



## DECEASED MEMBER NOTICE

2018-2019

[PLEASE TYPE OR PRINT]

Unit # \_\_\_\_\_ Unit Name \_\_\_\_\_ Dist. \_\_\_\_\_ Zone \_\_\_\_\_

Name of Deceased: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Date of Death: \_\_\_\_\_ Denomination: \_\_\_\_\_

Name of Next of Kin: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Relationship to Deceased: \_\_\_\_\_

Name of Person Submitting Form: \_\_\_\_\_

Title: \_\_\_\_\_ Unit: \_\_\_\_\_ Phone # \_\_\_\_\_

**Mail Form to Department Chaplain: Rev. Mattie C. Carr  
741 N. Main Street  
Halifax, Virginia 24558**

Units submit a copy to District Chaplains, and a copy to Department Chaplain.  
If you have any comments, a picture or a copy of obituary concerning Deceased member; please include as on a separate page along with this form..