ORDER FORM – ANNIVERSARY ANNOUNCEMENT



To make your announcement as accurate as possible, please type or print all information. Fill in only those items you would like to include in your published announcement. Please use formal names, complete with middle initials. In the case of serviceperson, give the rank and branch of service. Street addresses are not necessary. Only city and state will be published. Send this along with your signed authorization form (see the return information below.)

Anniversary		Anniversary Date		
	(# of Years)		(current year)	
INFORMATION AB	OUT THE COUPLE			
Spouse A's full name				
Occupation	(If retired list former occur	pation and how long it was held.)		
	(ij reinea, iist joillier eeeap	pation and now long it mas notally		
Spouse B's full name				
Occupation	(If retired list former occur	pation and how long it was held.)		
		pation and non-long it may notary		
INFORMATION AB	OUT THE MARRIAGE			
Marriage Date		Location		
Is a special event plar	nned in honor of the anniver	rsary?		
Children (Name and	City/State for each)			
Number of Grandchi	ldren	Great-grandchildren		
Any other special info	ormation you want published	d:		
CHECK ONE (The Po	ost-Standard will crop to 1.5	"x1.5")		

No photo attached.

Photo attached. (Note: photos will not be returned)

Digital photo. Send .jpg format not exceeding 1MB to

celebrations@syracuse.com. Use last name as subject.

ORDER FORM – AUTHORIZATION



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