

2017-2018 Unit/District Report Form Community Service

Unit Report Forms should be sent to your District and District to Department. Please retain a copy for your records.

Unit Name: _____ Town _____

Name of person reporting _____

Address _____

Check activities/programs carried out by your unit in your community/District.

Donations to food banks _____ Donations to clothing banks _____
Donations to United Way _____ Special Needs assistance _____
Community improvement projects _____ Service to the aging _____

Helping our Veterans—How did you assist the veteran and or family.

1. Total number of people served _____
2. Total # of volunteer hours for all community projects _____
3. Total value of volunteer hours,(hrs x\$21.00) _____
4. Total value of goods and materials _____
5. Total value of donations _____
6. Grand Total (add lines 3,4,&5) _____
7. Total \$ raised _____
8. Total # of participants _____

Put in narratives if possible send to your District chairman.

District chairman send to Department Chairman: Nancy Evans
427 N Carrie
Mepherson Ks 67460
nancylevans47@gmail.com
785-820-6033