

**Department of Michigan
Veterans of Foreign Wars
PROGRAM REPORTS**
Reporting period May 1 to April 30

District No. _____

Post No. _____

Date of this report

Reporting period for this report:
From _____ to _____

For Department Use Only			
	# Projects	Hours	Value
CS	_____	_____	_____
Am	_____	_____	_____
YA	_____	_____	_____
DR	_____	_____	_____
SAF	_____	_____	_____
LEG	_____	_____	_____

PLEASE READ!!!!

Fill out this form with information as accurate as possible. Report all monies expended from the Post funds to complete a project. In addition, you may use the VFW Post Hall as a donation cost. The mileage used in volunteer work can be included at **\$.14** per mile. Also, report the value of materials for community service projects donated by the Post member (i.e. canned goods, clothing items, etc.)

Do not list Hospital Activities on this form.

**Send completed form to Department Headquarters: 924 N. Washington
Lansing, MI 48906**

Signature: _____ Title: _____ Date: _____

Date of Project: _____

Project Description: What you did, the number of people involved, times the number of hours each and the amount of money spent and/or donated. _____

Hours
\$Value

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**Mail form to Department Headquarters: 924 N. Washington
Lansing, MI 48906**

Please keep a copy for your Post records. For additional reports, this form may be copied.