



DEPARTMENT OF PENNSYLVANIA
VETERANS OF FOREIGN WARS
PROGRAMS REPORT FORM

UNWAVERING SUPPORT



FOR UNCOMMON HEROES

POST/AUX. \_\_\_\_\_ DISTRICT \_\_\_\_\_

COMMUNITY SERVICE REPORT

ENTER REPORTING PERIOD HERE

IMPORTANT INSTRUCTIONS:

- 1. AFTER OPENING THE FORM, SAVE A COPY TO YOUR COMPUTER.
2. COMPLETE THE INFORMATION BY FILLING OUT ALL APPLICABLE AREAS.
NOTE: NOT ALL SECTIONS NEED TO BE FILLED OUT.
3. BEFORE CLOSING THE FORM - SAVE THE DOCUMENT AGAIN!
NOW YOU WILL HAVE A COMPLETED FORM ON YOUR COMPUTER.
4. NOW YOU CAN EITHER PRINT AND MAIL THE COMPLETED FORM OR SEND IT VIA EMAIL TO YOUR CORRESPONDING CHAIRPERSON.

NOTE: IT IS RECOMMENDED THAT YOU SAVE A BLANK VERSION OF THE FORM AND THEN CREATE A NEW FILE FOR EACH SUBSEQUENT FORM YOU COMPLETE. EACH FILE SHOULD BE RENAMED SO THAT YOU KEEP COPIES OF ALL COMPLETED FORMS.

A. COMMUNITY INVOLVEMENT:

- 1. ORGANIZED AND ASSISTED IN A BLOOD DRIVE HOURS SPENT \_\_\_\_\_ MONEY SPENT \_\_\_\_\_
2. RECYCLING PROGRAM HOURS SPENT \_\_\_\_\_ MONEY SPENT \_\_\_\_\_
3. ADOPT A HIGHWAY HOURS SPENT \_\_\_\_\_ MONEY SPENT \_\_\_\_\_
4. ORGANIZED CPR CLASS HOURS SPENT \_\_\_\_\_ MONEY SPENT \_\_\_\_\_
5. OTHER COMMUNITY INVOLVEMENT PROJECTS HOURS SPENT \_\_\_\_\_ MONEY SPENT \_\_\_\_\_

B. COOPERATION WITH OTHER ORGANIZATIONS:

- 1. ASSISTED OTHER ORGANIZATIONS IN THE COMMUNITY HOURS SPENT \_\_\_\_\_ MONEY SPENT \_\_\_\_\_
2. ASSISTANCE TO VA OR HOSPITAL HOURS SPENT \_\_\_\_\_ MONEY SPENT \_\_\_\_\_
3. OTHER COOPERATION WITH OTHER ORGANIZATIONS PROJECTS HOURS SPENT \_\_\_\_\_ MONEY SPENT \_\_\_\_\_

C. AID TO OTHERS:

- 1. COMMUNITY HOSPITAL/NURSING HOME VOLUNTEERS HOURS SPENT \_\_\_\_\_ MONEY SPENT \_\_\_\_\_
2. SENIOR CITIZENS HOURS SPENT \_\_\_\_\_ MONEY SPENT \_\_\_\_\_
3. SPECIAL NEEDS INDIVIDUALS HOURS SPENT \_\_\_\_\_ MONEY SPENT \_\_\_\_\_
4. OTHER AID TO OTHERS PROJECTS HOURS SPENT \_\_\_\_\_ MONEY SPENT \_\_\_\_\_

D. SCHOOL AND CHURCH ASSISTANCE:

- 1. VOLUNTEER IN SCHOOL/CHURCH HOURS SPENT \_\_\_\_\_ MONEY SPENT \_\_\_\_\_
2. SPEAKER IN SCHOOL/CHURCH HOURS SPENT \_\_\_\_\_ MONEY SPENT \_\_\_\_\_
3. ASSISTANCE TO SCHOOL/CHURCH HOURS SPENT \_\_\_\_\_ MONEY SPENT \_\_\_\_\_
4. OTHER SCHOOL/CHURCH ASSISTANCE PROJECTS HOURS SPENT \_\_\_\_\_ MONEY SPENT \_\_\_\_\_

TOTAL OF HOURS/MONEY FOR SECTIONS A/B/C/D HOURS \_\_\_\_\_ MONEY \_\_\_\_\_

ANY COMMENTS OR ADDITIONAL EXPLANATIONS SHOULD BE ATTACHED TO THIS FORM AND MAILED TO THE VFW STATE COMMUNITY SERVICE CHAIRMAN OR THE VFW AUXILIARY COMMUNITY SERVICE CHAIRMAN AT THE ADDRESS PROVIDED ON THE REVERSE SIDE OF THIS FORM.



**COMMENTS AND/OR ADDITIONAL EXPLANATIONS:**