



MARK S. EARLEY
 SUPERVISOR OF ELECTIONS
 LEON COUNTY, FLORIDA

Vote in Honor of a Veteran - Biography Form

Supervisor of Elections Mark S. Earley invites any Leon County voter to participate in the Vote in Honor of a Veteran program by publicly dedicating their vote to honor America's military service men and women. Completing this form entitles any Leon County voter to one specially *designed My Vote Honors a Veteran* commemorative pin to wear proudly when you vote (pictured). Our office will contact you once your form has been processed and your commemorative pin is ready to be picked up at our office.



Please print clearly. The information on this form will be used to identify the veteran on our Wall of Honor digital image gallery. The information you provide below will be made available for public view. You are encouraged to provide as much or as little information as you wish.

You may print and mail this form to:

Leon County Supervisor of Elections
 P.O. Box 7357, Tallahassee, FL 32314-7357

OR

Deliver it in person during hours of operation from 8:30 am to 5 pm to our office at 2990-1 Apalachee Parkway, Tallahassee, FL 32301-3678.

VETERAN INFO & BIOGRAPHY

Your first & last name: _____

Who are you submitting the application for? (please check one)

- Myself, I am a veteran.
- My family member is a veteran.
- My spouse/significant other is a veteran.
- My friend is a veteran.

Veteran's first & last name (if you are submitting for someone else):

Veteran's Branch of service: _____

Rank at discharge (or current rank if still serving): _____

Year service began: _____ Year service ended: _____ ("present" if currently serving)

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Biography for the *Wall of Honor* gallery - this can include personal life details, military career highlights, wars or conflicts in which the veteran served, medals/honors received, specialties, etc. (please attach a separate page if needed): _____

Please remember to include a **photocopy** (not an original) of a photograph to be shown in our online Wall of Honor.

Where would you like the veteran's biography and picture displayed? Check all that apply.

- ___ Wall of Honor digital image gallery, available on LeonVotes.org
- ___ Leon Supervisor of Elections social media pages
- ___ Official Leon County Supervisor of Elections publications
- ___ All of the above

Phone number/e-mail address to contact you when your pin is ready to pick up:

By completing this form, I affirm that I have permission to provide pictures and biographical information related to the veteran my vote honors. I consent to the Leon County Supervisor of Elections office making the pictures and biographical information provided on this form available for public view. I understand that my submission may be edited to fit space limitations on the digital Wall of Honor.

Your signature: _____

Date: _____

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