

Lawrence County Veterans Hall of Fame Committee



Members

John Turner
Teresa McKenzie
Louie Sheridan
Kayla Brown
Lou Pyles

Lawrence County Veterans Hall of Fame

Nominee Information

Full Name: _____

Address: _____ City: _____

County: _____ State: _____ Zip: _____

Primary phone #: _____

Email: _____ All periods of service discharged honorably? Y N
(Include copy of Discharge Record)

Date of birth: _____ Is the nominee deceased? Y N

Dates & location of Lawrence County Ohio residency: _____

Branch(es) of Service: _____

Years Served: _____ Conflict (if applicable): _____

Veteran's Biography (use separate sheet(s), include his/her record of community service).

Do not include original documents. Send copies **only**.

Nominator Information (can be same as the Veteran)

Full Name: _____

Email: _____ Address: _____

City: _____ State: _____ Zip: _____

Primary phone #: _____

I hereby affirm the information herein is accurate to the best of my knowledge and in conformance with the guidelines. I also understand that inductees must be available to attend the November ceremony. Signature: _____

Note: Only the nominator will be notified if the nominee does not advance to the finalist stage. Send nomination form, discharge papers and complete nomination packet to:

Lawrence County Veterans Hall of Fame

Lawrence County Veterans Service Commission

111 South 4th Street

Ironton, Ohio 45645

DEADLINE: September 4, 2024

111 South 4th Street
Ironton, Ohio 45638

740 | 533-4327
Fax: 740 | 533-4345