

MISSISSIPPI CONFERENCE UNITED METHODIST WOMEN

NECROLOGY REPORT FORM

August 1, 2017 to July 31, 2018

District \_\_\_\_\_

Name of Church \_\_\_\_\_

Unit or Circle \_\_\_\_\_

In Memory of \_\_\_\_\_ (Print Name)

Date of Death \_\_\_\_\_ (Age) \_\_\_\_\_

Please write a short biography of the woman listed above. List positions held, contributions and achievements made in the organization of United Methodist Women. Make copies of this form if you have more than one woman who passed away during this time period.

DO NOT USE MORE THAN THIS SPACE. SPACE IS LIMITED IN THE "IN MEMORY" SECTION OF THE ANNUAL MEETING PROGRAM BOOK.

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RETURN THIS COMPLETED FORM TO: Linda Stepko, Conference MNO, 185 Anderson Rd., Hattiesburg, MS 39401. OR e-mail to lindastepko@aol.com

Information from this form is used to compile the IN MEMORY section listed in the program book for the Annual Meeting in October. Any forms received after August 1, 2017 may not be included in the program book. THIS FORM CAN BE SENT TO ME AT ANY TIME. Do not wait until the last minute.

Name of person submitting form: \_\_\_\_\_

Phone # \_\_\_\_\_ e-mail address \_\_\_\_\_