WASHINGTON STATE PATROL MEMORIAL FOUNDATION
42nd Annual Memorial Foundation Dinner

In memory of those officers who gave their lives, serving the citizens of the State of Washington.

Vernon Fortin - September 30, 1923 | **Irving Thorsvig** - October 26, 1926 | **Conard Tolson** - March 24, 1929 | **H. Douglas Cossmann** - October 9, 1929 | **William Pautzke** - May 8, 1930 | **Loren Ray** - December 16, 1934 | **Allen Ludden** - March 15, 1938 | **John Gulden** - December 23, 1942 | **Thomas Hanlin** - May 26, 1945 | **Paul Johnson** - December 12, 1949 | **Ivan Belka** - August 18, 1951 | **Don Campbell** - December 21, 1951 | **John Wright** - June 28, 1953 | **Gene Bolstad** September 3, 1957 | **Ernest Eichhorn** - September 16, 1958 | **Wes Whittenberg** - December 29, 1960 | **Clarence Johnson** - September 8, 1968 | **C. Frank Noble** - February 5, 1972 | **Joseph Modlin** - August 15, 1974 | **Thomas Hendrickson** - November 17, 1974 | **Glenda Thomas** - May 24, 1985 | **James Gain** - March 2, 1987 | **Clifford Hansell** - July 22, 1987 | **Raymond Hawn** - January 17, 1990 | **Steven Frink** - March 22, 1993 | **James Saunders** - October 7, 1999 | **Tony Radulescu** - February 23, 2012 | **Sean O'Connell, Jr.** - May 31, 2013 | **Brent Hanger** - August 6, 2015 | **S. Renee Padgett** – September 4, 2018 | **Justin Schaffer** – March 24, 2020 | **Eric Gunderson** – September 26, 2021

APRIL 13, 2024 – TULALIP CASINO & RESORT, MARYSVILLE, WA

Dinner tickets - $75/adult and $50/child {10 and under}

Please fill out and mail in with check, Venmo payment or credit card information to: WSPMF, PO Box 901, Prosser, WA 99350

Registration names and meal choices: *{Please circle one}*

1. _____   Kalbi Beef Short Rib   Apple Smoked Chicken   Garden Risotto   Child

2. _____   Kalbi Beef Short Rib   Apple Smoked Chicken   Garden Risotto   Child

3. _____   Kalbi Beef Short Rib   Apple Smoked Chicken   Garden Risotto   Child

4. _____   Kalbi Beef Short Rib   Apple Smoked Chicken   Garden Risotto   Child

Please use an additional form if registering more than 4 attendees.

Name _____

Address _____

Phone (____)_____   Email _____

*Payment: ___ I have enclosed a check {made out to WSPMF}   ___ Debit/Credit   _____ Venmo Total Charge: _____

Card Number _____ *Expiration Date* _____ *3-Digit Code* _____

Authorized Signature _____

I would like to sit with: _____

Registration deadline – March 30, 2024 Questions? Contact Megan King at wspmemorialfoundation@gmail.com or 360.597.4411