



Veteran Biography Form



Veteran's Name _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Living	Deceased	KIA	MIA	POW	Active	Retired
<i>If you are filling this form out for a Deceased, KIA or MIA Veteran, please write your name and relationship to the Veteran here.:</i> _____							
Branch of Service _____				Rank Upon Discharge _____			
Years of Service _____				Specialties: _____			
Highlights of Military Service: _____							
Medal/Honors Received: _____							
Foreign Countries Stationed In: _____							
Why you believe it is important for our citizens to get involved, register and VOTE? _____							

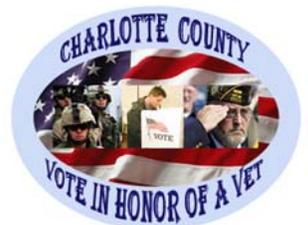
Submitters Name: _____ Date: _____

Please return the completed form to: 226 Taylor Street, Punta Gorda, FL 33950 Attn: Debra Rodi.
 Call: 941-833-5400 if you have any questions or comments about this program.

Don't forget to include a photo (no larger than 5x7") if you would like this included, or you can email it to soe@charlottevotes.com



Please feel free to reproduce this form if needed. If you have any questions, please contact The Supervisor of Elections Office by phone 941-833-5400. Also visit our website for additional information



Hon. Paul A. Stamoulis
 Supervisor of Elections
 Charlotte County, FL