Associates of Vietnam Veterans of America, Inc.

Volunteers In Service To America Hours

Name: _____ State & Chapter_____

E-Mail:_____ ,I \RX KDYH QR HPDLO DGGUHVV SOHDV

DATE	***HOURS***	***EVENT***

Total All Hours:_____

Complete this form and mail to: Jeri Wallis, ***AVVA VISTA*** Coordinator
5360 Redfield Way
Flowery Branch, GA 30542

Adopted: 4/14 F-Pro08.03