



FRANK J. BRICHACEK MEMORIAL AWARD
JR. AMVETS COMMUNITY SERVICE

Most Outstanding Community Service Project

Jr. AMVET Name: _____ Post: _____

Address: _____ Phone: _____

City: _____ State: _____ Zip: _____

Please write a brief description of project: (use back of sheet if necessary)

Summary of Hours _____

Miles _____

of People Served _____

Post Commander's Signature

Jr. AMVET Advisor's Signature

Send Application to Auxiliary Headquarters by May 1st.