

HOSPITAL FORM INSTRUCTIONS

Please read the form and answer the questions when filing out Hospital Forms. The following are explanations for each section of the form and an example of a completed form is on the next page.

Auxiliary Name, Number, State, and Where Visit Made: go on the 1st line (1), (2), (3), (4) on the sample form. If Patients are brought to the VFW Post, please list the Hospital or Nursing Home that Patients are from.

Member Number: (5) on sample.

Member Name: (6) on sample—list each MOCA Auxiliary Member in ALPHABETICAL order by LAST NAME. Put the total **Project Hours** (7), total **Travel Hours** (8), and Total **Visit Hours** (9) using no more than 2 decimal points. If you are using the computer form, (10) **Total Hours** will add automatically. If doing by hand, (10) Total Hours then add column 7, 8, and 9 together and put total in (10). Miles (11) is total miles round trip to 2 decimal points.

Total \$: (12) if using computer form, (12) will add automatically. If doing by hand, (12) is Total Hours (10) multiplied by \$22.55 plus Miles (11) multiplied by 0.14.

Information: (13) is used for explanations of project hours such as “baked 2 cakes, blood donations, lap robes, etc. This line can also be used to denote Clown, New Name, New Member, transfer, individual visit dates when more than one visit to same hospital, etc. When giving New Name, list Old Name in information. If transfer, give Grand and Auxiliary Number. If reinstated, the last year person was a member would be helpful in locating their previous hours.

Total (14) if using computer form, will add automatically. If doing by hand, (14) is total of each column.

No. Members (15) is the total number of members that did things not just the number of names listed. For example, on the sample sheet for the total members is 10 because of the different dates of visits.

Patients (16) is the number of patients visited. For example, on the sample sheet, the No. Patients is 125 which was 25 patients visited on 5/24 and then 25 patients visit each day of 5/5, 5/12, 5/19, and 5/23.

Date: (17) is the date of the visit if only one visit on sheet otherwise do like the sample.

Kind of Entertainment: (18) Bingo, sing-along, ball game, etc., and the allowable credit if applicable for amateur or paid entertainer goes in (19). Bingo prizes and money are listed under gifts.

Refreshments: (20) List refreshments with amount and cost. Example: 6 dz. Homemade cookies \$18, 1 cake purchased \$5.79 goes in (20) with the total of refreshments in (21).

Gifts: (22) This is Bingo Prizes, **blood**, canteen books, donations, lap robes, tray favors, toll costs, etc. Itemize with quantity and value of each on (22) and put total in (23).

Clothing, Books, & Magazines: (24) List new clothing and price and total from used clothing form. Attach a list of all used clothing, books, and magazines. Put totals listed from (24) in total (25).

Submitted By: (26) Put your name and title.

GRAND TOTAL: (27) If using computer form, total will add automatically. If doing by hand, then add Total \$(14), (19), (21) (23), and (25).

E-Mail: (28) put in your e-mail address. **Phone:** (29) your phone number. **Address:** (30) mailing address, **City:** (31), **State:** (32), and **Zip:** (33)