

# VETERANS OF FOREIGN WARS OF THE UNITED STATES

P. O. BOX 361370  
INDIANAPOLIS, INDIANA 46236

**DEPARTMENT OF INDIANA**  
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9555 E. 59th STREET  
INDIANAPOLIS, INDIANA 46216



## Hospital Report

Date: \_\_\_\_\_ Period: \_\_\_\_\_ Month Ending: \_\_\_\_\_  
Department: \_\_\_\_\_ District: \_\_\_\_\_ Post: \_\_\_\_\_

List Project Below:

Date	Num. Persons Participated Per Visit	Total Hours	Total Miles	Donations or Services
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
Totals				\$

Signed By: _____  Title: _____ Checked By: _____ District: _____ Department: _____	Number of patients benefited Total Hours at 12.13 Total Miles at .24 Total Donations or Services Blood Donations - No. of Pints at 69.00 Cards and/or Flowers Total Value Report	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
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**Forward this report to Department Hospital Chairman:**  
**Paul Curtice**  
**575 N. Penn. Room 374**  
**Indpls., IN 46204**