

United Daughters of the Confederacy®

**VETERANS AFFAIRS VOLUNTARY SERVICE COMMITTEE
(VAVS)**

September 1, 20 - August 31, 20

Name/contact info of Division Committee Chair:

Chapter name and number:

Division or Chapter Where No Division name:

Veteran Service

1. Number of VAVS volunteers at VA Medical Centers/Clinics:
2. Number of Volunteer hours (accredited to UDC):
3. Number of UDC Representatives/Deputies/Associate Reps/Depts to VAVS Committee and Number:
- Name of VA facility:

Names of UDC Reps/Depts/Assoc Reps to VAVS Committee:

- 1.
- 2.
- 3.
4. (Note: all Reps/Depts must be appointed by UDC by letter to the facility)

Donations

1. Amount of money contributed to VA facilities:
2. Value of items contributed to VA hospitals/clinics:
- List types of items and where/when donated:

List any other service to VA or veterans (including to Fisher Houses)

Use the reverse side of form if necessary