



Veteran Name Plate Request

In honor of the special person in your life who served honorably in the U.S. Military

Plate Instructions: Each plate is three lines maximum with no more than 12 characters per line. Spaces do count as a character. Please print clearly. Proof of Service is required. When placing this order, I understand that placement of the name plate at a desired location, or grouping of family members cannot be guaranteed, but will be considered.

(Please use a separate form for each name plate)

PLEASE FILL OUT EACH ROW BELOW

FIRST NAME (TOP LINE)

Example: Grant

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LAST NAME (SECOND LINE)

Example: Timmerman

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BRANCH & RANK (THIRD LINE)

Example: ARMY SGT

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Requester Information

Name: _____

Address: _____

City: _____

State & Zip Code: _____

Email: _____

Phone: _____

Donation/Payment Amount:

_____ \$125 Name Plate

_____ Additional donation for the Memorial

I request my gift be anonymous

TOTAL

**(Checks Only) Please make checks payable to the:
Emporia All Veterans Memorial Fund**

Mail your form, payment and proof of service to: AVM, PO BOX 1632, Emporia, KS 66801

Questions? Visit our website at www.allveteransday.org

Donations are held, receipted and recognized by the All Veterans Memorial fund. For a copy of your donation record please contact: Emporia All Veterans Memorial Attn: Secretary PO Box 1632, Emporia, KS 66801. The All Veterans Memorial, located in Emporia, Kansas, is an approved 501(c)(3) nonprofit organization, The AVM exists to honor all who have served our nation as a member or support of our military. Your donation to the Tablet of Honor Campaign will contribute to the creation of this beautiful component of the All Veterans Memorial.