THE AMERICAN LEGION - DEPARTMENT OF OREGON

2022-2023 QUESTIONNAIRE

NUMBER 18 – REHABILITATION REPORT

COMPLETED FORM DUE AT DEPARTMENT BY MAY 15, 2023.

Please Print or Type

Post Name _____ Post No.

Number of members in Post

1 000 1 100	
Date	

1. Competing Post will submit in story form, not to exceed 1,000 words, any activities of Rehabilitation done by **Post Members Only.**

NO CREDITS CAN BE USED WHICH ARE DERIVED FROM THE AUXILIARY OF YOUR POST

Gifts to Gift Shops of Veteran's Hospitals
Monetary value of gifts \$
Contributions to VAVS \$
Christmas Basket Program No \$
Hospital Visits, how many? Hours
Aid to Veterans' Family, how many?
Money Spent \$
Contributions to Post's Auxiliary Program \$
Mileage for hospital visits and/or hospital parties
(to include all food donations, party favors, etc., monetary value \$

All other projects giving Aid to Veterans (ATTACH SUPPLEMENTARY 9. REPORT GIVING HOW MANY ASSISTED.)

Attest: Commander _____ Adjutant: _____ Signature Signature Signature

Rehabilitation Award

Posts 15 to 250 members **Rehabilitation Award** Posts 251 to 500 **Rehabilitation Award** Posts 500 and up

Judged and presented by VA & Rehabilitation Commission