



Veterans Information for Cross

Note: These crosses are for Veterans who have passed away and not living Veterans.

Name of Veteran _____

Rank _____

Branch _____

Years of Service _____

Major Operations Served In _____

- KIA (if applicable)
- MIA (if applicable)
- POW (if applicable)

Contact Information

Name of Donor _____

PHONE _____

EMAIL _____

ADDRESS _____

Date of Payment \$30 _____

STAFF USE ONLY

Date of Application _____

Date of Payment _____

Date of Cross Completion _____

Completed By _____

SIGNATURE _____