

2025 – 2026 Annual Veteran Affairs & Rehabilitation Reporting Form for Units

Unit # \_\_\_\_\_ District # \_\_\_\_\_

Submitter

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone # ( \_\_\_\_\_ ) \_\_\_\_\_ email \_\_\_\_\_

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Please provide a brief narrative, when requested, in the box provided. If more space is needed, attach a separate sheet. A narrative should explain the activity/event you are reporting. Include in your report the number of members who participated in the event (both ALA members and non-members participating in the event), the hours of donated time, the money spent to hold the event, and/or the money raised at the event, and in-kind donation values. When aiding and supporting an outside organization, briefly explain who they are and how they support our mission or the community. A brief narrative need not be more than a short paragraph of two or three sentences.

**Please include photos of your activities along with your narratives.**

**Please indicate if you have a member applying for or if your Unit is applying for any Department or National awards.** Please include the official name of the award, not just Best Unit Report, etc. Please send your Unit report to the District President AND to the District Chairman for the program you are reporting. Your District President should provide that contact info for you prior to Annual Reporting time. **Unit reports are due by March 31.**

**Veteran Affairs & Rehabilitation (VA & R):**

- 1) How many members in your Unit volunteered at a VA healthcare facility, including state-run (Chesterfield, Grand Rapids and Jacobetti)? \_\_\_\_\_ How many hours of time volunteered? \_\_\_\_\_ What was the Monetary Value of other donations to the VA Healthcare Facility (not counting Gift Shop)? \$\_\_\_\_\_
- 2) How many members in your Unit volunteered to serve veterans outside a VA facility (Nursing Homes, Rehabilitation Center, Veteran’s own home)? \_\_\_\_\_ (Service To Veterans)? How many hours of time volunteered? \_\_\_\_\_ What was the Monetary Value of other Donations (not counting Gift Shop) \$\_\_\_\_\_.
- 3) How have you supported veterans and their families in the community by collaborating with external like-minded organizations (Honor Flight, Quilts of Valor, Wounded Warriors)? Provide details in your narrative with Hours and Monetary Value.

- 4) Does your Unit keep track of its members' volunteer hours & submit them for recognition?  
Yes  No
- 5) How did your Unit support veteran caregivers, family members, and survivors?

6) How did your Unit honor veterans over the past year?

7) How did your Unit support the rehabilitation & healing of veterans through arts, crafts & hobbies?

National Veterans Creative Arts Festival? Monetary Donation to National \$ \_\_\_\_\_  
to Department \$ \_\_\_\_\_

8) Did your Unit help promote job fairs for veterans & their families? Yes  No  Provide details in your narrative with Hours and Monetary Value.

9) Did your Unit assist veteran transition back into civilian life? Yes  No  Provide details in your narrative with Hours and Monetary Value.

10) Did your Unit assist & support caregivers of veterans? Yes  No  Provide details in your Narrative including Hours and Monetary Value.

11) Did your Unit support any Active Duty & Reservists? Yes  No  How? Provide details, including Hours and Monetary Value.

12) Did your Unit assist any Military Families? Yes  No  How? How? Provide details, including Hours and Monetary Value.

13) Did your Unit assist any Homeless Veterans? Yes  No  How? How? Provide details, including Hours and Monetary Value.

14) Did your Unit participate in an Annual Christmas Gift Shop? Yes  No  Hours of donated time, including shopping/prepping for and during Gift Shop? \_\_\_\_\_ Value of donations? \$ \_\_\_\_\_

15) Donation to the National Veterans Project Fund \$ \_\_\_\_\_

16) How has your Unit supported The American Legion "Be the One" Mission? How? Provide details, including Hours and Monetary Value.