



AMERICAN LEGION AUXILIARY
Department of Ohio, Inc.

2015-2016 DONATION DESIGNATION FORM

Dist #/Unit # _____/_____

*The following donations may be included in one (1) check. Please specify the amount credited to each program.
A copy of this form should be kept for your records. Your canceled check will be your receipt.*

AMERICANISM

\$ _____ Americanism/Government Test Trip (Department)
\$ _____ Spirit of Youth (National)

AUXILIARY EMERGENCY FUND

\$ _____ AEF – Financial Emergency Assistance for ALA Members

***BUCKEYE GIRLS STATE**

\$ _____ Buckeye Girls State Donation (for general operations NOT the Endowment Fund Scholarships)

CHAPLAIN

\$ _____ Chapel of Four Chaplains

CHILDREN AND YOUTH

\$ _____ Children and Youth Fund (Department)
\$ _____ The American Legion Child Welfare Foundation (National)

COMMUNITY SERVICE

\$ _____ Ohio Community Service Disaster Fund (Department)

***DEPARTMENT HEADQUARTERS**

\$ _____ Capital Improvement Fund (Department Headquarters Building)
\$ _____ National Candidates Fund (Department)

DEPARTMENT PRESIDENT'S SPECIAL PROJECT

\$ _____ Volunteers of America Homeless Veterans Project with Emphasis on Woman Veterans **

EDUCATION

\$ _____ Scholarships (Department)

NATIONAL HEADQUARTERS

\$ _____ ALA Foundation
\$ _____ National President's Special Project – AEF

NATIONAL SECURITY

\$ _____ U.S.O. **
\$ _____ Military Family Assistance Fund ** (Ohio Veterans Only)

PAST PRESIDENTS PARLEY

\$ _____ PPP Nurses Scholarship (Department)
\$ _____ Support for Women Veterans (Department) **

VETERANS AFFAIRS AND REHABILITATION ** (Poppy Funds May be used for those items listed below)

\$ _____ Chillicothe VA \$ _____ Cincinnati VA \$ _____ Cleveland VA
\$ _____ Dayton VA \$ _____ Ohio Veterans Home
VA Outpatient Clinics – \$ _____ Akron \$ _____ Columbus \$ _____ Parma
 \$ _____ Toledo \$ _____ Youngstown
\$ _____ Fisher Houses – Ohio \$ _____ Veterans Creative Arts Festival (Nat'l.)
\$ _____ Marie Moore Fund (Department-Donations for purchase of items for Veterans in VA Hospitals)

**** Indicates programs where Poppy Funds may be used**
Only VA Birthday Party contributions are to be sent directly to your District President

\$ _____ **TOTAL AMOUNT ENCLOSED** CHECK # _____ DATE _____/_____/_____

*Please enclose check made payable to **"American Legion Auxiliary Dept. of Ohio"** and send to:*

AMERICAN LEGION AUXILIARY, DEPARTMENT OF OHIO, PO BOX 2760, ZANESVILLE, OH 43702-2760