



**Rogue Valley Genealogical Society &
Jackson County Genealogy Library**

Obituary Form

Please complete information on this form or provide a completed obituary.

Information on Deceased

Name _____

(Title) (First) (Middle) (Last)

Date of Death _____ Sex (M/F) _____

Age _____ Residence at the time of death _____

Period of Residency _____

Cause of death _____

Date of Birth _____ Place of Birth _____

Father's Name _____

Mother's Name _____

Spouse's Name _____

Residence of Spouse _____ Yrs. Married _____

Children (and children's spouses). Use additional pages if needed.

First and Last Names	City, State	Deceased(Y/N)	Sex(M/F)
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Number of Grandchildren _____

Number of Great-Grandchildren _____

Names of Siblings. Use additional pages if needed.

First and Last Name

City, State

Deceased (Y/N)

Sex (M/F)

Military service, if any _____

Education/Work _____

Memberships/Organizations/Awards/Other _____

Funeral/Memorial Service information (include address) _____

Burial information _____

Memorial contributions may be made to (include address) _____

Funeral home (include phone number) _____

Contact for family (include phone number) _____

If you would like us to create a Memorial Memories Page as well as the Obituary Page, please submit additional photos and the complete Memorial Memories Form.

P.O. Box 1468, Phoenix, OR 97535 (541) 512-2340

www.rvgslibrary.org Email: memorials@rvgslibrary.org