THE AMERICAN LEGION Department of Pennsylvania

NORMAN L. STREICHER HOSPITAL ENTERTAINMENT REPORT

(FOR A 12 MONTH PERIOD MAY 1, 2015 THROUGH APRIL 30, 2016)

IMPORTANT: Norman L. Streicher trophy award will be based on the information provided on or attached to this report form. The trophy will be awarded to the Post with the most accumulated points for the year.

| POST NAME: | | | POST NO | | | | |
|--|--------------------------|--|----------------------|--|---------------------------------------|--|--|
| ADDRESS: | | | | | | | |
| CITY/STATE/ZIP: | | | | | | | |
| DISTRICT: SEG | CTION: | MEM | MEMBERSHIP CATEGORY: | | | | |
| | | MAIL TO: THE AMERICAN I PO BOX 232 HARRISBURG, PA 1 | 24 7105-2324 | | | | |
| POST MEMBERSHIP AT TOTAL NUMBER OF PO VETERANS CENTERS, C CARE OR OFF-STATION | ST VISITAT OR NURSING | IONS MADE THIS YEAR G HOMES WHERE VETE | TO VA MEDIC. | | | | |
| Name of Hospital, State Vets Center, Nursing Home or Off-station Visit Site | Date of Visit | Type of Entertainment | Cost to Post | No. of Post Members Attending | Total No. of Volunteer Hours | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| TOTALS | | | | | | | |
| SEE REVERSE SIDE FOR TO AFFIRM THE INFORMAT | | | IS CORRECT BY | POST RECORDS | | | |
| Signature of P | . 0.00 | | Title | | Date | | |

POINT CALCULATION FOR POST NORMAN L. STREICHER HOSPITAL ENTERTAINMENT REPORT

| | | by Post membership as of 6 average donation or 15 po | /10/15 (For example, \$500.00 don pints) | ation divided by 1,000 |
|-----------------|-----------------------------|---|---|------------------------|
| Calculation: \$ | | _(from front) + | members = \$ | per member |
| | \$.05 to \$.15 | 5 points | | |
| | \$.16 to \$.25 | 10 points | | |
| | \$.26 to \$.50 | 15 points | | |
| | \$.51 to \$.75 | 20 points | | |
| | \$.76 to \$.99 | 25 points | | |
| | \$1.00 and over | 30 points | | |
| | | | Points from above chart | + |
| | Total number of visits made | | _x 15 points each | + |
| | No. Post memb | ers attending (from front)_ | x 5 points each | + |
| | No. volunteer h | ours (from front) | x 5 points each | + |

NOTE: THIS AWARD MAY NOT BE WON TWO CONSECUTIVE YEARS.

(THIS FORM MUST BE FILLED OUT IN ITS ENTIRETY)