

# PLEASE ADD TO YOUR PLAN OF WORKS

VAVS REPRESENTATIVE REPORT  
MANCHESTER, NEW HAMPSHIRE

GLORIA J MORIN  
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LINCOLN N.H. 03251

It would be appreciated if each unit would fill this form out and return to Gloria Morin **no later than April 1, 2018**. All answers given are very important - not only for the Department - but for what is reported to congress, who decides the budget for what is needed there.

Unit name and number \_\_\_\_\_ District \_\_\_\_\_

Chairman's name and address \_\_\_\_\_

\_\_\_\_\_ Phone # \_\_\_\_\_

Has your unit or district sponsored a bingo or Wednesday cookout at the Manchester facility?  
If so please report hours, \_\_\_\_\_ number of volunteers \_\_\_\_\_ and monies spent.  
\$ \_\_\_\_\_

Did your unit send in monies or purchase items for the VA Shelf? Yes \_\_\_\_\_ or No \_\_\_\_\_.  
If yes, the amount given? \$ \_\_\_\_\_

Do you have a member who volunteers at the Manchester facility? Yes \_\_\_\_\_ or No \_\_\_\_\_  
If yes, how many hours has she/they volunteered? \_\_\_\_\_

Does your unit participate with the VA Christmas Gift Shop? Yes \_\_\_\_\_ or No \_\_\_\_\_  
If yes, how many volunteers, \_\_\_\_\_ hours and monies spent \$ \_\_\_\_\_

Do you send cards to any patients there? Yes \_\_\_\_\_ or No \_\_\_\_\_  
If yes, how many cards were sent? \_\_\_\_\_

**Thank you for taking the time to do this report.**