**St. Paul CME Church**

**Bereavement Form**

Name of Deceased: Enter First, Middle and Last Name

Date of Death: Click or tap to enter a date.

Next of Kin: Click or tap here to enter text. Relationship: Click or tap here to enter text.

Address: Click or tap here to enter text.

Telephone: XXX-XXX-XXXX

How long a member of St. Paul: Click or tap here to enter text.

Boards/Auxiliaries: Click or tap here to enter text.

Other family members who are members of St. Paul: Click or tap here to enter text.

Occupation/Profession: Click or tap here to enter text.

Tentative Date of Service: Click or tap to enter a date.

Officiant: Click or tap here to enter text.

Funeral Home: Click or tap here to enter text.

Interment: Click or tap here to enter text.

Repast Request: Click or tap here to enter text.

Special Instructions/Information: Click or tap here to enter text.

Notes: Click or tap here to enter text.