

### **PVQA Block-of-the-Month Return Slip**

Month you picked up BOM \_\_\_\_\_

Your name: \_\_\_\_\_

Block name: \_\_\_\_\_

Drawing? ☐ NO ☐ YES (*must have  
at least 6 BOM credits*)

Please enclose block(s) with this slip. Bring to the next PVQA meeting or mail to Valerie Spaugh, 29 W. Rianda Rd., Watsonville, CA 95076.

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