

WINNESHIEK COUNTY VETERANS MEMORIAL SURVEY

Your veteran must have resided at some time in Winneshiek County, IA

(Please answer questions to the best of your ability. Please Print.)

NAME of service man/woman: _____

Nickname (if used regularly): _____

Last known address: _____

Date of Birth: _____ Place of Birth: _____

Date of Death (if deceased): _____ Place of Death: _____

Cause of Death: _____

Where Buried: _____

Military Record

Date of enlistment: _____ Date of Discharge: _____

Which War served in: _____ OR Peacetime service time period: _____

Branch of Armed Forces: _____ Name of Unit: _____

Brief summary of Military Service (Where stationed, battles, honors, etc.):

Father's name: _____ Mother's name: _____

Name of Spouse: _____ Date of Marriage: _____

Person providing this information: _____

(please provide a contact address, phone number, or email address)

RETURN TO: Decorah Genealogy Association, 808 River St., Decorah, IA 52101
decorahgenealogyassociation@gmail.com

Thank you for your help in our efforts to collect the names of all our Winneshiek County service men and women for this memorial. For more information contact DGA, phone: 563-382-4197