

 **BLOOD DONOR REPORT 2012-2013**

**DISTRICT \_\_ COUNTY \_\_ POST \_\_ Choose One**

**Blood Donor Chairman Name:**

**Blood Drives Held \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Total Pints Collected \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Total Workers:**

Legionnaires \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Auxiliary \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Sal \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Boy Scouts \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Red Cross \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Others \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Total Hours \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Please Mail Form To: Paul O. Tagiaferri**

 **Department Blood Donor Chairman**

 **PO Box 132**

 **Avon, N.Y. 14414**