



AMERICAN LEGION AUXILIARY
Department of Ohio



2009-10 Annual Unit Report - HISTORY

This report is MANDATORY for the Citation of Merit

*Send completed report to Department Historian Anne Michel,
15300 South River Road, Pemberville, Ohio 43450 by the May 1, 2010 deadline*

District # _____ Unit # _____ Unit Name _____ Membership Goal _____

Unit Chairman _____ Telephone (_____) _____ - _____

Address _____ City _____ St _____ Zip Code _____

I. UNIT CHARTER

Date of Unit Charter: _____

II. GOAL UNIT

Is your Unit a Goal Unit? Yes ___ No ___

III. VETERANS HISTORY PROJECT

Did your Unit participate in a Veterans History project? Yes ___ No ___ If yes, describe.

IV. CAVALCADE OF MEMORIES

Did your Unit support the National Cavalcade of Memories Museum project?
Yes ___ No ___ If yes, describe.

V. UNIT HISTORY

Did your Unit submit a Unit History Narrative for judging? Yes ___ No ___

VI. JUNIOR GROUP

Does your Unit have an organized Junior Group? Yes ___ No ___

Did your Unit Junior Group submit a Junior History for judging? Yes ___ No ___

(Continued on back)

VII. UNIT MEMORIES

Does your Unit maintain, display, and promote your Unit's History with the American Legion Family? Yes ____ No ____ If yes, describe the methods used:

VIII. PROMOTIONAL ACTIVITIES

List all activities your Unit did to promote the American Legion Auxiliary within the Community on the back of this report or on a separate sheet of paper.