



*American Gold Star Mothers, Inc.*

**Community Service Report - CHAPTER YEAR-END SUMMARY**

For use by Chapter Community Service Rep or Chapter President to report Chapter Totals by March 1st annually. Additional pages may be added, if needed.

Chapter Name: \_\_\_\_\_ Department: \_\_\_\_\_ Date: \_\_\_\_\_

Submitted by: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: \_\_\_\_\_

**Service to the Military and Veteran Community:**

Member Name	Total HOURS	Total MILES TRAVELED	Total MONEY/IN-KIND DONATION VALUE

**Service to the Gold Star Community:**

Member Name	Total HOURS	Total MILES TRAVELED	Total MONEY/IN-KIND DONATION VALUE

**Service to the Community:**

Member Name	Total HOURS	Total MILES TRAVELED	Total MONEY/IN-KIND DONATION VALUE	Total PINTS OF BLOOD DONATED