

**Ancient Order of Hibernians in America**

**Ohio State Board**

**Order Form for John Barry Medal**

Date Ordered: \_\_\_\_\_

**Division/County/State Information**

Division #: \_\_\_\_\_

County: \_\_\_\_\_

State: \_\_\_\_\_

**Mailing Address to send the Medal**

Address: \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

Number of Medals requested \_\_\_\_\_ @ \$35.00 each = \$ \_\_\_\_\_

Check amount enclosed: \_\_\_\_\_

Make checks payable to: **(Ohio State Board of AOH)**

**Please send check to: Bob Harper, 2663 Losantiville Rd., Cincinnati, OH 45237**

Check # enclosed: \_\_\_\_\_

If you have any additional questions, please contact

Bob Harper at: (513) 383-6110 or halligan@cinci.rr.com