



Sons of AMVETS
Department of Ohio
960 Checkrein Ave
Columbus, Ohio 43229

Corporate Partnership Award Nomination Form

This award is given by to corporations and their employees who go above and beyond to assist the Sons of AMVETS in their dedication to serving our Veterans

Name of Corporation: _____

Address of Corporation: _____

City: _____ State: _____ Zip Code: _____

Contact Person: _____ Phone: _____

Outstanding Employee: _____

Please explain why you believe this Corporation and Employee should receive this award (use reverse side of form if needed):

Please Take Note

Winner will be selected prior to State Convention. Deadline for receipt of
ALL MATERIALS AND NOMINATION FORM IS MAY 15.

Submit all entries to: Sons of AMVETS Department of Ohio

ATTN: Awards Committee

960 Checkrein Ave

Columbus, Ohio 43229