

**MOPH  
 VETERANS AFFAIRS VOLUNTARY SERVICE  
 VAVS REPORT  
 2016 - 2017**

This report covers the period from 16 June, 2016 *through* 15 June, 2017.

DEPARTMENTS ONLY: Retain one copy; send one copy to the Region Commander and one copy to the National VAVS Director. Reports are due 30 June, 2017.

**\*\*PLEASE BE LEGIBLE\*\***

*This report was prepared by:* \_\_\_\_\_  
*Name* *Phone Number*

**Department VAVS Officer**

**Name:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**VAVS (VAMC & Recognized State Veteran Homes/SVH)**

Name of VAMC Site: \_\_\_\_\_

Address of VAMC Site: \_\_\_\_\_

Station Code: \_\_\_\_\_

<i>NATIONALLY APPOINTED VAVS Representative</i> Name	Telephone Number	Number of quarterly meetings attended
Rep _____	_____	_____
Dep _____	_____	_____
Dep _____	_____	_____
Dep _____	_____	_____



