

**THE AMERICAN LEGION - DEPARTMENT OF OREGON**

**2020-2021 QUESTIONNAIRE**

**NUMBER 3 – BLOOD DONOR**

**COMPLETED FORM DUE AT DEPARTMENT BY JUNE 1, 2021.**

Please Print or Type

Post Name \_\_\_\_\_

Post No. \_\_\_\_\_

Number of members in Post: \_\_\_\_\_

Date: \_\_\_\_\_

**BLOOD DONOR SERVICE TROPHY**

1. Number of Blood Drives Hosted/Co-Hosted by Post?

| Date  | No. Prospective Donors | Productive Units collected |
|-------|------------------------|----------------------------|
| _____ | _____                  | _____                      |
| _____ | _____                  | _____                      |
| _____ | _____                  | _____                      |
| _____ | _____                  | _____                      |
| _____ | _____                  | _____                      |
| _____ | _____                  | _____                      |

2. Number of Post and Unit members who:

A. Gave Blood \_\_\_\_\_

B. Worked in Donor Centers doing escort service, greeting/registering/recording?  
\_\_\_\_\_

Refreshment service and who provided cookies, posted signs, advertised?  
\_\_\_\_\_

Assisted in loading and unloading supplies and equipment. \_\_\_\_\_  
\_\_\_\_\_

3. Number of man hours of service donated to The Blood Program by Post and Unit Members. \_\_\_\_\_
  
4. Total number of miles traveled Legion/Auxiliary and/or donor. \_\_\_\_\_

Attest: Commander \_\_\_\_\_ Adjutant: \_\_\_\_\_  
Signature Signature

**Category of Post Size**

- Category 1: Posts with membership 15-150
- Category 2: Posts with membership 151-300
- Category 3: Post with membership 301-450
- Category 4: Posts with membership 451-and UP

Judged and presented by: National Security Commission  
Blood Donor Program