NOTIFICATION OF DEATH

By: **Time:** **Date:**

☐ Funeral Mass ☐ Memorial Mass (Cremation) ☐ Memorial Anniversary Mass

Deceased (Last, First): **Age:** **Male** ☐ **Female** ☐

Death Date: **Cause:** **Birth Date:**

Next of Kin (Last, First): **Relationship:**

Address:

Phone Number: **2nd Phone Number:**

Mortuary: **Contact:** **Phone:**

Vigil (Day, Date, Time): **Location:**

Vigil Presider:

Mass (Day, Date, Time): **Location:**

Mass Presider:

Cemetery: **Language:**

Bereavement Ministers: (1) **Phone Number:**
(2) **Phone Number:**
(3) **Phone Number:**
(4) **Phone Number:**

Cantor: **Phone Number:**

Pianist/Organist: **Phone Number:**

Notes: