

# 2019-2020 End of Year Report Forms

You must use the Awards Booklet to guide you submitting Reports for awards. Unit End-Of-Year reports are judged by Department Committee Chairmen on Department level before forwarding winning entry to National for judging. For National Judging you must include a narrative report. The narrative must be typewritten, not to exceed 1,000 words (in most cases) and use special cover page. Please refer to the Unit Awards Manual for specific rules. The “National President’s Award for Excellence” is included in the Awards Manual Book. *To be eligible for an Award please refer to the guidelines that are in the Unit Awards Manual.* If any questions on any of these report forms contact the Department Chairman for that report or contact this office at 1-888-604-2242 for any assistance.

**Mail or email your reports to: 1251 Doolin Run Rd.**

**New Martinsville WV 26155**

**Email: [alawvsec@frontier.com](mailto:alawvsec@frontier.com)**

**New Date For End-Of Year Reports**  
**Department Headquarters by April 30, 2020**

**Don’t let your Unit work not be considered because**  
**not sent in by deadline.**



## UNIT PRESIDENT ANNUAL REPORT

Please submit no later than **April 30, 2020** to: Department Headquarters, ALA  
1251 Doolin Run Road  
New Martinsville WV 26155-7808

President's Name \_\_\_\_\_

Unit Name & Number \_\_\_\_\_

**Number of Members in Unit** \_\_\_\_\_

1. How many meetings did your Unit hold this year? \_\_\_\_\_  
When and where are your meetings held? \_\_\_\_\_  
Average attendance at your meetings \_\_\_\_\_
2. Did your District President attend any of your Unit meetings this year? \_\_\_\_\_  
Did your District President contact your Unit throughout year by phone/mail/e-mail? \_\_\_\_\_
3. Did your Unit meet Membership Target Dates this year? \_\_\_\_\_ How many? \_\_\_\_\_
4. Did your Unit support the President's Special Project "Gold Star Family Memorial Monument"? \_\_\_\_\_  
Amount \$ \_\_\_\_\_
5. Did your Unit work with your Post on a Membership Drive? \_\_\_\_\_  
Activities \_\_\_\_\_  
\_\_\_\_\_
6. Did your Unit work with your Post on "Make a Difference Day" by helping a veteran in your community?  
Activities \_\_\_\_\_  
\_\_\_\_\_
7. Were any Distinguished Guests invited to your Unit meetings? \_\_\_\_\_  
Explain \_\_\_\_\_
8. Did your Unit attend how many for each: Fall Conference \_\_\_\_\_ Spring Conference \_\_\_\_\_  
Mid-Winter Conference \_\_\_\_\_ Fall Membership/Officers Workshop \_\_\_\_\_  
Department Convention \_\_\_\_\_
9. Was the Auxiliary "SPIRIT" messages from the President and Chairmen shared at your Unit meetings? \_\_\_\_\_  
District Information shared? \_\_\_\_\_
10. Did your Unit sell Department Fundraiser tickets this year? \_\_\_\_\_ How many? \_\_\_\_\_
11. Did your unit use the Policy and Procedures guide? \_\_\_\_\_
13. Did you encourage members to use the State Web Site and National Web Site for more information on programs? \_\_\_\_\_
14. List any accomplishments for this year that you achieved as Unit President.  
\_\_\_\_\_  
\_\_\_\_\_

You must do a narrative report to be eligible for a Department Award

## UNIT CHAPLAIN ANNUAL REPORT

Please submit no later than **April 30, 2020** to: Department Headquarters, ALA  
1251 Doolin Run Road  
New Martinsville WV 26155-7808

Chaplain's Name \_\_\_\_\_

Unit Name and Number \_\_\_\_\_

**Number of Members in Unit** \_\_\_\_\_

1. Gold Star Mothers in Unit \_\_\_\_\_
  
2. How many deaths in your Unit this year? \_\_\_\_\_ Seniors \_\_\_\_\_ Juniors \_\_\_\_\_ Gold Star Mothers \_\_\_\_\_  
Did your Unit have Funeral for a deceased member \_\_\_\_\_ How Many \_\_\_\_\_  
Did you drape your charter for these members? \_\_\_\_\_  
Did you hold memorial services for the departed? \_\_\_\_\_  
Include juniors in these services? \_\_\_\_\_
  
3. List organizations you gave memorial donations to and the amount \_\_\_\_\_  
\_\_\_\_\_
  
4. Did your Unit use/distribute Grace Cards? \_\_\_\_\_ How Many? \_\_\_\_\_
  
5. Did your Unit Chaplain visit the sick \_\_\_\_\_ Total Hospital Visits \_\_\_\_\_ Total Home Visits \_\_\_\_\_  
Total Nursing Home Visits \_\_\_\_\_ Did you include your Juniors? \_\_\_\_\_
  
6. Did your Unit observe Four Chaplains Sunday? \_\_\_\_\_ With your American Legion Post? \_\_\_\_\_  
Did your Unit donate to the Chapel 4 Chaplains? \_\_\_\_\_ Amount? \_\_\_\_\_
  
7. Did your unit observe: Memorial Day? \_\_\_\_\_ Independence Day? \_\_\_\_\_  
Veterans Day? \_\_\_\_\_ Other Patriotic holidays? \_\_\_\_\_ With your Post? \_\_\_\_\_
  
8. Does your Unit have a Prayer Chain? \_\_\_\_\_ Did you prepare a Prayer Book  
for your Unit President? \_\_\_\_\_ Send a prayer for Dept. President's Prayer Book? \_\_\_\_\_
  
9. Did you open and close unit meetings with a prayer or devotional? \_\_\_\_\_

Please use the Department Narrative Form or submit a Narrative Report  
Your Unit has done to be eligible for the Department Award.

## UNIT HISTORIAN ANNUAL REPORT

Please submit no later than **April 30, 2020** to: Department Headquarters, ALA  
1251 Doolin Run Road  
New Martinsville WV 26155-7808

Historian's Name \_\_\_\_\_

Unit Name and Number \_\_\_\_\_

**Number of Members in Unit** \_\_\_\_\_

1. Senior Unit History completed: \_\_\_\_\_ Are you submitting for judging at Department Convention? \_\_\_\_\_
  
2. Junior Unit History Completed: \_\_\_\_\_ Are you submitting for Judging at Department Convention? \_\_\_\_\_  
Veterans History Project: Senior Participation \_\_\_\_\_ Junior Participation \_\_\_\_\_  
# of Veterans Histories recorded online: Seniors \_\_\_\_\_ Juniors \_\_\_\_\_
  
3. Junior Participation In The Veterans History Project: \_\_\_\_\_ (Each Junior that participates may submit an essay (250 word minimum) of why she chose to participate in the project. Essay needs to be **submitted directly to Dept. Historian by April 30, 2020** in order to be entered in a National contest.)

### History of American Legion Auxiliary Formerly Cavalcade of Memories

1. Does your unit have space set up to show off your pride and brag about the past history of your unit?  
\_\_\_\_\_
  
2. Did your Unit make a donation to the Department History of American Legion Auxiliary ? \_\_\_\_\_  
Amount \_\_\_\_\_

Please use the Department Narrative Form or submit a Narrative Report  
Your Unit has done to be eligible for the Department Award.  
You may handwrite or type your narrative report

**UNIT AMERICANISM ANNUAL REPORT**

Please submit no later than **April 30, 2020** to: Department Headquarters, ALA  
1251 Doolin Run Road  
New Martinsville WV 26155-7808

Americanism Chairman's Name \_\_\_\_\_

Unit Name and Number \_\_\_\_\_

**Number of Members in Unit** \_\_\_\_\_

1. Flag Education: # of presentations to local groups \_\_\_\_\_ Cost to Unit \$ \_\_\_\_\_
2. Pocket Flags: # sent to troops \_\_\_\_\_ Cost to Unit \$ \_\_\_\_\_
3. Unit Participation: Flag Day \_\_\_\_\_ Get Out The Vote \_\_\_\_\_ Veterans Day \_\_\_\_\_  
Memorial Day: \_\_\_\_\_ July 4<sup>th</sup> \_\_\_\_\_ Other \_\_\_\_\_
4. Community Events: # involving Patriotic Holidays \_\_\_\_\_ Cost to Unit \$ \_\_\_\_\_
5. Support Awareness of the Flag Amendment: Yes \_\_\_\_\_ No \_\_\_\_\_
6. Americanism Essay Contest "*How Can We Address the Health and Well-Being of Our Veterans, Military, and Their families*" Participation: # Schools \_\_\_\_\_ Other Youth Groups \_\_\_\_\_  
# of Students \_\_\_\_\_ Cost to Unit \$ \_\_\_\_\_
7. Did you support American Legion Baseball? \_\_\_\_\_ Oratorical Contest? \_\_\_\_\_ Junior Shooting Sports? \_\_\_\_\_
8. How did you promote your "pride" in belonging to the American Legion Auxiliary? \_\_\_\_\_  
\_\_\_\_\_
9. Did you promote "Star Spangled Kids" program? \_\_\_\_\_ Explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please use the Department Narrative Form or submit a Narrative Report  
Your Unit has done to be eligible for the Department Award.

**UNIT AUXILIARY EMERGENCY FUND ANNUAL REPORT**

Please submit no later than **April 30, 2020** to: Department Headquarters, ALA  
1251 Doolin Run Road  
New Martinsville WV 26155-7808

Auxiliary Emergency Fund Chairman's Name \_\_\_\_\_

Unit Name and Number \_\_\_\_\_

**Number of Members in Unit** \_\_\_\_\_

1. Did your unit submit an application for a member in need? \_\_\_\_\_
2. Was the application approved by National? \_\_\_\_\_ Amount approved \$ \_\_\_\_\_
3. Did your Unit do any fundraisers to help a member in need? \_\_\_\_\_
4. Did your unit make a donation to the "Auxiliary Emergency Fund?" \_\_\_\_\_ Amount \$ \_\_\_\_\_  
To receive a "Lapel Pin" you had to have a contribution of at least \$50.00 donation
5. Did your Unit do anything extra to raise Donations for the Auxiliary Emergency Fund? \_\_\_\_\_
6. Did you present a program to your Unit on the Auxiliary Emergency Fund program? \_\_\_\_\_

Please use the Department Narrative Form or submit a Narrative Report  
Your Unit has done to be eligible for the Department Award.

## UNIT CHILDREN & YOUTH ANNUAL REPORT

Please submit no later than **April 30, 2020** to: Department Headquarters, ALA  
1251 Doolin Run Road  
New Martinsville WV 26155-7808

Children & Youth Chairman Name: \_\_\_\_\_

Unit Name and Number: \_\_\_\_\_

**Number of Members in Unit** \_\_\_\_\_

1. Did your Unit participate in the "Star Spangled Kid" program? \_\_\_\_\_ How? \_\_\_\_\_  
\_\_\_\_\_
2. Did your Unit support military children? \_\_\_\_\_ List How \_\_\_\_\_  
List what was donated \_\_\_\_\_ How many? \_\_\_\_\_
3. Did your unit host a "Kids of Deployed are Heroes 2" (KDH2) program? \_\_\_\_\_
4. Did your unit host events for children of veterans? \_\_\_\_\_ List \_\_\_\_\_  
\_\_\_\_\_
5. Did your unit provide safe activities for the community's children and youth such as Christmas party, Easter egg hunt or Trick or Treat? \_\_\_\_\_
6. Did you nominate a child for Youth Hero Award? \_\_\_\_\_ Good Deed Award? \_\_\_\_\_
7. Support Children & Youth programs? National Family Week \_\_\_\_\_ ALCWF \_\_\_\_\_ Family Support Network \_\_\_\_\_ Gateway Drugs \_\_\_\_\_ Make Halloween a Fun and Safe Night \_\_\_\_\_ Fireworks Safety \_\_\_\_\_ Play It Safe \_\_\_\_\_ Missing Children \_\_\_\_\_ Temporary Financial Assistance \_\_\_\_\_ Warning Signs \_\_\_\_\_ April Children & Youth Month \_\_\_\_\_
8. Did your unit promote *outstanding* unit activities? \_\_\_\_\_ List: \_\_\_\_\_
9. Number of Military Children helped \_\_\_\_\_  
Number of children in community helped \_\_\_\_\_  
Direct Aid to military children \_\_\_\_\_ community children \_\_\_\_\_  
Non Direct Aid to military children \_\_\_\_\_ community children \_\_\_\_\_
10. Number of hours volunteered \_\_\_\_\_
11. Did you wear **purple** on April 15<sup>th</sup> in honor of Purple Up! Military Kids Day?
12. Did you participate in the ALCWF "*piggy donations*" this year? \_\_\_\_\_ How much collected? \_\_\_\_\_

Please use the Department Narrative Form or submit a Narrative Report  
Your Unit has done to be eligible for the Department Award.



**UNIT COMMUNITY SERVICE ANNUAL REPORT**

Please submit no later than **April 30, 2020** to: Department Headquarters, ALA  
1251 Doolin Run Road  
New Martinsville WV 26155-7808

Community Service Chairman's Name \_\_\_\_\_  
Unit Name & Number \_\_\_\_\_  
**Number of Members in Unit** \_\_\_\_\_

Please report the number of Unit volunteers that participated in the following programs, the amount of money spent and hours volunteered.

<b>List of some suggested programs:</b>	<b><u>Money</u></b>	<b><u>Hours</u></b>
Make a Difference Day (Oct. 22)	_____	_____
Veterans Day (Nov. 11)	_____	_____
National Day of Service and Remembrance: (9-11)	_____	_____
Martin Luther King Jr. Day of Service: (Jan.20)	_____	_____
Month of the Military Child (April)	_____	_____
National Family Week	_____	_____
Flag Day (June 14)	_____	_____
Recycling /Adopt A Highway	_____	_____
Homeless Shelters/Food Banks	_____	_____
Blood Drives	_____	_____
Senior Citizens Centers/Nursing Homes	_____	_____
National Volunteer Week	_____	_____

Please use the Department Narrative Form or submit a Narrative Report  
Your Unit has done to be eligible for the Department Award.

## UNIT EDUCATION ANNUAL REPORT

Please submit no later than **April 30, 2020** to: Department Headquarters, ALA  
1251 Doolin Run Road  
New Martinsville WV 26155-7808

Education Chairman's Name \_\_\_\_\_

Unit Name & Number \_\_\_\_\_

**Number of Members in Unit** \_\_\_\_\_

1. Did your unit participate in **Veterans in the Community Schools**? \_\_\_\_\_  
# Veterans participating \_\_\_\_\_ # of Hours \_\_\_\_\_ # Schools served \_\_\_\_\_
  
2. Did your unit participate in "**American Education Week**"? \_\_\_\_\_ # Hours \_\_\_\_\_  
# Schools served \_\_\_\_\_ # Children served \_\_\_\_\_ Cost \$ \_\_\_\_\_
  
3. Did your Unit promote "**Teacher Appreciation Week**"? # Hours \_\_\_\_\_  
# Schools served \_\_\_\_\_ # Recognized Events at Local Schools \_\_\_\_\_
  
4. Did your Unit participate in "**Give 10 to Education**" \_\_\_\_\_ Cost \$ \_\_\_\_\_  
Items Donated \_\_\_\_\_  
\_\_\_\_\_
  
5. Did **Juniors** participate in education activities \_\_\_\_\_ # Hours \_\_\_\_\_  
# Juniors involved \_\_\_\_\_ Number of children served \_\_\_\_\_
  
6. Number of schools who received Scholarship applications \_\_\_\_\_
7. Number of scholarships the Unit received? \_\_\_\_\_  
Children of Warriors Scholarship \_\_\_\_\_  
Junior Auxiliary Loyalty Scholarship \_\_\_\_\_  
Spirit of Youth Scholarship \_\_\_\_\_  
Non-Traditional Student Scholarship \_\_\_\_\_  
Department Scholarship \_\_\_\_\_
8. Number of unit scholarships presented/awarded \_\_\_\_\_ Cost \$ \_\_\_\_\_
9. Total dollar amount of unit scholarships Unit records \$ \_\_\_\_\_
10. Total dollar amount donated to Department scholarships (education fund) \$ \_\_\_\_\_
11. Did your unit submit entry for the Children of Warriors Scholarship \_\_\_\_\_  
Did your unit submit entry for the Spirit of Youth Scholarship \_\_\_\_\_  
Did your unit submit entry for the Non-Traditional Student Scholarship \_\_\_\_\_  
Did your unit submit entry for the Department Scholarship \_\_\_\_\_
12. Did your unit donate to the National Presidents Scholarship Fund? \_\_\_\_\_ \$ \_\_\_\_\_

Please use the Department Narrative Form or submit a Narrative Report  
Your Unit has done to be eligible for the Department Award.

## UNIT GIRLS STATE ANNUAL REPORT

Please submit no later than **April 30**, 2020 to: Department Headquarters, ALA  
1251 Doolin Run Road  
New Martinsville WV 26155-7808

Girls State Chairman's Name \_\_\_\_\_  
Unit Name & Number \_\_\_\_\_  
**Number of Members in Unit** \_\_\_\_\_

1. Number of schools you serve \_\_\_\_\_ County \_\_\_\_\_ Name of Schools \_\_\_\_\_  
\_\_\_\_\_  
How were schools contacted? \_\_\_\_\_  
\_\_\_\_\_  
Did you have new schools participate this year? \_\_\_\_\_ How Many? \_\_\_\_\_  
How many officials do you work with at Schools \_\_\_\_\_ Principals \_\_\_\_\_ Counselors  
\_\_\_\_\_ Activity Director \_\_\_\_\_ Others \_\_\_\_\_
2. Number of students your Unit is sending to Girls State this year \_\_\_\_\_
3. Do you invite citizens to report to your Unit? \_\_\_\_\_ Do the citizens report to your contributors? \_\_\_\_\_
4. How many Certificates of Appreciation were presented to contributors? \_\_\_\_\_
5. List ways your Unit used to promote publicity for Girls State Program \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
6. Did you have an orientation for your citizens? \_\_\_\_\_ Did you include the past citizens? \_\_\_\_\_  
Was your orientation in the Unit \_\_\_\_\_ A joint orientation? \_\_\_\_\_ With Unit \_\_\_\_\_
7. Do you choose your citizens for Girls State \_\_\_\_\_ Do the school(s) choose your citizens \_\_\_\_\_
8. Did your Unit encourage members and students to use RGS Web Site for more information \_\_\_\_\_
9. What recognition is done by Unit for the Girls State Program and citizens that attend?  
Banquet \_\_\_\_\_ Unit Meeting \_\_\_\_\_ Invite Community Leaders \_\_\_\_\_ Invite school Officials \_\_\_\_\_  
Other (Identify) \_\_\_\_\_  
Joint with Legion Yes \_\_\_\_\_ No \_\_\_\_\_
10. Is your Unit submitting a Girls State Scrapbook for judging at Convention? \_\_\_\_\_

Please use the Department Narrative Form or submit a Narrative Report  
Your Unit has done to be eligible for the Department Award.

## UNIT JUNIOR ACTIVITIES ANNUAL REPORT

Please submit no later than **April 30**, 2020 to: Department Headquarters, ALA  
1251 Doolin Run Road  
New Martinsville WV 26155-7808

Junior Activities Chairman's Name \_\_\_\_\_

Unit Name & Number \_\_\_\_\_

**Number of Members in Unit** \_\_\_\_\_

1. Number of juniors in your unit \_\_\_\_\_ Number of new Juniors \_\_\_\_\_
2. Number of junior meetings held \_\_\_\_\_ Number attended - Juniors \_\_\_\_\_ Seniors \_\_\_\_\_
3. Did your unit hold the following ceremonies for Juniors? \_\_\_\_\_  
Initiation \_\_\_\_\_ Installation \_\_\_\_\_ Graduation \_\_\_\_\_
4. Did your unit Junior Group receive newspaper coverage on their events/programs \_\_\_\_\_  
How many inches of print? \_\_\_\_\_
5. Did your juniors participate in: Junior Activity Sheets \_\_\_\_\_ Number \_\_\_\_\_  
Leadership Correspondence Course \_\_\_\_\_ Number \_\_\_\_\_ Junior Member of The Year Nominee \_\_\_\_\_  
Veteran History Project \_\_\_\_\_ Number \_\_\_\_\_  
The Patch Program Activity Sheets \_\_\_\_\_ Americanism Patch \_\_\_\_\_ VA & R Patch \_\_\_\_\_  
Leadership Patch \_\_\_\_\_ Community Service Patch \_\_\_\_\_  
Membership Patch \_\_\_\_\_ Physical Fitness Patch \_\_\_\_\_  
Poppy Patch \_\_\_\_\_ Field Service Patch \_\_\_\_\_  
National Security \_\_\_\_\_ Education \_\_\_\_\_  
National President's Scholarship \_\_\_\_\_ History Patch \_\_\_\_\_
6. Did your unit submit a junior for the WV Junior Member of the Year? \_\_\_\_\_
7. Did Juniors teach the basics of email and Internet to members/Leaders in Unit? \_\_\_\_\_  
Did Juniors work with the Unit to create and maintain ALA unit website? \_\_\_\_\_  
Do your juniors practice and teach Internet Safety? \_\_\_\_\_
8. Did your Juniors participate in volunteering projects? \_\_\_\_\_ # hours \_\_\_\_\_ # Junior volunteers \_\_\_\_\_  
Special Unit Project \_\_\_\_\_ # Hours \_\_\_\_\_ # junior volunteers \_\_\_\_\_  
VOLUNTEENS \_\_\_\_\_ # Hours \_\_\_\_\_ # junior volunteers \_\_\_\_\_  
Community Service Projects \_\_\_\_\_ # Hours \_\_\_\_\_ # junior volunteers \_\_\_\_\_  
Pocket Flag Project \_\_\_\_\_ # Pocket Flags \_\_\_\_\_ # Hours \_\_\_\_\_ # Jr Volunteers \_\_\_\_\_
9. What did your senior members do to prepare juniors for Leadership roles in your Unit?  
\_\_\_\_\_  
\_\_\_\_\_
10. Did you have juniors attend Fall Workshop \_\_\_\_\_ # \_\_\_\_\_  
Mid-Winter Conference \_\_\_\_\_ # \_\_\_\_\_ Junior State Convention \_\_\_\_\_ # \_\_\_\_\_  
National Convention \_\_\_\_\_ # \_\_\_\_\_
11. Total hours of participation for the juniors in your Unit \_\_\_\_\_

Please use the Department Narrative Form or submit a Narrative Report  
Your Unit has done to be eligible for the Department Award.

## UNIT LEADERSHIP ANNUAL REPORT

Please submit no later than **April 30, 2020** to: Department Headquarters, ALA  
1251 Doolin Run Road  
New Martinsville WV 26155-7808

Leadership Chairman's Name \_\_\_\_\_

Unit Name & Number \_\_\_\_\_

**Number of Members in Unit** \_\_\_\_\_

1. Did your unit attend the Officers/Membership Training Workshop in September held at Hilton Garden Inn? \_\_\_\_\_ # attended? \_\_\_\_\_ # attended for the first time \_\_\_\_\_
  
2. Did your unit attend the Mid-Winter Leadership Conference? \_\_\_\_\_ # attended? \_\_\_\_\_ # attended first time? \_\_\_\_\_ was the conference helpful? \_\_\_\_\_
  
3. Did your Unit President have the *SPIRIT* at your unit meeting for those who don't receive the *SPIRIT*? \_\_\_\_\_
  
4. Does your Unit use the unit handbook guide at your meetings for information? \_\_\_\_\_
  
5. Did your District Conference follow the proper format on conducting their meetings? \_\_\_\_\_
  
6. Do you think your officers and chairmen were properly trained for their position? \_\_\_\_\_ What could be done to make the training better? \_\_\_\_\_
  
7. Does your unit have a "Leadership Toolbox" handy for unit training? \_\_\_\_\_
8. Did your Unit use a mentoring approach to develop the training of members? \_\_\_\_\_ How successful was it? \_\_\_\_\_
  
9. How many new activities were developed and initiated this year in your Unit \_\_\_\_\_
  
10. Did your Unit utilize the Member Data Survey Form? \_\_\_\_\_ yes \_\_\_\_\_ no. If yes, how many completed surveys did you receive from your members? \_\_\_\_\_
  
11. Summarize what "leadership toolbox" tools for leaders your unit has?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please use the Annual Program Narrative Department Form to complete this entry.  
Let me know what your Unit did and how you did it.

**UNIT LEGISLATIVE ANNUAL REPORT**

Please submit no later than **April 30, 2020**: Department Headquarters, ALA  
1251 Doolin Run Road  
New Martinsville WV 26155-7808

Legislative Chairman's Name \_\_\_\_\_

Unit Name & Number \_\_\_\_\_

**Number of Members in Unit** \_\_\_\_\_

1. # of Communications with Legislators: National \_\_\_\_\_ State \_\_\_\_\_ Local \_\_\_\_\_
2. # of staff members of your representatives or senator invited to a unit meeting? \_\_\_\_\_
3. # of Communications by: Letters \_\_\_\_\_ Emails \_\_\_\_\_ Phone Calls \_\_\_\_\_ Office Visits \_\_\_\_\_
4. Used Advocacy Guide as informational tool? Yes \_\_\_\_\_ No \_\_\_\_\_
5. # of Responses received from Legislators: National \_\_\_\_\_ State \_\_\_\_\_ Local \_\_\_\_\_
6. # of members receiving Dispatch subscription or reading online \_\_\_\_\_
7. Used Legion Legislative Action Alerts for updates and emails? Yes \_\_\_\_\_ No \_\_\_\_\_
8. Did you use the Legion Legislative Action Center for updates and emails? Yes \_\_\_\_\_ No \_\_\_\_\_
9. Did your unit host or help your Post host a "Meet the Candidate" night? \_\_\_\_\_
10. Subscribe to 3-newsletters of your elected officials to monitor what they consider priorities for Veteran/Military and National Security issues? \_\_\_\_\_
11. Did you meet with your representatives or Senators? \_\_\_\_\_
12. How did you educate members in the legislative issues promoted by The American Legion and how did your members employ those methods? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
13. What legislative activities (town hall meetings, legislative receptions) did members attend in your community and department? \_\_\_\_\_  
\_\_\_\_\_  
What suggestions did members have to improve those activities? Please describe \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
14. How did members develop relationships with your elected officials? Please describe \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
15. Please describe how members were able to connect with your local and state officials and what were their successes \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

You may include a typewritten narrative report not exceeding 500 words.

Please include any news articles and pictures with your report.

**UNIT MUSIC ANNUAL REPORT**

Please submit no later than **April 30**, 2020 to: Department Headquarters, ALA  
1251 Doolin Run Road  
New Martinsville WV 26155-7808

Music Chairman's Name \_\_\_\_\_

Unit Name & Number \_\_\_\_\_

**Number of Members in Unit** \_\_\_\_\_

1. Do you open each meeting with the Star Spangled Banner, whether singing or by tape? \_\_\_\_\_
2. Do you use Patriotic music at each meeting? \_\_\_\_\_
3. Did your unit provide music for community affairs and veterans in nursing homes, hospitals or VAMC?  
\_\_\_\_\_ # Volunteers \_\_\_\_\_ Cost \$ \_\_\_\_\_
4. Did your unit utilize resources from the schools and community, such as choirs, dance teams, bands for your unit meetings? \_\_\_\_\_  
List \_\_\_\_\_
5. Did your unit make monetary contributions for scholarships for music in local schools, for bands or community group? \_\_\_\_\_ Amount \$ \_\_\_\_\_
6. Did your unit have singing or musical programs at nursing home, hospitals or VAMC? \_\_\_\_\_
7. How many Juniors help with music programs? \_\_\_\_\_
8. Did your Unit participate in the "Membership Song" Video this year? \_\_\_\_\_
9. Did your unit enjoy music this year? \_\_\_\_\_ Explain \_\_\_\_\_

Please use the Department Narrative Form or submit a Narrative Report  
Your Unit has done to be eligible for the Department Award.

## UNIT NATIONAL SECURITY ANNUAL REPORT

Please submit no later than **April 30, 2020** to: Department Headquarters, ALA  
 1251 Doolin Run Road  
 New Martinsville WV 26155-7808

National Security Unit Chairman: \_\_\_\_\_  
 Unit Name and Number: \_\_\_\_\_  
**Number of Members in Unit** \_\_\_\_\_

**Service of US Service Members:**

Number of Volunteers: \_\_\_\_\_ Number of Hours \_\_\_\_\_  
 Dollars Spent \$ \_\_\_\_\_ In-Kind Value \$ \_\_\_\_\_  
 Number of US Service members Served: \_\_\_\_\_

**Service for Military Families:**

Number of Volunteers \_\_\_\_\_ Number of Hours Volunteered \_\_\_\_\_  
 Dollars Spent \$ \_\_\_\_\_ In-Kind Value \$ \_\_\_\_\_  
 Number of Military Families served: \_\_\_\_\_

Did your Unit participate in:	\$ Spent	In-Kind Donations \$ Amount	#Volunteers	# Hours
Yellow Ribbon Reintegration Program _____	_____	_____	_____	_____
Operation Home front _____	_____	_____	_____	_____
Family Readiness Groups _____	_____	_____	_____	_____
Family to Family support _____	_____	_____	_____	_____
USO _____	_____	_____	_____	_____
Family Support Network _____	_____	_____	_____	_____
Operation Comfort Warriors _____	_____	_____	_____	_____
Heroes to Hometown _____	_____	_____	_____	_____
Gold Star & Blue Star Banner _____	_____	_____	_____	_____
POW/MIA Initiatives _____	_____	_____	_____	_____
Citizen Corps _____	_____	_____	_____	_____
ROTC & JR ROTC _____	_____	_____	_____	_____
ALA Gateway to Services _____	_____	_____	_____	_____
National Military Appreciation Month (May) _____	_____	_____	_____	_____
American Red Cross _____	_____	_____	_____	_____
Tragedy Assistance Program "TAPS" _____	_____	_____	_____	_____
Promote "Remember Everyone Deployed" Wear Red on Friday _____	_____	_____	_____	_____
Other Specify _____	_____	_____	_____	_____

Hold CERT (Citizen Corps) training? Date: \_\_\_\_\_ Location: \_\_\_\_\_ # Registered: \_\_\_\_\_  
 #stayed for event: \_\_\_\_\_ #of flyers handed out: \_\_\_\_\_

To Compete for National Awards You Must Follow the Rules in the Awards Book  
 Please use the Department Narrative Form or submit a Narrative Report  
 Your Unit has done to be eligible for the Department Award.



**UNIT PAST PRESIDENTS PARLEY ANNUAL REPORT**

Please submit no later than **April 30, 2020** to: Department Headquarters, ALA  
1251 Doolin Run Road  
New Martinsville WV 26155-7808

Past Presidents Parley Chairman's Name \_\_\_\_\_  
Unit Name & Number \_\_\_\_\_  
**Number of Members in Unit** \_\_\_\_\_

1. Does your unit have an active Past Presidents Parley? \_\_\_\_\_  
If so, does your Past Presidents Parley do a fundraiser for your Unit Past Presidents Parley? \_\_\_\_\_  
List Fundraiser \_\_\_\_\_ Money Raised \_\_\_\_\_
2. Does your Unit plan to submit a nomination for Auxiliary Unit Member of the Year?  
\_\_\_\_\_ (Rules for this are in Awards Book)
3. Does your unit plan to submit a nomination for the WV Timeless Award? \_\_\_\_\_  
(Rules for this are in the Awards Book)
4. Did your Unit submit a Woman Veteran Honoree for honoring active duty service women and women Veterans serving/served in the Iraq and Afghanistan? \_\_\_\_\_

***To submit a nomination for Auxiliary Unit Member of the Year, the Timeless Award, and/or Honoring Active Duty Servicewomen, you must follow all Rules outlined in the Awards Book.***

100<sup>th</sup> Anniversary

100<sup>th</sup> Anniversary Reporting: While no formal reports are required, each unit is encouraged to write up a short narrative and send it to the Department 100<sup>th</sup> Anniversary Chairman by April 30, 2020 so the department can report to National by May 15, 2020. Please include all activities your unit has done or are gearing up to do next year. Also, include any activities you have helped the Legion do for their 100<sup>th</sup>.

## UNIT POPPY ANNUAL REPORT

Please submit no later than **April 30, 2020** to: Department Headquarters, ALA  
1251 Doolin Run Road  
New Martinsville WV 26155-7808

Poppy Chairman's Name \_\_\_\_\_

Unit Name & Number \_\_\_\_\_

**Number of Members in Unit** \_\_\_\_\_

1. Number of Poppies ordered/made this year \_\_\_\_\_ Number of Poppies ordered last year \_\_\_\_\_  
Is this a decrease or increase over last year? \_\_\_\_\_ # of Poppies \_\_\_\_\_  
Amount of contributions collected last year \$ \_\_\_\_\_  
Projected amount of contributions this year \$ \_\_\_\_\_
2. Did your Unit sponsor a Poppy Poster Contest? \_\_\_\_\_ Number of Schools participating \_\_\_\_\_  
# Students from:  
Class 1, Grade 2 & 3 \_\_\_\_\_ Class 4, Grade 8 & 9 \_\_\_\_\_  
Class 2, Grade 4 & 5 \_\_\_\_\_ Class 5, Grade 10-12 \_\_\_\_\_  
Class 3, Grade 6 & 7 \_\_\_\_\_ Class 6, Special Needs \_\_\_\_\_  
How many Volunteers \_\_\_\_\_ Hours \_\_\_\_\_
3. Did your Unit submit a Poppy Picture at Midwinter to be judged? \_\_\_\_\_
4. Did you select a Miss Poppy? (6-12) \_\_\_\_\_ (13-18) \_\_\_\_\_  
Did you enter her in the National Miss Poppy Contest? \_\_\_\_\_  
How many volunteers \_\_\_\_\_ Hours \_\_\_\_\_
5. Number of seniors helping with Poppy Day \_\_\_\_\_ Juniors \_\_\_\_\_ Legionnaires \_\_\_\_\_  
SAL \_\_\_\_\_ Other groups (list each) \_\_\_\_\_  
Did your Unit send/give Poppies to elected officials in your Community? \_\_\_\_\_ # \_\_\_\_\_
6. Did you order Poppy items to use for other occasions then Poppy Day? \_\_\_\_\_ \$ \_\_\_\_\_ # \_\_\_\_\_  
Explain how your Unit decorated for Poppy Day \_\_\_\_\_  
\_\_\_\_\_
7. Were Poppies placed in houses of worship? \_\_\_\_\_  
Did your Unit use Poppies for tray favors at local Nursing Homes or Personal Care Homes? \_\_\_\_\_  
# Poppies used \_\_\_\_\_ \$ \_\_\_\_\_ # Hours \_\_\_\_\_
8. Did you hand out certificates to Businesses, Organizations, News Media for help in promoting the Poppy Day program? \_\_\_\_\_ How many? \_\_\_\_\_
9. Did your Unit use the Auxiliary *Spirit* and/or Poppy messages to promote the Poppy program?  
Yes \_\_\_\_\_ No \_\_\_\_\_
10. Did your Unit use Poppies for decorations, etc.? \_\_\_\_\_ List \_\_\_\_\_  
Did you involve your juniors with the decorations or crafts involving the Poppies? \_\_\_\_\_
11. Does your Unit have a Poppy Club? \_\_\_\_\_ \$ \_\_\_\_\_ to Dept. \$ \_\_\_\_\_ to Unit.  
Describe how your club works \_\_\_\_\_
12. Did you have newspaper/television/radio coverage? \_\_\_\_\_ How much? \_\_\_\_\_
13. Did your unit promote poppies throughout the year (not just on Veterans Day or Memorial Day)? \_\_\_\_\_
14. Did your Unit submit a Poppy Scrapbook? \_\_\_\_\_

You can use the Annual Narrative Report Form for your Department Narrative.  
Narratives sent to National Must Follow National Rules

## UNIT PUBLIC RELATIONS ANNUAL REPORT

Please submit no later than April 30, 2020 to: Department Headquarters, ALA  
1251 Doolin Run Rd.  
New Martinsville WV 26155-7808

Public Relations Chairman's Name \_\_\_\_\_

Unit Name & Number \_\_\_\_\_

**Number of members in your Unit** \_\_\_\_\_

### Press Information

Number of interviews with Reporters \_\_\_\_\_ Number of articles published \_\_\_\_\_

Number of pictures published \_\_\_\_\_ Number of letters to the Editor \_\_\_\_\_

Number of letters of Appreciation \_\_\_\_\_ Number of Press Releases \_\_\_\_\_

Did your Unit enter in Press Book Competition? Yes \_\_\_\_\_ No \_\_\_\_\_

### Radio/Television

Number of Programs \_\_\_\_\_ Number of Announcements \_\_\_\_\_

Total Minutes of Broadcast Time \_\_\_\_\_ Was Public Access Radio/TV used? Yes \_\_\_ No \_\_\_

Describe programs on Public Access Radio/TV \_\_\_\_\_

Feel free to use back if more room is needed

### Type of Unit Publication

Does your Unit have a publication? Yes \_\_\_ No \_\_\_

What type of Unit publication? Newsletter \_\_\_ Bulletin \_\_\_ Web-Site Newsletter \_\_\_

Joint publication with the post? \_\_\_\_\_

Does your Unit subscribe to the "Auxiliary News" for Friends \_\_\_ Health Facilities \_\_\_

Schools \_\_\_ Churches \_\_\_ Community Agencies \_\_\_

Congressional Offices/Others \_\_\_\_\_

### Resource Materials from the National/Department Websites:

Did your Unit encourage members to use:

National Auxiliary Web-Site for additional information? Yes \_\_\_ No \_\_\_\_\_

Department Auxiliary Web-Site? Yes \_\_\_\_\_ No \_\_\_\_\_

Number Used: (Each copy posted counts as one, example if you use one version of the poster or banner and place in 10 businesses, it counts as 10.)

American Legion Auxiliary Posters to local business? \_\_\_\_\_ Banners? \_\_\_\_\_

Flyer/Newsletter Templates? \_\_\_\_\_ Brochures? \_\_\_\_\_

### Social Media, does your Unit have a:

Website? Yes \_\_\_ No \_\_\_ Is it actively used & updated? Yes \_\_\_ No \_\_\_

Facebook Page? Yes \_\_\_ No \_\_\_ Yes \_\_\_ No \_\_\_

Other social Media, such as Twitter, Instagram Yes \_\_\_ No \_\_\_ Yes \_\_\_ No \_\_\_

Newly created this year? Yes \_\_\_ No \_\_\_ What? \_\_\_\_\_ When? \_\_\_\_\_

Did your unit order Auxiliary Appeal, Honor Their Service button, Auxiliary Name Tags:

# of members? \_\_\_\_\_ Worn at number of events: \_\_\_\_\_

Does your Unit have the "ALA Branding Guide"? \_\_\_\_\_ Do you use it for reference? \_\_\_\_\_

If you are submitting a Press book for Department competition, a copy of this report must be included.  
Additional information does not take the place of the narrative.

## UNIT VETERANS AFFAIRS AND REHABILITATION ANNUAL REPORT

Please submit no later than **April 30, 2020** to: Department Headquarters, ALA  
1251 Doolin Run Road  
New Martinsville WV 26155-7808

Unit Name & Number \_\_\_\_\_

Chairman's Name \_\_\_\_\_

**Number of Members in Unit:** \_\_\_\_\_

1. Our Service For Veterans (Ex: include hours volunteering in VA, helping wounded warriors and elderly veterans at home, providing transportation (no family), distributing poppies, raising money or assisting with Veterans Creative Art Festival, fundraising events, planning and assisting with veterans job fairs, etc.)

	#Volunteers	Total Hours	Expenditures	# Vets Served
Unit/Post Fundraising	_____	_____	\$ _____	_____
VA Supervised Facilities	_____	_____	\$ _____	_____
Field Service	_____	_____	\$ _____	_____
Other Service Projects	_____	_____	\$ _____	_____
Totals	_____	_____	\$ _____	_____

Number of Veterans in Classroom presentations \_\_\_\_\_ Volunteer Hours \_\_\_\_\_

NUMBER OF NEW VOLUNTEERS RECRUITED: Seniors \_\_\_\_\_ Juniors \_\_\_\_\_

Describe what activities you did to recruit volunteers: \_\_\_\_\_

<u>Collaborative Program Efforts:</u>	# Volunteers	# hours	Expenditures/Donations
Christmas Gift Shop	_____	_____	\$ _____
Comfort Item Drive	_____	_____	\$ _____
Fisher House	_____	_____	\$ _____
Creative Arts Festival	_____	_____	\$ _____
Homeless Veterans Initiatives	_____	_____	\$ _____
Caregiver to Non Family Veterans	_____	_____	\$ _____
Other: List _____	_____	_____	\$ _____

Number of poppies purchased for distribution \_\_\_\_\_ Dollars raised from distribution \$ \_\_\_\_\_

2. Other service for active duty military: Hours Volunteered \_\_\_\_\_ Dollar Spent \$ \_\_\_\_\_

3. Other service for military families: Hours Volunteered \_\_\_\_\_ Dollars Spent \$ \_\_\_\_\_

4. Unit Scholarship for Veterans Family Members: # awarded \_\_\_\_\_ Dollar amount of Local Scholarships \$ \_\_\_\_\_

Dollar amount donated to Department Scholarships \$ \_\_\_\_\_

Did your unit donate to the Comfort Items at Midwinter Conference? \_\_\_\_\_ How much in goods and or money? \_\_\_\_\_

List names and hours for "Service to Veterans" Volunteers

List names and hours of **all** VA Hospital Volunteers (separate paper attached to report)

*SAMPLE:*

Mary Smith

Service to Veterans: 16 hours

Hospital: 25 hours

Please use the Department Narrative Form or submit a Narrative Report  
Your Unit has done to be eligible for the Department Award.

## Total Participation

Please submit no later than **June 1, 2020** to: Sharon Kauffman, Department President  
1671 Kelly Island Rd.  
Martinsburg WV 25405

Unit Name & Number: \_\_\_\_\_  
Chairman's Name \_\_\_\_\_  
**Number of Members in Unit** \_\_\_\_\_

1. Did your unit participate in the following programs?

Americanism \_\_\_\_  
Auxiliary Emergency Fund \_\_\_\_\_  
Children & Youth \_\_\_\_  
Community Services \_\_\_\_\_  
Education \_\_\_\_\_  
Girls State \_\_\_\_\_  
Junior Activities \_\_\_\_\_  
Leadership \_\_\_\_\_  
Legislative \_\_\_\_\_  
Membership \_\_\_\_\_  
Music \_\_\_\_\_  
National Security \_\_\_\_\_  
Past President's Parley \_\_\_\_\_  
Poppy \_\_\_\_\_  
Public Relations \_\_\_\_\_  
Veterans Affairs & Rehabilitation \_\_\_\_\_

2. To be eligible for the "Total Participation" Traveling Plaque you must include a narrative of not more than **500 words** describing what your unit participated in, in ALL programs of the American Legion Auxiliary Department of West Virginia for the 2019-2020 membership year
3. Cover page to include (centered and double spaced)  
Total Participation 2019-2020  
Unit President's Name  
Unit Name and Unit Number  
Total Membership in Unit
4. Unit Presidents' signature at end of narrative
5. Include this Year End report form with narrative

