

ROSE DE LIMA HOSPITAL AUXILIARY

ACTIVE \_\_\_\_\_  
ASSOCIATE \_\_\_\_\_

Name Theresa L. Bossi Husband's Name Alfred  
Address 805 N. 18th St Husband's Occupation Triffi Eng  
Telephone Number MI 2-4403 No. of Children & Ages 2 - 18-9  
Previous Volunteer experience None

Volunteer Preference:

(1) Service in Hospital:

Obstetrics, 2nd floor _____	Medical, 1st floor _____
Gift Shop _____	Central Supply, 3rd floor _____
Dietary Dept. _____	Business Office _____
Recovery Room, 3rd floor _____	Children's Ward _____
Out-Patient _____	Laboratory _____
Miscellaneous _____	Surgery, 3rd floor _____

(2) Homework:

Nursery & Pediatric Mending  \_\_\_\_\_  
Special decorations \_\_\_\_\_  
Telephone Committee \_\_\_\_\_

Do you drive a car? yes Will you take other workers? yes  
Do you type no  
Special interests \_\_\_\_\_

Date of last chest plate 4 yrs  
Comments \_\_\_\_\_

Date voted in \_\_\_\_\_ Date of Orientation 12-14-60  
Sponsored by Lafayette Dukes Assigned to \_\_\_\_\_

Theresa L. Bossi  
Signature of Member

(9-59)

TIME SHEET

ROSE de LIMA HOSPITAL AUXILIARY

Name Patricia J. Boyett Husband's Name Conrad E.  
 Address 1109 E Reynolds Husband's Occupation Electrician  
 Telephone Number None No. of Children & Ages 1 child age 4  
 Previous Volunteer experience none

Volunteer Preference:

(1) Service in Hospital:

Flowers	<u>yes</u>	Geriatrics	
Mail	<u>yes</u>	Central Supply	<u>no</u>
Library	<u>yes</u>	Business Office	<u>no</u>
Dietary Dept.	<u>yes</u>	Children's Ward	<u>yes</u>
Switchboard	<u>no</u>		
Miscellaneous	<u>Anything</u>		

(2) Homework:

Nursery & Pediatric mending no  
 Special decorations no  
 Telephone committee no

Do you drive a car? yes  
 Do you type yes  
 Special interests \_\_\_\_\_

Special skills \_\_\_\_\_  
 Date of last chest plate unknown  
 Comments \_\_\_\_\_

Interviewed by \_\_\_\_\_  
 Date of interview 5/18/60  
 Sponsored by \_\_\_\_\_  
 Assigned to \_\_\_\_\_

Patricia J. Boyett  
 Signature of Member

Please mail to Head Armstrong  
1403 Arville St.

TIME SHEET

(9-9-58)

ROSE de LIMA HOSPITAL AUXILIARY

Name Florence Bradford

Husband's Name James H. Bradford

Address 5825 Evergreen Ave

Husband's Occupation Chemical Engineer

Telephone Number PR-8-1821

No. of Children & Ages (married) Girl 34 yrs (married) Boy 26 yrs

Previous Volunteer experience Worked as practical nurse for three years.

Volunteer Preference:

(1) Service in Hospital:

- Flowers \_\_\_\_\_
- Mail \_\_\_\_\_
- Library \_\_\_\_\_
- Dietary Dept. \_\_\_\_\_
- Switchboard \_\_\_\_\_
- Miscellaneous Surgery
- Geriatrics \_\_\_\_\_
- Central Supply \_\_\_\_\_
- Business Office \_\_\_\_\_
- Children's Ward \_\_\_\_\_

(2) Homework:

- Nursery & Pediatric mending \_\_\_\_\_
- Special decorations \_\_\_\_\_
- Telephone committee \_\_\_\_\_

Do you drive a car? no

Do you type yes

Special interests \_\_\_\_\_

Special skills \_\_\_\_\_

Date of last chest plate 1957

Comments Negative

Mrs Florence Bradford  
Signature of Member

Interviewed by \_\_\_\_\_  
Date of interview Sept  
Sponsored by Mrs Annis Scherer  
Assigned to \_\_\_\_\_

*[Handwritten notes]*  
58

Please fill in and mail to Dean Armstrong 1403 Arville  
Thank you -

(3-3-59)

ROSE DE LIMA HOSPITAL AUXILIARY

Name Mary J Brady Husbands Name Owen A  
Address 1621 Mary Jane Circle Husband's Occupation Retired  
Telephone Number 2-4285 No. of Children & Ages 1 - 13-1/2  
Previous Volunteer experience none

Volunteer Preference:

(1) Service in Hospital:

Flowers <input checked="" type="checkbox"/>	Geriatrics _____
Gift Shop _____	Central Supply _____
Library _____	Business Office <input checked="" type="checkbox"/>
Dietary Dept. _____	Children's Ward _____
Switchboard <input type="checkbox"/>	

Miscellaneous \_\_\_\_\_

(2) Homework:

Nursery & Pediatric Mending \_\_\_\_\_  
Special decorations \_\_\_\_\_  
Telephone Committee \_\_\_\_\_

Do you drive a car? no  
Do you type? yes  
Special interests \_\_\_\_\_

Date of last chest plate \_\_\_\_\_  
Comments \_\_\_\_\_

Interviewed by \_\_\_\_\_ Date of Interview \_\_\_\_\_  
Sponsored by Cleo Harmon Assigned to \_\_\_\_\_

Mary J Brady  
Signature of Member

ROSE DE LIMA HOSPITAL AUXILIARY

ACTIVE \_\_\_\_\_  
ASSOCIATE \_\_\_\_\_

Name Jan Breach Husband's Name Geoffrey  
Address 801 No. 18th St Husband's Occupation Bartender  
Telephone Number DV 4-9567 No. of Children & Ages 2 - 2 mos  
Previous Volunteer experience none

Volunteer Preference:

(1) Service in Hospital:

Obstetrics, 2nd floor _____	Medical, 1st floor _____
Gift Shop _____	Central Supply, 3rd floor _____
Dietary Dept. _____	Business Office _____
Recovery Room, 3rd floor _____	Children's Ward _____
Out-Patient _____	Laboratory _____
Miscellaneous _____	Surgery, 3rd floor _____

(2) Homework:

Nursery & Pediatric Mending

Special decorations \_\_\_\_\_

Telephone Committee \_\_\_\_\_

Do you drive a car? no Will you take other workers? \_\_\_\_\_  
Do you type yes  
Special interests \_\_\_\_\_

Date of last chest plate 1959 (late)  
Comments \_\_\_\_\_

Date voted in \_\_\_\_\_ Date of Orientation 12-14-60  
Sponsored by Lafayette Assigned to \_\_\_\_\_

Jan Breach  
Signature of Member

6-19-59

Faxon (Ross)

ROSE de LIMA HOSPITAL AUXILIARY

Name ELEANOR BROWN Husband's Name CHAS. E. ROSS  
 Address 918 BILTMORE DR Husband's Occupation CHARLESTON T.V.  
 Telephone Number DU 4-3008 No. of Children & Ages Self-Employed  
 Previous Volunteer experience Red Cross Nurse Aid

Volunteer Preference:

(1) Service in Hospital:

Flowers _____	Geriatrics _____
Mail _____	Central Supply _____
Library _____	Business Office _____
Dietary Dept. _____	Children's Ward _____
Switchboard _____	
Miscellaneous _____	

(2) Homework:

Nursery & Pediatric mending \_\_\_\_\_  
 Special decorations \_\_\_\_\_  
 Telephone committee \_\_\_\_\_

Do you drive a car? Yes  
 Do you type \_\_\_\_\_  
 Special interests \_\_\_\_\_

Special skills \_\_\_\_\_  
 Date of last chest plate MAY 1958  
 Comments \_\_\_\_\_

Eleanor Brown  
 Signature of Member

Interviewed by \_\_\_\_\_  
 Date of interview \_\_\_\_\_  
 Sponsored by \_\_\_\_\_  
 Assigned to \_\_\_\_\_

Dues Pd.  
 57-58

(2-60)

ROSE DE LIMA HOSPITAL AUXILIARY

Name Bunny Burns Husbands Name Charles  
 Address 2008 Bracher Husband's Occupation Dealer  
 Telephone Number DU 2-0986 No. of Children & Ages \_\_\_\_\_  
 Previous Volunteer experience None

Volunteer Preference:

(1) Service in Hospital:

Flowers _____	Geriatrics _____
Gift Shop _____	Central Supply _____
Library _____	Business Office _____
Dietary Dept. _____	Children's Ward <u>X</u>
Switchboard _____	

Miscellaneous \_\_\_\_\_

(2) Homework:

Nursery & Pediatric Mending \_\_\_\_\_  
 Special decorations X \_\_\_\_\_  
 Telephone Committee \_\_\_\_\_

Do you drive a car? Yes  
 Do you type? No  
 Special interests \_\_\_\_\_  
 Date of last chest plate \_\_\_\_\_  
 Comments \_\_\_\_\_

Interviewed by \_\_\_\_\_ Date of Interview \_\_\_\_\_  
 Sponsered by Elizabeth Ciro Assigned to \_\_\_\_\_

Bunny Burns  
 Signature of Member