

# LAKE UNION HERALD

## OBITUARY FORM

This form may be filled out by the pastor, church secretary, or communication leader. Please **type or clearly print** all information and **verify spellings and dates**.

\_\_\_\_\_   
 *name & phone number of person who filled out this form*

Checked for completeness and approved by:

\_\_\_\_\_   
 *conference communication director*

**Send this completed form to your local conference communication director:**

- Illinois, 619 Plainfield Rd., Ste 200, Willowbrook, IL 60527
- Indiana, P.O. Box 1950, Carmel, IN 46082-1950
- Lake Region, 8517 S. State St., Chicago, IL 60619
- Michigan, P.O. Box 19009, Lansing, MI 48901
- Wisconsin, P.O. Box 7310, Madison, WI 53707-7310

**Please fill in blanks and VERIFY all information.**

\_\_\_\_\_, \_\_\_\_\_ (\_\_\_\_\_), age \_\_\_\_\_; born \_\_\_\_\_ . \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_,   
 *LAST NAME given name & initial maiden name age at time of death month day, year*

in \_\_\_\_\_, \_\_\_\_\_; died \_\_\_\_\_ . \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, in \_\_\_\_\_,   
 *city state or country month day year city*

\_\_\_\_\_.  He  She was a member of the \_\_\_\_\_ Church, \_\_\_\_\_, \_\_\_\_\_.   
 *state name of church city state*   
 *(Indicate where church membership was held while the deceased was living in the Lake Union, even if death occurred elsewhere.)*

**SURVIVING family members:** Give each man's given name, initial, and family name *as he was known*, and give each woman's given name and initial, (maiden name), and married name. Separate the family members' names with commas.

**DO NOT LIST DECEASED FAMILY MEMBERS.** These are the only family members we list. Aunts and uncles, nieces and nephews, and cousins are not listed. **Space does not permit listing the city where each surviving family member lives.**

Survivors include  his wife  her husband, \_\_\_\_\_;   
 *surviving spouse's given name, initial, and (maiden name)*

Son(s), \_\_\_\_\_;

Stepson(s), \_\_\_\_\_;

Daughter(s), \_\_\_\_\_;

Stepdaughter(s), \_\_\_\_\_;

Foster child(ren), \_\_\_\_\_;

Father, \_\_\_\_\_; Mother \_\_\_\_\_ (\_\_\_\_\_)   
 *maiden name*

Brother(s), \_\_\_\_\_;

Stepbrother(s), \_\_\_\_\_;

*(Please see the second page for the continuation of this list.)*

Half brother(s), \_\_\_\_\_;

Sister(s), \_\_\_\_\_;

Stepsister(s), \_\_\_\_\_;

Half sister(s), \_\_\_\_\_;

\_\_\_\_\_ grandchildren; \_\_\_\_\_ great-grandchildren; and \_\_\_\_\_ great-great-grandchildren;  
*number number number*

\_\_\_\_\_ step-grandchildren; \_\_\_\_\_ step-great-grandchildren; and \_\_\_\_\_ step-great-great-grandchildren.  
*number number number*

Funeral  Memorial services were conducted by \_\_\_\_\_  
*(Please use first and last names) (officiant)*

\_\_\_\_\_, and

interment (*if buried*)  inurnment (*if cremated*) was in \_\_\_\_\_  
*name of facility*

Cemetery  Mausoleum, \_\_\_\_\_, \_\_\_\_\_ (*or*)  with private inurnment (*if the ashes*  
*city or township state*

*of the deceased were given to the family*).

**NOTE:** These records may be used by people who are doing genealogy research, so the information must be as complete and accurate as possible. Be particularly careful to include the women's full names, including the maiden name (if possible), so people can trace both sides of their family tree.

Incomplete obituaries will be returned for completion. If you intend to leave a blank unfilled write N/A (not applicable) in the space, so the editors will know you didn't just miss filling it in.

Please copy the obituary form on both sides of a single sheet of **yellow** paper.