Omro Veterans Memorial Data Form

1) Name of Veteran being honored: _____

2) Branch of military service: _____

3) When did this Veteran serve? _____ to _____

4) Is this Veteran now deceased? Yes or No
Date of birth _____
Date of death _____

5) Did this Veteran die while serving our country? Yes or No
*Special recognition will be given to deceased-in-service Veterans

6) Was this Veteran honorable discharged? Yes or No
If possible, please submit a copy of the Veterans DD-214 or other separation papers. Medical and general discharges under honorable conditions are honorable discharges.

7) Did this Veteran live in the Omro School district at any time? Yes or No
If yes, approximate dates _____ to _____
Address_____
If possible, please submit a copy of the Veterans obituary, drivers license, or other official document indicating residency in the Omro School District.

8) Are there photos of this Veteran available? Yes or No #_____
If possible, please submit photos with this form.
Do you want the photos returned? Yes or No

9) Name of any relative _____
Relation _____ Living Yes or No
Address _____ Phone _____
_____ e-mail _____

10) Comments _____
_____
_____
_____
_____
(use back if needed)

In case we have a question about the information you have provided please give us your name and phone number.
Name_____
Address_____ Phone _____
_____ e-mail_____

Please drop off or mail this form to:
Omro Public Library
405 E. Huron
Omro, WI 54963