



how to complete form

AMVETS LADIES AUXILIARY LOCAL SERVICE REPORT FORM

Individual reports shall be made for the following programs:

- 1 Americanism/SOS Child Welfare Community Service Hospital
Scholarship (please indicate which program)

2 Local Auxiliary Reporting:

3 Reporting Period to

Auxiliary

List Volunteers: 17
(List Additional Volunteers on the back)

4 Number of Volunteers 1.

5 Hours Donated 2.

6 Number of Miles 3.

7 Number of Projects 4.

EVALUATIONS: 5.

8 Hours @ \$30.00 per hour 6.

9 Mileage @ \$.65 per mile 7.

10 Refreshments 8.

11 Cash Donations 9.

12 New Material 10.

13 Used Material 11.

14 Lodging 12.

15 TOTAL EVALUATIONS: _____

List projects and activities in detail. (Use the back or additional sheets if necessary)

16

18 Chairman Signature: Date:

Address:

City/State:

Phone/E-mail:

Revised MAY 2024

see service report form guide