



American Legion Auxiliary Department of Texas

VA&R Monthly Reporting

REPORTING MONTH

ALA Representative Information

Representative Name		Hospital/Clinic	
Number of Beds		# Veterans Served	
Are you able to serve the Veterans in Person?		Yes ____ No ____	

Please list Representative/Deputy and number of Monthly Volunteer Hours

Type of Volunteer	Name	Hours
ALA Representative		
ALA Deputy		
ALA Deputy		
		Total ALA Hours
AL		
SAL		
Volunteer Teen		
Un-affiliated Volunteer		
		Total Hours

Please list Travel Miles/Date and purpose of Travel (also note if these are miles for Rep/Dep)

Date	Miles	Purpose

Rep & Dep Reimbursement .25 cents per mile

Rep Mileage _____ x .25 = _____	Dep Mileage _____ x .25 = _____	Total all Miles _____
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Please include all Miles, even if you are not requesting reimbursement (see Stipend/Mileage Request Form)

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Please list any additional funds you have received (formerly Gift of the Month) who donated and what the purpose of the Donation.

Date	Amount Donated Cash/Check #	Name/Unit	Purpose

In-Kind Donations (Please include the estimated value of items received)

Date	Item	Estimated Value	Name/Unit	Purpose

You must include any additional funding you receive in your monthly reports. At no time should there be more than \$2,500.00 in your VA & R bank account. Amounts exceeding \$2,500.00 should be turned into Department Headquarters where it will be held in the VA & R Account until needed. These funds will not and cannot be used at another facility.

Please attach your receipts to this monthly report. You must be up-to-date to receive funds. Please note if you are mailing your Reports please send them to Secretary Tiffany Troxclair P.O. Box 1629, Little Elm TX 75068. Reports will be scanned and emailed to VA&R Chair/Finance/Bookkeeper.

Email all reports to:

VA&R Chairman Rosie Cherry - rronrosie@aol.com

Department Secretary - secretary@alateexas.org

Finance Committee Chair - Christinet2121@yahoo.com

Bookkeeper Shana Duke - shanaaduke@gmail.com