INDIVIVUAL COMMUNITY SERVICE REPORT FROM:

(Click in the right of any “:” and begin typing in the box – the box will expand as needed)

(Please enter your name above)

(When finished, save this page with a new name)

NAME OF EVENT:

WHAT DID YOU DO:

# MEMBERS***:***  HOURS:  MILEAGE:

EXPENSES AND/OR DONATIONS (WHAT DID YOU SPEND OR GIVE:

………………………………………………………………………………………………………………………………………………………………….

NAME OF EVENT:

WHAT DID YOU DO:

# MEMBERS***:***  HOURS:  MILEAGE:

EXPENSES AND/OR DONATIONS (WHAT DID YOU SPEND OR GIVE:

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NAME OF EVENT:

WHAT DID YOU DO:

# MEMBERS***:***  HOURS:  MILEAGE:

EXPENSES AND/OR DONATIONS (WHAT DID YOU SPEND OR GIVE:

………………………………………………………………………………………………………………………………………………………………….

ADDITIONAL INFORMATION:

ITEMS THAT SHOULD BE COVERED: COMMUNITY SERVICE, SAFETY, AMERICANISM AND YOUTH