Date _____

Pieced by _____

Longarmer _____

I have the binding made Y N

I would like to do the binding Y N

Is this quilt intended for a specific veteran?
Y N

Veterans
Name _____

Date _____

Pieced by _____

Longarmer _____

I have the binding made Y N

I would like to do the binding Y N

Is this quilt intended for a specific veteran?
Y N

Veterans
Name _____

Date _____

Pieced by _____

Longarmer _____

I have the binding made Y N

I would like to do the binding Y N

Is this quilt intended for a specific veteran?
Y N

Veterans
Name _____

Date _____

Pieced by _____

Longarmer _____

I have the binding made Y N

I would like to do the binding Y N

Is this quilt intended for a specific veteran?
Y N

Veterans
Name _____