



**Delta Kappa Gamma Necrology-Chapter
2019 Annual Report
Due February 1, 2020**

Form 2
Jan.-Dec. 2019

DIRECTIONS:

Send one copy to each of the following, **if requested by your state organization:**

1. State Organization Necrology or State Membership Committee Chair (contact State Organization for address or email)
2. Chapter President
3. Chapter File

Copies may be duplicated before mailing. Questions may be answered as needed on a separated sheet and attached to this form.

Greek Name of Chapter (e.g., Alpha)	Geographic Name of State Organization (e.g., Texas, Alberta, Sweden)	Date of Report
Name of Chapter Necrology or Membership Committee Chair		E-Mail Address

1. Number of deceased members since last year's report (February 2, 2019):
Be sure that all names listed in this report have been sent to Society Headquarters on a Form 6.
2. List alphabetically all deceased members. Please print or type-last name first. Use additional pages if necessary.
(We use this to verify our records)

ID Number	Last Name, First Name	Address	Date of Death