



## Veteran's Affairs and Rehabilitation

District # \_\_\_\_\_ Unit # \_\_\_\_\_ Unit Chairman \_\_\_\_\_  
Phone # \_\_\_\_\_ Email: \_\_\_\_\_  
No Activity reported during this period: \_\_\_\_\_

1. Did your Unit participate in Wreaths Across America Day on Dec. 14, 2024? Yes \_\_\_ No \_\_\_  
Total number of wreaths Unit sponsored? \_\_\_\_\_ Total dollars spent? \$ \_\_\_\_\_  
Total number of Unit volunteers? \_\_\_\_\_ Total volunteer hours? \_\_\_\_\_  
On a separate sheet of paper please describe activities.
2. Did your Unit participate in the Honor Flight, Inc. Program? Yes \_\_\_ No \_\_\_ Miles driven \_\_\_\_\_  
Number of volunteers \_\_\_\_\_ Dollars spent/donated \$ \_\_\_\_\_ Total volunteer hours? \_\_\_\_\_  
On a separate sheet of paper briefly describe how members volunteer for this program.
3. Number of Unit members who participated in the Military and Veteran Caregiver Network? \_\_\_\_\_  
Hours Spent \_\_\_\_\_ Dollars Spent \$ \_\_\_\_\_ Miles Driven \_\_\_\_\_  
On a separate sheet of paper briefly note the tasks/activities performed by caregivers.
4. Service for Veterans and Their Families:  
Total hours Unit members volunteered for veterans and their families this year: \_\_\_\_\_  
Number of volunteers \_\_\_\_\_ Total dollars spent? \$ \_\_\_\_\_ Miles Driven \_\_\_\_\_  
Total number of veterans and veteran families assisted by your Unit this year \_\_\_\_\_  
Total number of "Veterans in Community Schools" presentations facilitated by your Unit \_\_\_\_\_  
Total value of in-kind donations received by your Unit for veterans this year? \$ \_\_\_\_\_  
Total number of poppies or poppy items distributed by your Unit this year \_\_\_\_\_  
Total dollars raised by your Unit for poppies or poppy items this year? \_\_\_\_\_
5. Did your Unit supporting the National Veterans Creative Arts Festival (NVCAF) Yes \_\_\_ No \_\_\_  
Did your Unit donate to NVCAF? Yes \_\_\_ No \_\_\_ Total dollars donated? \$ \_\_\_\_\_  
On a separate sheet of paper briefly describe NVCAF activities in which your Unit is involved.
6. Did your Unit recruit Auxiliary members as volunteers for the VA Center for Development and Community Engagement at VA facilities? Yes \_\_\_ No \_\_\_
7. Did your Unit participate/members in the "Be the One" Project this year?  
Yes \_\_\_ No \_\_\_  
On a separate sheet of paper briefly describe member participation.

Please attach a supplemental report describing your Unit's success stories in the VA&R Program. Please include pictures as attachments to your report. Do not imbed photos in the body of your document. All photos must be submitted as attachments in either .jpg or .pdf format. The completed form and supplemental must be submitted as a Word .doc or .pdf document. PHONE PHOTOS OF COMPLETED REPORTS WILL NOT BE ACCEPTED.

If you would like your supplemental report to be considered for a National Western Division Most Outstanding Unit VA&R Award please complete and attach a National Report and Award Cover Sheet. Thank you!

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**Submit this completed form to your District Chairman no later than Friday, April 11, 2025**