



CQ 60th ANNIVERSARY AWARDS “CQ Gang” Award

SUMMARY AND APPLICATION

NAME _____ CALL _____

ADDRESS _____

CITY _____ STATE/PROV _____ ZIP/PC _____

COUNTRY (IF DX) _____

CERTIFICATE APPLIED FOR (CHECK APPLICABLE BOX[ES]):

Basic “CQ Gang” Award (60 pts.) Check here if SWL award

Endorsement(s): 120 pts. 180 pts. 240 pts. 300 pts. 360 pts.

420 pts. 480 pts. 540 pts. 600 pts.

SCORING SUMMARY:

of contacts _____

of multipliers _____

TOTAL POINTS _____

I hereby certify that I have made or monitored valid two-way contacts with each of the stations listed on the attached log(s), and exchanged the required information in accordance with the rules for the “CQ Gang” Award.

Signed _____ Date _____

Submit log(s) and application before March 31, 2005 to:

Ted Melinosky, K1BV
CQ Gang Award Manager
12 Wells Woods Road
Columbia, CT 06237