

CHAPLAIN'S REPORT OF DECEASED MEMBERS 2018/2019

It is with deep regret that I inform you of the death of Member _____ who went to her/his heavenly home on _____

Member ID _____

Auxiliary Name _____ Number _____ District _____

Submitted by _____ Title _____

Phone Number _____

**Mail to: Kathy Smith, Dept. Chaplain
9398 Central Ave., Orangevale, CA 95662-4202**

(Please list family contact information on reverse if you wish a card to be sent)

✂ *****

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Mail to: **VFW Auxiliary Dept. of California
9136 Elk Grove Blvd, Suite 101
Elk Grove, CA 95624**

✂ *****

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Mail to: **YOUR - District Chaplain**