

ENGAGEMENT ANNOUNCEMENT

Photo \$10.00, prepaid

Her Name: _____

Daughter of: _____, of city: _____

Engaged to:

His Name: _____

Son of: _____, of city: _____

Date, Time and Place of Wedding:

She is a graduate of: _____

Employed at: _____

He is a graduate of: _____

Employed at: _____

Return this form to:

Dodge County Pionier

126 Bridge Street, Mayville WI 53050

Phone: 920-387-2211 Fax: 920-387-5515

Or email to frontdesk@dodgecountypionier.com