

MARION COUNTY VETERANS MEMORIAL
East Lawn Cemetery
East Main Street
Salem, Illinois

Request for Adding Name of Deceased Veteran To Marion County Veterans Memorial

Veterans must have lived in Marion County to be listed on the Memorial.

Print Name of Veteran: _____		
<i>Last</i>	<i>First</i>	<i>Middle Initial Only</i>
Address (include City): _____		
Served in _____	War. _____	Branch of Service _____
Dates of Service, if known _____	Serial Number _____	
Was this Veteran killed in action? ____ If so, where _____		
Date of Birth _____	Date of Death _____	
Place of burial _____		
Any other information that you feel is pertinent: _____		
Form completed by: _____		
<i>Print Name</i>		
Address: _____		
<i>Street</i>	<i>City</i>	<i>State</i> <i>Zip</i>
Relationship to veteran _____	Phone Number _____	
Signed _____		
Date: _____		

This form must be submitted by April 1st. Names will be added to the Marion County Veterans Memorial during the month of May each year.

Please return to: *City of Salem*
Tabitha Meador, City Clerk
101 South Broadway
Salem, IL 62881
Phone: 618-548-2222, x20 e-mail: cityclerk@salemil.us