

**2022-2023
HOSPITAL PIN & KEYCHAIN
ORDER FORM**



District # _____

Auxiliary # _____

_____ Pins @ \$2.00 each

_____ Key Chains @ \$3.00 each

CHOICE OF DELIVERY

_____ Pick up at June
Convention

_____ Pick up at July
C of A

_____ ship my order (include \$8.00 for 1-150 pcs postage)

_____ ship my order (include \$16.00 for 150+ pcs postage)

SHIP TO ADDRESS:

Name _____

Address _____

City _____ State _____ Zip Code _____

MAKE CHECK PAYABLE TO: Department of Ohio VFW Auxiliary
35 E. Chestnut St. #508, Columbus, OH 43215

Please note: If pins or keychains are no longer available, please specify as to how you would like to have your check handled. (please check one)

_____ Donate to the Department Auxiliary Hospital Fund

_____ Return check to Auxiliary Treasurer

FOR OFFICE USE ONLY

Pins _____ Keychains _____ Shipping _____

Check # _____ Amount of check \$ _____