OFFICIAL 2024 FLORIDA STATE PRIMITIVE BAPTIST CONVENTION

Elder Dr. Chris A. Burney, General President (850) 210-5003 E-Mail: caburney22@yahoo.com

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Elder Al Ware, Financial Secretary (727)	415-4866N	Mail to: P. O. Box 16823, Saint Petersburg, Fl. 33733
		EGISTRATION DEADLINE IS MARCH 1st
		an Ordained Elder, Deacon or hold an office in egate amount each year and contribute to the
Mortuary fund)	_	·
NEW	MEMBER (\$25.00	(Initial Joining Fee)
ASSOCIATION		
7	ANNUAL REGIS	TRATION
EX	XISTING MEMBER	CHECK ONE
Elder-\$20.00	Deacon-S	010.00Other-\$10.00
Name		Phone ()
Address		70
City		Zip Code
Email Address		Married Single
Total ContributionS	Date	Received by
		EFICIARY) annually
TRANSPORT TO THE PROPERTY OF T		
City		Zip Code
Email Address		Relationship
Note to Beneficiary-P	lease contact the	above listed for benefits payout
Benefits approved:		Chairman-Date
Benefits approved:		President-Date
COMPLETE THIS SECTION ANI	D MAIL TO THE P. (D. BOX ABOVE FOR BENEFIT CLAIM
Date of demise	Benefi	ciary Phone number ()
Beneficiary Signature	1)(1)	Date
Address to mail Check		
60	NVENTI	Zip
	LATIMIL	
I	FOR CONVENTION	USE ONLY
Total Registration	Date	Received by
Authorized Payment-Date	by	

NOTE: Upon verification of eligibility the President shall authorize payment Yellow - Individual White - Office **Blue - Financial Secretary**