



"IT'S HARD TO FORGET SOMEONE WHO HAS GIVEN YOU SO MUCH TO REMEMBER." - UNKNOWN

WE HERE AT ORTA KNOW THAT IT'S HARD TO COPE WITH THE PASSING OF A TEACHER, LOVED ONE, PARENT AND FORMER MEMBER OF OUR ORGANIZATION. WE HAVE CREATED THE FORM BELOW TO SEND BACK TO US FOR OUR RECORDS. THIS ALLOWS FOR US TO STOP SENDING UNWANTED MAIL, MAKING UNNEEDED PHONE CALLS ETC., TO BEREAVED FAMILY AND LOVED ONES.

PLEASE SEND ANY NAMES OF THE MEMBERS WHO YOU MAY HAVE RECORD OF PASSING **IN 2018**

COUNTY/CHAPTER: _____

YOUR NAME & CHAPTER POSITION TITLE: _____

LIST OF DECEASED MEMBERS:

(PLEASE LIST NAME AND ADDRESS OF MEMBERS, ALONG WITH DATE PASSED)

- 1 _____
- 2 _____
- 3 _____
- 4 _____
- 5 _____
- 6 _____
- 7 _____
- 8 _____
- 9 _____
- 10 _____

LIST OF DECEASED MEMBERS:

(PLEASE LIST NAME AND ADDRESS OF MEMBERS, ALONG WITH DATE PASSED)

11 _____

12 _____

13 _____

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THANK YOU FOR YOUR SUBMISSION. SHOULD YOU NEED ADDITIONAL SPACE, PLEASE
USE THE BACK OF THIS FORM