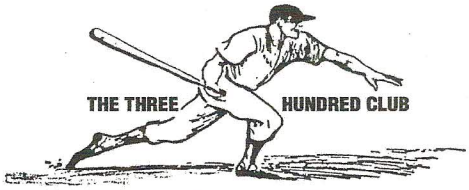
Ballot



PRINT Clearly
Use Black Ink

Name

Number & Street Address

City **State** **Zip Code**

Country

Telephone #: _____

Email

Player's LAST Name	Player's FIRST Initial	Team	Player's LAST Name	Player's FIRST Initial	Team

Batters - Please List alphabetically.

1.			6.		
2.			7.		
3.			8.		
4.			9.		
5.			10.		

Alternates - Please List in order of preference.

1.			3.		
2.					

Pitchers (Total Victories, Season)

1.			3.		
2.			4.		

Home Run Hitters (Total Homers, Season)

1.			3.		
2.			4.		

RBI Champion(Total RBI's, Season)

1. _____ _____ _____ **# of RBI's** ☐☐☐

Stolen Base Champion (Total Stolen Bases, Season)

1. _____ _____ _____ **# of Stolen Bases** ☐☐☐

DIMAGGIO PRIZE (Longest Consecutive-Game Hit Streak)

# of Consecutive Games ☐☐