



STANDARD OBITUARY FORMAT

_____, _____, of _____, passed away on _____
Name Age City / State lives in Date of Death

at _____
Location or facility of death

PERSONAL INFORMATION (may include birth information, education, work, hobbies, religious affiliations, clubs, etc.)

Preceded in death by:

Survived by:

A Service to Honor the Life _____ will be held at _____ am/pm, _____,
Name Time Day
_____, _____, _____, at _____, _____ with _____
Month Date Year Facility Name City Clergy/Other Name

officiating. Burial / Entombment will be in _____,
Cemetery Name City

Family and friends may visit from _____ am/pm to _____ am/pm, _____, _____,
Time Time Day Month Date
_____ at, _____,
Year Facility Name City

OPTIONAL (remove if you do not want to include this)

In lieu of flowers the family asks that donations be made to _____.

Memories of _____ may be shared by visiting www.snodgrassfuneral.com and
name

selecting the obituary. Snodgrass Funeral Home, South Charleston, is handling the arrangements.