Nominee:



## The National Society of the Sons of the American Revolution Grave Marking Medal Reporting Form

Nominee Information:				
Name:		National Number:		State Number:
Society:	Chapter:	Humbon		Humbor.
District:	Patriot:		Compatriot	:
Has this Nominee received the Grave Marking Medal previou	sly?	NO	YES	If Yes, when?

## The Nominee has participated in the following Grave Marking Ceremonies

Note: Only one Role is required for each event. Color Guard service does not count toward this medal.

Ceremony #1	Patriot Name:			Date of Birth:			Date of Death:			
Cemetery Name:	1			Cemetery Address:						
City:	State: Zip Code:				(			County:		
Type of Marker:							Cere	mony Date:		
GPS Latitude:	GPS Latitude: GPS Longitude:				Nominee Role:					
Ceremony #2	Patriot Name		Date of Birth:			Date of Death:				
Cemetery Name:				Cemetery Address:				L		
City:		State:		Zip Code:	C			nty:		
Type of Marker:							Cere	mony Date:		
GPS Latitude:	GPS Longitude:				Nominee Role:			L		
Ceremony #3	Patriot Name	Patriot Name: Date of Birth:				Birth:		Date of Death:		
Cemetery Name:				Cemetery Address:				·		
City:	State: Zip Code:			Co			ounty:			
Type of Marker:					Ceremony Date:					
GPS Latitude: GPS Longitude:					Nominee Role:					
Ceremony #4	Patriot Name	e:			Date of	Birth:		Date of Death:		
Cemetery Name:				Cemetery Address:				I		
City:		State:		Zip Code:				County:		
Type of Marker:								Ceremony Date:		
GPS Latitude:			GPS Longitude:			Nominee Role:				
Ceremony #5	Patriot Name	e:			Date of	Birth:		Date of Death:		
Cemetery Name:				Cemetery Address:				1		
City:		State:		Zip Code:			Cour	nty:		
Type of Marker:		I		_1			Cere	mony Date:		
GPS Latitude:			GPS Longitude:			Nominee	L			

Role:

Nominee:

Ceremony #6	Patriot Name:				Date of Birth:			Date of Death:		
Cemetery	Cemetery									
Name: City:				Address: Zip Code:			Cour	ounty:		
Type of Marker:				P				Ceremony Date:		
							Cere	anony Date.		
GPS Latitude:			GPS Longitude:			Nominee Role:				
_	Patriot Name				Date of	Birth		Date of Death:		
Ceremony #7	T athot Name				Date of	Dirtin.				
Cemetery Name:			Cemetery Address:							
City:		State:		Zip Code:			Cour	nty:		
Type of Marker:							Cere	emony Date:		
GPS Latitude:			GPS Longitude:			Nominee				
						Role:				
Ceremony #8	Patriot Name	):			Date of	Birth:		Date of Death:		
Cemetery				Cemetery						
Name: City:		State:		Address: Zip Code:			Cour	nty:		
Type of Marker:							Cere	mony Date:		
						Maralinaa	0010	ciciliony Date.		
GPS Latitude:			GPS Longitude:		Nominee Role:					
Coromony #0	Patriot Name:				Date of	Birth:		Date of Death:		
Ceremony #9 Cemetery				Cemetery						
Name:				Address:						
City: State:			Zip Code:			Cour	nty:			
Type of Marker:						Cere	emony Date:			
GPS Latitude: GPS Longitude:					Nominee Role:					
	1									
Ceremony #10	Patriot Name	):			Date of	Birth:		Date of Death:		
Cemetery Name:				Cemetery Address:						
City:		State:		Zip Code:			Cour	nty:		
Type of Marker:							Cere	emony Date:		
GPS Latitude:			GPS Longitude:			Nominee				
			5			Role:				
Ceremony #11	Patriot Name	e:			Date of	Birth:		Date of Death:		
Cemetery				Cemetery						
Name: City:	State:			Address: Zip Code:				County:		
Type of Marker:			Ce			Cere	Ceremony Date:			
			Nominee				- ,			
GFS Lallude:			GPS Longitude:			Nominee Role:				
Ceremony #12	Patriot Name	e:			Date of	Birth:		Date of Death:		
Cemetery				Cemetery	L					
Name: City:		State:		Address: Zip Code:				County:		
Type of Marker:								emony Date:		
								anony Date.		
GPS Latitude: GPS Longitude:					Nominee Role:					

						Non	ninee:			
Ceremony #13	Patriot Name					Birth:		Date of Death:		
Cemetery Name:	•			Cemetery Address:						
City:		State: Zip Code:			Count			ty:		
Type of Marker:							Cere	emony Date:		
GPS Latitude:	GPS Longitude:				Nominee Role:					
Ceremony #14	Patriot Name	:			Date of	Birth:		Date of Death:		
Cemetery Name:				Cemetery Address:						
City:		State:		Zip Code:			Cou	nty:		
Type of Marker:				I			Cere	emony Date:		

Ceremony #15	Patriot Name:				Date of Birth:		Date of Death:
Cemetery			Cemetery				
Name:			Address:				
City:	State:		Zip Code:			Coun	ty:
Type of Marker:						Cerer	mony Date:
GPS Latitude:		GPS Longitude:			Nominee Role:		

GPS Longitude:

## **Society President:**

GPS Latitude:

\_\_\_\_\_, do hereby affirm that the above record is accurate and recommend the Ι, Nominee for the awarding of the Grave Marking Medal.

## National Patriot Graves Chairman:

, do hereby approve the Nominee for presentation of the National Grave Marking Ι. Medal.

Signature of National Chairman

Date of signature

Nominee Role:

Note: Upon receipt of the approved form, the presenting Society may order the National Grave Marking Medal and certificate from the National Merchandise Department. The presenting Society is responsible for the preparation of the certificate and scheduling the presentation of the Award. It is suggested the award be presented during an appropriate National event. If this cannot be arranged, then the presentation should be made at an appropriate District or Society event by a National Officer or Society President.

**Role Abbreviations:** MC = Master of Ceremonies; M = Music; P = on Program; W = Wreath; R = Research; L = Labor; D = Funding; MS = Musket Salute