



138 S. CENTER STREET
 TURLOCK, CA 95380

PHONE: 209-634-9141
 FAX: 208-632-8813

Picture attached:

Yes _____

No _____

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Obituary Notice

Completed, typewritten obituary forms are due at the Turlock Journal office by 5:00 p.m. Monday for Wednesday's publication. 5:00 pm on Thursday for Saturdays' publication. Failure to notify the Turlock Journal on a pending late obituary could subject the obituary to the next publication date. All efforts will be made to publish obituaries in a timely fashion, however, the Turlock Journal will not be held responsible for late submissions. By filling out this form you are releasing it for publication as true and accurate information, the Turlock Journal will be held harmless for incorrect information provided.

Inaccurate information received and a correction requested will result in a re-publication charge. The Turlock Journal is not responsible for lost or damaged photos. Photos will not be mailed back and will be available after publication.

Email to: obits@turlockjournal.com

Funeral Home: _____ Contact phone: _____

Services For: _____ Age: _____

Service Location: _____ Date: _____ Time: _____

Address: _____

Burial Location: _____ Date: _____ Time: _____

Visitation @: _____

Born: _____ In: _____

Died: _____ In: _____

Background: _____

Survivors: _____

Memorial Contributions may be made to (organization/address): _____

Deceased name:

Obituary Notice

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Additional information (maximum 50 words)

A signature is required as verification that the information provided is true and accurate for release of publication.. The Turlock Journal is held harmless of any unauthorized photographs submitted or information provided for this announcement. The Turlock Journal will print corrections only for facts that are filled out on this form.. Corrections run once on the page the announcement appeared. Reproduction of photos will be processed as best possible for publication. No correction will be made for poor reproduction of photos.

Funeral Home—Submitted by _____

Other—Relationship to deceased _____ Date _____

Daytime phone _____ After hours phone _____