**TO BE RETURNED TO BEREAVEMENT COMMITTEE**

**BEREAVEMENT NOTICE**

**The Passing of: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date: \_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_**

**Memorial Service:**

 **Date: \_\_\_\_\_/\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_**

**Time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**RECEPTION TO FOLLOW AT:**

 **Location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **NUMBER OF GUESTS ANTICIPATED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **NUMBER OF FAMILY TABLES NEEDED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Updated 11/22**