



# Book of Memories

Auxiliary to the American Postal Workers Union

Please Print or Type

In Memory of: \_\_\_\_\_

Last known residence: City: \_\_\_\_\_ State: \_\_\_\_\_

List any titles held in APWU or Auxiliary:

\_\_\_\_\_

Please list name **EXACTLY** as you want it to appear in the Book of Memories

Submitted by: \_\_\_\_\_

Local/State APWU, Auxiliary: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Send Family acknowledgement card to (if different):

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Remembered by \_\_\_\_\_

**(This line must be completed)**

\$10.00 Minimum Donation Suggested      Amount Enclosed: \$ \_\_\_\_\_

Make checks payable to:

*All proceeds go to the :*

Auxiliary to the APWU

*Nilan Continuing Education Scholarship*

Karen Wolver Secretary

208 Brick Street SE

Bondurant, IA 50035-2020

*If you have any questions regarding this form, please contact*

*Lisa Beer, Committee Chair [lbeer@apwuauxiliary.org](mailto:lbeer@apwuauxiliary.org) (610)762-5759 -*

