



**FULLFILLING OUR PROMISES**  
TO THE MEN AND WOMEN WHO SERVED

**DEPARTMENT OF ALABAMA DISABLED AMERICAN VETERANS**

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**\*\*\*Keep Prayer Alive**

**\*\*\*We Walk By Faith**

Date \_\_\_\_\_

It is my unfortunate duty to inform you of the passing of a member of the following Chapter:

Chapter \_\_\_\_\_ District \_\_\_\_\_

Membership # \_\_\_\_\_ Date Deceased \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Burial Date \_\_\_\_\_ Location \_\_\_\_\_

Reporting Official \_\_\_\_\_

Signature \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**Please Print or Type Only**