

WOOD COUNTY VETERANS MEMORIAL

Legacy Memorial Information

Name: _____

Married Y/N , Children? _____

Home Community: _____

Date of Death (if applicable): _____

Service: _____

Organizations belonged to:

Interests: Sports, Music, Recreational, Etc.

How should this veteran be

remembered? _____

Biographical: _____

This form is a guide only. You may include as much or little information as you wish for our legacy book.