Necrology Report Form

AUGUST 1, 2025 TO JULY 31, 2026

District _____

Name of Church _____

Unit or Circle _____

In Memory of _____

Date of Death _____ Age _____

Please write a short biography of the woman listed above. List positions held and contribution 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 span.

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

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RETURN THIS COMPLETED FORM TO: **Ruby Lovett**
POB 661 | Hattiesburg, MS 39403
Email: ruby_lovett@aol.com | Text : (662) 897-0581

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, 2026, will not be included in the 2026 Annual Conference Meeting Program Book but will be saved for the 2027 book. THIS FORM CAN BE SENT AT ANY TIME.

Name of person submitting form: _____ Phone _____