

SERVING AMERICA'S HEROES

Soaring for our Veterans

HOSPITAL REPORT 2026-2027

1. The number of VFW Auxiliary members that volunteered at any VA and/or non-VA medical facility. (VFW Auxiliary members to be counted one time only per year). _____
2. The total number of hours that VFW Auxiliary members volunteered at any VA and/or non-VA medical facility. _____
3. The total number of hours that Sponsored Volunteers and/or students volunteered under the VFW Auxiliary sponsorship and supervision at any VA and/or non-VA medical facility. _____
4. The number of VFW Auxiliaries that promoted, participated in or co-hosted any activity with their VFW Post. _____
5. The total dollar amount spent on all Hospital Program-related items and/or projects. _____
6. List most creative/unique activity and/or event to interact with and provide happiness to veterans in hospitals on separate sheet (VA and non-VA facilities).

Hours _____ Miles _____ # of members _____ \$ _____

Hospital Chairman _____ Date _____

Auxiliary # _____ District _____ Division _____

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