



**DEPARTMENT OF MARYLAND  
 Veterans of Foreign Wars  
 of the United States War Memorial  
 Building, Room J  
 101 North Gay Street  
 Baltimore, Maryland 21202-4018  
 Telephone: 410-752-6474  
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***POST BLOOD REPORT***

*PLEASE PRINT OR TYPE ALL INFORMATION*

DISTRICT NUMBER \_\_\_\_\_ POST NUMBER \_\_\_\_\_ DATE \_\_\_\_\_

BLOOD DONOR CHAIRMAN'S NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY & STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE # \_\_\_\_\_

**Post Participated In:**      **Red Cross** \_\_\_\_\_

**Local Hospital** \_\_\_\_\_  
 (Give Name of Hospital)

**Commercial Blood Bank** \_\_\_\_\_  
 (Give Name of Blood Bank)

**Others** \_\_\_\_\_

**DONORS TO PROGRAM:**      **Post:** \_\_\_\_\_      **Auxiliary:** \_\_\_\_\_      **Recruit Members:** \_\_\_\_\_

**Number of Donors:**      *(Include all Donors)*

**Last Year** \_\_\_\_\_      **This Year to Date:** \_\_\_\_\_