

V.F.W. DEPARTMENT OF MINNESOTA

SAFETY REPORT

Post/Auxiliary # _____ District _____ Location _____

Post/Auxiliary Membership _____

Chairman's Name _____ Reporting Period from _____ to _____

The following Safety Categories have been completed:

1. **Highway Safety**
AAA Driver Improvement Program
55 Alive/Mature Driving – AARP
National Safety Council
Youth Driver Education Classes
Buddy System
2. **Drug Awareness**
Contact and Supply your local Police Department Social Services and Schools
Support Drug, Treatment – self – help Groups
Assist Established Programs
3. **Recreational Safety**
Hunter Safety, Boating Safety, Snowmobile Safety, Play Ground Safety
4. **Pedestrian Safety**
Like-A-Bike, Bicycle Safety, Lite-A-Bike
5. **Home/Fire Safety**
Home Security Classes
Fire Prevention Classes
Domestic Abuse
Home Crime Prevention
6. **Recognition** (All citations are available from National Headquarters)

Life Saving Award	Paramedic Citation
Police Citations	Citizen Citation
Sheriff Citation	Firefighter Citation

Completion of all six categories are not required. Pick one or two and do a good job. Community Service Recordbooks are required for the top 5 winners. Who, What, When, Where, How and Why – Involve the Community. If classes or Seminars are held, a list of names of the people taking classes must be included.

List your local media for news releases:

Newspapers _____ Radio & TV Stations _____

Frank Presfield, Safety Chairman
Department of Minnesota

Deadline: March 30, 2010: THIS FORM SHOULD BE INCLUDED IN THE CATEGORY 2 – SAFETY SECTION OF THE COMMUNITY SERVICE RECORDBOOK