



# ST. ANN CATHOLIC CHURCH

6712 El Paso Street, Bonners Ferry, ID 83805

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## NOTIFICATION OF DEATH FORM

Name of the deceased \_\_\_\_\_

Age \_\_\_\_\_ date of death \_\_\_\_\_

Parish of the deceased \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Funeral Service: Mass  Church Service without Mass  Graveside service

Blessing at the Parlor

Date \_\_\_\_\_ Time \_\_\_\_\_

Body  Ashes  Memorial

Place of burial \_\_\_\_\_ Date \_\_\_\_\_

Attending priest/s \_\_\_\_\_

Funeral Parlor \_\_\_\_\_

Address \_\_\_\_\_

Telephone no. \_\_\_\_\_

Informant's name \_\_\_\_\_

Relationship to deceased  Son/ Daughter  Husband/Wife  Mother/Father

Relative \_\_\_\_\_  Friend

Informant's telephone number \_\_\_\_\_

Address of the family \_\_\_\_\_

OFFICE USE

Date of DEATH \_\_\_\_\_

Parish Priest \_\_\_\_\_

Book No. \_\_\_\_\_ Page No. \_\_\_\_\_ Line No. \_\_\_\_\_

Notes \_\_\_\_\_