



# Obituary Helper

phone: 541-963-5022 fax: 541-963-2278 email: lfc@lovelandfuneralchapel.com

## Name and Announcement

Full Name \_\_\_\_\_

Nickname \_\_\_\_\_ Maiden Name \_\_\_\_\_

Residence \_\_\_\_\_

Death Date \_\_\_\_\_ Death Place \_\_\_\_\_

Cause of Death (optional) \_\_\_\_\_

## Life

Birth Date \_\_\_\_\_ Birth Place \_\_\_\_\_

Father Name \_\_\_\_\_ Mother (Maiden ) Name \_\_\_\_\_

Places of Residence \_\_\_\_\_

Schools Attended \_\_\_\_\_

Marriage(s) \_\_\_\_\_

Employment \_\_\_\_\_

Awards, Recognition \_\_\_\_\_

Hobbies, Activities \_\_\_\_\_

Sports \_\_\_\_\_

Organizations \_\_\_\_\_

Achievements \_\_\_\_\_

Military \_\_\_\_\_

turn over →

**Surviving Family**

Spouse Name \_\_\_\_\_ Residence \_\_\_\_\_

Child Name \_\_\_\_\_ (Spouse) \_\_\_\_\_ Residence \_\_\_\_\_

Child Name \_\_\_\_\_ (Spouse) \_\_\_\_\_ Residence \_\_\_\_\_

Child Name \_\_\_\_\_ (Spouse) \_\_\_\_\_ Residence \_\_\_\_\_

Child Name \_\_\_\_\_ (Spouse) \_\_\_\_\_ Residence \_\_\_\_\_

Child Name \_\_\_\_\_ (Spouse) \_\_\_\_\_ Residence \_\_\_\_\_

Child Name \_\_\_\_\_ (Spouse) \_\_\_\_\_ Residence \_\_\_\_\_

Parents Names \_\_\_\_\_ Residence \_\_\_\_\_

Sibling Name \_\_\_\_\_ (Spouse) \_\_\_\_\_ Residence \_\_\_\_\_

Sibling Name \_\_\_\_\_ (Spouse) \_\_\_\_\_ Residence \_\_\_\_\_

Sibling Name \_\_\_\_\_ (Spouse) \_\_\_\_\_ Residence \_\_\_\_\_

Sibling Name \_\_\_\_\_ (Spouse) \_\_\_\_\_ Residence \_\_\_\_\_

Sibling Name \_\_\_\_\_ (Spouse) \_\_\_\_\_ Residence \_\_\_\_\_

Sibling Name \_\_\_\_\_ (Spouse) \_\_\_\_\_ Residence \_\_\_\_\_

# of Grandchildren \_\_\_\_\_ # of Great Grandchildren \_\_\_\_\_ # nieces and nephews \_\_\_\_\_

Aunts and Uncles \_\_\_\_\_

Others \_\_\_\_\_

**Predeceased Family**

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

I prefer my obituary to appear in the following newspaper(s): \_\_\_\_\_

In lieu of flowers, memorial donations may be made to: \_\_\_\_\_

I hereby authorize the preceding biographical information to be used for the above named Beneficiary, by Loveland Funeral Chapel, or their authorized agent for obituary purposes only.

Signed: \_\_\_\_\_

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_