



**AMERICAN LEGION AUXILIARY**  
Department of Ohio



**2011-12 Annual Unit Report – NATIONAL SECURITY**

*This report is MANDATORY for the Citation of Merit*

*Send completed report to Department National Security Chairman Mona Shipley,  
632 South Elizabeth Street, Lima, Ohio 45804 by the May 1, 2012 deadline*

District # \_\_\_\_\_ Unit # \_\_\_\_\_ Unit Name \_\_\_\_\_ Membership Goal \_\_\_\_\_

Unit Chairman \_\_\_\_\_ Telephone (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip Code \_\_\_\_\_

**A. Outside Programs to Support Military and Their Families**

Program Name – on a separate sheet please describe what was included in your program.	Yes	No	# of Volunteers	# of Veterans/ Military/ Families served	Total Hours	Money Spent	Donations
Yellow Ribbon Re-integration Program						\$	\$
Operation HomeFront						\$	\$
Family Readiness Groups						\$	\$
Family to Family Support						\$	\$
USO						\$	\$

**B. Participate with The American Legion in Military and Family Support Programs**

Program Name – on a separate sheet please describe what was included in your program.	Yes	No	# of Volunteers	# of Veterans/ Military/ Families served	Total Hours	Money Spent	Donations
Family Support Network – please list services to families. Use separate sheet if needed. _____ _____						\$ \$ \$	\$ \$ \$
Operation Comfort Warriors						\$	\$
Heroes to Hometown – please list services to families. Use separate sheet if needed. _____ _____						\$ \$ \$	\$ \$ \$
Blue Star Banner Program						\$	\$
Gold Star Banner Program						\$	\$
POW/MIA Initiatives – please describe activities/events. Use separate sheet if needed. _____ _____						\$ \$ \$	\$ \$ \$

(continued on back)

