



ANNUAL REPORTS 2009-2010

American Legion Auxiliary
Department of Wisconsin

Please complete and return to:
No later than May 1, 2009

American Legion Auxiliary – Dept. of Wisconsin
P.O. Box 140
Portage, WI 53901

Dear Auxiliary Units:

Included are the Annual Reports forms for Program activities for this Auxiliary year.

I cannot impress upon you enough of the importance of these reports. As soon as your Unit reports are received at Department Headquarters, they are forwarded to the individual Program Chairman. These Chairmen total all of Wisconsin's numbers and dollars and forwarded them to the National Program Chairmen. The most important step of this reporting process happens at National Headquarters, where all the number from each state are combined and given to The American Legion who then includes the American Legion Auxiliary in their report to the U.S. Congress.

This information is used to show the public what the American Legion Family does and to lobby Congress for veteran's issues. Every single piece of data you submit is included in the report to Congress, so please take time to complete and forwarded the Annual Reports to Department Headquarters by May 1, 2010. I will be looking for them.

If you have any questions, please contact the Department Chairmen directly. Their phone numbers and email addresses are listed on a separate page in this packet. If you unable to contact a chairman, please feel free to call Department Headquarters. 1-866-664-3863, staff will assist you or find someone who can.

Start right now with charts and tally sheets, keeping track of your Unit's activities. This information also helps you with your year-end reporting to your District. Wisconsin American Legion Auxiliary Units do so much; let's be sure Congress hears about it!

Thank you for all you do.

Gayle Janson, Department President
American Legion Auxiliary
Department of Wisconsin



Stay on Track

Reporting Guidelines

The following guidelines are in response to the resolution passed in 2006. The issue was how hours and donations etc. should be reported.

“Resolved, By the American Legion Auxiliary in National Convention assembled in Salt Lake City, Utah, August 25-31, 2006 that the National organization clarify and articulate in writing the proper procedures for distributing hours and filling out all Annual Report Forms; and be it further

Resolved, That this information be distributed and included annually in the Plans of Work beginning with the 2007-2008 administrative year.”

1. American Legion Auxiliary Unit members should annually record their activities and accomplishments. This record reflects what the women of our organization have done in service for others. These reports are also an excellent source of information and ideas to share for further activities.
2. Unit reports are first compiled into Department reports, which are then compiled into the National reports for the year. National reports are then given to The American Legion who reports to Congress. This information can be used to share the great efforts of our members with the public and to lobby for veterans' and other issues we are involved with as an organization. Without Unit reporting, this would not be possible.
3. The service of the Unit members individually and collectively is gathered and recorded on the Unit reports. Units may use a variety of methods to collect their data.
4. When activities, projects, donations, etc. cross over multiple programs, the efforts can be reported for any one of those applicable programs or divided among them, but not duplicated. For example, if a project took thirty-five hours and over-lapped two programs, part of those hours, say twenty, may be reported in one program and the rest, fifteen, to the other program.
5. Some Unit reports may also request a narrative. The information in a program narrative should match the data in that program report. For example if twenty hours out of a total of thirty-five are recorded on the Education report, the narrative for the Education report can only reference the same twenty hours, not the whole thirty-five from the project.
6. Veterans Affairs & Rehabilitation reports must follow the specific rules as outlined in the American Legion Auxiliary *Guide for Volunteers*.
7. It is recommended and can be advantageous to use the report form in planning Unit program activities during the year. Contact the Department program chairman with any questions.



Please contact the program chairmen below for questions concerning Annual Reports

DEPARTMENT OF WISCONSIN – Chairman 2009-2010

Title - Chairman	First	Last	Address	Phone/Email
Americanism	Laura	Calteux	7012 W. Squire Ave. Greenfield, WI 53220	414-281-5789 calteuxx2@sbcglobal.net
AEF	Rose	Wenger	N3327 Joy Del Rd. Monroe, WI 53566	608-325-6364 rfwenger@tds.net
Badger Girls State Chrm.	Jeannine	Conradt	N4678 Kettner Rd. Shiocton, WI 54170	920-986-3800 JeannineLeroyConradt@msn.com
Badger Girls State Dir.	Delores	Woolf	390 South Court Street Platteville, WI 53818	608-348-7403 dwoolf@centurytel.net
Calvalcade of Memories/ Past President Parley	Andrea	Page	468 Campfire Drive West Salem, WI 54669	608-786-0299 apage468@cs.com
Chaplain/Music	Teresa	Isensee	PO Box 145 Boyd, WI 54726	715-667-3528 isensee@centurytel.net
Children & Youth	Joan	Chwala	W13567 County Hwy M Gilman, WI 54433	715-668-5661 jvchwala@hotmail.com
Community Service	Beverly	Tutas	308 N. Roger Street Port Washington, WI 53074	262-284-2855 tutas2@wi.rr.com
Constitution & By-Laws	Virginia	Faust	1508 Park Street Cross Plains, WI 53528	608-798-2463 vafaust@webtv.net
Education	Elizabeth	Staff	920 8 th Avenue N Onalaska, WI 54650	608-781-6888 raykline@centurytel.net
History	Joyce	Endres	1147 Fleetwood Avenue Madison, WI 53716	608-221-1763 ljendres@charter.net
Junior Activities	Theresa	Schindler	W10241 Bitner Avenue Owen, WI 54460	715-229-2202 tschindl@ceas.coop
Leadership	Diana	Sirovina	9428 W. Eden Place Milwaukee, WI 53228	414-321-1479 durango1@wi.rr.com
Legislative	Sue	Vorwald	576 Fairhome Rd Roberts, WI 54023	715-222-9343 svorwald@pressenter.com
Membership	Laurel	DuBois	1883 138 th Street Balsam Lake, WI 54810	715-825-3916 sdubois188@aol.com
National Security	Karen	Degner	914 Dreifuerst Rd Plymouth, WI 53073	920-892-6139 mdegner@wi.rr.com
Poppy	Florence	Wasley	415 W. Chapel St. Dodgeville, WI 53533	608-935-3527 tuskman@mhtc.com
Public Relations	April	Kollmorgen	25946 NW Circle Dr. S Poulsbo, WA 98370	360-930-0072 aekollmorgen@comcast.net
VA & R	Fern	Madden	3934 Adelaide Drive Winchester, WI 54557	715-686-2838 3maddens@centurytel.net
Field Service	Judy	Van Ryzin	727 Warbler Lane Stevens Point, WI 54482	715-344-6142 jwarbler@msworldnet.com
Home Service	Patricia	Ziarnik	1069 Pilgrim Way #18 Green Bay, WI 54304	920-496-2291 forjsmom@yahoo.com

Americanism Annual Report

Laura Calteux, Department Chairman, 414-379-2943

Please complete and return by May 1, 2010 to: American Legion Auxiliary
P.O. Box 140
Portage, WI 53901

Unit Name: _____ Unit# _____

City: _____ District# _____

Please report numbers participating, money spent and hours as applicable

	<u>#</u>	<u>Money Spent</u>	<u>Hours</u>
1. National Americanism Youth Conference	_____		
2. Americanism Essay Contest	_____		
3. Girl Scout Achievement Award	_____		
4. Flag Protocol and Americanism Activities In schools (i.e.: Kids Vote, patriotic programs Flag programs)	_____		
5. Junior Americanism programs/activities	_____		
6. Pocket Flag project Number of flags mailed _____	_____		
7. Support of Legion Junior Shooting Sports program	_____		
8. Support of The Legion Baseball program	_____		
9. Support of the Legion Oratorical Contest	_____		
10. Participation in "Get Out The Vote"	_____		
11. Support of Patriotic Holiday observances	_____		
12. Flags presented to schools, organizations, etc.	_____		
13. Blue Star/Gold Star banners presented	<u>report on National Security page</u>		
14. Operation Military Kids and National Guard Activities	_____		
15. Supporting Military families	<u>report on Community Service page</u>		
16. Participation in the "Month of the Military Child"	<u>report on National Security page</u>		
17. Support of the Citizens Flag Alliance	_____		

Please report any other Americanism projects or activities on the back of this form or on a separate piece of paper.

BADGER GIRLS STATE ANNUAL REPORT

Questions? Contact BGS Director Delores Woolf at 608-348-7403

Please complete and return by May 1, 2010 to: **American Legion Auxiliary, Dept. Of WI
P.O. Box 140
Portage, WI 53901**

Unit Name: _____ **Unit #:** _____

City: _____ **District:** _____

How many girls do you sponsor? _____

Do you have a contributor(s)? _____ yes _____ no. Who? _____

Were you on the Selection Committee at school? _____ yes _____ no

Who was your contact person at school? _____ Principal _____ Counselor _____ Activity
Director _____ Other _____

Did your delegate(s) attend an orientation? _____ yes _____ no

What county _____

Where did you invite your delegate(a) to give a report? _____ Unit Meeting, _____ Joint with
Post, _____ Banquet, _____ Other, Explain _____

Did you invite school officials to this recognition? _____ Yes, _____ No.

Did you invite community leaders to this recognition? _____ Yes, _____ No.

Do you publicize Badger Girls State? _____ Yes _____ No. How (Please Circle those that
apply) Newspaper Articles, Newspaper Pictures, School Newsletter, Other (Explain)

Person filling out report: _____

Title: _____

Please include any additional comments or information on the reverse side of this form.

Chaplain 2009-2010 Annual Report

Teresa Isensee, Department Chaplain, isensee@centurytel.net ♦ 715-667-3528

Please complete and return by **MAY 1, 2010** to: American Legion Auxiliary
Box 140
Portage, WI 53901

Unit Name: _____ Unit #: _____

City: _____ District # _____

1. How many members have you lost by death?

Number of: Seniors: ____ Juniors: ____ Gold Star Mothers: ____

2. Did your Unit hold memorial services for deceased members? ____ Yes ____ No

Did you include Juniors in the Ceremonies? ____ Yes ____ No

Was the Charter draped for deceased members? ____ Yes ____ No

3. List the organizations that received Memorial Donations:

_____ Total Amount Donated: \$ _____

4. Did Unit use Grace Cards? ____ Yes ____ No How Many? _____

5. Did your Unit have Four Chaplains Programs? ____ Yes ____ No

Did you include members of the Legion Family? ____ Yes ____ No

Donations made to the Chapel of the Four Chaplains: \$ _____

6. Did someone from your unit attend the National Chaplains Conference? ____ Yes ____ No

7. Did you participate with the American Legion Family in observing: Check all that apply:

____ Veterans Day ____ Independence Day ____ Memorial Day Other: _____

8. Did your Unit prepare a Unit Prayer Book? ____ By Seniors ____ By Juniors

Did you send Prayers to the Dept President? ____ Yes ____ No

Send Prayers to Nat'l President? ____ Yes ____ No

9. Did you use information from the National Chaplain or the Auxiliary Web Site Chaplain's corner as a resource for your activities? ____ Yes ____ No. If yes, please explain:

10. If there one person you feel deserves special recognition for their efforts this year? If so who and why?

11. Suggestions for improving the Chaplain's program – Please write your comments on reverse side, as needed.

Children & Youth Annual Report-2009-2010
Joan Chwala, Dept. of Wisconsin Chairman
Ph: 715-668-5661 ♦ Email: jvchwala@hotmail.com

Please complete and return by May 1, 2010 to: American Legion Auxiliary
PO Box 140
Portage, WI 53901

Unit Name _____ Unit Number _____ District _____
Unit City _____ Unit President's Name _____
Address _____ Phone _____

1. Did your unit participate in the following ? (check X if yes)

Special Olympics _____ \$ _____ Hrs. _____

Explain activities: Use extra paper if needed.

_____ National Family Week _____ \$ _____ Hrs _____

Children's Miracle Network _____ \$ _____ Hrs _____

Missing Children _____ \$ _____ Hrs _____

April is Children & Youth Month observance _____ \$ _____ Hrs _____

Halloween Safety _____ \$ _____ Hrs _____

Family Support Network _____ \$ _____ Hrs _____

Child Safety _____ \$ _____ Hrs _____

Other: Use extra paper if needed. (list programs, \$, hours, and explain)

2. What is your total estimated monies spent for administrative expenses? Postage, printing, etc. \$ _____

3. Direct Cash Aid given to needy children \$ _____ Number of children _____

Value of Goods given directly to needy children \$ _____ Number _____

4. American Legion Child Welfare Foundation \$ _____ Hours _____

5. Describe any activity not already listed. Use back or extra paper if necessary. Include cost of parties, movies, picnics, educational programs, etc. Tell how many children attended or benefited from each activity.

Community Service Annual Report

Beverly Tutas, Chairman – Ph: 262-284-2855 ♦ Email: tutas2@wi.rr.com

Please complete and return by May 1, 2010 to:

**American Legion Auxiliary
P.O. Box 140
Portage, WI 53901-0140**

Unit Name _____ Unit Number _____

City _____ District _____

Please report the number of Units participating in the following programs and the amount of money spent and hours volunteered.

Name of Program	Money Spent	Hours Spent
Community Support for our Troops (Area of Emphasis) Other than what was reported on the National Security report page		
Youth Appreciation Week		
Make a Difference Day (Area of Emphasis)		
Serving the Community that Veterans Secured for us (Area of Emphasis)		
Organ and Tissue Donation (Area of Emphasis)		
Community Beautification		
Recycling		
Homeless Shelters		
Food Banks		
Habitat for Humanity (Area of Emphasis)		
Blood Donation/Drives		
Domestic Violence Centers		
Libraries		
Senior Citizen Centers		
Nursing Homes (Area of Emphasis)		
Loaning Medical Equipment		
Supporting Programs of the American Legion		
Individual Community Needs (List programs on back of form		

Please include any additional comments or information on projects that you are most proud of on the reverse side of this form.

Education Annual Report

Elizabeth Staff, Dept. Chairman Ph: 608-781-6888 ◇ Email: raykline@centurytel.net

Please complete and return by May 1, 2010 to:

American Legion Auxiliary
P.O. Box 140
Portage, WI 53901

Unit Name: _____ Unit # _____
City: _____ District _____

- I. Participation with Scholarships. Please list number submitted:
 1. National President's Scholarship _____
 2. Spirit of Youth Junior Scholarship _____
 3. Non-Traditional Scholarship _____
 4. Number of Department Scholarship Awarded _____
 5. Donations made to ALA scholarship fund \$ _____
 6. Donations made to the National President's Project: \$ _____
 7. Donations made to other scholarship funds (please list) _____
\$ _____

- II. Participating in Adult Literacy Programs
 1. Number of Schools Served _____; Number people served _____
 2. Value \$ _____
 3. Participating in "Give 10 in Education" _____
 4. Please identify what activities units included in "Give 10 in Education"

- III. Participating in Classroom mentoring and reading programs
 1. Number of Schools Served _____; Number of students served _____
 2. Value \$ _____

- IV. Participating in Veterans in the Classroom
 1. Number of Schools Served _____; Number students served _____
 2. Value \$ _____

- V. Supporting American Legion Programs
 1. Oratorical Contest: Report on Americanism page
 2. PACT _____
 3. American Education Week _____
 4. Policy on Education _____

- VI. Number of Resources distributed
 1. Need a Lift _____; Guide for Parents & Students _____; Comic Books _____; America's video _____; For which it Stands DVD _____; Other items (please list)

- VII. Tell us about your Education programs that you are most proud of.

Field Service Annual Report (Division of Veterans Affairs and Rehabilitation Program)

Report total hours and money spent by your Unit members and non-affiliated volunteers

Questions? – Chrm. Judy Van Ryzin Ph: 715-344-6142 ♦ Email: jwarbler@msworldnet.com

Please complete and return by May 1, 2010 to:

**American Legion Auxiliary
P.O. Box 140
Portage, WI 53901**

Unit Name: _____

Unit # _____

City: _____

District _____

Total Unit members volunteering and total hours spent:	#	Hr.
Number of first-time volunteers	#	Hr.
Total Non-ALA members volunteering and total hours spent:	#	Hr.
Number of first-time volunteers	#	Hr.
Total number of Volun-Teens volunteering	#	Hr.

Total number of Veterans served	#	
Total number of Homeless Veterans served	#	

Total number of programs, parties, etc. for Veterans	#	
Total number of Veterans Day cards sent to Veterans	#	

Total dollars spent for Field Service program (by Unit members)	\$	
---	----	--

Field Service Volunteers

Field Service is defined as any service provided to a sick or injured veteran outside a V-A Medical Center or assisting with veteran burials or gravesites upkeep.

Field Service hours can be earned through work done on behalf of veterans in state or community-based nursing homes, soldiers homes, contracted veterans' homes, day care centers, foster homes, halfway houses, hospices homeless shelters, stand-downs, or veterans cemeteries or gravesites.

Junior members may also earn hours through services provided while under supervision of a Senior volunteer. (examples: reading, playing board games, plan activities around special holidays and upkeep of veterans gravesite)

Each Field Service volunteer is responsible for reporting her hours to her Unit's VA & R Chairman, who shall verify the hours and order for Field Service pins (order form included) annually to the Department Field Service Chairman. Department Field Service will total hours and issue volunteer pin or hour-bars accordingly. A Field Service volunteer Pin will be awarded for first 50-hour and hour bars of 100, 300, 500 etc are available. **Please report Field Service hours from April 1, 2009 – March 31, 2010**



AMERICAN LEGION AUXILIARY
Empowering Women, Inspiring Communities

Mail this completed form for verification to:

Judy Van Ryzin
727 Warbler Lane
Stevens Point, WI 54482

Unit City Location: _____

Unit #: _____

Date: _____

Dist #: _____

2009 – 2010 FIELD SERVICE PIN ORDER BLANK

Please send pins to:
Name: _____
Address: _____
City/State/Zip: _____

Pins are available one-time-only at no cost to the member upon completion of the first 50 hours (\$10.95 value).

Qualifying Member Information	# of Hours Completed	Verified
Name: _____ Address: _____ City: _____ State/Zip: _____ Telephone: (_____) _____	_____	___ Yes ___ No
Name: _____ Address: _____ City: _____ State/Zip: _____ Telephone: (_____) _____	_____	___ Yes ___ No
Name: _____ Address: _____ City: _____ State/Zip: _____ Telephone: (_____) _____	_____	___ Yes ___ No
Name: _____ Address: _____ City: _____ State/Zip: _____ Telephone: (_____) _____	_____	___ Yes ___ No

Department Chairman Use Only: Your signature on this form confirms that you have verified the information above. 50-hour pins and 100, 300, 500, 1000 hour bars and each additional 1000 hours completed.

Ok'd by: _____

Date: _____

Historian Annual Report, 2009-2010

Joyce Endres, Dept. Chairman – Ph: 608-221-1763 ♦ Email: ljendres@charter.net

Mail Completed Report to: American Legion Auxiliary
PO Box 140
Portage, WI 53901-0140

Mail No Later Than **May 1, 2010**

Please Print Clearly or Type All Information

Unit # _____ District # _____ Unit Name: _____ City: _____

Unit President Name: _____ Unit Historian Name: _____

Record ALL UNIT ACTIVITIES IN THE HISTORY PROGRAM FROM MAY 1, 2009 TO April 30, 2010

1. Did your Unit prepare a History for 2009-10? Yes No
2. Did you submit your History for judging? Yes No
3. Did you participate in the "Milestones over the Years" Project? Yes No
4. Did you submit an entry for the "Milestone over the Years" Project? Yes No
5. Did you interview local veterans for the Veteran's History Project? Yes No How many?
6. Did you submit any histories to the Veteran's History Project? Yes No How many?
7. Did you do anything special to promote the Veteran's History Project? Yes No
8. Did your Juniors prepare a History for 2009-10? Yes No
9. Did you return your Mid-year History report? Yes No
10. Did you make any special history presentations this year? Yes No
11. Did you make any special history presentations this year? Yes No
12. Please **list special events** (that your most proud of) in your Units' history this year to include in the Department History:

Please Print Clearly

Name of Person Submitting this Report: _____

Address: _____ City: _____ Zip Code: _____

Daytime Phone #: _____ Evening Phone #: _____ Email: _____

AMERICAN LEGION AUXILIARY
DEPARTMENT OF WISCONSIN

Mail this completed form for verification to:

Mrs. Pat Ziarnik
1069 Pilgrim Way #18
Green Bay, WI. 54304-5838

Unit City Location: _____ Unit No. _____

Date: _____ Dist. No. _____

2009 – 2010 HOME SERVICE PIN ORDER BLANK

Please send pins to: Name _____ Address: _____ City: _____ State/Zip: _____

Pins are available one-time-only at no cost to the member upon completion of the first 50 hours (\$10.95 value).

Qualifying Member Information	# of Hours Completed	Verified
Name: _____		
Address: _____		Yes
City: _____ State/Zip: _____		No
Telephone: (____) _____		
<hr/>		
Name: _____		
Address: _____		Yes
City: _____ State/Zip: _____		No
Telephone: (____) _____		
<hr/>		
Name: _____		
Address: _____		Yes
City: _____ State/Zip: _____		No
Telephone: (____) _____		
<hr/>		
Name: _____		
Address: _____		Yes
City: _____ State/Zip: _____		No
Telephone: (____) _____		

DEPARTMENT CHAIRMAN USE ONLY: Your signature on this form confirms that you have verified the information above. 50-hour pins and 100, 300, 500, 1000 hour bars and each additional 1000 hours completed

Ok'd by: _____ Date: _____

JUNIOR ACTIVITIES ANNUAL REPORT 2009-2010

DEPARTMENT OF WISCONSIN

Theresa Schindler, Dept. Chairman ~ Ph: 715-229-2202 ♦ Email: tschindl@ceas.coop

Send report to: ALA Annual Reports, PO Box 140, Portage, WI 53901 Due by **May 1, 2010**

Unit Number and Name _____ District _____
Unit City _____ Unit President's Name _____
Address _____
Phone _____ Email _____

Unit Participation

1. _____ Number of Active Juniors
2. _____ Are you a new Junior Group organized this year?
3. _____ Are you a Reorganized Junior Group?
4. _____ Did you submit a candidate for Junior Member of the Year?
5. _____ Are you participating in National Junior Plaque Award?

6. _____ Number of New Junior Members recruited (May 2009-April 2010)
7. _____ Number of Junior Recruiters

Junior Participation

8. _____ Leadership Correspondence Course
9. _____ Junior Member of the Year
10. _____ Department Junior Meeting
11. _____ Veterans History Project

12. _____ Patch Program Activity Sheets
 _____ Americanism Patch _____ VA&R Patch _____ Leadership Patch
 _____ Comm. Service Patch _____ Membership Patch _____ Physical Fitness
 _____ Poppy _____ Field Service _____ National Security
 _____ National President's Scholarship _____ Education

Volunteerism

13. _____ Community Service Projects _____ #Juniors _____ Hours
14. _____ Volunteers _____ #Juniors _____ Hours
15. _____ Pocket Flag Project _____ #Juniors _____ Hours
16. _____ President's Special Olympics Project _____ #Juniors _____ Hours

Miscellaneous Facts

Please use back or separate sheet of paper.

- A. When are your Unit Junior Meetings held? Describe the type of activities offered.**
- B. What types of awards are given to Juniors in your Unit?**
- C. What types of activities were done by Senior members to prepare Juniors for leadership in our organization?**

LEADERSHIP ANNUAL REPORT – ALA DEPARTMENT OF WISCONSIN
DIANA SIROVINA, DEPARTMENT CHAIRMAN
Ph: 414-321-1479 ♦ Email: durango1@wi.rr.com

MAIL COMPLETED REPORT TO: ALA Annual Reports, PO Box 140, Portage, WI 53901

MAIL NO LATER THAN MAY 1, 2010 PLEASE PRINT ALL INFORMATION

Unit# _____ District# _____

Unit Name: _____ City _____

Unit President: _____ Unit Leadership Chrm: _____

Record all Unit activities in the Leadership Program from May 1, 2009 to April 30, 2010

1. How did your unit educate members about Auxiliary programs?

2. Did your unit conduct officer training? ____Yes ____No

3. How and where was your officer training conducted?

4. How many members from this unit participated in correspondence courses? _____

5. Did your unit use ALL of the "Topic of the Month" articles? ____Yes ____No

6. Did your unit use at least 3 of the "Topic of the Month" articles? ____Yes ____No

7. Did your unit develop any new Leadership activities this year? ____Yes ____No

8. What Leadership activities did your unit participate in this year?

9. How many members of this unit participated in a Leadership Workshop this year? # _____

10. How many members purchased a copy of the newly revised Leadership manual? # _____

11. How many members participated in a "mentor" program this year? Seniors # _____
Juniors # _____

12. Did you include Juniors in Leadership training this year? ____Yes ____No

13. Did you use the National website for program information? ____Yes ____No

14. Did you use the Department website for program information? ____Yes ____No

List (on a separate piece of paper) any other information about how the Leadership program was used in your unit this year. Include pictures also.

Please Print Clearly!!

Name of Person Submitting this report: _____

Address: _____ City: _____ Zip code: _____

Daytime Ph: _____ Evening Ph: _____

Email: _____

Legislative Annual Report American Legion Auxiliary

Sue Vorwald, Department Chairman, Ph: 715-222-9343

Please complete and return by May 1, 2010 to: American Legion Auxiliary
P.O. Box 140
Portage, WI 53901

1. Did your Unit hold: Legislative meetings? Y___N___, Legislative Rallies? Y___N___
Town Hall Meetings? Y___N___, Meet the Candidates Night? Y___N___

(if yes to any of the above, please give details on a separate sheet of paper)

2. Did you receive The American Legion's publication "The Dispatch"? Y_____N_____

3. Did you promote/honor the Women Veteran? Y_____ N_____

4. Did you campaign to have mandated civic and government education programs in public schools? Y_____ N_____? How? (use separate sheet)

5. How many letters were sent by Unit members to: The White House _____,
U.S. Senators? _____, U.S. Representative _____, State Officials _____, Local Officials _____

6. How many personal visits were made by Unit members to: U S Senators _____,
U.S. Representatives _____, State Officials _____, Local Officials _____,

7. Number of other contacts (telephone calls, e-mails, etc.) made by Unit members to:
The White House _____, U.S. Senators _____, U.S. Representatives _____,
State Officials _____, Local Officials _____.

8. Number of replies received by Unit members from: The White House _____,
US Senators _____, US Representatives _____, State Officials _____, Local Officials _____

9. Did your Unit submit activities to the Congressional Record? Y_____N_____
Briefly describe:

10. Describe any other outstanding Legislative activity:

Unit Name: _____, Unit # _____

City: _____ Chrm/President name: _____

NATIONAL SECURITY ANNUAL REPORT

Questions? Please contact Chairman, Karen Degner
 Ph: 920-892-6139 ♦ email: mdegner@wi.rr.com

Please complete and return by May 1, 2010 to:

American Legion Auxiliary
 P.O. Box 140
 Portage, WI 53901

Unit Name: _____
 City _____

Unit # _____
 District _____

Please Report Numbers, Hours, and Dollars Where Applicable

	Volunteers	Hours	\$\$\$
1. Did your Unit host a Cert Program? _____			
2. Did your Unit participate in Month of the Military Child? _____			
3. Did your Unit partner with a USO? _____			
4. Number of Blue Star Banners provided _____			
5. Did your Unit honor POW/MIA at meetings & events? _____			
6. Number of Gold Star Banners provided. _____			
7. Did your Unit participate in Welcome Home Activities? _____			
8. Did your Unit sponsor a National Military Appreciation Month Event? _____			
9. Did your Unit support Legislative Lobbying Efforts for Veterans? _____			
10. Did your Unit sponsor a Blood Donor Program?	Report on Community Service page		
11. Did your Unit adopt a ROTC/JROTC unit? _____ # medals presented _____ # certificates presented _____			
12. Did your Unit participate in Coupon Clipping? Weight # _____			
13. Did your Unit participate in Toasty Toes? _____ # sent _____			
14. Did your Unit participate in sewing Cool Ties, or Comfort Quilts? _____			
15. Did your Unit participate in care packages/monetary value? _____			

Name: _____
 style="text-align: center;">Unit President/Chairman

PAST PRESIDENT PARLEY ANNUAL REPORT

Questions? Please contact Chairman Andrea Page Ph: 608-786-0299
Email: apage468@cs.com

Please complete and return by May 1, 2010 to: American Legion Auxiliary
PO Box 140
Portage, WI 53901-0140

Unit Name: _____ **Unit #:** _____

City: _____ **District:** _____

1. Does your Unit have a Past Presidents Parley? Yes____ No____ New____

If so, how many members? _____

2. What did your Parley do to recognize Women Veterans or Female Active Duty Veterans? _____

3. Did you nominate an Active Duty Service Woman for the Department Award?

Yes_____ No_____

4. Did you nominate someone for the Department Unit Member of the Year Award?

Yes_____ No_____

5. Did you donate to the Past Presidents Parley for Nursing Scholarships?

Yes_____ No_____ If so how much did you donate? _____

6. Did you present a Nursing scholarship from your Parley? Yes____ No____

If so, how much was the scholarship? _____

Poppy Annual Report
Florence Wasley, Department Chairman
Ph:608-935-3527 ♦ Email: tuskman@mhtc.com

Please complete and return by May 1, 2010 to:

American Legion Auxiliary
P.O. Box 140
Portage, WI 53901

Unit Name: _____

Unit # _____

City: _____

District _____

Poppy Annual Report Form

1. How many poppies did your Unit order?
Large _____ Small _____
2. Was this more or less than last year?
More _____ Less _____ Same _____
3. If more or less, by how many? _____
4. Did your Unit sponsor the Poppy Poster Contest? _____
If yes, how many entries? _____
5. Did your Unit select a Miss Poppy?
(age 6 - 12) _____ (age 13-18) _____
6. Did your Unit contact the local media? Yes _____ or No _____
7. Did your Unit give poppies to the elected officials? _____
8. Total contributions from Poppy distributions _____
9. How many poppies did your Unit distribute? _____

Public Relations – Annual Report Form 2009-2010

April Kollmorgen, Dept. Chrm. ~ Ph: 360-930-0072 ♦ Email: aekollmorgen@comcast.net

Please complete by May 1, 2010 and forward to:

Department Headquarters, PO Box 140, Portage, WI 53901

Unit Name & Number: _____

City _____ District _____

Unit Chairman: _____

Media Form	#’s	Yes	No
1. Interviews with reporters			
2. Articles published			
3. Letters to the Editor			
4. Aired Programs/interviews/event coverage:			
5. Public Television Announcements:			
6. Public Service Announcements:			
7. Print Advertisements:			
8. Letters of Appreciation Sent:			
9. Entry completed for Unit Program Emphasis Award?		Yes	No
10. Entry completed for Community Display Award?		Yes	No
11. Other PR print material used:			
(please list various forms on back)			
Unit Communications			
12. Unit Web site URL:			
13. Number of hits this year:			
14. Name of person maintaining website			
15. Unit Email Address:			
16. List Unit Publications			
1.			
2.			
17. As Unit Chairman, did you complete a Press Book?		Yes	No
18. Did you submit your Unit Press Book for judging?		Yes	No
19. Does your Unit send out e-bulletins?		Yes	No
20. Did Unit Chairman create a Fact sheet?		Yes	No
21. Did Unit Chairman create a Public Relations Plan?		Yes	No
22. Number of Press Releases sent featuring Juniors			

23. How did your Unit work to build the image of the ALA in your community?

Please submit additional details regarding other Public Relations projects or activities on the back of this form or a separate sheet of paper.

VETERANS AFFAIRS AND REHABILITATION ANNUAL REPORT

Questions? Please contact Chairman Fern Madden Ph: 715-686-2838
Email: 3maddens@centurytel.net

Please complete and return to: **ALA Dept. of Wisconsin**
No later than May 1, 2010 **P.O. Box 140, Portage, WI 53901**

Unit Name: _____ Unit #: _____

City: _____ District: _____

NUMBER OF VOLUNTEERS RECRUITED

Regularly Scheduled _____ Occasional _____ Non-Affiliated _____
Junior Members/Volunteers _____
Methods used to recruit _____

Activities used to recognize volunteers _____

CREATIVE ARTS FESTIVAL

Volunteers _____ Total Hours _____ Donations \$ _____
Special fund-raising activities _____

HOMELESS VETERANS

Donations \$ _____ # Volunteers _____ Total Hours _____
Any Special Activities _____

FISHER HOUSE

Donations \$ _____ # Volunteers _____ Total Hours _____
Special Fund-raising Activities _____

WORK WITH OTHER ORGANIZATIONS (VSO or Community based)

Organization _____ # Volunteers _____ Total Hours _____
Donations \$ _____ Describe Activity _____

PARTICIPATION WITH AMERICAN LEGION VA&R EFFORT

HEROES TO HOMETOWNS

Volunteers _____ Total Hours _____ Donations \$ _____
Describe Activities _____

Veterans History Project --- REPORT ON HISTORY PAGE

Volunteers _____ Total Hours _____ # Veterans interviewed _____

SALUTE TO HOSPITALIZED VETERANS

Volunteers _____ Total Hours _____ Donations \$ _____
Describe Activities _____

CHRISTMAS GIFT SHOP

Volunteers _____ Total Hours _____ Donations \$ _____

VETERANS REMEMBERED WITH CARDS Veterans Day _____ Others _____

NATIONAL VOLUNTEER MONTH # Volunteers _____ Describe activities _____

PRESIDENTIAL MEMORIAL CERTIFICATES # Ordered _____

COLD WAR CERTIFICATE PROGRAM # Ordered _____

GRANT THE LAST WISH PROGRAM # Veterans _____ # Volunteers _____ Hours _____
Donations \$ _____. Describe Activity:

CAMP AMERICAN LEGION # Volunteers _____ Total Hours _____ Donations \$ _____

FOUR CHAPLAINS # Attending Program _____ Donations \$ _____

U.S.O. State \$ _____ National \$ _____

ADDITIONAL VETERANS PROGRAMS Hours _____ Donations \$ _____
Program name _____

Please feel free to use additional sheets is necessary

SIGNATURE - _____ DATE _____
VA&R Chairman or Unit President