## THIS REPLACES THE CANCER PINS/KEY CHAINS OBLIGATION TO DEPARTMENT

## NEW 2018-2019 HOSPITAL PIN & KEY CHAIN ORDER FORM

District # _	Auxiliar	~y #	
Pins @\$	2.00 each	_ Key chains @\$3.00 each	
CHOICE OF D	ELIVERY		
Pickup a	t June Conventio	n Pickup at C of A June 2	9
Ship my	order (include \$8.0	00 postage for 1-150 pieces to be shipped	<del>4</del> )
Ship my o	rder (include \$16.00	) for <u>150</u> pieces or larger to be shipped)	
SHIP TO ADD	RESS:		
Name:			<del></del>
Address:			<del></del>
City:		Zip Code:	
MAKE CHECK	PAYABLE TO:		
Dept of Ohio	VFW Auxiliary (ed	armark "hospital pins/key chains)	
Mail order to:	Department of (	Ohio VFW Auxiliary	
	P.O. Box 15730,	, Columbus, Ohio 43215-0730	
	•	chains are no longer available, plea check handed? (Please check one)	• •
Donate	to the Departme	ent Auxiliary Hospital Fund	
Return	check to Auxilia	ry Treasurer	
\$\$\$\$\$\$\$\$\$\$	\$\$\$\$\$\$\$\$\$\$\$\$	\$	\$\$\$\$\$\$\$\$\$\$\$\$\$
	F	OR OFFICE USE ONLY	
PINS	KEY CHAINS _	SHIPPPING	<del></del>
CHECK #	AMOUNT (	OF CHECK \$	