

CHAIRMAN LES MONTAG  
VETERANS MEMORIAL COMMISSION  
411 W. HIGGINS ROAD  
HOFFMAN ESTATES, IL 60169  
(847) 843-7130



DATE OF APPLICATION \_\_\_\_\_ FLAG # \_\_\_\_\_

VETERAN'S NAME \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

DATE DECEASED \_\_\_\_\_

DONATOR'S NAME \_\_\_\_\_ PHONE NUMBER ( ) \_\_\_\_\_

DONATOR'S ADDRESS \_\_\_\_\_  
Street City State Zip

EMAIL ADDRESS \_\_\_\_\_

VETERAN'S BRANCH OF SERVICE:

ARMY \_\_\_\_\_ NAVY \_\_\_\_\_ AIR FORCE \_\_\_\_\_ MARINES \_\_\_\_\_ COAST GUARD \_\_\_\_\_

RANK \_\_\_\_\_ UNIT \_\_\_\_\_

DATES OF SERVICE: FROM: \_\_\_\_\_ TO: \_\_\_\_\_

DECORATIONS \_\_\_\_\_

REQUIRED CERTIFICATION OF SERVICE CAN BE PROVIDED BY A COPY OF:

DD 214 \_\_\_\_\_ DISCHARGE PAPERS \_\_\_\_\_ OTHER \_\_\_\_\_

WHEN THE FLAG CAN NO LONGER BE FLOWN, THE DONATOR REQUESTS:

\_\_\_\_\_ FLAG TO BE RETURNED TO THE DONATOR

\_\_\_\_\_ FLAG TO BE DISPOSED OF ACCORDING TO MILITARY REGULATIONS

\_\_\_\_\_ FLAG TO BE RETURNED TO DONATOR AND DROPPED FROM ROTATION

\_\_\_\_\_ NEW FLAG TO BE DONATED AND CONTINUED TO BE FLOWN IN THE SAME ORDER

NOTE: The flag can be withdrawn from the program at any time upon receipt of a written request from the next of kin.

APPROVED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

Commission Chairman