

COLONIAL HEIGHTS AMERICAN LEGION POST 284

CHRISTMAS BASKET NOMINATION

*NAME: _____

*Sponsor Delivers: _____

ADDRESS: _____

*Individual Picks Up: _____

*CONTACT PHONE #: _____

DATE: _____

*# OF CHILDREN (IN THE HOME): _____

*VETERAN OR AFFILIATED: YES _____ NO _____

ANY EXTENUATING CIRCUMSTANCES (examples – disabled, single parent, etc.):

*SPONSORED BY: _____

*PHONE: _____

* Information must be completed for consideration

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