Notice of Death	Notice of Death
Lodge Name:	Lodge Name:
District No Lodge No	District No Lodge No
Membership No.(s)	Membership No.(s)
Print Full Name of Deceased Member	Print Full Name of Deceased Member
Address	Address
Date of Death	Date of Death
WILL MEMORIALS TO THE S/N FOUNDATION BE REQUESTED? DATED SIGNED Form 10-A (12/04) LODGE OFFICER	WILL MEMORIALS TO THE S/N FOUNDATION BE REQUESTED? Dated Signed Form 10-A (12/04) LODGE OFFICER

Notice of Death	Notice of Death
Lodge Name:	Lodge Name:
District No Lodge No	District No Lodge No
Membership No.(s)	Membership No.(s)
Print Full Name of Deceased Member	Print Full Name of Deceased Member
Address	Address
DATE OF DEATH MONTH YEAR	Date of Death
NAMES OF SURVIVORS	NAMES OF SURVIVORS
Will Memorials to the S/N Foundation be Requested?	Will Memorials to the S/N Foundation be Requested?
DATED SIGNED LODGE OFFICER	DATED SIGNED LODGE OFFICER
Form 10-A (12/04)	Form 10-A (12/04) LODGE OFFICER