

YLRL - WAZ-YL

(10 CQ Zones)

Name: _____ Call: _____

Date: _____ Mode: _____ Email: _____

Address: _____

CQ Zone	Call	Country/State	Date	Band/Mode	Time (UTC)	First Name

Instructions: Make copies of your cards, front and back, or printed LoTW confirmation details. Put cards in order and mail with your application. If you email application, attach scanned copies of your cards, preferably 3 on a page. If you mail them, they will be returned quickly after processing, and you will be notified of the date returned.

Email or Mail to: cjf1941@roadrunner.com Carol J. Laferty, K4SAF, 55 E. Cardinal Lane, Clearfield, KY 40313