

*New Jersey Vietnam Veterans' Memorial Foundation*

**IN MEMORY**

**A program designed to honor those New Jersey veterans and civilians who died as a result of their experience in Vietnam but whose names are not on the New Jersey Memorial.**

**Person IN MEMORY honors:** \_\_\_\_\_

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Middle Name

Relationship to you and/or reason for request (Answer as fully as possible) \_\_\_\_\_

**ADDITIONAL INFORMATION ABOUT HIM/HER**

Dates of Vietnam Tour: from \_\_\_\_\_ to \_\_\_\_\_ Date of Birth \_\_\_\_\_ Date of Death \_\_\_\_\_

Where Buried \_\_\_\_\_ Hometown \_\_\_\_\_ Home State \_\_\_\_\_ Home of Record \_\_\_\_\_

Locations (in Vietnam) \_\_\_\_\_

Additional Information \_\_\_\_\_

**\*For Military Honorees** – Branch of Service (circle): Army – Navy - Air Force – Marines – Coast Guard

Rank \_\_\_\_\_ Social Security # \_\_\_\_\_ Service Number \_\_\_\_\_

**Fill in unit designations or equivalent as appropriate for branch of service:**

Division \_\_\_\_\_ Brigade \_\_\_\_\_ Battalion \_\_\_\_\_ Regiment \_\_\_\_\_

Company \_\_\_\_\_ Battles (in Vietnam) \_\_\_\_\_

**\*For Civilian Honorees** – Branch of Civilian Service \_\_\_\_\_

Activities in Vietnam: \_\_\_\_\_

**BIOGRAPHIC INFORMATION AND CAUSE OF DEATH**

*Please be specific about type of cancer, illness or other cause of death and how it is related to service in Vietnam.*

**Please attach DD214 and Death Certificate. Also attach VA paperwork stating that death has been recognized as service connected.** – Additional pages may be attached if necessary

**INFORMATION ABOUT YOU**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle/Maiden Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_