 **IN MEMORY OF**

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| --- | --- |
| Church Name: |  |
| District Name: | **Colorado** |
| Assembly Date: | **June 16-18, 2016** |

**Deceased Church Members**

PASTOR:

Please list below all church members deceased May 1, 2015 – April 30, 2016.

This form should be returned to the **DISTRICT OFFICE** by May 15th.

*This information is NOT for the NMI Memorial Roll.*

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**Signature: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_**

Pastor Date