M DD YYYY					
S#							
ace of Death							
ity	State	-					
Iome Address:							
ome Address:	Street						
City	State	Zip					
esponsible person for deceased:							
(Last Name)	(First Name)	(Middle Name)					
ddress:							
	Street						
City	State	Zip					
hone: ()	()						
Home	\	Cell					

is of Muslim faith and l rules and regulations o understand that the ma neither owned nor lease	I am responsible for the payment the Riaz-ul Jannah cemetery anagement has only permitted to me. I pledge that I shall no us-Sunnah). I authorize and give	nt of the burial cost and fully agree to burial of the dece to indulge in any pa	st. I have read the abide by them. I ased; the space is ractice against the
demolish any structure have constructed on the right to ask for the Head as per their approved plamily will be responsib person will lead the fundamental structures.	that I or family member or frien grave which is in violation of the dstone installation, however ISG pattern with no Arabic inscript le for the cost. I will also abide weral prayer as per Fiqh us-Sunnagement's decision in this regar	nd of the deceased, in the cemetery rules. It will order and institution or verses from with the rule that the ah or the prayer we	relating heirs may The family has the stall the headstone n Quran, and the ne ISG responsible ill be held at some
SignatureSignature o	f a person authorized by the family of the deceas	Date:	_//
Witnesses:			
Name	Signature	Date: _	/
Name	Signature	Date: _	/
	with Headstone; \$3,000 without with Headstone; \$4,500 without \$1,000		
I would like donate \$	to Riaz-ul Jannah I	Muslim cemetery.	

Revised May 25, 2024



## SOUTH CAROLINA CERTIFICATE OF DEATH FUNERAL HOME WORKSHEET

1. DECEDENT'S LEGAL NAME (Include AKAs, if any) (First, Middle, Last)							2. SEX	2. SEX 3. SOCIAL SECURITY NUMBER				
			_									
4a. AGE-Last Birthday	4b. UNDER 1	YEAR	4c. UNDEF	R 1 DAY		1	TE OF E		6. BIRTHPLACE (City and State or Foreign Country)			
(Years) Months		Days	s Hours Minu		es	(IVIIVI/I	DD/YYY	1)				
7a. RESIDENCE-STATE		7b. COUN	JTY					7c CITY	OR TOWN			
								7 0. 0				
7d. STREET AND NUMBE	R				76	e. APT.	NO.	7f. ZIP C	ODE		7g. INSIDE CITY LIMITS?	
											Yes No	
	9. MARITAL ST				10. SUF	RVIVINO	SPOU	SE'S NAN	IE (Name prior to fi	st marriage	)	
ARMED FORCES?  ☐ Yes ☐ No	☐ Married ☐ M☐ Divorced ☐		•									
			nica 🗀 onki	TOWIT	12 MO	TUED'S	NAME	DDIOD T	O FIDET MADDIAC	□ /□irot Mic	Idlo Loot)	
11. FATHER'S NAME (First, Middle, Last) 12. MOTHER'S NAMI						) INAIVIE	PRIOR II	RIOR TO FIRST MARRIAGE (First, Middle, Last)				
13a. INFORMANT'S LEGA	AL NAME	1	I3b. RELATIO	NSHIP TO	DECED	ENT	13c. MA	AILING AE	DRESS (Street and	d Number, C	ity, State, Zip Code)	
									,			
18. METHOD OF DISPOS	ITION   Buri	ial 🗌 Crem	nation	19. PLA	CE OF DI	SPOSI	TION (N	ame of ce	metery, crematory,	other place)		
☐ Donation ☐ Entomb	_	noval from st	ate									
20. LOCATION-CITY, TOW												
20.200/011 011 1, 1011	,,,,,,,											
the box that best describes degree or level of school co time of death.  8th grade or less  9th-12th grade; no diplo  High school graduate or  Some college credit, bu  Associate degree (e.g., Bachelor's degree (e.g., MEd, MSW, MBA)  Doctorate (e.g., PhD, Esional degree (e.g., MD LLB, JD)	8th grade or less 9th-12th grade; no diploma High school graduate or GED completed Some college credit, but no degree Associate degree (e.g., AA, AS) Bachelor's degree (e.g., BA, AB, BS)  Master's degree (e.g., MA, MS, MEng, MEd, MSW, MBA)  Doctorate (e.g., PhD, EdD) or Professional degree (e.g., MD, DDS, DVM,				edent is Sp ox if decedino/Latina an, Chican	indicate what the decedent considered himself or he white Black or African American  ob/Latina  Chicano/Chicana  tino/Latina  tino/Latina  indicate what the decedent considered himself or he white Black or African American  American Indian or Alaska Native  (Name of the enrolled or principal tribe)  Asian Indian  Chinese  Filipino  Japanese  Korean  Vietnamese  Other Asian (Specify)  Native Hawaiian  Guamanian or Chamorro  Samoan  Other Pacific Islander (Specify)  Other (Specify)				ered himself or herself to be.		
55. KIND OF BUSINESS/IND	DUSTRY											
The information										accurate	e and truthful.	
Sigi	nature of Inform	nant Requir	red				_	D	ate Required	-		
The collection and reporti (see 45 CFR §§ 160.203 (											from the death certificate.	
For DHEC Use C	Only											
State File #		<del> </del>	Date of [	Death <sub>-</sub>								