



NATIONAL SOCIETY OF THE DAMES OF THE COURT OF HONOR

NECROLOGY FORM — 2023-2025

Last Name, First Name, Middle Name Maiden Name Husband's Full Name (living or deceased)

Street or PO Address, City, State, Zip Code

National Number/State Number Date of Admission to Society Name of State Society

Place of Death Date of Death Date of Interment

Place of Interment (City & State) Name of Cemetery

Next of Kin (if husband deceased) Relationship Full Name

Street or PO Address, City, State, Zip Code

Date Reported to National Date Memorialized by State

National Offices Held:

State Offices Held:

Name of State President: _____

Address: _____

Phone Number AND email: _____

Name of State Chaplain: _____

Address: _____

Phone Number AND email: _____

This form may be copied. Please keep extra copies on hand. Complete this form as soon as you are notified of the death of a member. Retain a copy for your files and mail/email the original to:

NSDCH Chaplain General: Elaine Thames, 61 Chasewood Lane, Senoia, GA 30276-6717
thameselaine@gmail.com (770) 599-0250

NSDCH Treasurer General: Vicky Zuverink, 3834 Dogwood Road, Floyds Knobs IN 47119-9359
vzuverink@gmail.com (812) 923-9244

NSDCH Registrar General: Diane Dyess, 3912 Wisteria Lane, Haltom City, TX 76137-5820
dianeadyess@gmail.com (817) 300-1451