

Notice of Acceptance
Ceremony at Lincoln Tomb, Springfield, IL
Monday April 15, 2019 – 11:00 A.M.

Organization Name in full (Print) _____

() Yes () No A wreath will be presented

Our organizational representative and wreath bearer at the ceremony will be (Print):

First name, Initial, Last name, Title

Street Address, City, State, Zip Code

Luncheon at President Abraham Lincoln Hotel & Conference Center
701 East Adams – Springfield, Illinois 62701
April 15, 2015 – 12:30 P.M.
\$30.00 per person

Please reserve ___ luncheon places and enclose a check or money order to cover the total cost. Make the checks out to the Death Day Association. Please print the name(s) of those attending the luncheon. Names will be checked at the door. If a veggie plate is required please make notice on the form.

Special guest at the dinner will be Mary Todd Lincoln.

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Signature and Title: _____

Address: _____

In order to insure listing of your organization and representative in the printed program, *this notice must be returned no later than Tuesday March 31 to:* Ron Clark, 36 Field Planters Circle, Carolina Shores, NC 28467-2355. If you have any questions, Mr. Clark can be reached at: SUVCW4@YAHOO.COM or [217-816-6877](tel:217-816-6877).

The hotel has offered rooms at the best rates possible. Call the hotel at 217-544-8800 as soon as possible to reserve a room.