College of Heralds		
Society Name		Action Type
		Resubmission
_	This name is (pick one):	Kingdom Laurel
Address	submitted with this device	Change, if registered:
Branch Name	previously submitted from the Kingdom of	
Phone Number		retain old badge(s)
	Date Submitted	Appeal (attach justification)
	Herald's E-mail/Phone	i iOmer (Specify)
If using any restricted charges, please give Kingdom and date of eligibility for that charge.	Is this badge jointly owned? Yes No If Yes, co-owner's Society Name	
	(Note: the square below should be approximately 4.5 inches (11.	
Check here for a fieldless badge		
(no particular background)	\	
Proposed Blazon (Consult a herald if possible. Use plain English if you don't know how to blazon.)		
	-	-
Instructions: send 1 color and 1 line art form to Aster submitter each retain a copy.	risk (name and address in the Black Star). It is recommended that	the local/consulting herald and the
Amount Possived - Data Poss	aived Action Taken Amoun	t Forwarded Date Forwarded

Ansteorra

Local

Laurel

Kingdom

Badge Submission Form