

Celebrations

FOR LIFE'S MEMORABLE MOMENTS

Anniversary Form

Please indicate (✓) the paper your ad is to appear in:

- | | |
|--|--|
| <input type="checkbox"/> Journal News (Publishes Sunday) | <input type="checkbox"/> Middletown Journal (Publishes Sunday) |
| <input type="checkbox"/> Western Star (Publishes Thursday) | <input type="checkbox"/> Pulse-Journal (Publishes Thursday) |
| <input type="checkbox"/> Fairfield Echo (Publishes Thursday) | <input type="checkbox"/> Oxford Press (Publishes Friday) |

Please fill out and mail to:

1611 S. Main St. , Dayton, OH 45409

Attn: SWG Celebrations

Photo No photo

(Print or type very clearly)

HUSBAND'S FULL NAME: _____

WIFE'S FULL NAME: _____

WIFE'S MAIDEN NAME: _____

COUPLE'S ADDRESS: _____

DATE & CITY OF MARRIAGE: _____

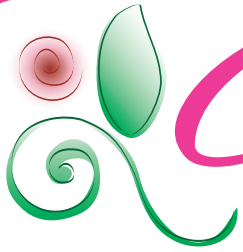
YEAR BEING CELEBRATED: _____

TYPE OF CELEBRATION PLANNED: _____

DATE OF CELEBRATION: _____ **TIME:** _____

LOCATION OF CELEBRATION: _____

HOSTED BY: _____



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NAMES OF CHILDREN (Please list city and state of residence):

NUMBER OF GRANDCHILDREN: _____

NUMBER OF GREAT GRANDCHILDREN: _____

HUSBAND'S EMPLOYMENT (Circle one): Employed Retired

EMPLOYER (City & state):

WIFE'S EMPLOYMENT (Circle one): Employed Retired

EMPLOYER (City & state):

Name and phone number of someone who can be contacted between 8:30 a.m. and 5 p.m. for information:

NAME: _____ **PHONE NUMBER:** _____

Address: _____

City/State/Zip: _____