



**AMERICAN LEGION AUXILIARY, INC.**  
**DEPARTMENT OF VIRGINIA**

MAKE FOUR COPIES

**MONTHLY REPORT FORM**

**Citation Requirement #1**  
TO BE POSTMARKED BY  
10<sup>TH</sup> of month following  
the month the meeting  
was held. (July 1 – June 30)

Department President  
District President  
Zone Vice President (Courtesy Copy)  
Copy for Unit Files  
**(do not send to Dept. Secretary)**

UNIT NO. \_\_\_\_\_

DISTRICT NO. \_\_\_\_\_

Name of Unit \_\_\_\_\_ Location \_\_\_\_\_ Name of Secretary \_\_\_\_\_

Unit Meeting

Date meeting was held \_\_\_\_\_ Place \_\_\_\_\_ Kind (regular or special) \_\_\_\_\_

Last Year's Membership \_\_\_\_\_ Number of Members paid this year \_\_\_\_\_

CHILDREN & YOUTH: Cash \_\_\_\_\_ Clothing donated \_\_\_\_\_ Amount valued \_\_\_\_\_

Other Activities \_\_\_\_\_

VETERANS AFFAIRS & REHABILITATION: Contributions \_\_\_\_\_ and other activities \_\_\_\_\_

CONTRIBUTIONS TO OTHER PROGRAMS: \_\_\_\_\_

Check Citation Requirements met this month:

No. 1: (Monthly report on time to Department President and District President) \_\_\_\_\_

No. 2 (Dec 1) a. Children & Youth Assessment\* \_\_\_\_\_ b. Veterans Rehabilitation Per Capita\* \_\_\_\_\_

c. Entertainment of Veterans\* \_\_\_\_\_

No. 3 Poppy Receipts (10% of gross Dec 1)\* \_\_\_\_\_ Poppy order (Feb1) \_\_\_\_\_ Poppy Report (April 15) \_\_\_\_\_

No. 4 Program Reports including Chaplain (to Department Headquarters, April 15) \_\_\_\_\_

No. 5 Unit Officer Listing (as soon as elections are held in May)\* \_\_\_\_\_

No. 6 Roll Call at District Annual Meeting \_\_\_\_\_

No. 7 Automatic Bonding (Dec 1)\* \_\_\_\_\_

No. 8 Pride of Virginia Assessment (March 1)\* \_\_\_\_\_

No. 9 Unit History (to Department Headquarters – April 30) \_\_\_\_\_

Give highlights of meeting and program held for the month. You may attach minutes or computer printouts. Use back of page if necessary: \_\_\_\_\_

