



Ladies of the Grand Army of the Republic, Inc.

Community, Children and Veterans Service Report



Report for Community, Children, and Veterans Service July 1, 20____ to June 30, 20____

Department of _____ Number of Members _____

Circle Name _____ No. _____ Number of Members _____

or Member At Large Location (city , state)_____

or Under National _____ Number of Members _____

| Service provided | Total Number of Hours donate |
|---|------------------------------|
| Beautification of neighborhood, ecology and clean-up work | |
| Blood Bank (pint donation = 1 hour) | |
| Church Volunteer hours (outreach, youth groups, etc.) | |
| Service to Seniors (include hours preparing meals, visiting, transporting to doctor etc.) | |
| Service to Community (hours include drug abuse programs, family services, homeless services, English as a 2 nd language, school volunteers, scouts, 4H) | |
| Events for fund raising (hours include Komen Race for the Cure, Livestrong Challenge, Crop Walk for example) | |
| Food Bank (hours collecting or distributing food) | |
| Law Enforcement, Fire Dept, or EMS volunteer hours | |
| Community Hospitals or Nursing homes | |
| Veterans Hospitals or Homes | |
| Active Duty service (hours spent sending packages, mail, supporting families) | |
| Total hours | |

Please attach another paper with significant projects or information you would like to share.

Respectfully submitted in F, C &L,

Community Service Chairperson

Name _____

Address _____ City _____ St. _____ Zip _____

Phone _____ email _____

Circles send to Department Secretary Departments send to National Secretary

Contact Person if you have Questions _____

Revised 08/2021