

**PDP LUCILLE T. HENSON AWARD**

Awarded to the individual Auxiliary member who has collected the most money for Auxiliary to send to the Department of Florida for the John Tracy Clinic. (Auxiliary projects not to be included in total)

**PROOF REQUIRED:**

Letter of confirmation from her Auxiliary signed by her local President and Treasurer.

Auxiliary # \_\_\_\_\_ City \_\_\_\_\_

Name of Member \_\_\_\_\_

**ENTRY FORM REQUIRED:**

Signed: \_\_\_\_\_  
Local Auxiliary President

Signed: \_\_\_\_\_  
Local Auxiliary Treasurer

**Entry form must be postmarked by: May 30, 2020**

Mail to: **PNP Evelyn McElvin, Awards Chairman**  
4332 Princehall Blvd  
Orlando, FL 32811  
Phone: 407-758-3392  
E-mail: [bleve123@aol.com](mailto:bleve123@aol.com)

**COMMUNITY SERVICE CHAIRMAN AWARD**

Awarded to the Community Service Chairman demonstrating ability in forming committees to successfully complete projects and in forwarding legible and correct service reports promptly to the Department Chairman.

**PROOF REQUIRED:**

Signed statement of confirmation from local President. Entries will be verified with the Department Chairman.

Auxiliary # \_\_\_\_\_ City \_\_\_\_\_

Name of Chairman \_\_\_\_\_

Address \_\_\_\_\_

**ENTRY FORM REQUIRED:**

**Copies of work must be submitted in booklet form.**

Signed: \_\_\_\_\_  
Local Auxiliary President

**Entry form must be postmarked by: May 30, 2020**

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