



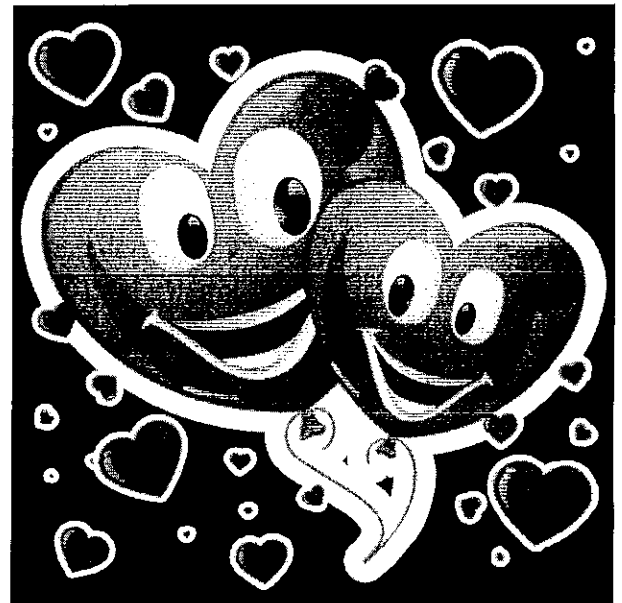
BULK MAILING - FEBRUARY 2021
(for March Activities)

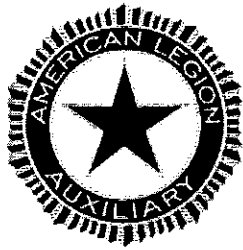
To: Unit Presidents
District Chairmen
Department Chairmen

Dept. Executive Committee
Hospital Representatives & Deputies
Past Department Presidents

Included in this mailing:

- President's Message – all members
- Americanism (pink)
- Children & Youth (buff)
- Junior Activities (yellow)
- Leadership (green)
- Legislative (pink)
- Membership (tan)
- National Candidates Fund (white)
- Past Presidents Parley (lilac)
- Poppy (cherry)
- **Poppy Shop Information (white)**
- Public Relations (yellow)
- Veterans Affairs & Rehabilitation (blue)
- **KIT OF REPORTS (WHITE ENVELOPE)**





Kristen Little
Department President
17324 Independence Ct.
Brook Park, OH 44142
KLL721@yahoo.com
216-265-9611 (home)
440-781-1327 (cell)



Greeting Auxiliary Members,

The ALA 731 is in its final stage as NASCAR refers to it. I know that many of us feel that our RACE this year has been red flagged, but I look at it as if we are under an extended caution. What is the difference many might ask? In NASCAR a red flag means all work must stop on and off the track for the team, a caution means you still work but at a slightly slower pace. Hopefully many of our members have been able to get the Covid vaccine and the State is starting to lift some of the restrictions, so I am hopeful to see some green flag racing soon. The Legion has set up a National Campaign of "Buddy Checks"; this is a great time for Auxiliary members to do the same with our members. A quick phone call to check on members and let them know we are still thinking of them during this challenging time can go a long way.

As of this mailing Poppy Shop and our Junior Conference are still happening. Please watch for updates on both events in case things have to change. Information for Department Convention will be coming out soon so keep your eyes open for it and check our website for information on all these upcoming events.

Included in this mailing is the "Kit of Reports", please read all the instruction on deadlines and who to send them to. Remember is your unit is submitting for a National Award the narrative must cover the 2019-2021 time frame. Department awards will be based on the 2020-2021 year. Please make sure your unit completes the impact report and sends it to your District President by the deadline. These numbers are used to compile the state report that goes to National. We need now more than ever to let Congress know what the organization is doing to help and support our Veterans.

Keep RACE(ing),

Kristen



Americanism

A few American Legion Family members got together on February 6th to create another Poppy Wreath for the Tomb of the Unknown Soldier. We did have enough "toothpicked" poppies to complete another wreath and we may have enough of the poppies to complete yet another wreath for 2022

Raffle Baskets to benefit the A&G Test Trip. Yes, the A&G Test Trip will happen! The students are going March 1-5, 2021. These raffle baskets really help with the cost of sending these students. You will be required to put your name on the tickets. Let's work together to exceed last year's total of \$2,341.00, but that can only happen with your help! The basket themes are as follows:

Baking/Cooking; Movie Night; Men's Basket; Caffeine/Chocolate; Valentine's; World Tour; Sewing Time; Spa; NASCAR; Ice Cream Sundae; Children's; Patriotic; Inspirational/Spiritual; Household Needs; Lottery/Gift Cards; Adult Beverages

Reports:

The Americanism Spirit Essay Plaque – Due **April 1st** to Mary Ann Dull. This goes to the Unit Americanism Chairman submitting the best narrative.

Norma Frazier Plaque – Due **April 1st** to Mary Ann Dull. Schools displaying the most outstanding Americanism program throughout the year.

Patricia Logan Plaque – Due **April 15th** to your District Chairman. Awarded to the UNIT that has the most outstanding Americanism Program.

Best All Around Americanism Program Certificates – Due **April 15th** to your District Chairman. Awarded to the Units that have promoted and carried out the best year-round Americanism Program.

The All American School Awards – Due **April 15th** to Mary Ann Dull. Please be sure to have the cover sheets completed and attached.

Mary Walker Plaque – Due **June 1st** to Department Headquarters. The Unit that contributes the most money per capita to the A&G Test Trip Fund.

If you have your reports ready by Mid-Winter Convention, please feel free to bring them with you and submit them to either me or Mary Ann.

Renee Kohl, 13 W. Prospect St. Hudson, OH 44236 330-802-2845 rckohl@aol.com

Mary Ann Dull, 407 Phillips Ave, Ashland, OH 44805 419-651-0156 alamadlady54@yahoo.com

Respectfully, Renee Kohl, ALA Dept. of Ohio, Americanism Chair, 2019-2021

♪♪ And I won't forget the men who died ♪♪

Children & Youth

Darlene Leiter, Chairman

Hey everyone! I hope you are all doing well and staying healthy. I am so **PROUD** of the work you are doing for all the children in spite of the pandemic. You are all **AWESOME**.

I hope you are all getting your notes together and getting information from your other Unit members, so you have everything together for your year-end reports. **PLEASE** be sure you attach the forms with your report to tell me which Award Department or National that you may be going for. You are **ALL** doing such a **GREAT** job that I do not want you to miss out.

Don't forget your donation to the American Legion Child Welfare. This is also a Very Important program. You did Awesome last year, and I know you can do it again.

GOD BLESS You ALL for all the work you do for our Children. Remember they are our **FUTURE**.

For GOD and COUNTRY,

Darlene Leiter
Children and Youth Chairman





February Bulk Mailing



JUNIOR ACTIVITIES

District Junior Activities Chairman

CHAIRPERSON

Carmella Fugate
550 Clark St
Milford, OH 45150
(513) 513-260-9516 (cell)
Email -carmella.fugate@yahoo.com

2nd MEMBER

Kathleen Richardson
9305 Flora Drive
Streetsboro, OH 44241-8306
(330) 842-7650 (cell)
Email -kats889@aol.com

3rd MEMBER

Michelle Zayakosky
7400 Johnnycake Ridge
Mentor, OH 44060-7518
(216) 337-3178 (cell)
Email -post214michellez@gmail.com

Junior Activities

3rd Chair-Michelle Zayakosky

Re: Craft books

Here's an Easter craft idea, fun party favors for each place setting...**Bunny Cups!** Fill with wrapped chocolates, M&M's, any small candy. Or skip the candy and fill with small toys, erasers, markers, crayons, pencils. You could even turn them into little planters! Fill your cup with soil, plant a seed inside and watch it grow! Another visit to the Dollartree...

**What you need:**

White Cup (Styrofoam or paper cups will work)
2 Googly Eyes
White and Pink Craft Foam or Card Stock
Black Gel Pen or Black Sharpie
Pink Sharpie
Scissors

Cut out the shapes for the bunny's ears and feet – two oval shapes for the feet and two long, pointy ear shapes for the ears. Finally, cut out a small pink oval for the nose.

Use a pink sharpie to color the ears and feet.

Attach the eyes, nose, ears and feet to the cup using a glue gun.

Use a black gel pen or sharpie to draw the face onto the cup.

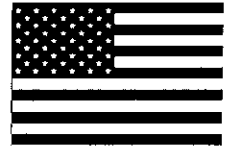
onelittleproject.com



IMPROVISE (use what is available)

ADAPT (adjust to new conditions)

OVERCOME (succeed)



2021 BULLETIN #6

LEADERSHIP

PAM BATES, DEPARTMENT CHAIRMAN

pamelabates9@gmail.com

937-974-2316

ARE YOU PLANNING AHEAD?

What does planning ahead mean: to make all arrangements or preparations that one will or might find necessary or useful in advance of something happening.

How about End of Year Reports...Reporting on your forms...Writing a narrative for that form...Award Criteria...and Elections. WOW....it's all around the corner. READ your specific Program Plan of Action.

END YEAR REPORTS & NARRATIVE STORY

- Review & read the OHIO Programs Action Plan (formerly Plan of Action) for your program to determine objectives to accomplish during the year. They were mailed to the Unit President to distribute to the Unit Chairman or you can find them online at www.alaohio.org or you can request an email copy from the Department Chairman. To locate this information go to the Programs Action Plan – What Can You Do? – Ideas for the member and the unit.
- It is IMPORTANT to read thoroughly and completely as each program has different criteria. Some require dollar values; number of volunteers; number of veterans served (be specific - “many” is not numerical); impact reports some require totally different information. One size does not fit all.
- Compile data, total numbers, activities from your members and treasurer and then determine where the information fits the Ohio Programs Action Plan objectives.
- If an activity crosses several Programs, decide to use the numbers on one or distribute them across the Programs that are involved.
- Write the narrative, and forward it by deadline to the individual who is to receive the report. This is listed in the Programs Action Plan.
- If we as department chairmen do not receive information from our units, we cannot report “What Ohio Does” for the programs. **WRITING YOUR UNIT NARRATIVE STORY**
- The word narrative often panics people. Don't let it! You are really writing a story about what your unit did or if it's a member specific award, what they did for the program.
- Think of a member you have not seen for a long time. Here's your chance to tell that member what has been happening in the unit for the year.
- Review and read the OHIO Programs Action Plan awards...there will be two types you can submit – National and Department. Each has different criteria. Some require impact reports in order to be considered. **READ CAREFULLY!**

- Where to start:

DISCLAIMER: I apologize for any misspellings; punctuation; grammar mistakes. Content is IMPORTANT. Page 1

o Plan ahead - check the Programs Action Plan and decide what the unit would like to accomplish and what goals the unit needs to accomplish to achieve any awards. Remember most units cannot do all the programs. Pick and choose what your unit does best.

- o Try and keep a journal of what your unit and members have done through the year. o Go to the Programs Action Plan – What Can You Do? – Ideas for the member and the unit.
- o When you find the “What Can You Do” section, you will see there are subtitles on what to accomplish...go to the ideas for members and unit under that subtitle. Then decide if the unit has accomplished any of those activities.
- o Once you have gone through all the subtitles and determine the activities the unit has accomplished start writing...who, what, when, where and how. Be very specific in your writing. Try to write in the 3rd person...not my or I, but the unit, chairman or member. If the award is member specific, you will have to mention the name. o Keep in mind that the Department Chairman, are looking for the criteria specific to their program. If in doubt what to write, contact the Department Chairman and ask for advice.
- o Trust me...you will not get it right on the first writing...it may take 3 or more times...start early...write then walk away...come back reread and rewrite...suggest you put a Revision on each copy just in case you removed something and now you want it back.

FILLING OUT YOUR REPORT FORM:

- Make sure you fill it out correctly...especially the top section.
 - o Know your Unit’s Official Name & Number
 - o Make sure you refer to the American Legion Auxiliary as UNIT ###
 - o Make sure you write in a Point of contact with phone number and email if possible
 - o Answer any or all questions in accordance with the forms directions
 - o Most Chairpersons want a little explanation when you answer “yes”. Just a sentence or two or refer to your narrative story note really helps

ELECTIONS:

- First and foremost, follow your Unit’s Constitution & Bylaws on Elections.
- If your situation is not in your Unit’s governing documents, check Department, National, and Robert’s Rules
- The National Judge Advocate advises against a person holding leadership positions simultaneously in both The American Legion and the American Legion Auxiliary at any level due to the potential for conflicting interests. There are several possible conflicts of interest that can arise when a post and a unit have a disagreement or a Legion department and Auxiliary department have a disagreement over an array of matters such as joint event contracts, office/building leases, and joint events and projects.
- It depends upon the offices. Let’s say that a member wants to be unit president and historian or chaplain. If the unit’s C&B does not prohibit it, then there is no problem since one is a corporate governance position and the other is a supportive position. If their bylaws state a member cannot run for or be elected to two offices simultaneously, then the unit could elect the member president and then in a separate vote confirm her as a special appointment to serve as historian.

CONFUSED...don’t be...Contact your Department/District Chairperson for any help or specifics.

Legislative

As the R.A.C.E. continues, we need to update our toolboxes. The two Ohio Senators remain the same, but your local legislators may have changed. Please update your lists. I will have a list of the Representatives at Mid-Winter and you can pick up a copy if you are attending.

The American Legion Legislative Agenda for the 117th Congress – Session 1 is now available on the Legion's website under **Legislative** or on our site, also under **Legislative**.

Thank you to all the members who have been sending me copies of their correspondence with their legislators. Whether you are using phone, text, email, or a handwritten letter, your input on legislation can make a difference.

On January 5, 2021, H.R.7105 – The Johnny Isakson and David P. Roe, M.D. Veterans Health Care and Benefits Improvement Act of 2020 was signed into law. The following information was sited from The American Legion website (www.legion.org) and included in the Central Division Newsletter by Legislative member Betty Moore.

This Bill in part does the following:

“Expands access to education and training services for transitioning servicemembers.

Continues to ensure servicemembers and veterans impacted by COVID 19 are taken care of

Supports Key programs by expanding the STEM scholarship program and increasing funding for the VET Tec Pilot program

Requires VA to reinstate public-facing Disability Benefits Questionnaires on their website.

Improves healthcare services and benefits for women veterans at VA by ensuring that the VA healthcare system is more prepared for their need and helps instill a culture that is more welcoming, inclusive, and safe.

Modernizes the Service-Disabled Veteran Insurance Program to meet the needs of today's economy.

Supports services for veterans who are homeless by increasing funding for transitional housing providers and improving case management procedures.

Streamlines benefits for survivors of military sexual trauma.

This bill incorporates education reforms, changes for Vietnam Era dates, and the Deborah Sampson Act (S.514 and H.R.3224). It also addresses the Impact Covic-19 is having on our veterans.

Stay safe,

Diann Long
17402 Independence Court
Brook Park, Ohio 44142
ken17402@yahoo.com
216-267-4711



Membership



It is so important we keep working on membership at every chance we get. Check out the plan of action for some ideas.

Please consider doing the "One week of Caring and Sharing". My own unit has done a form of this for years. We split up the names of any members who have not paid and make sure someone talks to these members. We have taken it one step further with the COVID-19 Pandemic year. We try to make sure someone contacts each of our members at least once a month. So many people have had to reduce the time they spend with extended family and friends. Let us be the organization who proves we care for all our members every month; not just when we have a fund raiser or event, but all the time.

Contact those members who haven't renewed, offer to stop by and pick up their dues.

Remember these incentives:

\$50 – To the Unit with highest increase of Junior members from Aug 1, 2020 to May 1, 2021 (to be given at Department Convention).

AND For all **GOAL** Units by June 1, 2021, a drawing will be held at Department Convention for **THREE AWARDS**, 1st for \$100, 2nd 70.00 & 3rd for \$50.00.

PERSONAL INCENTIVE

All Department of Ohio Members who have recruited a **NEW** member before May 1st, 2021 will have their name entered in a drawing . There will be SEVEN names drawn each of those members will win \$20.

2021
ONE WEEK OF CARING & SHARING
April 1-7th, 2021

Purpose: Unit members & leaders organize during this one designated week to contact and check in with EVERY possible unit member, past and present.

One entry per unit (no matter how many rejoins you end up with)

This certified form must be received at ALA Department Headquarters **no later than April 9th**.

CERTIFICATION FORM

Please type or print legibly

Unit Name: _____ Unit # _____ Dept: _____

Unit representative's name (who is filling out form): _____ Title: _____

Email: _____ Phone: _____

To qualify for entry into the drawing for a \$25 Emblem Sales Gift Certificate the unit must have secured at least one REJOINED member from their unit during this week. That member must not have paid dues since 2018 & **must be entered as a rejoin into ALAMIS between April 1 - April 24th** using her former member ID

Name of rejoined member: _____ Member ID: _____

Certified by Department Secretary:

DATE _____

Dept. Secretary Kelly Gibson

Printed name & signature: _____ Dept: _____

Check here that the unit included their Tax ID #

***I certify that the rejoined member last paid in 2018 or prior & was entered in ALAMIS between 4/1-4/24/21. I've provided or verified her member ID & that**

Departments

Please either scan & email to:

heather@alaohio.org

(Subject line: Week of Caring & Sharing)

Or

Please fill out the following information:

Number of unit members participating in making calls or visits during this week: _____

Number of unit members who were called or visited: _____

Number of members that renewed their membership due to unit contact: _____

Number of members that rejoined due to unit contact: _____

OPTIONAL: Share a specific story where you felt this week made an impact on a member:



NATIONAL CANDIDATES FUND RAFFLE

We are asking still all units to donate gift cards in denominations of \$15-\$25 for the National Campaign Committee's raffle to raise funds.

Be advised that the units are not required to do this.

Our committee still has all the gift cards that were donated from last year.

We still need more to make for a nice raffle at Department Convention. I personally will not be able to attend Mid-Winter as I am getting my 2nd dose of the COVID-19 vaccine a few days before so feel free to mail them or bring to Department Convention. If you are going to bring them to the state convention, please e-mail me or one of the committee members so we can get an idea as to how many we will have to raffle off.

National Candidates Chairperson – Tammy Dillon 734 N. Pierce Ave. Lancaster, OH. 43130-2415 Home # 740 653 8056 Cell # 740 974 7642 Email - tomtammy49@columbus.rr.com

2nd Chairperson – Nancy Longbrake 169 New London Ave. New London, OH. 44851 Cell # 567 215 7386 Email - nllongbrake@neo.rr.com

3rd Chairperson – Ruth Schutz 671 High St. Van Wert, OH. 45891-2221 Home # 419 605 8596 Email - rschutz68@gmail.com

PAST PRESIDENTS PARLEY
SHIRLEY MAURER, CHAIRMAN
pmaurer@nktelco.net

I just want to remind all of you that we are getting close to deadlines for end of the year reports, scholarships and awards. Please adhere to the dates.

Following are the deadline dates that I need items returned to me.

Nurses Scholarships – May 15, 2021 – When you send it to me, please look the application over and make sure everything is there that is needed along with signatures. The applicant must have:

- ✓ a copy of the veteran's DD-214 or the equivalent showing active service time.
- ✓ Must be a resident of Ohio
- ✓ Must be sponsored by an American Legion Auxiliary Unit
- ✓ May be used at a nursing school of choice with proof of acceptance
- ✓ Three letters of recommendation from:
 - ✓ A member of the clergy
 - ✓ Representative of the community
 - ✓ The applicant stating his/her qualifications for the nursing profession
 - ✓ Applicant must sign and date the application.

The completed application must be returned to the American Legion Auxiliary Unit by **May 1, 2021** and forwarded to me by **May 15, 2021**, with all supporting documents.

Unit Member of the Year Award – Postmarked by April 15, 2021 – open to senior members who are not in an elected or appointed leadership role higher than unit president. Must submit a narrative of 1,000 words or less, along with nominee's name and address and 5-8 pictures in jpeg form.

Salute to Servicewomen Award – April 15, 2021 - You can nominate one from each of the following branches of service:

U.S. Army, Navy, Marine Corps, Air Force, Coast Guard including the National Guard and Reserve components of each branch and the US Space Force. Criteria is that the woman is currently serving in the U.S. Armed Forces, writes a narrative or YouTube video demonstrating exemplary service both in and out of uniform, must be willing to be a guest of the Auxiliary to speak to the general assembly and if a National winner be willing to attend the National Convention.

Don't forget your **Unit Year End Report** is due to me by **April 15, 2021**.

PLEASE REMEMBER TO WRITE CLEARLY AND LEGIBLY.

If I can't make it out, it is hard for me to know who it is from and who to give an award to.

If you have questions, please do not hesitate to contact me
at either 419-733-3397 or pmaurer@nktelco.net

POPPY
KAREN PEEL – CHAIRMAN

Don't forget the Poppy Corsage / Usage Contest at Mid-Winter Conference!

Poppy Shop is on the calendar! Sunday April 18th at the Ohio Veterans Home. We hope that we will be able to hold our event this year. The form for Little Miss or Master Poppy is included with this bulk mailing. Your forms can be emailed, snail mailed (if you are going to mail them, mail them early!), or you can bring them to me at Mid-Winter.

I hope that all the juniors and local school children are working on their Poppy Posters. They are due to me by April 15th. Make sure that you read the instructions carefully. I don't want anyone to be disqualified for not following the instructions. Make sure that your Unit and District number are on the back of the poster.

I know that it is hard to think about Poppy Days with everything that is happening with this Corvid-19 virus. However – there are still some options for a successful Poppy Days if you are unable to distribute poppies in your communities:

- Poppy letter to all your Auxiliary members and local businesses.
- Dinners (when we can all gather again) or dinners to go.
- Drive Thru Poppy Drive at your Post home.
- Poppy Day in November around Veterans Day.

You are all very creative! Think out of the box! I have seen the work that the Units have done. I know that we can still have a successful Poppy Day!

Thank you for all that you do for our veterans. They deserve the very best that we can give them. Now more than ever, we need to continue to work the Poppy program. Keep up the great job!

Love,



Karen

POPPY SHOP OPEN HOUSE



Sunday April 18, 2021

Ohio Veterans' Home
Sandusky, Ohio

- ▶ Poppy Shop Open House is open to all American Legion Family Members, including American Legion, American Legion Auxiliary, Sons of the American Legion, 40 et 8, 8 et 40 and their families and friends.
- ▶ Participants in the Little Miss (ages 2-6), Junior Miss (ages 7-17) and Master Poppy (ages 2-17) will parade in their *poppy attire* as part of the program.
- ▶ All participants in the *poppy parade* must complete an application. These applications must be returned on or before March 15, 2021 to:

Karen Peel, 2216 25th St SW, Akron, OH 44314-2202

Hotel accommodations may be at:

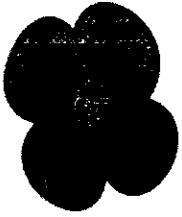
Sleep Inn
5509 Milan Rd
Sandusky, Ohio 44870
419-625-6989

Use Group Name: American Legion Auxiliary
Group rate: \$79.99 plus tax and fees

POPPY SHOP OPEN HOUSE APPLICATION

For

Miss Poppy, Master Poppy, Mr. & Mrs. Poppy



Lest We Forget.

POPPY SHOP OPEN HOUSE
SUNDAY April 18, 2021
Ohio Veterans' Home – Sandusky

This application must be completed and mailed to:

Karen Peel
2216 25th St SW
Akron, OH 44314-2202

DEADLINE
March 15, 2021

► Please remember that Poppy attire is to be worn by all participants ◀

Name: _____

Sponsoring Unit, Post, SAL: _____

School, grade & age: _____

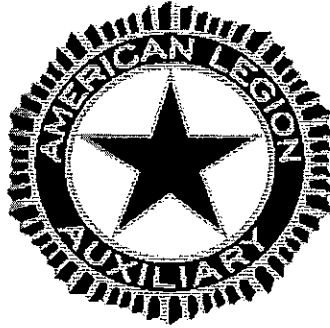
(if participant is a child)

Parents: _____

(if participant is a child)

Hobbies, extracurricular activities, sports or accomplishments:

Thank you for taking the time to complete this application. It helps in preparation of the program and ensures that each participant receives proper recognition.



“OHIO ADVOCATE NEWS”

Have you “liked” and are “following” Facebook page “Ohio Second Vice President Am Legion Auxiliary”. I try to keep everyone informed on events, webinar information, news, articles from The American Legion, Auxiliary, SAL, and Riders. This information will be from National, Departments, Districts, Posts/Units.

With Mid-Winter Conference around the corner and End-of-the-year reports due by April 15 – Why not bring your reports, Department Award narratives, Press Books, and etc., to the conference. By bringing them to Mid-Winter they won’t be late because of the Postal service and no postage needed.

Read your Plan of Action for the award / Press book criteria. Remember some awards are based on 2019-2021. If you need any assistance, please don’t hesitate to call.

Good Luck. I look forward to reading all your reports.

Cindy Masowick

Public Relations Chairman



VETERANS AFFAIRS AND REHABILITATION

Wow, time is flying! We hope you have been keeping track of your hours. The glass is still half full. We see all the wonderful things that you do to assist veterans and their families (through Facebook), so keep up the good work everyone!!! Everything you do makes a difference.

Just as a reminder:

BLANCHE KLEIN PLAQUE: Best all around **VA & R Program** by a Unit based on the Annual Report/Narrative. Due to Department Chairman.

SUE FRIEDRICH PLAQUE: Best overall **VA & R Program** by a Unit based on the Narrative. Due to Department Chairman.

MARIE MOORE FUND PLAQUE: Awarded to the Unit donating the most money per capita to the Marie Moore Fund. Donations must be received at ALA Department Headquarters by June 1, 2021.

OLIVE RUFFNER PLAQUE: Awarded to the most outstanding VA Volunteer by the Hospital Director. Nominations may be submitted by a Unit or VA Voluntary Services. Entries must be submitted to Department Hospital Director, Linda Close.

VOLUNTEEN AWARD: Awarded to the volunteer with the most hours served in a VA Medical Center. Entries must be submitted to Department Hospital Director, Linda Close.

SERVICE TO OUR VETERANS HOURS: Hours must be submitted to Co-Chairman, Judy Leddy.

Please see the POA for dates and details in regard to reporting.

We are looking forward to seeing your accomplishments.

Susan Schofield Fratino
7565 Lambton Ct.
Mentor, OH 44060
Sscoey17@gmail.com

Judy Leddy
85 Marilla Rd.
Columbus, OH 43207
jal85@aol.com

(440) 759-4961

(614) 783-9063

KIT OF REPORTS

THE FOLLOWING ATTACHED DOCUMENTS ARE YOUR REPORT FORMS FOR THE 2020-2021 ANNUAL YEAR

**Tear Off Each Report Form, Fill Out, and Send to your
Department Chairman or District Chairman along with your
Program Narrative**

CITATION OF MERIT



REQUIREMENT

- All of the report forms are included in this packet. You will also see this STAMP on the report forms that are required for the Citation of Merit.
- You can find all of the Plans of Action and the Report Forms on the Department Website: www.alaohio.com
- **Don't forget to complete your Unit Impact Numbers Report! It is now a requirement for the Citation of Merit.**

UNIT REPORTING RECOMMENDATIONS

1. The report form shall be attached to all narratives. This form states the award applying for, contact information, and program name.
2. Copy and attach the National Report and Award Cover sheet to each report and complete the Member Award or Unit Award section. Department chairman will complete the Department Award section.
3. Please include in your narrative the total number of volunteers, total number of Junior volunteers, total number of volunteer hours, total \$ spent, total number of veterans served, and total number of people affected.
 - a) A Unit may make a donation with no volunteer hours. There would only be a dollar amount in the total dollars spent.
 - b) The VA&R report should include the assessment from dues of \$0.75 x each paid member and included in the total dollars spent. Also include this information in the narrative.
 - c) The Children & Youth report should include the assessment from dues of \$0.25 x each paid member and included in the total dollars spent. Also include this information in the narrative.

YEAR END REPORTING

1. All reports and applications shall be submitted by due dates as listed by Department Chairmen or National Chairmen in the Plan of Action.
2. An Annual Impact report shall be completed by the Unit and submitted to the District President. District President shall submit a District Annual Impact Report to the Department Headquarters.
3. Reports must be submitted as specified below in order for the Unit to receive the coveted "CITATION OF MERIT"
4. All required reports must be made on OFFICIAL REPORT FORMS. A report form with nothing reported does not count as a report received.
5. District Chairman shall track all Unit Reports received on a District worksheet and submit to Department Chairman by the date specified in the Plan of Action.

CITATION OF MERIT REQUIREMENTS
Resolution Adopted Department Convention, 2014.

<u>PROGRAM</u>	<u>REPORTS REQ'D</u>	<u>MAIL TO</u>	<u>DEADLINE</u>
Americanism	1	District Chairman	May 1
Bonding Fee *	0	Department Headquarters	May 1
Chaplain	1	Department Chaplain	May 1
Children & Youth***	1	District Chairman	Deadline Date
Community Service	1	District Chairman	May 1
History	1	Department Chairman	May 1
Legislative	1	Department Chairman	May 1
Membership **	0	Dept. Headquarters	GOAL by last day of business in May
National Security	1	Department Chairman	May 1
Poppy ***	1	Department Chairman	Deadline Date
Plus Small Poppy Purchase ****		Department Headquarters	Dec 31
Veterans Affairs & Rehab	1	District Chairman	May 1
Unit Year-End Impact #s Report l		District President	May 1

* The Unit Bonding Fee must be paid and received in Department Headquarters on or before May 1 of the year for which it is due.

** Membership Goal is set by Department and listed in the Buckeye Messenger. Transmittal forms accompanied with properly marked unit rosters must be received in Department Headquarters on or before 10:00 AM the last day of business in May of each year; all transmittals must be accompanied by a check in the correct amount. Do not include any other moneys in your check for Membership dues.

*** Deadline date for Report is determined by the Department Chairman and is stated on the annual report form.

**** Purchase of small veteran-made Poppies for distribution in your community must be made through Department Headquarters. Small poppies must be ordered and paid for by December 31 of each year to be considered for a Citation of Merit. Send Poppy Order Form with check in correct amount payable to:

**AMERICAN LEGION AUXILIARY
DEPARTMENT OF OHIO, INC.
P O BOX 2760
ZANESVILLE, OH 43702-2760**

All required reports must be made on OFFICIAL REPORT FORMS. A report form with nothing reported does not count as a report received.

**Reports can be Emailed, Faxed,
or US Postal Service. The most
important thing is that Units report
their good works!
Please Send in your Reports**

RE: 2019-2021 Update on word count for End Of Year Reports

This message is to address a question that has been asked recently of the national program chairs. Some of you were copied just as an FYI since this is about reporting.

Thank you to all who have been collecting program data. These reports from across the country are so often the source of the inspiring stories we hear at national convention. It is a great way to share good ideas and celebrate our success.

In response to a few questions about word count for department annual program reports to the national organization, the *most general* answer is that department program reports should not be more than 1,000 words *per year*.

If a department has already submitted a 2019-2020 report, the 2020-2021 department program chair should simply attach the first report to the 2020-2021 report, and submit it following the guidelines outlined on the award cover sheet, which is attached for your convenience. If no program report was filed for 2019-2020, the department program representative will submit a single 2019-2021 committee report of less than 2,000 words.

In summary, each department program owes ONE end-of-year report for the 2019-2021 term to the respective national program chairman. Total word count should not exceed 2,000.

While these guidelines are important, we know that the responsibility of reporting can be a challenging one all along the chain, so please be sure to express your appreciation for *any* effort and be flexible where possible.

Thank you for all you do to move our mission forward.

Gratefully, Colette

Colette S. Fike

Director of Programs and Events, National Headquarters of the American Legion Auxiliary

Why is the National Impact Report MANDATORY

ARTICLE SUBMITTED BY
Past Department President DENISE CONRAD

On several occasions I have been asked, “Why is the **MANDATORY National Impact Report** so important? Some think it is just another form to fill out. Although we have many programs in the American Legion Auxiliary, there are certain programs that are important because they are tied directly to our not-for-profit status granted and governed by the IRS. It is our mission to help our Veterans, our Military and their families... with youth and community also important to our mission, that gives us our not-for-profit qualification.

Every year The American Legion Family makes what is called a “Walk on the Hill” in Washington D.C. The Conference is designed to call attention to the support our organizations give our Veterans, Military and their families. It is tough to argue that the government is doing enough when we can show that the American Legion Family alone is donating \$1.1 BILLION in services for our Veterans Military and their families. These numbers would be so much greater if everyone completed the National Impact Report. Armed with these numbers the American Legion Family meets with our own Senators and Representatives on an individual basis to discuss the legislation pending for our Veterans and Military which now includes caregiving.

Caregiving for our Veterans and Military, suicide, PTSD, and TBI are the fastest growing concerns for our Veterans and Military. Our fight is to provide the best benefits, healthcare and income for those who are willing to give their life for us. We owe them the very best technology the U. S. has to offer. Cutting benefits for our Veterans and Military every time there is a budget issue is unacceptable.

If we cannot show on paper how much the government fails to do for our Veterans and Military, then we fail those who defend us. Especially now when there is no draft, these young men and women CHOOSE to defend all of us, up to, and including the ultimate sacrifice. Their families serve with them by supporting their decision and making it possible for them to serve.

Our Veterans and Military and their families didn't say, “No, I don't have time for this”. We know that our American Legion Auxiliary Units do the work, they just don't report it. It is the **only** required form and it serves such a vital purpose.

So now....Can you say you are too busy to fill out the National Impact Report and send it to your District President? **Deadline to your District President is May 1, 2021. Let's be 100% reporting!**



**American Legion Auxiliary
National Report and Award Cover Sheet**

Please note, your report will also be viewed as an award entry.

Complete the following if you are applying for a member award. Be sure to give the complete name of the member. The award certificate will be prepared using the information you include below.

Unit #: _____ Full official unit name: _____

Name of state where you are a member: _____

Member Name: _____ ALA member ID#: _____

Nominating Member (if different from above): _____

Nominator's Phone number: (____) _____

Nominator's Email address: _____

National committee sponsoring award: _____

Type of Award: Department Unit Member

Name of the award you are applying for: _____

For a unit award or to submit a year-end unit narrative report, please complete this section.
Be sure to give the complete name of your unit. The award certificate will be prepared using the information you include below.

Unit #: _____ Full official unit name: _____

Name of department: _____

Unit president/chairman (circle one) name: _____

Above listed person's ALA member ID#: _____ Phone number: (____) _____

Email address: _____

For a department award or to submit a year-end department narrative report, please complete this section:

Name of department: _____

Name of department chairman: _____

Chairman's phone number: (____) _____ ALA member ID#: _____

Chairman's email address: _____

Please see your committee's Annual Supplement to the Programs Action Plan to determine where to send this form.

American Legion Auxiliary
YEAR-END IMPACT REPORT FORMS

Why report these numbers?

Every hour, every dollar ALA members invest in our mission of helping veterans adds up. It not only gives each member a sense of pride, but it allows us to demonstrate our effectiveness to the world. Each small sum of numbers gets added into the collective numbers that are called Impact Numbers. These numbers proclaim our impact and make membership in the ALA meaningful.

These numbers are also reported to The American Legion, which includes them in its annual report to Congress. To make this process easier for you, it has been simplified and the form has been condensed to essential information. If you aren't sure, even giving an estimate is better than not reporting at all.

How to complete the Impact Report Form

1. **Each ALA member** should fill out the Member Form and give it to the unit president. This probably happens in April, but check with your unit.
2. The unit president (or designee) compiles all of the member data on the Unit Form and adds any additional data not reported individually by unit members. This form then gets forwarded to either the district/county (if applicable) or department, which compiles all the records.
3. It is more important that you report information in one section of the form only rather than worry if you have selected the right category. For example, if you provide a service for children, it should go in either Service for Military Families (for example, camps for military children only) or Service for Children & Youth (Legion Family camps for all children) but not in both places.
4. Please round to whole dollar values (for example, \$149.50 should be \$150).

Report Simplifications

1. All service for all military whether active duty, retired, or reserve component is now combined in one section.
2. Each section has better defined examples of the service that should be reported.
3. **For Units, Districts/Counties, and Departments:**
“Line numbers” and “Obtain Total From” columns have been added to help in transferring data from form to form. For example, units can find the number of Volunteer Hours for Military Families on Line 5 of the Member Form.

A downloadable fillable monthly tracking worksheet and annual report form is available under the Members Only, Annual Report Forms section on the national website:
www.ALAforVeterans.org

Thank you for taking the time to REPORT your VALUABLE SERVICE and helping us TELL OTHERS about our INCREDIBLE IMPACT!

END OF YEAR IMPACT REPORTING

FAQs

- Question: Where do I report my service for a National Guard "Welcome Home" activity?
Answer: *Service for ALL members of the military, whether they are retired, active-duty or in the reserve component such as the National Guard is now reported in "Section 1: My Service for Veterans, Active-Duty, and Reserve Military."*
- Question: Do I report my VAVS (Veterans Administration Voluntary Services) on the Impact Form since I already sign in at the VA when I volunteer?
Answer: No, the ALA receives those hours from the VA on a yearly basis.
- Question: Does time shopping for care packages for deployed military count as service?
Answer: *Yes, shopping for care packages not only counts as service hours under Section 1, but also mileage associated with shopping for care packages may be reported under the new section "Section 5: Mileage."*
- Question: So.... does driving my daughter to Junior Meetings count as service?
Answer: *Sorry, that falls within your responsibility as a parent. You get kudos for being a great ALA parent though!*
- Question: My unit volunteered at a summer camp for military kids. Where should I report this service?
Answer: *You may report service for summer camps open only to military kids under "Section 2: My ALA Service for Military Families." If the camp is open to ALL children, then your service would be reported under "Section 3: My ALA Service for Youth." But don't worry if you don't remember. Just report it somewhere.... once!*
- Question: My neighbor is deployed, so I help her husband by babysitting their children once a week. Does this count?
Answer: *Absolutely! Report this under "Section 3: My ALA Service for Military Families."*
- Question: What if I don't know exactly where on the form to report my service?
Answer: *You can always report it under "Section 4: My Service Representing the ALA in My Community."*
- Question: Can I count hours spent taking care of a veteran who lives with me but is not a blood relative?
Answer: *As long as you are not receiving compensation in return for your role as a caregiver (such as when you care for your spouse), you may report it under "Section 1: My ALA Service for Veterans, Active-Duty and Reserve Military."*
- Question: Can I count hours spent preparing meals for Legion meetings and administrative support for TAL commanders as hours spent in Service to Veterans?
Answer: *Those hours count but should be reported under "Section 4: My Service Representing the ALA in My Community." Some of our members aptly describe those activities as family chores.*

THANK YOU FOR SERVING **AND** REPORTING!

Turn in to Unit President by April 15, 2021.

American Legion Auxiliary

MEMBER Year-End Impact Numbers Report

I am a member of Unit # _____ Unit Name _____

Department _____

My name _____

Here is what I did in the past 12 months since May 1.

- 1. My ALA Service for Veterans/Active-Duty/Reserve Military** (Examples: hours shopping for and preparing care packages for deployed troops, helping wounded warriors and elderly veterans at home, providing transportation, military send-off and welcome-home events, parades, projects for homeless veterans, activities related to distributing poppies, recording veteran histories, raising money for the Veterans Creative Arts Festival, fundraising events that benefit veterans (such as Walk, Run & Roll), assisting with veterans hiring fairs, advocating for The American Legion legislative agenda that supports veterans and the military.)

Line 1 Hours I volunteered: _____

Line 2 Dollars I personally spent/donated: \$ _____

Line 3 Number of veterans/military I assisted: _____

Line 4 Number of "Veterans in Community Schools" presentations I facilitated: _____

- 2. My ALA Service for Military Families:** (Examples: programs for military and veterans' children, helping Family Support Groups, supporting adopt-a-military-family projects, military spouse hiring fairs, organizing and delivering hero packs, providing childcare for military activities, distributing Blue Star Banners, providing G.I. Josh dogs)

Line 5 Hours I volunteered: _____

Line 6 Dollars I personally spent/donated: \$ _____

Line 7 Number of military families I served: _____

- 3. My ALA Service for Youth** (Examples: Jr. Activities, classroom and patriotic activities for children, camps open to all children, raising funds for or promoting Legion Family activities like Girls State)

Line 8 Hours I volunteered for ALA Girls State: _____

Line 9 Hours I volunteered for all other Legion Family youth activities: _____

Line 10 Dollars I personally spent on goods for youth activities (parties, backpacks): \$ _____

Line 11 Direct cash aid to help a needy child: \$ _____

Line 12 Number of children/youth served: _____

Line 13 Dollars donated to all other child service charities (ex: Make a Wish, St. Jude's): \$ _____

- 4. My Service Representing the ALA in My Community** (Examples: blood drives, walks/runs, food pantries)

Line 14 Total number of hours for any service not included in Sections 1 through 3: _____

Line 15 Total dollars spent for any service not included in Sections 1 through 3: \$ _____

When completed, send to: _____ by _____ / _____ / _____

(Get name and date from unit)

**CONGRATULATIONS--YOU DID IT! THANK YOU FOR ALL YOU DO
AND FOR REPORTING YOUR SERVICE!**

MANDATORY FOR ALL UNITS

Send to your DISTRICT PRESIDENT by May 1, 2021,

American Legion Auxiliary

UNIT Year-End Impact Numbers Report

Unit # _____ Unit Name _____

Department _____ Unit President _____

Your Name (if other than president) _____

Your Email _____

Number of Member Impact Reports _____

Here is what our unit did in the last 12 months.

1. Our ALA Service for Veterans/Active-Duty/Reserve Military

	Service for Veterans/Military	Obtain Total From	Member \oplus	Unit \oplus	Total
Line 1	Total hours members volunteered	<i>Member Form Line 1</i>		N/A	
Line 2	Total dollars spent	<i>Member Form Line 2</i>	\$	\$	\$
Line 3	Total number of veterans/military assisted	<i>Member Form Line 3</i>			
Line 4	Total number of "Veterans in Community Schools" presentations facilitated	<i>Member Form Line 4</i>			
Line 5	Value of in-kind donations received*	<i>Unit Records</i>	N/A	\$	\$
Line 6	Number of poppies or poppy items distributed	<i>Unit Records</i>	N/A		
Line 7	Dollars raised from poppies	<i>Unit Records</i>	N/A	\$	\$

*Estimated cash value of non-cash donations from **NON-MEMBERS** of goods (like paper goods, clothing) or services (like pro-bono CPA services from a local firm)

2. Our ALA Service for Military Families

	Service for Military Families	Obtain Total From	Member \oplus	Unit \oplus	Total
Line 8	Total hours members volunteered	<i>Member Form Line 5</i>		N/A	
Line 9	Total dollars spent	<i>Member Form Line 6</i>	\$	\$	\$
Line 10	Number of military families served	<i>Member Form Line 7</i>			

3. Our ALA Service for Youth

	Service for Children & Youth	Obtain Total From	Member	Unit	Total
Line 11	Total hours for ALA Girls State	Member Form Line 8		N/A	
Line 12	Dollars spent for ALA Girls State	Unit Records	N/A	\$	\$
Line 13	Total hours for other Legion Family youth activities	Member Form Line 9		N/A	
Line 14	Dollars spent on goods for youth activities	Member Form Line 10	\$	\$	\$
Line 15	Dollar amount of direct cash aid to help a needy child	Member Form Line 11	\$	\$	\$
Line 16	All other UNIT expenses (parties, dinners, paper goods, trophies)	Unit Records	N/A	\$	\$
Line 17	Total number of children/youth served	Member Form Line 12			
Line 18	Donations to all other child service charities	Member Form Line 13	\$	\$	\$

4. Our Service Representing the ALA in Our Community

	For any service not included in Sections 1-3	Obtain Total From	Member	Unit	Total
Line 19	Total number of hours	Member Form Line 14		N/A	
Line 20	Total dollars spent	Member Form Line 15	\$	\$	\$

5. Scholarships Presented/Awarded by Our Unit

	Scholarships	Obtain from	Total
Line 21	Number of unit scholarships presented/awarded	Unit Records	
Line 22	Total dollar amount of unit scholarships	Unit Records	\$
Line 23	Total dollar amount donated to department scholarships	Unit Records	\$

When completed, send to: _____ by _____ / _____ / _____
 (Get name and date from district or county, if applicable, or department)

CONGRATULATIONS---YOU DID IT! THANK YOU FOR ALL YOU DO AND FOR REPORTING YOUR UNIT'S IMPACT!

MANDATORY FOR EACH DISTRICT

Send to Department Sec/Ex. Director by May 15, 2021.

American Legion Auxiliary

**DISTRICT/COUNTY/COUNCIL
Year-End Impact Numbers Report**

District/County _____ Department _____

Number Units in District/County _____ Number of Units Reporting _____

Total Number of Members Reporting _____

Your name _____ Email _____

Here is what our units did in the past 12 months since **May 1**.

1. Our ALA Service for Veterans/Active-Duty/Reserve Military

	Service for Veterans/Military	Obtain Total From	Total
Line 1	Total hours members volunteered	<i>Unit Form Line 1</i>	
Line 2	Total dollars spent	<i>Unit Form Line 2</i>	\$
Line 3	Total number of veterans/military assisted	<i>Unit Form Line 3</i>	
Line 4	Total number of "Veterans in Community Schools" presentations facilitated	<i>Unit Form Line 4</i>	
Line 5	Value of in-kind donations received*	<i>Unit Form Line 5</i>	\$
Line 6	Total number of poppies or poppy items distributed	<i>Unit Form Line 6</i>	
Line 7	Total dollars raised from poppies	<i>Unit Form Line 7</i>	\$

*Estimated cash value of non-cash donations from **NON-MEMBERS** of goods (like paper goods, clothing) or services (like pro-bono CPA services from a local firm)

2. Our ALA Service for Military Families

	Service for Military Families	Obtain Total From	Total
Line 8	Total hours members volunteered	<i>Unit Form Line 8</i>	
Line 9	Total dollars spent	<i>Unit Form Line 9</i>	\$
Line 10	Total number of military families served	<i>Unit Form Line 10</i>	

3. Our ALA Service for Youth

	Service for Children & Youth	Obtain Total From	Total
Line 11	Total hours for ALA Girls State	<i>Unit Form Line 11</i>	
Line 12	Total dollars spent for ALA Girls State	<i>Unit Form Line 12</i>	\$
Line 13	Total hours for other Legion Family youth activities	<i>Unit Form Line 13</i>	
Line 14	Total dollars spent on goods for youth activities	<i>Unit Form Line 14</i>	\$
Line 15	Total dollar amount of direct aid to help a needy child	<i>Unit Form Line 15</i>	\$
Line 16	Total other UNIT expenses (parties, dinners, paper goods, trophies)	<i>Unit Form Line 16</i>	\$
Line 17	Total number of children/youth served	<i>Unit Form Line 17</i>	
Line 18	Total dollars to other child service charities	<i>Unit Form Line 18</i>	\$

4. Our Service Representing the ALA in Our Communities

	For any service not included in Sections 1-3	Obtain Total From	Total
Line 19	Total number of hours	<i>Unit Form Line 19</i>	
Line 20	Total dollars spent	<i>Unit Form Line 20</i>	\$

5. Scholarships our Units & District/County Presented/Awarded

	Scholarships	Obtain Total From	Units	District or County	Total
Line 21	Total number of scholarships presented or awarded	<i>Unit Form Line 21</i>			
Line 22	Total dollar amount of scholarships	<i>Unit Form Line 22</i>	\$	\$	\$
Line 23	Total dollar amount donated to department scholarships	<i>Unit Form Line 23</i>	\$	\$	\$

When completed, send to: _____ **by** ____ / ____ / ____
 (Get name and date from district or county, if applicable, or department)

CONGRATULATIONS---YOU DID IT! THANK YOU FOR ALL YOU DO AND FOR REPORTING YOUR DISTRICT/COUNTY/COUNCIL'S IMPACT!



Ohio Unit Plan of Action



AMERICANISM

CHAIRMAN

Renee Kohl 13 W. Prospect St.
Hudson, Ohio 44236
(330) 802-2845 (cell)
Email – rckohl@aol.com

VICE CHAIRMAN

Mary Ann Dull 407 Phillips Ave.
Ashland, Ohio 44805
(419) 651-0156 (cell)
Email – alamadlady54@yahoo.com

CITATION OF MERIT



REQUIREMENT

REPORT DUE TO DISTRICT

April 15, 2021 to

CHAIRMAN BY:

DISTRICT CHAIRMAN

ESSAY CONTEST

April 1, 2021

**DISTRICT CHAIRMAN SEND REPORT TO DEPARTMENT
CHAIRMAN BY MAY 1, 2021**

Your District Americanism Chairman is listed below.

District Americanism Chairmen

01	553	ROSEANNE	PAQUETTE	5359 CRESTHAVEN #6	TOLEDO	43614	(419) 509-1500	roseanne@adray-grna.com
02	210	REBECCA	FETTERS	3893 CARMEL CHURCH RD	CELINA	45822	(419) 586-3731 (419) 305-8644	tyh@hright.net
03	763	TINA	WHITE	2058 S BELLVIEW DR	BELLBROOK	45305-1620	(937) 776-5764	ala763president@gmail.com
04	194	MICHELLE	COSSMAN	5653 STONE TRACE DR	MASON	45040	(513) 368-5952	mcossman@zoomtown.com
05	181	ALICE	TEYNOR	524 PROSPECT ST	BUCYRUS	44820	(419) 563-5166	ateynor@gmail.com
06	417	JEAN	LISTON	17417 DENNIS RD	MT STERLING	43143	(740) 207-6527	cabinlady8491@yahoo.com
07	062	PEGGY	PARK	PO BOX 32	CHILLCOTHE	45601-0032	(740) 775-5751	None
08	011	SUSANNE	FREELAND	904 LANRECO BLVD	LANCASTER	43130	(740) 654-2287	sfreekab@columbus.rr.com
09	151	CHRISTINE	BETTS	463 MILL ST	CONNEAUT	44030	(440) 265-8161	tinakins49@hotmail.com
10	499	LINDA	PORTER	1080 COUNTRY CLUB DR UNIT 18	WOOSTER	44691	(330) 345-7393	llscrp@sssnet.com
11	077	MARY	PADGETT	PO BOX 273	NEFFS	43940	(740) 671-9956	mlucy01@aol.com
12	144	KAY	HAYMAN	2649 MCCOMB RD	GROVE CITY	43123	(614) 537-4359	kaybh@juuo.com
13	421	CYNTHIA	BOEHNLEIN	6669 ROCHELLE BLVD	PARMA HTS	44130	(440) 212-5150	Choehnlein55@gmail.com
14	281	SHARON	MCCLAIN	1322 FOREST GLEN DR	CUYAHOGA FALLS	44221	(330) 923-9746 (330) 571-1664	smccl184119@yahoo.com

Narrative must be typed written in narrative form.

Narrative must not exceed 1,000 words. (Can be fewer words if program dictates) Narrative may include photographs and news articles.

Essay Contest: April 1, 2021 Narrative Deadline: April 15, 2021

Ohio Unit Plan of Action

Department Report Form

This Form should be attached to each narrative that is submitted for information, Citation of Merit requirements and possible Department award. Please fill out the information as completely and accurately as possible. A Unit must submit this report form with boxes completed and answer the questions below in order to earn the Citation of Merit. Narrative -word count must follow directions given in award guidelines. Simple or elaborate stories will be accepted as a report.

Please complete the following. Be sure to give the complete name of your Unit:

District _____	Unit # _____	Unit Membership Goal _____	Unit Membership Total As of Report _____		
Name of Person Completing Report:			Unit Chair.		Unit Pres.
Phone # _____	Email _____	Membership ID (if available) _____			
Specific Award Name(if applicable) _____					

Answer the following Questions in your narrative

- How did your unit promote Star Spangled Kids in your community? _____

- How did your Unit promote the Americanism essay contest? _____

- How did your Unit promote the flag program? _____

- How did your Unit promote patriotic holidays? _____

- How did your Unit encourage support of the flag amendment? _____

- Did your Unit support American Legion Americanism programs? How? _____

- How did your Unit promote Americanism in your community? _____

Program Summation:

Total Number of Legion Family Volunteers	Total Number of Jr. Volunteers	Total Number of Community Volunteers	Total Number of Volunteer Hours	Total Dollars Spent or Raised	Total Number of Patriotic/Veteran Programs/Events
				\$	

The National Cover Sheet is included on the backside of this form.

Please fill out the Unit or Member Portion and send with your Narrative. Send your narrative, this report form and National Cover Sheet to your District or Department Chairman.



Ohio Unit Plan of Action



CHAPLAIN

CITATION OF MERIT



REQUIREMENT

CHAIRMAN

Carol T. Robinson
 8483 Woodgrove Dr.
 Centerville, Ohio 45458-1853
 (937) 436-1983 (home)
 (937) 602-9365 (cell)
 Email – abernia@aol.com

Year-End Report Due: April 15, 2021

Department Report Form				
This Form should be attached to each narrative that is submitted for information, Citation of Merit requirements and possible Department award. Please fill out the information as completely and accurately as possible. A Unit must submit a this report form with boxes completed and answer the questions below in order to earn the Citation of Merit. Narrative - word count must follow directions given in award guidelines. Simple or elaborate stories will be accepted as a report. Please complete the following. Be sure to give the complete name of your Unit: _____				
District	Unit #	Unit Membership Goal	Unit Membership Total As of Report	
Name of Person Completing Report:			Unit Chair.	Unit Pres.
Phone #	Email	Membership ID (if available)		
Specific Award Name(if applicable)				

Narrative must be typed written in narrative form.
 Narrative must not exceed 1,000 words.
 Narrative may include photographs and news articles.

Narrative Deadline: April 15, 2021

Program Summation:

Total Number of Volunteers	Total Number of Jr. Volunteers	Total Number of Volunteer Hours	Total Dollars Spent or Raised	Total Number of Patriotic/Veteran Programs/Events
			\$	

MAIL TO DEPARTMENT CHAPLAIN

Carol T. Robinson
8483 Woodgrove Dr.
Centerville, Ohio 45458-1853



Ohio Unit Plan of Action



CHILDREN & YOUTH

CHAIRMAN

Darlene Leiter
 329 Lyndale Ave
 Ashland, Ohio 44805
 (419) 289-2794 (home)
 (419) 651-6598 (cell)

VICE CHAIRMAN

CITATION OF MERIT



REQUIREMENT

Email – darleiter@yahoo.com

REPORT DUE TO DISTRICT

April 15, 2021 to

CHAIRMAN BY :

DISTRICT CHAIRMAN

DISTRICT CHAIRMAN SEND TO DEPARTMENTS CHAIRMAN

BY MAY 1, 2021

Your District Children & Youth Chairman

(address shown below)

District Children and Youth Chairmen

01	320	MARYBETH	PARKER	3311 MAPLEWAY DR	TOLEDO	43614	(419) 385-6531	mbparker58@yahoo.com
02	444	SARA	MAURER	09428 ST RT 219	NEW KNOXVILLE	45871	(419) 753-2730	dmaurer@nktelco.net
03	526	PAMELA	BATES	2122 WILLOW RUN CIR	ENON	45323-9787	(937) 974-2316	pameiabates9@gmail.com
04	450	JUDI	MAUPIN	3194 BEECH RD	BETHEL	45106-9534	(513) 560-0534	hudi@aol.com
05	447	JANE	YEAGER	17 E HIGH ST	PLYMOUTH	44865	(419) 989-2125	janeyeager2000@yahoo.com
06	085	JOYCE	CHANEY	11521 BOLEN RD NE	NEWARK	43055	(740) 345-7650	joycec@windstream.net
07	633	STACY	HUMPHREY	1811 INLOW AVE	PEEBLES	45660	(937) 798-1439	mtstacy@yahoo.com
08	011	JODIE	KEELS	626 N MAPLE ST	LANCASTER	43130	(740) 415-8844	Flok2991@gmail.com
09	214	MARIBETH	SHANKMAN	287 E 235 TH ST	EUCLID	44123	(216) 408-6284	scarfitup@att.net
10	131	ALYCE	BARNES	44609 Y & O RD	WELLSVILLE	43968	(330) 383-8941	alycebarnes@gmail.com
11	064	SUZANNE	WAGNER	211 VANBERGEN AVE	MARIETTA	45750	(740) 374-8814	suewagner45750@yahoo.com
12	430	BOBBIE	HALL-REFINATI	1554 MANOR DR	COLUMBUS	43232	(614) 620-1088	bobbiehall@sbcglobal.net
13	091	DONELLA	KLINE	26963 ELIZABETH LN	OLMSTED TWP	44138	(216) 396-8968	dkline@chnhousingpartners.org
14	685	KATHLEEN	RICHARDSON	9305 FLORA DR	STREETSBORO	44241	(330) 842-7650	Kats889@aol.com

Narrative Deadline: April 15, 2021

MAIL TO DISTRICT CHILDREN & YOUTH CHAIRMAN

Ohio Unit Plan of Action

Department Report Form				
This Form should be attached to each narrative that is submitted for information, Citation of Merit requirements and possible Department award. Please fill out the information as completely and accurately as possible. A Unit must submit a this report form with boxes completed and answer the questions below in order to earn the Citation of Merit. Narrative - word count must follow directions given in award guidelines. Simple or elaborate stories will be accepted as a report. Please complete the following. Be sure to give the complete name of your Unit: _____				
District	Unit #	Unit Membership Goal	Unit Membership Total As of Report	
Name of Person Completing Report:			Unit Chair.	Unit Pres.
Phone #	Email	Membership ID (if available)		
Specific Award Name(if applicable)				

If you would like to be considered for a Department or National Award attach your narrative to this report form. Follow all criteria when composing your Unit Program Narratives. Criteria for ALL narratives are as follows:

- Narrative must be typed written in narrative form.
- Narrative must not exceed 1,000 words. (Can be fewer words if program dictates)
- Narrative may include photographs and news articles.

Answer the following Questions in your narrative

How did your unit demonstrate "Celebrating a Century of Service, with the focus centering on "The Health and Well-Being of our Veterans, Military, and their Families"? _____

How did your Unit promote the Youth Hero/Good Deed Award? _____

What success stories do you have regarding support for military and or homeless veterans' children? _____

Program Summation:

Total Number of Volunteers	Total Number of Jr. Volunteers	Total Number of Volunteer Hours	Total Dollars Spent or Raised	Total Number of Children Served
			\$	

The National Cover Sheet is included on the backside of this form. Please fill out the Unit or Member Portion and send with your Narrative. Send your narrative, this report form and National Cover Sheet to your District or Department Chairman.



Ohio Unit Plan of Action



COMMUNITY SERVICE

CHAIRMAN

Robyn Cooper
 901 W High St
 Piqua, Ohio 45366
 (937) 773-0165 (home)
 (937) 214-6307 (cell)
 Email – ronaldcooper901@gmail.com

VICE CHAIRMAN

Becky Dippman
 3186 S. River Rd.
 Pemberville, Ohio 43450-9676
 (419) 287-3257 (home)
 (419) 409-6032 (cell)
 Email – dippman@amplex.net

CITATION OF MERIT



REQUIREMENT

REPORT DUE TO DISTRICT

April 15, 2021 to

CHAIRMAN BY :

DISTRICT CHAIRMAN

DISTRICT CHAIRMAN SEND TO DEPARTMENT CHAIRMAN

BY MAY 1, 2021

Your District Community Service Chairman

(address shown below)

District Community Service Chairmen

01	541	MINDI	RUE	PO BOX 10	DUPONT	45837	(419) 439-2950	Mindi1036@gmail.com
02	387	RUTH	BROOKHART	718 N FRANKLIN ST	NEW BREMEN	45869	(419) 629-2238	crbrookhart@nktelco.net
03	776	JUANITA	BALLARD	2333 DUNCAN DR APT 7	FAIRBORN	45324-5749	(937) 426-2523	thlrddistpres18@gmail.com
04	256	MARGIE	HOMINY	490 HENNEPIN DR	MAINEVILLE	45039-7332	(440) 823-2515	mhominy@yahoo.com
05	292	NANCY	LONGBRAKE	169 NEW LONDON AVE	NEW LONDON	44851	(567) 215-7386	nllongbrake@neo.rr.com
06	254	REBECCA	LONG	2951 GALLANT RD	RADNOR	43066	(614) 314-3746	Rebecca.l.long254@gmail.com
07	633	STACY	JAMES-GROOMS	227 FORREST AVE	SEAMAN	45679-9751	(937) 798-3179	lstacy858@gmail.com
08	011	APRIL	ICE	1989 TWP RD 184 SW	JUNCTION CITY	43748	(740) 605-4333	icewomanishere@hotmail.com
09	214	SUSAN	SCHOFIELD-FRATINO	7565 LAMBTON CT	MENTOR	44060	(440) 354-1838	bfratino@yahoo.com
10	067	AMIEE	DITMARS	926 PEPPERWOOD DR	WOOSTER	44691	(330) 697-4422	asprang@live.com
11	768	LISA	SNODGRASS	PO BOX 115	BEALLSVILLE	43716	(740) 359-6291	Ljs549@me.com
12	144	VICKY	DALTON	1098 VIEWPOINTE DR	COLUMBUS	43207	(614) 491-3551	vickyd144@aol.com
13	703	DANIELLE	ZAREMBA	11337 BLOSSOM AVE	PARMA HTS	44130	(216) 534-4509	blueeyes78@aol.com
14	685	CINDY	MASOWICK	9320 ROOT DR	STREETSBORO	44241	(330) 714-3873	cldgy@gmail.com

Ohio Unit Plan of Action

Department Report Form

This Form should be attached to each narrative that is submitted for information, Citation of Merit requirements and possible Department award. Please fill out the information as completely and accurately as possible. A Unit must submit a this report form with boxes completed and answer the questions below in order to earn the Citation of Merit. Narrative - word count must follow directions given in award guidelines. Simple or elaborate stories will be accepted as a report.

Please complete the following. Be sure to give the complete name of your Unit: _____

District _____	Unit # _____	Unit Membership Goal _____	Unit Membership Total As of Report _____		
Name of Person Completing Report: _____			Unit Chair. _____	_____	Unit Pres. _____
Phone # _____	Email _____	Membership ID (if available) _____			
Specific Award Name(if applicable) _____					

NARRATIVE INFORMATION

Narrative must be typed written in narrative form.

Narrative must not exceed 1,000 words. (Can be fewer words if program dictates)

Narrative may include photographs and news articles.

Answer the following Questions or include answers in your narrative

- How did members recruit community volunteers (non-members) while engaged in ALA Community Service activities and/or projects? _____

- How did members engage high school students (with or without service hour requirements to graduate) in ALA Community Service activities and/or projects? _____

- Did members volunteer for or organize service projects for any of the ALA suggested days of service? If so, which days were most successful for offering service projects? Did you have any challenges?

- What types of community service activities and/or projects were done in your Unit? _____

Program Summation:

Total Number of Volunteers	Total Number of Jr. Volunteers	Total Number of Volunteer Hours	Total Dollars Spent or Raised	Total Number of Patriotic/Veteran Programs/Events
			\$	

The National Cover Sheet is included on the backside of this form.

Please fill out the Unit or Member Portion and send with your Narrative. Send your narrative, this report form and National Cover Sheet to your District or Department Chairman.



Ohio Unit Plan of Action



HISTORY HISTORIAN

CITATION OF MERIT



REQUIREMENT

Dayna Beyer
6013 Garber Road
Bellville, Ohio 44813
(419) 566-9395 (cell)
(888) 225-3180 (fax)

Email – mrsdaynabeyer@gmail.com

REPORT DUE: April 15, 2021

Department Report Form					
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Name of Person Completing Report:			Unit Chair.		Unit Pres.
Phone #	Email		Membership ID (if available)		
Specific Award Name(if applicable)					

Narrative must be typed written in narrative form.

Narrative must not exceed 1,000 words. (Can be fewer words if program dictates)

Narrative may include photographs and news articles.

Program Summation:

Total Number of Volunteers	Total Number of Jr. Volunteers	Total Number of Volunteer Hours	Total Dollars Spent	Total Dollars Raised	Total Number of Patriotic/Veteran Programs/Events
			\$	\$	

The National Cover Sheet is included on the backside of this form.
Please fill out the Unit or Member Portion and send with your Narrative. Send your narrative, this report form and National Cover Sheet to your District or Department Chairman.

Report Deadline: April 15, 2021

Narrative Deadline: April 15, 2021

MAIL TO DEPARTMENT HISTORIAN



Ohio Unit Plan of Action



LEGISLATIVE

CHAIRMAN

Diann Long
17402 Independence Ct
Brookpark, Ohio 44142
(216) 267-4711 (home)

CITATION OF MERIT



REQUIREMENT

Email – ken17402@yahoo.com

REPORT DUE: April 15, 2021

Department Report Form					
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District	Unit #	Unit Membership Goal	Unit Membership Total As of Report		
Name of Person Completing Report:			Unit Chair.		Unit Pres.
Phone #	Email	Membership ID (if available)			
Specific Award Name(if applicable)					

Answer the following questions or include answers in your narrative report. Please include answers to the following questions:

- How did you educate members on the legislative issues promoted by The American Legion and how did your members employ those methods? _____
- What legislative activities (town hall meetings, legislative receptions) did members attend in your communities? _____
- What suggestions did members have to improve those activities? Please describe. _____
- How did members develop relationships with their elected officials? Please describe. _____
- Please describe how members were able to connect with their local and state officials and what were their successes. _____

Program Summation:

Total Number of Volunteers	Total Number of Jr. Volunteers	Total Number of Volunteer Hours	Total Dollars Spent or Raised
			\$

The National Cover Sheet is included on the backside of this form. Please fill out the Unit Portion and send your narrative, this report form and the National Cover Sheet to your Department Chairman.

Mail report to Department Legislative Chairman:

Diann Long, 17402 Independence Ct., Brookpark, OH 44142



Department of Ohio Plan of Action



NATIONAL SECURITY

CHAIRMAN

Cynthia Boehnlein
 6669 Rochelle Blvd.
 Parma Hts., OH 44130
 (440) 212-5150
 Email – cboehnlein55@gmail.com

CITATION OF MERIT



REQUIREMENT

REPORT DUE: April 15, 2021

Department Report Form			
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District	Unit #	Unit Membership Goal	Unit Membership Total As of Report
Name of Person Completing Report:		Unit Chair.	Unit Pres.
Phone #	Email	Membership ID (if available)	
Specific Award Name(if applicable)			

NARRATIVE INFORMATION

Narrative must be typed written in narrative form.

Narrative must not exceed 1,000 words. (Can be fewer words if program dictates)

Narrative may include photographs and news articles.

As part of your narrative report, answer the following questions in your narrative and include number of volunteers, hours and monies:

- Did members organize Welcome to Our Hometown events? If so, what was most successful? Did they have any challenges? _____
- What types of national security activities and/or projects were done at units in your department that weren't near a military installation? _____
- How were Blue Star and Gold Star Banners presented? _____
- How were MIA families recognized following notification of remains? _____
- How were service members honored during welcome-home events? _____
- How were military families connected to other units when moving? _____

Department of Ohio Plan of Action

- Did your Unit host a Blood Drive? _____
- Preparing care packages? _____
- Write letters to the troops? _____
- Participate with Taps (Tragedy Assistance Program for Survivors)? _____
- Have a Pow/Mia Chairman at meetings? _____
- Wear RED on Friday? _____
- Recognize ROTC and JROTC cadets? _____
- Participate and recognize and family during National Military Appreciation Month? _____
- Participate and recognize Send Off events? _____
- Present Blue Star or Gold Star Banner? _____
- Did military families connect with other families during a move? _____
- Participate or host a Red Cross or USO event? _____

Program Summation:

Total Number of Volunteers	Total Number of Jr. Volunteers	Total Number of Volunteer Hours	Total Dollars Spent or Raised	Total Number of Patriotic/Veteran Programs/Events
			\$	

The National Cover Sheet is included as the next form. Please fill out the Unit or Member Portion and send with your Narrative. Send your narrative, this report form and National Cover Sheet to your District or Department Chairman.



Department of Ohio Plan of Action



POPPY

CHAIRMAN

Karen Peel
2216 25th St SW
Akron, Ohio 44314
(330) 962-0738 (cell)

CITATION OF MERIT



REQUIREMENT

Email – karen.peel@sk2holdings.com

REPORT DUE : April 15, 2021

Department Report Form				
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District	Unit #	Unit Membership Goal	Unit Membership Total As of Report	
Name of Person Completing Report:			Unit Chair.	Unit Pres.
Phone #	Email	Membership ID (if available)		
Specific Award Name(if applicable)				

Narrative must be typed written in narrative form.

- Narrative must not exceed 1,000 words. (Can be fewer words if program dictates)
- Narrative may include photographs and news articles.

Answer the following Questions or include answers in your narrative

- How did your members promote the Poppy Program? _____
- How did your members increase poppy revenue? _____
- How did your unit promote the Poppy Poster Contest? _____
- How did your unit promote Little Miss and Miss Poppy? _____

Program Summation:

Total Number of Volunteers	Total Number of Jr. Volunteers	Total Number of Volunteer Hours	Total Dollars Spent or Raised	Total Number of Patriotic/Veteran Programs/Events
			\$	

The National Cover Sheet is included on the backside of this form.

Please fill out the Unit or Member Portion and send with your Narrative. Send your narrative, this report form and National Cover Sheet to your District or Department Chairman.



Ohio Unit Plan of Action



VETERANS AFFAIRS & REHABILITATION

CHAIRMAN

Sue Schofield Fratino
 7565 Lambton Court
 Mentor, OH 44060
 (440) 354-1838 (home)
 (440) 759-4961 (cell)
 Email – sscoey17@gmail.com

VICE CHAIRMAN

Judy Leddy
 85 Marilla Rd.
 Columbus, OH 43207
 (614) 444-0119 (home)
 (614) 783-9063 (cell)
 Email – jal85@aol.com

Department Hospital Director

Linda Close
 1041 Donnawood Dr
 Mansfield, Ohio 44903
 (419) 989-1180 (home)

Email –
lindaaclose@gmail.com

CITATION OF MERIT



REQUIREMENT

REPORT DUE TO April 15, 2021 to
DISTRICT CHAIRMAN BY: DISTRICT CHAIRMAN

DISTRICT CHAIRMAN SEND TO DEPARTMENT CHAIRMAN

BY MAY 1, 2021

Your District VA & R Chairman

(address shown below)

District VA&R Chairmen

01	320	PAM	BRENNEMAN	1467 GAGE RD	TOLEDO	43612	(419) 283-5655	pam52@buckeye-express.com
02	241	SHIRLEY	SUCHLAND	25 N EASTMOOR DR	NEW BREMEN	45869	(419) 629-3353	framesandsuch@nktelco.net
03	184	ROBYN	COOPER	901 W. HIGH ST	PIQUA	45356	(937) 773-0165	ronaldcooper901@gmail.com
04	450	CARMELLA	FUGATE	550 CLARK ST	MILFORD	45150-1210	(513) 260-9516	carmella.fugate@yahoo.com
05	535	DAYNA	BEYER	6013 GARBER RD	BELLVILLE	44813	(419) 566-9395	mrsdaynabeyer@gmail.com
06	085	LOLA	NIXON	44 CURTIS AVE	NEWARK	43055	(740) 345-1567	nix7lo@roadrunner.com
07	757	PATRICIA	OLAKER	207 CEDARWOOD TERRACE	CHILlicoTHE	45601-1778	(740) 775-3389	NONE
08	011	TAMMY	DILLON	734 PIERCE AVE	LANCASTER	43130	(740) 653-8056	tomtammy49@columbus.rr.com
09	103	MARIE	SCHULZ	1631 PLEASANTVIEW AVE	ASHTABULA	44004	(440) 645-0103	marie.schulz@aacs.net
10	436	JULIE	MARTIN	12574 ISLANDVIEW AVE NW	UNIONTOWN	44685	(330) 699-6268	msjulieamartin@gmail.com
11	071	REBECCA	COLE	74 S MAIN ST LOT 8	ROSEVILLE	43777	(740) 704-1221	rcole4@columbus.rr.com
12	614	JANE	DOMER	5252 GRANDON DR	HILLARD	43026	(614) 653-2710	jvdomer@yahoo.com
13	627	KIM	BUNCH	10600 FAIRLAWN DR	PARMA	44131	(216) 401-8842	kimmieb219@sbcglobal.net
14	801	JANICE	MANG	9287 SHEPARD RD	MACEDONIA	44056	(330) 467-4490	janicemang@windstream.net

Ohio Unit Plan of Action

Department Report Form

This Form should be attached to each narrative that is submitted for information, Citation of Merit requirements and possible Department award. Please fill out the information as completely and accurately as possible. A Unit must submit a this report form with boxes completed and answer the questions below in order to earn the Citation of Merit. Narrative - word count must follow directions given in award guidelines. Simple or elaborate stories will be accepted as a report.

Please complete the following. Be sure to give the complete name of your Unit: _____

District _____	Unit # _____	Unit Membership Goal _____	Unit Membership Total As of Report _____		
Name of Person Completing Report: _____			Unit Chair. _____	Unit Pres. _____	_____
Phone # _____	Email _____	Membership ID (if available) _____			
Specific Award Name(if applicable) _____					

NARRATIVE INFORMATION

- Narrative must be typed written in narrative form.
- Narrative must not exceed 1,000 words. (Can be fewer words if program dictates)
- Narrative may include photographs and news articles.
- Narrative must include hours, activities, money, and volunteers spent on projects.

Narrative Deadline: April 15, 2020
MAIL TO DISTRICT VA & R CHAIRMAN

The National Cover Sheet is included as the next form. Please fill out the Unit or Member Portion and send with your Narrative. Send your narrative, this report form and National Cover Sheet to your District or Department Chairman.

1. How Did your Unit Participate at the VA Hospitals and other VA facilities? Explain. _____

2. Describe how members earned their Service to Veterans hours? _____

3. How did your Unit Support your local Veterans? Do you have any unique ideas to share with other Units? Explain. _____

Program Summation:

Total Number of Volunteers	Total Number of Jr. Volunteers	Total Number of Volunteer Hours	Total Dollars Spent or Raised	Total Number of Patriotic/Veteran Programs/Events
			\$	



Department of Ohio Plan of Action



AUXILIARY EMERGENCY FUND

CHAIRMAN

Mindi Rue
PO Box 10
Dupont, OH 45837-0010
(419) 439-2950 (home)
Email – mindi1036@gmail.com

REPORT DUE: April 15, 2021

Department Report Form

This Form should be attached to each narrative that is submitted for information, Citation of Merit requirements and possible Department award. Please fill out the information as completely and accurately as possible. A Unit must submit a this report form with boxes completed and answer the questions below in order to earn the Citation of Merit. Narrative - word count must follow directions given in award guidelines. Simple or elaborate stories will be accepted as a report.

Please complete the following. Be sure to give the complete name of your Unit: _____

District	Unit #	Unit Membership Goal	Unit Membership Total As of Report		
Name of Person Completing Report:			Unit Chair.		Unit Pres.
Phone #	Email	Membership ID (if available)			
Specific Award Name(if applicable)					

Narrative must be typed written in narrative form.

Narrative must not exceed 1,000 words. (Can be fewer words if program dictates)

Narrative may include photographs and news articles.

Program Summation:

Total Number of Volunteers	Total Number of Jr. Volunteers	Total Number of Volunteer Hours	Total Dollars Spent or Raised	Total Number of Patriotic/Veteran Programs/Events
			\$	

The National Cover Sheet is included on the backside of this form.

Please fill out the Unit or Member Portion and send with your Narrative. Send your narrative, this report form and National Cover Sheet to your District or Department Chairman.

Report Deadline: April 15, 2021

Narrative Deadline: April 15, 2021

EMAIL OR MAIL TO DEPARTMENT AEF CHAIRMAN

mindi1036@gmail.com

Mindi Rue

PO Box 10

Dupont, Ohio 45837-0010



Ohio Unit Program Action Plan



American Legion Auxiliary Buckeye Girls State

DIRECTOR

Rene' Reese
6543 Engle Rd.
Brook Park, Ohio 44142
(216) 362-0609 (home)
(216) 409-0122 (cell)
Email – rqr21@sbcglobal.net

COORDINATOR

Vicky Buck
PO Box 2760
Zanesville, Ohio 43702-2760
(740) 452-8245 (work)
Email – vicky@alaohio.org

Mid-Year Report Due :

December 15, 2020

Year-Report Due:

May 1, 2021

SEND REPORTS TO :

Department BGS Director

A Board of Directors oversees the American Legion Auxiliary Buckeye Girls State Program, which includes:

Director
Department President
Department 1st Vice President
Director of Counselors
Director of Government
Director of Health
Director of Music and Recreation
Director of Public Relations
Department Secretary/Executive Director

Rene' Reese
Kristen Little
Colleen Phillips
Gwenda Schroeder-Zulch
Diann Long
Deb Schrolucke
Karen Peel
Linda Close
Kelly Gibson

Please carefully read the additional information enclosed in the envelope marked American Legion Auxiliary Buckeye Girls State!

The National Cover Sheet is included on the backside of report form.
Please fill out the Unit or Member Portion and send with your Narrative. Send your narrative, this report form and National Cover Sheet to your District or Department Chairman.

Ohio Unit Program Action Plan

Department Report Form				
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Name of Person Completing Report:			Unit Chair.	Unit Pres.
Phone #	Email	Membership ID (if available)		
Specific Award Name(if applicable)				

2020– 2021 Department Report Form

This form should be attached to each narrative that is submitted for information, Citation of Merit requirements and possible Department award. Please fill out the information as completely and accurately as possible. If a Unit only completes this form and does not do a narrative, they will still receive credit as having completed a report. However, if the report shows all zero's or blank information this will not qualify as an actual report.

Answer the following Questions and/or include answers in your narrative

- How did you promote the ALA BGS program? _____

- Did you have an ALA BGS presentation in your community? If so, detail the success of this activity and the number of participants. _____

- Did your unit donate to the ALA Buckeye Girls State Endowment Fund? _____
Amount \$ _____
- How did your unit recognize your 2020 delegates to ALA Buckeye Girls State? _____

- What have you done within your ALA Girls State program to encourage membership? _____
- What methods does your Unit utilize to recruit the ALA Girls State delegates for membership? Are they effective? _____

- Does your Unit receive donations or sponsorship from outside of the Legion Family? What does your Unit do to solicit successful fund raising outside the Legion Family? _____

- How has your unit improved your BGS Girls State program this year? In what ways? _____

Program Summation:

Total Number of Volunteers	Total Number of Jr. Volunteers	Total Number of Volunteer Hours	Total Dollars Spent	Total Number of Patriotic/Veteran Programs/Events
			\$	



Department of Ohio Plan of Action



CONSTITUTION & BYLAWS

CHAIRMAN

Cyndi Underwood
2213 Bryn Mawr Dr.
Stow, OH 44224
(330) 256-0700 (cell)

Email – cyndiunderwood73@gmail.com

Mid-Year Report Due: December 15, 2020

REPORT DUE: April 15, 2021

Department Report Form

This Form should be attached to each narrative that is submitted for information, Citation of Merit requirements and possible Department award. Please fill out the information as completely and accurately as possible. A Unit must submit a this report form with boxes completed and answer the questions below in order to earn the Citation of Merit. Narrative - word count must follow directions given in award guidelines. Simple or elaborate stories will be accepted as a report.

Please complete the following. Be sure to give the complete name of your Unit: _____

District	Unit #	Unit Membership Goal	Unit Membership Total As of Report		
Name of Person Completing Report:			Unit Chair.		Unit Pres.
Phone #	Email	Membership ID (if available)			
Specific Award Name(if applicable)					

As part of your Narrative Report, please include answers to the following questions:

- Have you done an annual review of your Unit Constitution, Bylaws, and standing rules? _____
- When were your Unit Constitution & Bylaws last revised? _____
- How was your Unit inspired to review their governing documents? _____
- Did your unit sponsor a Constitution & Bylaws activity(s)? _____
- If so, what were the activity(s)? _____
- Did your unit participate in a web-based Constitution & Bylaws activity? If so, was it helpful? _____
- Did you add a list of Past Presidents info (names, numbers, dates served) to your guidelines? _____
- Did you add a page for Constitution & Bylaws revision, review and amendments dates? _____

Program Summation:

Total Number of Volunteers	Total Number of Jr. Volunteers	Total Number of Volunteer Hours	Total Dollars Spent or Raised	Total Number of Patriotic/Veteran Programs/Events
			\$	

The National Cover Sheet is included on the backside of this form.

Please fill out the Unit or Member Portion and send with your Narrative. Send your narrative, this report form and National Cover Sheet to your District or Department Chairman.

MAIL TO DEPARTMENT C&B CHAIRMAN

◆ Cyndi Underwood ◆ 2213 Bryn Mawr Dr. ◆ Stow, Ohio 44224 ◆



Ohio Unit Plan of Action



EDUCATION

CHAIRMAN

Barbara Benz
 6102 Charles Ave
 Parma, Ohio 44129-3705
 (440) 885-0781 (home) (440) 570-0527 (cell)

Email – babzbenz6102@gmail.com

REPORT DUE: April 15, 2021 (postmarked)

Department Report Form				
This Form should be attached to each narrative that is submitted for information, Citation of Merit requirements and possible Department award. Please fill out the Information as completely and accurately as possible. A Unit must submit a this report form with boxes completed and answer the questions below in order to earn the Citation of Merit. Narrative - word count must follow directions given in award guidelines. Simple or elaborate stories will be accepted as a report. Please complete the following. Be sure to give the complete name of your Unit: _____				
District _____	Unit # _____	Unit Membership Goal _____	Unit Membership Total As of Report _____	
Name of Person Completing Report: _____			Unit Chair. _____	Unit Pres. _____
Phone # _____	Email _____	Membership ID (if available) _____		
Specific Award Name(if applicable) _____				

Answer the following Questions or include answers in your narrative

- Did member/units participate in Teacher Appreciation Week and/or National Education Week? How? _____
- Did your unit participate in Give 10 to Education? _____
- Describe how Veterans in Community Schools programs were presented? _____
- If units actively support veterans' associations on campus, describe their activities? _____
- What types of help did units give a needy student? _____
- How did your unit recognize scholarship winners? _____
- How many scholarship applications does your unit receive? _____

Narrative must be typed written in narrative form.

Narrative must not exceed 1,000 words. (Can be fewer words if program dictates)

Narrative may include photographs and news articles.

Program Summation:

Total Number of Volunteers	Total Number of Jr. Volunteers	Total Number of Volunteer Hours	Total Dollars Spent or Raised	Total Number of Patriotic/Veteran Programs/Events
			\$	

The National Cover Sheet is included on the backside of this form. Please fill out the Unit or Member Portion and send with your Narrative. Send your narrative, this report form and National Cover Sheet to your District or Department Chairman.

Report Deadline: April 15, 2021

Narrative Deadline: April 15, 2021

MAIL TO DEPARTMENT EDUCATION CHAIRMAN



Ohio Unit Plan of Action



JUNIOR ACTIVITIES

District Junior Activities Chairman

CHAIRPERSON

Carmella Fugate
 550 Clark St
 Milford, OH 45150
 (513) 513- 260-9516 (cell)
 Email -carmella.fugate@yahoo.com

2nd MEMBER

Kathleen Richardson
 9305 Flora Drive
 Streetsboro, OH 44241-8306
 (330) 842-7650 (cell)
 Email – kats889@aol.com

3rd MEMBER

Michelle Zayakosky
 7400 Johnnycake Ridge
 Mentor, OH 44060-7518
 (216) 337-3178 (cell)
 Email – post214michellez@gmail.com

Honorary Jr. President

Samantha Altman
 598 Rinehart Rd
 Bellville, Ohio 44813
 samanthaaltman@embarqmail.com

Honorary Jr. Vice President

Evelyn Phillips
 717 N Hall St
 Ottawa, Ohio 45875
 (419) 748-7515 (home)

**REPORT DUE TO DISTRICT
 CHAIRMAN BY :**

**April 15, 2021 to
 DISTRICT CHAIRMAN**

DISTRICT CHAIRMAN SEND TO DEPARTMENT CHAIRMAN

BY MAY 1, 2021

**Your District Junior Activities Chairman
 (address shown below)**

01	587	SANDY	MACK	5931 YARMOUTH AVE	TOLEDO	43623	(419) 348-1761	mack593.sm@gmail.com
02	217	MAGGIE	WILEY	317 S BROOKLYN AVE	SIDNEY	45365	(937) 489-1792	howmaw71@gmail.com
03	776	CAROL T	ROBINSON	8483 WOODGROVE CT	CENTERVILLE	45458-1853	(937) 602-9365	abernia@aol.com
04	450	CARMELLA	FUGATE	550 CLARK ST	MILFORD	45150	(513) 260-9516	carmella.fugate@yahoo.com
05	535	KATHY	HEICHEL	513 ROSS RD	BELLVILLE	44813	(567) 303-2851	dkheichel@aol.com
06	085	MIRIAM	MILLER	1104 LAWNVIEW AVE	NEWARK	43055	(740) 344-1453	None
07	471	BETTY	TAYLOR	25 WILSON ST	PORTSMOUTH	45662-5778	(740) 250-3249	taylors604@hotmail.com
08	078	SHANI	KORNMILLER	9900 ST RT 664 N	LOGAN	43138	(740) 270-4004	shanikornmiller@yahoo.com
09	214	MICHELLE	ZAYAKOSKY	7400 JOHNNYCAKE RIDGE RD	MENTOR	44060	(216) 337-3178	post214michellez@gmail.com
10	436	CONNIE	MORTON	11022 KENT AVE NE	HARTVILLE	44632	(330) 877-1237	cismorton@hotmail.com
11	495	FLO	HARPOLD	533 WIRT ST	BELPRE	45714	(740) 423-7766	None
12	614	MARY LEE	MERCIER	3674 COLONIAL DR	HILLIARD	43026	(614) 579-3382	mimoh6140@gmail.com
13	610	LOUISE	AIGNER	6115 SMITH RD	BROOKPARK	44142	(216) 337-1411	laigner109@yahoo.com
14	566	KATHY	BURKHAMMER	885 POLK AVE	AKRON	44314	(234) 738-8552	lovelyangels2@yahoo.com

Ohio Unit Plan of Action

Department Report Form

This Form should be attached to each narrative that is submitted for information, Citation of Merit requirements and possible Department award. Please fill out the information as completely and accurately as possible. A Unit must submit a this report form with boxes completed and answer the questions below in order to earn the Citation of Merit. Narrative - word count must follow directions given in award guidelines. Simple or elaborate stories will be accepted as a report.

Please complete the following. Be sure to give the complete name of your Unit: _____

District _____	Unit # _____	Unit Membership Goal _____	Unit Membership Total As of Report _____		
Name of Person Completing Report: _____			Unit Chair. _____	Unit Pres. _____	
Phone # _____	Email _____	Membership ID (if available) _____			
Specific Award Name(if applicable) _____					

Please consider answering the questions below and include them in your Unit's Narrative/Story about your program.

1. How has participation in the Patch Program increased enthusiasm amount the Juniors?

2. What are the various Service projects in which Junior were involved? Has Participation in the service projects increased as the year has progressed? _____
3. What Type of Volunteer hours did Junior members perform? _____
4. What ways did your senior members mentor the Junior Members? _____
5. How does our unit plan to increase Junior member participation in meetings and activities?

Please include pictures and news articles showing juniors involved in their activities.

Program Summation:

Total Number of Volunteers	Total Number of Jr. Volunteers	Total Number of Volunteer Hours	Total Dollars Spent or Raised	Total Number of Patriotic/Veteran Programs/Events
			\$	

The National Cover Sheet is included as the next form. Please fill out the Unit or Member Portion and send with your Narrative. Send your narrative, this report form and National Cover Sheet to your District or Department Chairman.



Department of Ohio Plan of Action



LEADERSHIP

CHAIRMAN

Pam Bates
 2122 Willow Run Circle
 Enon, Ohio 45323
 (937) 974-2316 (cell)
 Email – pamelabates9@gmail.com (preferred communication)

Report & Narrative can be emailed

NARRATIVES DUE: April 15, 2021

Department Report Form

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Phone # _____	Email _____	Membership ID (if available) _____			
Specific Award Name(if applicable) _____					

NARRATIVE AWARDS shall be judged based on your Unit's usage of the What Can You do Sections 1-5 of this POA AND filling out the boxes below and describing in your narrative how you accomplished them. REMEMBER: That your Unit Mid-Year and End-of-Year reports and narrative need to pertain to the who, what, where and how of Leadership. (See award instructions)

DID YOU SHARE THE FOLLOWING DOCUMENTS AT YOUR UNIT MEETINGS?

Buckeye Messenger	Bulk Mailing	District Newsletter	Constitution & Bylaws	Policies and Procedures	Plan of Action

MEMBER/S ATTENDANCE AT MEETINGS BELOW

Average Number of Members attending a Unit Meeting	Number of Members attending District Meetings	Number of Members Attending School of Instruction (SOI)	Number of Members Attending SOI Leadership Workshop	Number of Members Attending Mid-Winter (MW) Conference	Number of Members Attending MW Leadership Workshop



Ohio Unit Plan of Action



MEMBERSHIP

CHAIRMAN

Colleen Phillips
 C-032 Co Rd 8B
 Hamler, Ohio 43524-9785
 (419) 274-4001 (home)
 (419)-439-0526 (cell)
 Email – ckphillips43524@gmail.com

REPORT DUE : April 15, 2021

Department Report Form

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Phone #	Email	Membership ID (if available)			
Specific Award Name(if applicable)					

Answer the following Questions in your narrative

Please share how your Unit is using membership tools and other Auxiliary programs to engage, retain and recruit members, which tools were most effective, and which incentives were most effective. _____

Narrative must be typed written in narrative form.

Narrative must not exceed 1,000 words. (Can be fewer words if program dictates)

Narrative may include photographs and news articles.

Program Summation:

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Narrative Deadline: April 15, 2021

MAIL TO DEPARTMENT MEMBERSHIP CHAIRMAN

Colleen Phillips, C-032 Co Rd 8B, Hamler, Ohio 43524-9785



Department of Ohio Plan of Action



PAST PRESIDENTS PARLEY

CHAIRMAN

Shirley Maurer
 06247 St Rt 219
 New Knoxville, Ohio 45871
 (419) 753-2486 (home)
 (419) 733-3397 (cell)
 Email – pmaurer@nktelco.net

REPORT DUE : April 15, 2021

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Mail to Department Past Presidents Parley Chairman:

Shirley Maurer, 06247 St Rt 219, New Knoxville, Ohio 45871



Department of Ohio Plan of Action



PUBLIC RELATIONS

CHAIRMAN

Cindy Masowick
9320 Root Dr
Streetsboro, Ohio 44241
(330) 650-9594(work)
(330) 714-3873 (cell)
Email – cjidgy@gmail.com

REPORT DUE: April 15, 2021

Department Report Form				
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Narrative may include photographs and news articles.

Narrative Deadline: April 15, 2021

Answer the following Questions or include answers in your narrative

- **How has your Unit website and/or Facebook page inspired units to develop social media at the local level?** _____
- **Has your unit been mentioned in local media promotion of mission-related activities? What type of promotions have they received?** _____
- **Did your Unit do any Public Service Announcements? How were they received?** _____
- **How does your Unit keep an active and updated media contact list?** _____
- **How did your Unit use Social Media to promote the ALA Brand?** _____
- **What specific activities have you done to help build brand loyalty?** _____

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