

PROGRAM: VETERANS AFFAIRS & REHABILITATION (VA&R)

Unit Annual Narrative Report 2022-2023

Department of Wisconsin

Submit to Department Headquarters by 4/15/23 only if you participated in any of these activities:

Unit # _____ District # _____

Name/Title (of person completing form) _____

Email Address _____ Phone: _____

1. Unit members who volunteer at a VA Facility (Hospital or Veterans Home).

Their hours are recorded at the facility. Check with your Rep for totals if unknown.

Name of VA Facility(s) where volunteer work is done _____

Exact Number of Volunteers recruited (to volunteer at VA facility):

Non-Affiliated Volunteers _____ # Occasional Volunteers _____ # VolunTeens _____

2. Total Number of Volunteer Hours at a VA Facility by your Unit: _____

3. Unit members who volunteer at a CBOC: CBOC hours are not recorded through the VA

Location _____ #Volunteers _____ #Hours _____

4. Question 4 refers to *Service to Veterans Volunteers*. Note your Unit hour total below. The names & hours of participants are reported to Department Headquarters, attn: Andrea Stoltz, PO Box 140, Portage WI 53901 or alawi@amlegionauxwi.org to add to Wisconsin's statistics & for qualifying awards. Hours accumulate from year to year.

Total Number of Service to Veteran Hours for the Unit: _____

*****Please do not cross off a category to insert another. Note 0 if no donation was given*****

5. Amount donated to the Veterans Creative Arts Festival: \$ _____

6. Amount donated to Camp American Legion: \$ _____

7. Amount donated to Christmas Gift Shop: \$ _____

8. Amount donated to Homeless Female Veterans Grant Fund: \$ _____

9. Amount donated to Fisher House: \$ _____

10. Amount donated to VA Medical Facilities and Veterans Homes: \$ _____

11. Did your Unit remember Veterans with cards? Yes No

Questions 12 & 13 require signing up with specific programs. If your Unit has not done so, check NO. List # of quilts crafted only through Quilts of Valor below. Any other should be noted elsewhere.

12. Did your Unit participate in the Quilts of Valor? Yes No

If so, how many quilts were made? _____

13. Did your Unit participate in the Elizabeth Dole caregiver support foundation? Yes No

Use flip side or separate sheet to list VA&R activities, events, and projects your Unit was involved in.

Please Complete and Return by APRIL 15, 2023 to:

American Legion Auxiliary, Dept of Wisconsin
PO Box 140, Portage WI 53901-0140