2025-2026 COUNTY WARRIORS' FAMILY ASSISTANCE REPORT FORM

Reporting dates: ☐November 10, 2025 ☐March 10, 2026 ☐May 10, 2026

Name: _____

Address: _____

Email: _____Phone: _____

County: _____District: _____

_____ 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 $34.79_____

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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