



"Eaton County's Advertising & News Journal"

• 241 South Cochran Ave., Suite #1 • Charlotte, MI 48813
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STANDARD OBITUARY FORM

Date To Be Published: Funeral Home: Phone:

This area to be used for both, a brief one paragraph announcement which is free of charge and full announcement.

Mr. / Mrs. / Miss Name Age Address

died at a.m. / p.m. Time Circle One Day/Date

at Place of death Services will be / were held Circle One

Time and Day at Location of Services

Continue Here for Full Obituary for a charge of \$30.00 plus \$5.00 for each photograph

Mr. / Mrs. / Miss Last Name Date of Birth was born on

at Location of Birth, the son / daughter of Parents Names

He / She was raised in Fill In Appropriate Information

and attended Schools, graduating in

Fill in additional information about where deceased lived and was educated as needed. Use reverse side if necessary.

He/She was married to Name of Spouse on Wedding Date

at Location of Wedding, fill in information about employment and dates of employment where available

He/She was a member of Fill in information about community activities, military service, club memberships, offices held, religious affiliation and other pertinent information.

