

PHI BETA SIGMA FRATERNITY, INC.

STATE OF MISSISSIPPI

107th Anniversary State Conference Virtual February 25 – February 27, 2021

Omega Chapter Citation Form

(attach additional sheets if necessary)

| Name of Deceased Brother | | |
|---|-------------------------|------|
| Last Chapter Deceased Brother was affiliated with | | |
| Date of Death | Cause of Death | |
| Date of Initiation | Chapter of Initiation _ | |
| Deceased Brother's Nearest Relative | | |
| Relationship | Telephone Number | |
| Name of Person Completing Form | | |
| Address | | |
| City | _State | _Zip |
| Telephone | _Chapter Affiliation | |
| | | |

THIS FORM MUST BE EMAILED TO:

Sedric Scott, at sedricscott@hotmail.com