



Moldavian District Award

Application for ___ Basic award, or ___ sticker, or ___ 5BMDA Plaque, or ___ MDA Honour Roll Plaque Basic MDA # _____

Call _____ Name (as you want it on your certificate) _____

Address _____ Signature _____

Record of Moldavian District contacted									
MDA	Call	Date	Band	Mode	MDA	Call	Date	Band	Mode
AN					HN				
BL					IL				
BR					LV				
BS					NS				
C					OC				
CA					OR				
CH					RB				
CL					RS				
CM					RZ				
CO					SD				
CR					SG				
CS					SL				
CT					SR				
DB					ST				
DN					SV				
DR					TG				
ED					TL				
FL					TR				
FR					TS				
GE					UN				
GL									
GR									

Application checked _____ Date _____ Call _____ Signature _____