

DEPARTMENT OF KANSAS, VFW

WAYNE E. RICHARDS AWARD

Nomination Form

Name_____Post #_____Life Member?_____

Address_____City_____Zip_____

SOME QUALIFICATIONS

1. Current Kansas VFW Member or Life Member
2. Active in Post - District - and/or Department
3. Please list a short resume on nominee as to activities in the Veterans of Foreign Wars.

RESUME

Submitted by _____

FORM MUST BE RECEIVED AT DEPARTMENT HEADQUARTERS NO LATER THAN APRIL 1.