

VFW COMMUNITY SERVICE PROGRAM
South Carolina Post/Auxiliary Report Form

Dear Post Commander/Auxiliary President:

Please assist your Department by completing this six-month Community Service Report Form (May 1 – October 31) and return to VFW Department Headquarters no later than November 15.

Post/Auxiliary No.	Total amount of monies expended to complete activities	Total number of volunteer hours

Completed By: _____
Post/Auxiliary Officer or Chairman's Signature

RETURN FORM TO DEPARTMENT S.C. VFW BY NOVEMBER 15:
210 Glassmaster Road, Lexington, South Carolina 29072 (Keep copy for Post records)

VFW COMMUNITY SERVICE PROGRAM
South Carolina Post/Auxiliary Report Form

Dear Post Commander/Auxiliary President:

Please assist your Department by completing this six-month Community Service Report Form (November 1 – April 15) and return to VFW Department Headquarters no later than April 30.

Post/Auxiliary No.	Total amount of monies expended to complete activities	Total number of volunteer hours

Completed By: _____
Post/Auxiliary Officer or Chairman's Signature

RETURN FORM TO DEPARTMENT BY APRIL 30.
210 Glassmaster Road, Lexington, South Carolina 29072 (Keep copy for Post records)