

GOLD STAR WIVES OF AMERICA, INC

Community Service Report

Period Covered: January 1, 2017 to December 31, 2017

Name _____ Your Region/Chapter _____

Address _____ Blood: # of Pints Donated _____

City/St/Zip _____

COMMUNITY SERVICE DONATIONS: Community Service is any charitable contribution made to a non-profit organization (including churches and hospitals), money, hours donated in service or miles traveled (as a driver or a passenger, or by bus, taxi, etc.) **SEE BACK FOR MORE INSTRUCTIONS AND SPACE**

Please identify by name and city and state where volunteer work and/or donations were given. Estimate cash value of donated goods as if you had sold them. Please keep an itemized account of your contributions so that you and GSW can have proper records.

<u>SERVICE ORGANIZATION NAME/CITY/STATE</u>	<u>MONEY</u>	<u>HOURS</u>	<u>MILES</u>
Church _____	_____	_____	_____
Hospital (Civilian) _____	_____	_____	_____
Nursing Home/Care Center _____	_____	_____	_____
School/College _____	_____	_____	_____
Food Shelf _____	_____	_____	_____
Civic org/activity _____	_____	_____	_____
Other _____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
TOTALS FROM REVERSE SIDE	_____	_____	_____
GRAND TOTAL MONEY/HOURS/MILES	_____	_____	_____

Other non-profit examples: Humanitarian groups such as Red Cross, United Way, Cancer Fund, Salvation Army, CARE, Veteran’s Org, Scouting, environment, animals, etc.

NOTE NEW PROCEDURE: All members, please complete and send by March 31, 2018 to **Carol DeVore, 56 - 33rd Ave S #313, St Cloud, MN 56301-3722**. Phone: 320-217-1321
 Email: cdev325gs@outlook.com

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ADDITIONAL INFORMATION AND INSTRUCTIONS

Community Service does not include any work for a relative such as babysitting, caring for an elderly relative, or any family-related assistance.

Do Not Include on this report: Donations or volunteerism benefitting Gold Star Wives or a military or veteran’s medical facility. A separate form is provided for reporting money, goods, hours, and mileage for military and veteran’s hospitals/clinics/homes.

To determine if you are a Chapter member or a Member-at-Large (MAL), examine the newsletter address printing for your name.

MAL: 123456 - North Central - 2017
Jane Doe
4567 Main Street
Anytown, WI 54016

Chapter: 456789 – Potomac -2017
Mary Smith
6789 Central Ave
Washington, DC 20005

IF YOU HAVE ANY FURTHER QUESTIONS, PLEASE CONTACT:

Carol DeVore, Community Service Director
56 - 33rd Ave S #313, St Cloud, MN 56301-3722
320-217-1321, email: cdev325gs@outlook.com

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<u>SERVICE ORGANIZATION NAME/CITY/STATE</u>	<u>MONEY</u>	<u>HOURS</u>	<u>MILES</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
TOTALS FROM THIS PAGE:	_____	_____	_____