

AMVETS LADIES AUXILIARY LOCAL YOUTH VOLUNTEER SERVICE REPORT FORM

Individual reports shall be made for the following programs: Hospital, Child Welfare, Community Service, Americanism/SOS and Scholarship.

Local Auxiliary Reporting: 8000 **Report for:** Hospital

Reporting Period: September 1, 2021 to Sept 30, 2021

List Youth Volunteers:

Number of Volunteers _____
List Additional Volunteers on the Back 2 1. George Jones

Hours Donated 4 2. Tammy Wynette

Number of Miles 0 3. _____

Number of Projects 1 4. _____

EVALUATIONS: _____ 5. _____

Hours @ \$20.00 per hour 80 6. _____

Mileage @ \$.50 per mile 0 7. _____

Refreshments _____ 8. _____

Cash Donations _____ 9. _____

New Material _____ 0. _____

Used Material _____ 1. _____

Lodging _____ 2. _____

TOTAL EVALUATIONS: \$80.00

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

Chairman Signature: Barbara Mandrell Date: 10/8/21

Address: 555 Main Street

City/State/Zip: Anywhere, FL 99999

Phone/E-mail: bmandrell@gmail.com 813-555-1212

George and Tammy helped the Auxiliary to package up toiletries and socks for delivery to the VA hospital. Spent 2 hours each bundling toiletry sets and adding socks to care bags.