



The BALTIMORE COUNTY VOLUNTEER FIREMEN'S ASSOCIATION

DECEASED MEMBER NOTICE

Station Number	Name of Company or Auxiliary
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INFORMATION ABOUT DECEASED MEMBER			
Title of Member	First Name	Middle Name or Initial	Last Name
Date of Birth	Date of Death		

INFORMATION ABOUT NEXT-OF-KIN			
Salutation	First Name	Middle Name or Initial	Last Name
Address			
City	State	Zip Code	Telephone Number
Relationship to Deceased			

COMPANY OFFICIAL SUBMITTING REPORT	
Printed Name	Signature
Title	Date

A PHOTOGRAPH OF THE DECEASED MEMBER IS ENCLOSED: YES NO

INSTRUCTIONS FOR THE USE OF THIS FORM

- Form to be completed for every member of your Company or Ladies Auxiliary who has died between **August 1st, of the previous year and August 1st of this year.** Then return the form, **with a photograph of the deceased** as soon as possible, to:

The Baltimore County Volunteer Firemen's Association
700 East Joppa Road, 3rd Floor
Towson, MD 21286
Email: bcvfa-admin@baltimorecountymd.gov

- We want accurate information about the name and address of next-of-kin, so that we can send them an invitation to the service.