



Livingston Piecemakers Quilt Guild

Request Form for Quilt of Valor (one person per form)



PLEASE - COMPLETE FORM IN FULL before turning in

Date: _____ **(form turned in)**

Enter the Veteran's name for his/her Printed Certificate below -

FIRST NAME: _____

LAST NAME: _____

SUFFIX: _____ **Email Address:** _____

Enter mailing Address for the QOV invitation to be sent to below -

Address: _____

City: _____ **State:** _____ **Zip:** _____

Branch of Service: _____

Years Served: _____

Return this Form to: Bonnie Walker

Livingston Piecemakers Quilt Guild

335 Jayhawker Road, Cleveland, TX 77328

froggy1323@yahoo.com / 281-592-4848 (H) 281-806-0868 (C)

For QOV Admin only:

Quilt Pieced By: _____

Quilter's Name: _____

Size of Quilt: _____