

PDP DELIA J. RAY HOSPITAL AWARD

Awarded to the Auxiliary with the highest total evaluation in hospital work in the name of AMVETS Ladies Auxiliary, in terms of hours, money, etc.

PROOF REQUIRED:

Hours must coincide with reports submitted to the Department Hospital Chairman.

Auxiliary # _____ City _____

Number of hours served _____

Name of Hospital/s _____

ENTRY FORM REQUIRED:

Proof of work must be submitted in booklet form.

Signed: _____
Local Auxiliary President

Local Auxiliary Hospital Chairman

Entry form must be postmarked by: May 27, 2017

Mail to: PDP Dee Baggett, Awards Chairman
13238 Rose Hollow Way
Astatula, FL 34705
Phone: 352-742-8215
E-mail: doe123dee@aol.com

PDP LINDA BEST GFELL MEMORIAL AWARD ST. JUDE'S CHILDREN'S RESEARCH HOSPITAL

Awarded to the Auxiliary with the highest percentage per member in total evaluation to: St. Jude's Children's Research Hospital.

PROOF REQUIRED:

Service report forms must be filed with the Department Hospital Chairman to be eligible.

Auxiliary # _____ City _____

Total Evaluation for St. Jude's Hospital _____

ENTRY FORM REQUIRED:

Signed: _____
Local Auxiliary President

Signed: _____
Local Hospital Chairman

Entry form must be postmarked by: May 27, 2017

Mail to: PDP Dee Baggett, Awards Chairman
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