$\qquad$ AMVETS Post \# $\qquad$ AMVETS Programs Reporting Form Contact Person $\qquad$ Phone Number $\qquad$ Email $\qquad$


| Brief Description of Activity |  | Number of Volunteers | Total Hours <br> (\$28.54 per hour) |  | $\begin{gathered} \hline \text { Total Miles } \\ \text { (\$0.42 } \\ \text { per mile }) \end{gathered}$ |  | Activity <br> Accuactat ash <br> in used <br> in addition onous <br> d mileage) |  | Total Cost of Program Mileage + ActivityCost + Donation)$\qquad$ |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | \#HRS | stotal | \#MLES | stotal |  |  |  |
| 1 | (date) |  |  |  | \$ 0.00 |  | \$ 0.00 |  |  | \$ 0.00 |
|  |  | (escripition) |  |  |  |  |  |  |  |
| 2 | (date) |  |  | \$ 0.00 |  | \$ 0.00 |  |  | \$ 0.00 |
|  |  | (Descripioion) |  |  |  |  |  |  |  |
| 3 | (date) |  |  | \$ 0.00 |  | \$ 0.00 |  |  | \$ 0.00 |
|  |  | (Oescrition) |  |  |  |  |  |  |  |
| 4 | (date) |  |  | \$ 0.00 |  | \$ 0.00 |  |  | \$ 0.00 |
|  |  | (Oescrition) |  |  |  |  |  |  |  |
| 5 | (date) |  |  | \$ 0.00 |  | \$ 0.00 |  |  | \$ 0.00 |
|  |  | (Descrition) |  |  |  |  |  |  |  |
| 6 | (date) |  |  | \$ 0.00 |  | \$ 0.00 |  |  | \$ 0.00 |
|  |  | (Descrition) |  |  |  |  |  |  |  |
| 7 | (date) |  |  | \$ 0.00 |  | \$ 0.00 |  |  | \$ 0.00 |
|  |  | (Descripioion) |  |  |  |  |  |  |  |

- Meetings of any kind (State, Post, District) are not to be included - this form is only for Post programs
- Please do not send duplicate copies of forms, only one is necessary

