

**VETERANS OF FOREIGN WARS
DEPARTMENT OF LOUISIANA
SAFETY PROGRAM
POST REPORTING FORM**

POST:_____ DIST:_____ DATE:_____

Category: No. of Entries: No. of Entries that Advance to State:

Law Officer _____ _____

EMT _____ _____

Firefighter _____ _____

Please submit this form to the Department Safety Chairman:

Randy Campbell
3405 Grand Bayou Dr.
Bossier City, LA 71111

C: 318-272-7291
Email: vfwlasafety@gmail.com