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

Reporting periods are as follows: May 1 to October 31 for the Mid-Year Report. May 1 to April 30 for the Annual Report.

Auxiliary

4 Number of Volunteers

5 Hours Donated

6 Number of Miles

7 Number of Projects

EVALUATIONS:

8 Hours @ $30.00 per hour

9 Mileage @ $.65 per mile

10 Refreshments

11 Cash Donations

12 New Material

13 Used Material

14 Lodging

15 **TOTAL EVALUATIONS: _____**

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

1.
2.
3.
4.
5.
6.
7.
8.
9.
10.
11.
12.

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

18 Chairman Signature: Date:

Address:

City/State: Phone/E-mail:

Revised MAY 2024

See Service Report Form Guide