

Ladies Auxiliary of the Fleet Reserve Association  
(Please type or print information)  
NOTIFICATION OF A DEATH OF A UNIT MEMBER

YEAR 2023-2024

.....  
TO: National Financial Secretary: LA FRA DEATH NOTIFICATION  
National Financial Secretary  
PO Box 706  
Goose Creek SC 29445

Name of Deceased: \_\_\_\_\_ Membership# \_\_\_\_\_

Name of Next of Kin: \_\_\_\_\_ Relationship \_\_\_\_\_

Address: \_\_\_\_\_

Date of Death: \_\_\_\_\_ Unit# \_\_\_\_\_

Region: \_\_\_\_\_ (TITLE IF PAST NATIONAL OFFICER) \_\_\_\_\_

Telephone: \_\_\_\_\_

UNIT CHAPLAIN \_\_\_\_\_

Email: \_\_\_\_\_

.....  
TO: National Chaplain: Julia Fogel DEATH NOTIFICATION  
149 Laurelwood Ln  
Crossville TN 38555-3721

Name of Deceased: \_\_\_\_\_ Membership# \_\_\_\_\_

Name of Next of Kin: \_\_\_\_\_ Relationship \_\_\_\_\_

Address: \_\_\_\_\_

Date of Death: \_\_\_\_\_ Unit# \_\_\_\_\_

Region: \_\_\_\_\_ (TITLE IF PAST NATIONAL OFFICER) \_\_\_\_\_

Telephone: \_\_\_\_\_

UNIT CHAPLAIN \_\_\_\_\_

Email: \_\_\_\_\_

.....  
TO: Regional Chaplain: DEATH NOTIFICATION

Name of Deceased: \_\_\_\_\_ Membership# \_\_\_\_\_

Name of Next of Kin: \_\_\_\_\_ Relationship \_\_\_\_\_

Address: \_\_\_\_\_

Date of Death: \_\_\_\_\_ Unit# \_\_\_\_\_

Region: \_\_\_\_\_ (TITLE IF PAST NATIONAL OFFICER) \_\_\_\_\_

Telephone: \_\_\_\_\_

UNIT CHAPLAIN \_\_\_\_\_

Email: \_\_\_\_\_