

# the paper

of wabash county inc.

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## Anniversary Form

For \_\_\_\_\_ th Anniversary

Couple's Names: \_\_\_\_\_

Date, Time and Place of Celebration: \_\_\_\_\_

Who will be sponsoring the celebration? \_\_\_\_\_

### **Background on Couple:**

Wife's Maiden Name: \_\_\_\_\_

When and Where were couple married? \_\_\_\_\_

By whom were they married (if known)? \_\_\_\_\_

Occupations of couple (if retired, state previous employment and indicate retired):

Husband: \_\_\_\_\_

Wife: \_\_\_\_\_

Children's Names and Addresses: \_\_\_\_\_

Number of Grandchildren: \_\_\_\_\_ Great-Grandchildren: \_\_\_\_\_

Gifts: Yes or No (circle one) Picture Provided: Yes or No (circle one)

Additional information to be included written on the back? Yes or No (circle one)

Submitted by: \_\_\_\_\_ Phone number: \_\_\_\_\_

**Thank you for sharing your family's special moment with 'the paper' of Wabash Co., Inc.**