COMMUNITY SERVICE REPORT 2018-2019

	out in triplicate.	Send two copies to address listed at righ Unit files.	t:						
Mυ	<u>ist be postmarke</u>	d by:							
<u>PL</u>	EASE PRINT								
NAME OF UNIT				UNIT NUMBER					
CITY				STATE					
NUMBER OF <u>SENIOR</u> MEMBERS Total			Total ser	senior members working on Community Service					
Mo do ite (lin	onetary donations nations from mer mized explanatio	Community Service by the Unit should be onbers should be listed in of expenditures. Ad is). The report of servi	e listed only i I in the last o Iditional expl	n the colu column. If anation ar	mn for the tota d detai	Unit Check al amount e I of unit act	s.* All othe exceeds \$1, 0 tivities may l	r cas <u>000,</u> be a	sh attach ttached must not
1.	Family Service	s: Direct aid to	<u>Miles</u>	<u>Hours</u>	b	onation y Unit hecks	Value all Other Donations		Cash Donations from <u>Members</u>
	families, visits, of errands, transport	•			\$	\$		\$_	
2.	Facility Visits: treatment cente centers/hospital	rs, health care							
3.	Professional & Payments: Med electrician, plum				\$	\$		\$_	
4.	Organized active Wheels, senior groups, fund dri				\$	\$		\$_	
5.	Excursions, par	intertainment: ties, reading, gifts, ing, baking, etc.			\$			\$_	
6.	Caregiver Initiat	ts and Programs: ive, LVAP, Efforts , Parades, Fairs, etc.			\$	\$		\$_	
		Totals:			\$	\$		\$_	
				To	tal of A	II Donatio	ns \$		
Su	bmitted by: Sigr	nature of Commander	and/or Chai	rman					

*<u>Unit</u> funds may be used for community efforts benefiting veterans and their families.