



# Community Services Activity Report Form

(Reporting Period Jul 1 to June 30)

Post 7110 District # 5

Briefly Describe Each Activity and "PRINT CLEARLY". If we can not read it then no credit will be given

MM/DD/YY	Describe Your Activity	
1) Name (Last, First)		Youth:
		Americanism:
		Hours:
		Money:
2) Name (Last, First)		Youth:
		Americanism:
		Hours:
		Money:
3) Name (Last, First)		Youth:
		Americanism:
		Hours:
		Money:
4) Name (Last, First)		Youth:
		Americanism:
		Hours:
		Money:
5) Name (Last, First)		Youth:
		Americanism:
		Hours:
		Money:

In accordance with I.R.S. guidelines the community service reported was conducted by VFW &/or Auxiliary members for the benefit of non-members and the community-at-large for which no reimbursement or payment of any kind was received and has been documented in the Meeting Notes at the monthly Post meeting on:

MM/DD/YYYY:

Community Service Chairperson:

(Print Name)

Contact Information:

(Phone Number)

**DO NOT FAX!**

Mail to: Dept. of Texas VFW, P.O. Box 14468, Austin, Texas 78761