



Branch Veterans Service Officer – D5 Report

Zone	Branch Name & Number	Reporting Period

1. Name of Branch Service Officer? _____

2. Number of Veterans visited:

A	Retirement Homes	
B	Nursing Homes	
C	Hospitals	
D	Veteran's Personal Home	
E	Branch	
F	Other ex. Technology, Internet, Telephone	

3. Number of Veterans\Widow\Widower who made appointments to be seen by the Provincial Veteran Service Officer?

4. From the Provincial Officer visit how many Veterans\widow\widowers were you asked to assist in the filling out of:

	Legion Application for Claim (Service Officer name on bottom)	
	Veterans Affairs Application	
	Quality of Life	
	Sunnybrook/Tony Stacey Application	

5. How many cases within your Branch Area was financial assistance (from the Poppy Fund) granted to:

A	Veteran	
B	Widow/Widower	

6 What method did you advertise the visit of the Provincial Veteran Service Officer?

- a. _____
- b. _____
- c. _____

7. Are you a member of the Poppy Committee? _____

8. What other activities does your Branch do for Veterans, Widows, or Widowers.

- a. _____
- b. _____
- c. _____

9. Any issues to discuss prior to Zone Convention.

- a. _____
- b. _____

10. Any other issues/concerns that need to be raised with the Zone or requests to the District:

Date Submitted: _____

Please Note: *This form should be completed and forwarded to the Zone Veterans Service officer Quarterly - By the 5th of January, April, July, October by e-mail.*