

Death Notice

(use Jewish Funeral Practices Committee symbol)

On _____, _____, of _____
Day, date, year of death Deceased's name Deceased's city

Beloved (husband) (wife) of (the late) _____,
Spouse's name

Devoted (father) (mother) of _____

Beloved (brother) (sister) of _____

Cherished grand (father) (mother) of _____

(Funeral) (Graveside) services will be held on _____,
Day and date of service Time of service

at _____,
Location of service and address if needed

interment _____
Cemetery name, city, and state

Family will be (receiving friends) (observing shiva) at the residence of _____
Shiva host(s)

starting _____ through _____
Shiva start date (and time if needed) Shiva end date (and time if needed)

Contributions may be made to _____

Arrangements by Hines-Rinaldi Funeral Home, Inc. under Jewish Funeral Practices Committee
of Greater Washington Contract. (This sentence is required by the Jewish Funeral Practices Committee.)

Newspaper(s) _____ Date(s) to run _____ Cost _____