

COUNTY WARRIORS' FAMILY ASSISTANCE REPORT FORM 2023-2024

Reporting Dates: **November 10, 2023** **April 10, 2024**

County: _____ District: _____

Name of Person Reporting: _____

Contact Information: Email Address: _____ Phone _____

_____ **County does not have WFA Chairman**

Check activities in which Units in your County participated and describe activities/fundraisers/publicity your Units held for this Committee. Please use the back of this form or additional paper.

- Publicized WFA in Community _____
- Provided brochures to VA clinics, hospitals, veterans service officers, etc. _____
- Provided information on WFA to American Legion Posts _____
- Developed a Unit and/or County Review Panel _____
- Donated to the WFA _____
- Solicited donations from other organizations _____
- Held fundraiser to benefit WFA _____
- Provided additional assistance to a WFA applicant _____
- The value of a volunteer hour is \$31.80 _____

Total number of hours dedicated to this program _____

Total amount of donations to Warriors Family Assistance Program \$ _____

Total monetary donations provided directly to WFA applicants \$ _____

Total value of goods and/or services donated directly to WFA applicants \$ _____

Grand Total of all donations \$ _____

*** YOU MUST FILL IN THIS INFORMATION FOR IMPACT REPORTS ***

1. Our ALA Service for Veterans/Active-Duty/Reserve Military

Impact Report Form	Service for Veterans/Military	Total
	Total hours members volunteered	
	Total dollars spent	\$
	Total number of veterans / military assisted	
	Value of in-kind donations received*	\$

Send a copy to department Chairman. Keep a copy for your records.

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C 718-928-5952
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