# Joseph L. SantaCroce
# Service to Veterans Award

**Detachment of New York - Sons of The American Legion**
**VA&R Commission**

**NOMINEE**_____ ____/____/_____
**(name, address, city, state, zip code)** **(date)**

**SQUADRON #:** _____
**(name, address, city, state of Squadron)**

**SONS CARD NUMBER:** _____

*Please indicate below activities and events participated in, their location and purpose, and Veteran group(s) served*

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***PLEASE ATTACH ADDITIONAL SHEETS AS NEEDED***

**Submitted by** _____ **Title**_____ **Date** _____

**Attested by** _____ **Title** _____ **Date** _____

Return all Nominations NO LATER than June 30 to:

***Sons of The American Legion VA&R Commission Chairman***
***4178 Angela Way***
***Canandaigua, NY 14424***