



## AMVETS LADIES AUXILIARY LOCAL SERVICE REPORT FORM

Individual reports shall be made for the following programs:

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

### Local Auxiliary Reporting:

Reporting Period

to

Auxiliary

List Volunteers:

(List Additional Volunteers on the back)

Number of Volunteers

1.

Hours Donated

2.

Number of Miles

3.

Number of Projects

4.

**EVALUATIONS:**

5.

Hours @ \$30.00 per hour

6.

Mileage @ \$.65 per mile

7.

Refreshments

8.

Cash Donations

9.

New Material

10.

Used Material

11.

Lodging

12.

**TOTAL EVALUATIONS:** \_\_\_\_\_

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

Chairman Signature:

Date:

Address:

City/State:

Phone/E-mail:

**Revised MAY 2024**