

# Honoring Our Fallen Warriors

Please help us honor your family member, friend, and warrior fallen in a hostile environment. Requests must be accompanied with substantiating documentation

Please fill out the following information for the warrior to be honored.

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

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

Branch of Service: \_\_\_\_\_

Arena Fell: \_\_\_\_\_

Tribal Affiliation: \_\_\_\_\_

Return all documentation for approval to:

Mid-America All-Indian Center  
650 N. Seneca • Wichita, KS 67203  
(316) 350-3342

[cdendurent@wichita.gov](mailto:cdendurent@wichita.gov)