VIETNAM WAR COMMEMORATION
COMMEMORATIVE EVENTS REQUEST

OMB No. 0704-0500
OMB approval expires:
20250731

The public reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to the Department of Defense, Washington Headquarters Services, at whs.mc-alex.esd.mbx.dd-dod-informationcollections@mail.mii. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number. PLEASE DO NOT RETURN YOUR FORM TO THE ABOVE ORGANIZATION. RETURN COMPLETED FORM AS DIRECTED IN THE INSTRUCTIONS BELOW.											
INSTRUCTIONS											
Event requests are made by Team, with as many details requests using one of the for 1. Through the Commerce 2. Email to: WHS.VNWarf 3. Fax to: 703-692-4691 4. U.S. Mail to: The United Attn: Eve 241 18th Arlington, *NOTE: INFORMATION IN	as possi ollowing f orative Pa 50th_CPI d States o ents Street So , VA 2220	ble, a our pr artner P_EV of Am outh, \$	minimum c referred me Portal onlir ENTS@ma erica Vietna Suite 101	this form to of 30 days in thods: he: http://www il.mil am War Com	the Unite advance w.vietnan	d States of Ameri of the event start hwar50th.com/par	date for suppor <u>tners/login</u> (pre	rt if required. Subr ferred)			
1. *ORGANIZATION NAME: 2. *WEBSITE:											
T. "ORGANIZATION NAME:						2. WEBOILE:					
3. EVENT POINT OF CONTAC	CT:										
a. *NAME:				b. *EMAIL:				c. *TELEPHONE N	NUMBER:		
4. *EVENT TITLE:					5. *FVF		SITE NAME (Ev	ample: The Pentag	on)		
								ampio. The Ferrag	0.17		
b. *STREET ADDRESS:				c. *CITY:		d. *STATE:	e. *ZIP CODE:	f. *COUNTRY			
6. *LIST COMMEMORATIVE F	PARTNER	CO-F	IOSTS:	1			1	1			
7. ANTICIPATED ATTENDANCE: 8. VIETNAM VETERANS IN					9. START DATE (YYYYMMDD): 10. END DATE (YYYYMMDD):						
ATTENDANCE:											
11. *EVENT DESCRIPTION A								anon win be posted on o	ur website.		
13. IS MEDIA COVERAGE AN	ITICIPATE	ED? E	Example: Rac	lio/TV/Print, Fa	acebook						
14. COMMEMORATION OFFIC a. FULL SUPPORT (Full S Speaker		ubject	to availability		ons a, b, o	b. MA	<i>itomatically poste</i> TERIALS ENT WEBSITE P				
15. MATERIALS (The following	g items ma	ay be p	provided for y	our event bas	ed on ava	ilability. Please spec	cify the quantity o	f each.)			
(1) ITEM	#	(1) ITEM			#		(1) ITEM	()			
VWC Brochure		Fami	ily Member T	in Pin		Marine Corps Patc	h Poster	Poster			
Vietnam Pin and Fact Sheet				Proclamation		Navy Patch Poster					
Surviving Spouse Pin/FS		Pres	ident Trump	Proclamation		Air Force Patch Poster					
We Heart Magnet		Pres	ident Biden F	Proclamation		Coast Guard Patch Poster					
I Served Magnet			of Vietnam			Other:					
Eagle Tin Pin		Army	Service Pat								
a. SHIP TO (Name):				b. STREET A	DDRESS	(No P.O. boxes):					
c. CITY:			d. STATE:	STATE: e. ZIP CODE		TELEPHONE NUM	MBER (For FedE	For FedEx): g. DATE NEEDED (YYYYMMDD):			
DD FORM 2956, JUL 2022 PREVIOUS EDITION IS OBSOLETE.											

INSTRUCTIONS FOR COMPLETION OF DD FORM 2956, THE UNITED STATES OF AMERICA VIETNAM WAR COMMEMORATION COMMEMORATIVE EVENTS REQUEST

The DD Form 2956 is used to request support for a Commemorative Partner Event. Use the instructions below to complete the DD Form 2956. Note: Fields with an asterisk * will be listed in the Public Event Website Posting of your event. 1. Organization Name: List the name of the Commemorative Partner organization. 2. List the website of the organization (if none, please type "none"). 3. Event Point of Contact Name: a. Who is the contact person for this event? b. Email: List the email address for the event point of contact. c. Telephone number for the event point of contact. 4. Event Title: What is the official name given to this event? 5. Event Location: a. Site Name (Example: The Pentagon). b. - f. Address of the Event Location. 6. List the names of any other commemorative partners you collaborated with. 7. Anticipated Attendance: How many people are expected to attend overall? 8. How many Vietnam Veterans are expected to attend overall? 9. Start Date: The date the event starts. 10. End Date: The date the event ends. 11. Purpose of the Event, and how Vietnam Veterans and their families will be honored. This information will be posted on our website exactly as it is written. 12. Special Instructions 13. Is media coverage anticipated? Please list what type and any additional details. 14. Commemoration Office Requested Role. Support is requested in the following forms (All are automatically posted to website): a. Full Support: Select which options are being requested: Speaker, Manned Booth,

- b. Materials. Materials: Available materials are sent for support of your event.
- c. Event Website Posting only No materials needed

15. Materials: Please indicate the quantity of each type of material requested. Note: The Veterans Lapel Pin is for Vietnam War-era veterans only, as such we ask that you request enough for them only . Quantities of this pin requested should not exceed the number of Vietnam Veterans expected to attend. The Surviving Spouse Lapel Pin is to be presented to the surviving spouse of a deceased Vietnam War veteran. a –g. Ship To Name, Address, and Phone number for shipping materials, and the latest date materials need to be delivered by.