



**American Legion Auxiliary
National Security—Annual Report Form 2010-2011**

Please complete/forward to Angela Kilcrease, 720 Tyler Avenue, Tylertown, MS 39667 by May 1, 2011.

Unit Name/No _____

Chairman Name _____ Total Number of Members _____

Address _____

Please report numbers of volunteers, dollars and hours where applicable.

Dept. Objective I: Support for Military Families (include hours volunteered, money/good donated or spent; and number of unit volunteers who assisted)

- 3. through Welcome Home Greetings _____
- 4. offering child care _____
- 5. making social visits _____
- 6. cooking meals _____
- 7. doing yard work _____
- 8. other _____

Unit participation (check all that Unit participated in/supported):

- Yellow Ribbon Reintegration Program _____
- Operation Homefront _____
- Family Readiness Groups _____
- Family to Family Support _____
- Family Support Network _____
- Operation Comfort Warriors _____
- Heroes to Hometown _____
- POW/MIA Initiatives _____
- Nat'l Military Appreciation Month _____

Total No. of veterans/military/families served: _____

Total No. of volunteers for above initiatives: _____ Hrs: _____

Total Cost to Unit for above initiatives: \$ _____

Unit participation: Citizen Corps: _____

Did Unit provide information to veterans/military/families through ALA Gateway to Services?

Dept. Objective II: Additional Military Related Initiatives

- | | |
|--|-------------------------------------|
| 8. Partnered with USO | #of Unit volunteers _____ |
| total hours _____ | Expenses/Donations \$ _____ |
| 9. Provided Blue Star Banner | # of Banners provided _____ |
| Cost \$ _____ | |
| 10. Provided Gold Star Banner | # of Banners provided _____ |
| Cost \$ _____ | |
| 11. Sponsored Blood Donor Programs | # of volunteers _____ Cost \$ _____ |
| 12. Adopted ROTC/ JROTC | Yes _____ No _____ |
| 13. Presented medals and/or certificates | # of medals presented _____ |
| # of certificates presented _____ | Cost \$ _____ |
| 14. Donated to Camp Shelby Chaplains Project | \$ _____ (cash) |
| Value of goods donated _____ | Unit Volunteers/hours _____ |

CERT (include hours volunteered, money/good donated or spent; and number of unit volunteers who assisted)

1. Did your Unit host a CERT Program _____
2. Number of people participating in CERT training _____
3. Cost \$ _____ No. of Unit volunteers _____

Please include additional details regarding all National Security projects and activities on the back of this form or on a separate piece of paper.