## Obituary/Death Notice Information

Deceased Name:		
Date of Death:	Where:	
Date of Birth:	Where:	
City of Residence:	How Long?	
Spouse:	Years Married?	Surviving? $\square$ Yes $\square$ No
Children:		
	65	~&
Grandchildren:		
Great Grandchildren:		
Parents:		
Siblings:		
Preceded in Death:		

## Obituary/Death Notice Information

Tell us about your loved one. What did s/he love to do? What would y	ou like others to know about him/her? If you were
to close your eyes and think about him/her, what is the first thing that	t comes to mind? What would s/he want others to
know about his/her life?	
	C- O4
In Lieu of Flowers:	
Special Thanks:	
Service and Visitation Details:	