

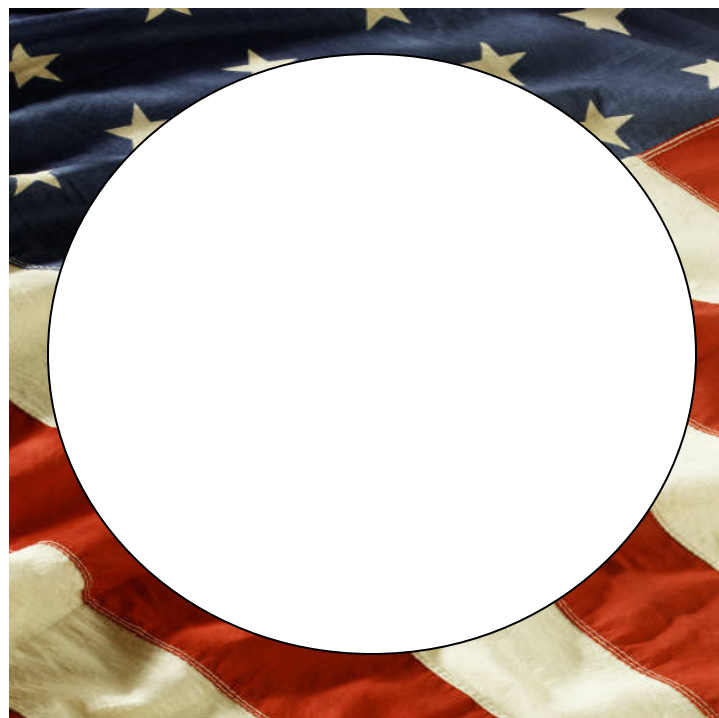
Name of person in picture_____

Name of the military branch_____

Years of service_____

Submitted by _____

Other information_____



Name of person in picture_____

Name of the Military Branch_____

Years of service_____

Submitted by_____

Other Information_____