**WHEN A CHAPTER MEMBER PASSES AWAY…….**

Immediately, within 10 days –

❑ Complete Form 6 *“Report of the Death of a Member”*

❑ Identification Number – the chapter treasurer has this.

❑ Name of deceased member – **make a note of how to pronounce the**

**name** (this is important for the State Necrology Service).

❑ Date of death – include month, day and year.

❑ Residence – include complete address.

❑ Name and address of closest relative and/or friend – include name,

relationship, and complete address.

❑ Look for an obituary in the local newspaper or a burial service program

to include with your Form 6 to the State Membership Chairman.

❑ Make 5 copies of Form 6 that are easy to read.

❑ Get 4 business envelopes and address them as follows or e-mail to:

❑ Delta Kappa Gamma Society International

P.O. Box 1589

Austin, TX 78767-1589

[mem@dkg.org](mailto:mem@dkg.org).

❑  Patricia Cermak, ADS President

9504 Greenhaven Parkway

Brecksville, OH 44141

[patriciaj2@juno.com](mailto:patriciaj2@juno.com)

❑ Diana Haskell, State Treasurer

8726 Redcloud Ct.

Cincinnati, OH 45249-2317

[dianah@cinci.rr.com](mailto:dianah@cinci.rr.com)

❑  Meier Bauer, Membership Chair

465 Woodlands Ridge Dr.

Cincinnati, OH 45238

[mhbauer@fuse.net](mailto:mhbauer@fuse.net)

❑ Place a copy in the chapter Necrology file

❑ Contact the family and plan a chapter memorial service for the deceased

member at the funeral home if the family requested one.

❑ Contact the family to determine if they would like to return the Delta Kappa

Gamma pin of the deceased to the chapter.

❑ Send Form 6 immediately. If it is sent long after a death, it is awkward for

the State Membership Chairman to send a note of condolence.

❑ Complete State Necrology Report by February 1st deadline. This is an annual

report and must be sent even if there were no deaths in the chapter.