

**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**