Individual CSR Form 1 2026

Community Service Report - **VFW Post 7720**

Date of Service:_____ Name:_____

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Help Provided to:

Person(s) Name:_____

☐ Veteran ☐ Veteran Spouse/family member ☐ Civilian

or

Organization Name:_____

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Type of Service:

☐ Transportation ☐ Physical Assistance (describe below) ☐ Counseling

☐ Buddy Poppy drive ☐ Recruitment ☐ Hospital/Nursing

☐ Other:_____

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Service/Destination Location:

☐ Members home ☐ Outside Members home ☐ Event

Describe:_____

****

Volunteered hours total HOURS: (include all travel time) _____

Travel miles total: (your home to your home) MILES: _____

_____

Comments:

Out of Pocket Expenses

☐ None

Tolls: $ _____

Parking: $ _____

Food: $ _____

Hotel: $ _____

Other: $ _____

(describe):_____

Total Expenses - $_____

Hand in completed report or email: David Horn | VFWjrvice7720@gmail.com | Subject line: CSR Report