

DATE: _____

TO: M.W. Shelton D. Redden , Grand Master

SUBJECT: Recent Death of a Brother

Name of Deceased: _____

Lodge Name: _____ Lodge Number _____

Date of Death: _____

Charity Fund Status: Good Standing ___ Out-of-Bounds ___

FUNERAL ARRANGEMENTS:

Masonic Funeral Desired: Yes ___ No ___

Date of Wake: _____ Time: _____

Date of Funeral: _____ Time: _____

Names of Church: _____

Church Address: _____

Funeral Director: _____

Funeral Director's Address: _____

INFORMATION RECEIVED FROM: _____

REMARKS:

SIGNATURE: _____

TITLE: _____