



Death Notice

To: Worthy Grand Matron

Date: _____

Copy To: Grand Chaplain _____

Grand Secretary _____

Name of Member: (Sister/Brother) _____

GA Membership ID # _____

Date of Death: _____

Current Office Held: _____

Next of Kin (Mr./Mrs./Ms.) Name & Address:

Next of Kin Member of OES: Yes ___ No___

Relationship: _____

Secretary Name & Address:

Chapter Name: _____

Chapter #: _____ District: _____

Revised November 2014



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Revised November 2014