

# MARINE CORPS LEAGUE AUXILIARY UNIT VOLUNTEER REPORT

DATE \_\_\_\_\_

UNIT NAME \_\_\_\_\_ MEMBERS \_\_\_\_\_

DEPARTMENT of \_\_\_\_\_

CHAIR(s) \_\_\_\_\_  
\_\_\_\_\_

MAIN EMAIL OR PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_

ACTIVITY	TIMES VOLUNTEER	HOURS	DONATIONS	MILES	VALUE OF MILES	TOTAL VALUE
AMERICANISM						
CHILD WELFARE**						
CIVICS*						
REHAB						
VAVS						

\*Civics only: Pints of Blood Donated \_\_\_\_\_

\*\*Girl Scouts only: Number of Awards Given \_\_\_\_\_

\*\*14 cents per mile equals value of miles

UNIT CHAIR: Please keep one copy for your files and send one copy to each Department Chair. If no Department exists, please send one copy to each National Chair prior to July 1.

Activity Report Period is May 1 to April 30.