

Unit Kit of Reports



Unit Presidents:


Impact Report Form (white)
Due to your District President by May 1, 2026

Unit Chairman: Green Unit Report Forms

All Unit Green Reports & Narratives Due: **April 15, 2026**

Attach additional pages to answer questions where necessary

Units are encouraged to fill out all report forms included, in this kit, please be aware that:

Reports bearing this emblem  are MANDATORY to Receive Citation of Merit

CITATION OF MERIT



REQUIREMENT

Reports to send to DISTRICT Chairman:

Americanism
Children & Youth,
Community Service
Jr Activities,
VA&R

All other reports are to be sent to the **Department Chairman.**

Please print legibly & follow all instructions on the report 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 assist 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?
- Question: Does time shopping for care packages for deployed military count as service?
Answer: *Yes, shopping for care packages counts as service hours under Section 1*
- 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!

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 ⁺	Unit	Total
Line 1	Total hours members volunteered	Member Form Line 1		N/A	
Line 2	Total dollars spent	Member Form Line 2	\$	\$	\$
Line 3	Total number of veterans/military assisted	Member Form Line 3			
Line 4	Total number of "Veterans in Community Schools" presentations facilitated	Member Form Line 4			
Line 5	Value of in-kind donations received*	Unit Records	N/A	\$	\$
Line 6	Number of poppies or poppy items distributed	Unit Records	N/A		
Line 7	Dollars raised from poppies	Unit Records	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 ⁺	Unit	Total
Line 8	Total hours members volunteered	Member Form Line 5		N/A	
Line 9	Total dollars spent	Member Form Line 6	\$	\$	\$
Line 10	Number of military families served	Member Form Line 7			

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!**



Unit AMERICANISM Report

CITATION OF MERIT



REQUIREMENT

CHAIRMAN

Diann Long
17402 Independence Court
Brook Park, OH 44142
(440)781-4935

Email – ken17402@yahoo.com

VICE CHAIRMAN

Kimm Bunch
10600 Fairlawn Drive
Parma OH 44130
(216) 401-8842

Email – kimmieb219@sbcglobal.net



**REPORT & NARRATIVE DUE TO DISTRICT
CHAIRMAN BY:**

(Select your district chairman from list below)

APRIL 15, 2026

District Americanism Chairmen

<i>Dist</i>	<i>Uni</i>	<i>First Name</i>	<i>Last Name</i>	<i>Address</i>	<i>City</i>	<i>SH</i>	<i>Zip</i>	<i>Phone</i>	<i>Email</i>
01	468	Jane Anne	Brenneman	5702 Angola Rd Lot 317	Toledo	OH	43615	(419) 345-9091	jtapper470@gmail.com
02	387	Deborah	Meyer	90 N Lincoln St	Minster	OH	45865	(937) 441-6497	debmeyer69@gmail.com
03	707	Natalie	Hollinger	6034 Cinnamon Tree Ct	Englewood	OH	45322	(937) 371-7011	nholling05@yahoo.com
04	615	Katie	Mackoway	8353 Lytle Ferry Rd	Waynesville	OH	45068	(513) 255-7669	kmackoway@yahoo.com
05	181	Beth	Bloomfield	114 W Liberty	Bucyrus	OH	44820	(419) 569-4665	rbnabloom03@aol.com
06	107	Penny	Scott	166 Coors Blvd.	Pataskala	OH	43062	(785) 375-1624	pennyscott@cox.net
07	062	Peggy	Park	PO Box 32	Chillicothe	OH	45601	(740) 775-5751	peggyprk@yahoo.com
08	376	Betty	Harris	103 Summit St	Somerset	OH	43783	(740) 408-0629	bettyharr2141@yahoo.com
09	103	Carolyn	Rice	4611 New London Rd.	Ashtabula	OH	44004	(814)512-6371	Newwheels76@gmail.com
10	499	Linda	Porter	1080 Country Club Dr	Wooster	OH	44691	(330) 641-8570	llscrp@sssnet.com
11	768	Jamey	Taylor	55055 Belmont Ridge Rd	Beallsville	OH	43716	(740) 213-9999	taylorjamey17@gmail.com
12	239	Paula	Lombardo	1400 Pegwood Dr	Columbus	OH	43229	(614) 827-5362	pgaile1354@gmail.com
13	627	Kimm	Bunch	10600 Fairlawn Dr	Parma	OH	44130	(216) 401-8842	kimmieb219@sbcglobal.net
14	566	Kari	Hines	1541 Lillian Road	Stow	OH	44224	(330) 671-5032	kari.hines4@gmail.com

Department Report Form

This Form must 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 to earn the Citation of Merit.**

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 _____		
Specific Award Name (if applicable)				

- How did your unit promote Star Spangled Kids, educating children and youth about the U.S. Constitution from the aspect of patriotism and Americanism? _____

- What training on flag history, etiquette, and proper disposal methods did your unit provide in communities? _____

- How did your unit promote patriotism and Americanism in communities? _____

- What avenues were used to increase participation in the ALA Americanism Essay Contest? _____

- How did your unit contribute to the advancement of The American Legion's Americanism programs? _____

NARRATIVE: Must be typed and not exceed 1000 words.
Include; answers from above, photographs and news articles.

IMPACT REPORT: Provide a copy of the following to your Unit President to be included in the Unit Impact Report. The line numbers are only a reference for the Unit Impact Report.

	AMERICANISM	Total
Line 19	Total number of hours	
Line 20	Total dollars spent	\$



Unit AUXILIARY EMERGENCY FUND Report



CHAIRMAN
 Lori Shields
 54 W. Barlow Rd
 Hudson, Oh 44236
 (330) 352-7550
wtshields107@gmail.com

REPORT & NARRATIVE DUE: April 15, 2026

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) _____						

- Give examples of how your unit educated and shared AEF resources with members? _____

- Give me some fund-raising ideas that your unit may have done.

NARRATIVE: Must be typed and not exceed 1000 words.
 Include; answers from above, photographs and news articles.



American Legion Auxiliary Buckeye Girls State



DIRECTOR

Gwen Schroeder-Zulch
PO Box 242
Jerry City, OH 43437-0242
(419) 494-7366

Email – gweniesue@yahoo.com

PROGRAM SUPPORT

Megan Wilson
1100 Brandywine Blvd Ste D
Zanesville, Ohio 43701
(740) 452-8245 (work)

Email – programs@alaohio.org

Year-Report Due: April 15, 2026

SEND REPORTS TO: Department BGS Director

Department Report Form

This Form must be attached to each narrative that is submitted for information, and possible Department award. Please fill out the information as completely and accurately as possible.

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		
Specific Award Name (if applicable)				

- How did your Unit promote the ALA Buckeye Girls State program in your schools and community

- How did your Unit recognize your 2025 delegates to ALA Buckeye Girls State? _____
- What unique ways did your Unit fundraise to help finance your Buckeye Girls State delegates

- How has your Unit improved your BGS Girls State program this year? Please give details of what worked or what needs more improvement. _____

NARRATIVE: Must be typed and not exceed 1000 words.
Include; answers from above, photographs and news articles.

IMPACT REPORT: Please provide a copy of the information below to your Unit President to be included in the Unit Impact Report.
The line numbers are only a reference for the Unit Impact Report.

Our ALA Service for Youth

	Service for Children & Youth	Total
Line 11	Total hours for ALA Girls State	
Line 12	Dollars spent on ALA Girls State	\$



Unit CHAPLAIN Report

CITATION OF MERIT



REQUIREMENT

CHAIRMAN
Michele N. Sandridge
1857 Marks Ave.
Akron, OH 44305
(330) 620-3443

michelesandridge@yahoo.com

Year-End Report & Narrative Due: April 15,2026



Department Report Form

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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		
Specific Award Name (if applicable)					

- During the year, how many Unit members volunteered to help with Memorial Services? _____
(example: attended memorial services of deceased members, serving wake meals, etc.)
How many Junior members participate in religious services at their meeting or church? _____
- What is the total number of prayer books, prayers, and devotions that were given to Veterans and where were they taken? (example: CBOCs, clinics, nursing homes, hospitals, VAMCs) _____

- How many of your Unit members, both Juniors and Seniors, sent a prayer for President Renee's Prayer Book?

- How much money did your Unit spend throughout the year on prayer books, devotions, etc.? (examples: materials, stamps, ink, etc.) and what were some of those items? _____

- _____
- _____

NARRATIVE: Must be typed and not exceed 1000 words.
May include; answers from above, photographs and news articles.



Unit CHILDREN & YOUTH Report

CITATION OF MERIT



REQUIREMENT

CHAIRMAN
Colleen Phillips
C-032 Co. Rd. 8B
Hamler, OH 43524-9785
(419) 439-0526

VICE CHAIRMAN
Jane Yaeger
17 E. High St
Plymouth, Oh 44865
(419) 989-2125



Email – ckphillips43524@gmail.com

Email – janeyeager2000@yahoo.com

**REPORT DUE TO DISTRICT
CHAIRMAN BY:**

APRIL 15,2026

Select your District Chairman from list below.

District Chairmen

DNO	UNO	First Name	Last Name	Address	City	State	Postal Code	Cell Phone	Email Address
01	468	Marybeth	Parker	961 S Renyolds Rd Lot 68	TOLEDO	OH	43612	(419) 344-4236	mbparker58@yahoo.com
02	381	Amanda	Shaw	4133 CO RD 9	BELLEFONTAINE	OH	43311	(937) 539-5786	mandeesdragon@hotmail.com
03	184	ROBYN	COOPER	901 W HIGH ST	PIQUA	OH	45356-1921	(937) 773-0165	ronaldcooper901@gmail.com
04	194	SUSAN	SEWELL	6967 HIDDEN RIDGE DR	WEST CHESTER	OH	45069	(513) 518-1233	sewell1954@yahoo.com
05	397	NICOLE	ARNOLD	4805 MAPLEVIEW DR	VEMILION	OH	44089-1627	(419) 577-0438	arnolds2004@gmail.com
06	518	HOPE	EATON	3964 CO RD 217	MARENGO	OH	43334	(419) 210-6088	hopeeaton90@gmail.com
07	062	CARI	STEINBROOK	531 N. HIGH ST	CHILLOCOTHE	OH	45601	(740) 804-7924	caristeinbrook@gmail.com
08	021	LYNN	LAFFERTY	PO BOX 164	CHAUNCEY	OH	45719-0164	(254) 245-4399	lynndlafferty@aol.com
09	103	Carolyn	Rice	4611 NEW LONDON RD	ASHTABULA	OH	44004	(814) 512-6371	newwheels76@gmail.com
10	557	MELISSA	COCHRAN	44175 HAMMOND SCHOOL RD	WELLSVILLE	OH	43968	(330) 708-0598	melissascott42@yahoo.com
11	768	JESSICA	SKELTON	46532 St Rt 145	Woodsfield	OH	43793	(740)228-2205	wrinkles4me2@yahoo.com
12	171	SHEILA	NOCKS	8060 SCHOTT DR	WESTERVILLE	OH	43081	(614) 563-4798	sheilanocks@yahoo.com
13	091	STACEY	LEHMANN	41 HENRY ST	BEREA	OH	44017	(440)465-3868	stacey_m15@hotmail.com
14	449	KAREN	PEEL	1140 CRESTVIEW AVE	AKRON	OH	44320	(330) 860-4814	karen.peel@sk2holdings.com

Department Report Form

This Form must 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 to earn the Citation of Merit.**

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

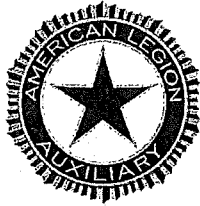
District # _____	Unit # _____	Unit Membership Goal _____	Unit Membership Total as of Report _____	
Name of Person Completing Report:			Unit Chair.	Unit Pres.
Phone # _____	Email _____	Membership ID _____		
Specific Award Name (if applicable) _____				

- What did your Unit do to promote the awareness to protect, care for and support children and youth (bullying, youth suicide, drug safety, Halloween safety, violence safety)? How much did you spend? _____
- What did you do to support/help the homeless/needly children in your community? How much did you spend and how many children did you help? _____
- Did you nominate any children for the Youth Hero Award and the Good Deed Award and how many nominations of each? _____
Did you honor those you nominated? _____
- What did you do to honor the nominated children? How did your Unit find children/youth to nominate? _____
- Did your Unit participate in the Kids of Deployed Heroes 2 (KDH2) honoring military children? What did your Unit do to participate? Did you do other activities to support military and veterans' children? Did you participate in National Military Children April 15th? Did you promote to others to wear purple April 15th? _____
- How did your Unit support The American Legion Children & Youth program (example - Child Well Being Foundation, and the American Legion Veterans and Children Foundation, National Family Week Oct. 7-13, 2025, and April Children & Youth month). Please list your money spent and time volunteered. _____
- What other activities did your Unit do to support Children and Youth that aren't listed above? (parties, drive-in events, auctions, dinners, etc.) How much did you spend and how much time did you volunteer? _____
- What children's service charities did your Unit donate to and how much did you donate? How many children were served? _____

NARRATIVE: Must be typed and not exceed 1000 words.
Include; answers from above, photographs and news articles.
money spent, hours volunteered & number of children served for each question.

IMPACT REPORT: Report the following to your Unit President to be included in the Unit Impact Report.
The line numbers are only a reference for the Unit Impact Report.

	Service for Children & Youth	Total
Line 13	Total hours for other Legion Family youth activities	
Line 14	Dollars spent on goods for youth activities	\$
Line 15	Dollar amount of direct cash aid to help a needy child	\$
Line 16	All other UNIT expenses (parties, dinners, paper goods, trophies)	\$
Line 17	Total number of children/youth served	
Line 18	Donations to all other child service charities	\$



Unit COMMUNITY SERVICE Report

CITATION OF MERIT



REQUIREMENT

CHAIRMAN

Darlene Leiter
2886 Myers Rd
Shelby, OH 44875
(419) 651-6598
Email – darleiter@yahoo.com

VICE CHAIRMAN

Rebecca Dippman
3186 S. River Rd.
Pemberville, OH 43450
(419) 409-6032
bdippman@gmail.com



REPORT DUE TO DISTRICT
CHAIRMAN BY:

April 15, 2026

Your District Community Service Chairman is listed below

District Chairmen

DNO	UNO	First Name	Last Name	Address	City	State	Postal Code	Cell Phone	Email Address
01	553	PATTI	WATSON	1150 ELCO AVE	MAUMEE	OH	43537	(419) 309-3362	pattiwatson09@yahoo.com
02	179	ERIN	FINFROCK	16399 St Rt 114	Grove City	OH	45849	(419)399-0783	finfocke@yahoo.com
03	776	JUANITA	BALLARD	2333 DUNCAN DR APT 7	FAIRBORN	OH	45324-2082	(937) 260-3685	thirddistpres18@gmail.com
04	615	ERICHA	JUSTINAINO	1100 SNIDER RD APT 67	MASON	OH	45040	(859) 801-3329	erichalynne@yahoo.com
05	181	CONNOR	TEETERS	3064 ANDREWS RD	BUCYRUS	OH	44820	(419) 563-4626	tetersco@hotmail.com
06	097	BARB	ARNDT	1996 CO RD 170	MARENGO	OH	43334	(419) 560-5897	barndt501@twc.com
07	62	LEAH	Deffenbaugh	3423 MCGINN DR APT 202	GROVE CITY	OH	43213	(740) 466-4281	Ldeffenbaugh123@gmail.com
08	021	DARCI	RODGERS	7865 STONE CASTLE RD	ATHEN	OH	45702	(740)416-7353	XXXXX
09	103	Carolyn	RICE	4611 NEW LONDON RD	ASHTABULA	OH	44004	(814) 512-6371	newwheels76@gmail.com
10	070	RUBY	WITHEROW	1020 CRAWFORD DR	WELLSVILLE	OH	43968	(330) 843-3380	r.witherow@comcast.net
11	768	LISA JO	SNODGRASS	PO BOX 115	BEALLSVILLE	OH	43716	(740) 359-6291	ljs549@me.com
12	144	ANN	GARREN	3744 ABNEY RD	COLUMBUS	OH	43207	(614) 749-2821	anngarren@hotmail.com
13	421	ALLISON	NYE	28207 WINSTERIA DR	NORTH OLMSTED	OH	44070	(330) 573-2228	Allison.nye7@gmail.com
14	331	HEATHER	SEPELAK	120 EAST HIGHLAND AVE	RAVENNA	OH	44266	(330) 631-5922	HCSEPELAK@yahoo.com

Department Report Form

This Form must 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 to earn the Citation of Merit.** Narrative word count must not exceed 1000 words. 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		
Specific Award Name (if applicable)					

- What is the total number of volunteers your Unit had for the year? (This cannot exceed the number of paid Senior Members.)

- What is the total number of Junior Volunteers your Unit had for the year?

- How many non-members volunteers, seniors and juniors, did you have and what event or project did they participate in? Did your Unit recruit these volunteers as new members and how did you do

- How did your Unit engage Junior Members and/or High School Students (with or without service hour requirements to graduate) in ALA Community Service activities, events 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 the most successful? What were any challenges you had?

- What types of Community Service activities, events, or projects were done in Unit?

NARRATIVE: Must be typed and not exceed 1000 words.
Include answers from above, photographs and news articles, flyers, Facebook posts, and Unit newsletters.

IMPACT REPORT: Provide a copy of the information below to your Unit President to be included in the Unit Impact Report. The line numbers are only a reference for the Unit Impact Report.

	For any service not included in other program reports	Total
Line 19	Total number of hours	
Line 20	Total dollars spent	\$



Unit EDUCATION Report

**CHAIRMAN**

Jane Ann Brenneman
 5702 Angola Lot 317
 Toledo, OH 43615
 (419) 345-9091

VICE CHAIRMAN

Jane Ridenour
 17070 Mercer Rd
 Bowling Green, OH 43402
 (419) 409-0572

Email – jtapper470@gmail.com

Email – prezjane@yahoo.com

REPORT & NARRATIVE DUE: April 15, 2026

Department Report Form

This Form must be attached to each narrative that is submitted for information, and possible Department award. Please fill out the information as completely and accurately as possible.

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 _____			
Specific Award Name (if applicable)					

- Did members/unit participate in Teacher Appreciation Week or National Education Week?
 _____ How?

- Did your Unit participate in Give 10 to Education Program? _____ Number of members participating: _____ Value of donations: _____
 What type of donations were made? _____

- Did your Unit schedule a Veterans in Community Schools Program? If so, how were they presented?

- Did Unit actively support veterans' association on campus? How? Amount of money spent or value of donations:

-
-
-
- Did your Unit offer scholarships? If so, how were the winners recognized? How were scholarships promoted?
-
-
-

- How many scholarship applications did your Unit receive? _____ Unit: _____
 Department: _____ National: _____

- How much money has your Unit contributed to the Nurse's Scholarship?

NARRATIVE: Must be typed and not exceed 1000 words.
 Include; answers from above, photographs and news articles.

IMPACT REPORT: Please provide a copy of the information below to your Unit President to be included in the Unit Impact Report.
 The line numbers are only a reference for the Unit Impact Report.

Scholarships Presented/Awarded by Our Unit

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



Unit HISTORY Report

HISTORIAN
Patti Watson
1150 Elco Ave
Maumee, Ohio 43537

(419) 309-3362

Email – pattiwatson77@gmail.com



REPORT DUE : April 15,2026

Department Report Form

This Form must 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 to earn the Citation of Merit.**

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		
Specific Award Name (if applicable)					

- How many senior and junior members and volunteers helped serve and/or participate in the year's activities and events? Give a brief description of the kinds of activities and events that were had.

- How many veterans were served and how many patriotic activities and events were planned and or presented. Select two activities or events that were most memorable and showed the spirit of serving and write a short story on them.

- Share a story that involved members Supporting the Creative Arts Festival.

- What was the total amount of funds raised from all activities and events? How and where were the funds distributed i.e., presented by check or in person and to what program and or charity?

- How did you support G.N.O.M.E (Giving Necessities to Our Military Everywhere)? _____

- Did your unit interview, video tape and post on You Tube and the ALA National History Facebook page senior and junior members stories for the “Members Remember Project”. Please elaborate on what was learned about your member(s).

- How is your unit archiving their history? Are you incorporating the unit’s history into a Cavalcade of Memories to show other members and the public on the unit’s service in the community? Consider having an open house and invite inactive members and the public for a tea to share with them the past history gathered in the cavalcade.

- Who was the honored veteran interviewed for the Veterans Service Project by your junior member(s)? Summarize what was learned about the veteran’s service i.e., when and where he served, his or her branch of service, and was the entire package submitted to Washington DC Library of Congress. Share a brief summary story on LegiontownUSA.

- What was the significant goal that the woman veteran or non-veteran achieved and what was learned about her during Women History Month of March? Submit your story to Facebook and to the American Legion Auxiliary Magazine. _____

- What was your goal quota membership, and did you reach goal? Any new or old members you would like to highlight? _____

NARRATIVE: Must be typed and not exceed 1000 words.
Include; answers from above, photographs and news articles.

The Unit History consists of what the Unit/members did in each program, (i.e. Americanism, Children & Youth, Education, VA&R, and National Security, etc.)



Unit JUNIOR ACTIVITIES Report

District Junior Activities Chairman



CHAIRPERSON

Michelle Bolin
4300 Bridgeview Ave.
Newburgh Hts., OH 44105-3124
(216) 253-2101
Email – ala627.bolin@gmail.com

2nd MEMBER

Brandy Little
6158 Licking Valley Rd.
Frazeytsburg, OH 43822-9517
(740) 644-9462
Email – unit764ala@gmail.com

3rd MEMBER

Hope Eaton
3964 County Road 217
Marengo, OH 43334
419-210-6088
Email - hopeeaton90@gmail.com

REPORT DUE: APRIL 15, 2026

**DISTRICT CHAIRMAN SEND TO DEPARTMENT CHAIRMAN
BY MAY 1, 2026**

District Junior Activities Chairmen

DN	UN	First Name	Last Name	Address	City	State	Postal Code	Cell Phone	Email Address
01	262	COLLEEN	PHILLIPS	C-032 CO RD 8B	HAMLER	OH	43524	(419) 439-0526	ckphillips43524@gmail.com
02	381	Amanda	Shaw	4133 Co Rd 9	Bellefontaine	OH	43311	(937)539-5786	mandeesdragon@hotmail.com
03	598	LISA	DRAHMAN WICKS	641 DEAUVILLE	DAYTON	OH	45429	(513) 520-9123	ldrahman@yahoo.com
04	194	MARSHA	GIEHLS	118 SOUTH WEST	MASON	OH	45040	(513)398-6566	Aux194@embarqmail.com
05	292	Nancy	Longbrake	169 New London Ave	New London	OH	44851	(567)215-7386	nllongbrake@neo.rr.com
06	764	BRANDY	LITTLE	6158 LICKING VALLEY RD	FRAZEYSBURG	OH	43822	(740) 644-9462	unit764ala@gmail.com
07	633	SANDY	GROOMS	135 COLUMBIA ST	SEAMAN	OH	45679	(937) 892-0400	s_grooms_219@yahoo.com
08	376	LYNN	LAFFERTY	P.O. BOX 164	CHAUNCEY	OH	45719	(254)245-4399	lynndlafferty@aol.com
09	103	CAROLYN	RICE	4611 NEW LONDON RD	ASHTABULA	OH	44044	(814) 512-6371	newwheels76@gmail.com
10	436	CONNIE	MORTON	11022 KENT AVE NE	HARTVILLE	OH	44632	(330) 354-6001	cjasmorton@hotmail.com
11	038	LEIANN	CLINE	72894 PLEASANT GROVE	DILLONVALE	OH	43917	7403913105	leianncline@gmail.com
12	144	VICKI	BUCK	3637 TORRINGTON ST	HILLARD	OH	43206	(614) 596-8540	LT248@aol.com
13	627	MICHELLE	BOLIN	4300 BRIDGEVIEW AVE	NEWBURGH HEIGHTS	OH	44105	(216) 253-2101	ala627.bolin@gmail.com
14	566	KATHY	BURKHAMMER	885 POLK AVE	AKRON	OH	44314	(330)738-8552	Lovemyangelsof2@yahoo.com

Department Report Form

This Form must be attached to each narrative that is submitted for information, and possible Department award. Please fill out the information as completely and accurately as possible. 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			
Specific Award Name (if applicable)					

- What did your Unit do to maintain/obtain new Junior members? _____

- How did your Juniors participate in Unit activities? What were the Juniors' duties for those activities?

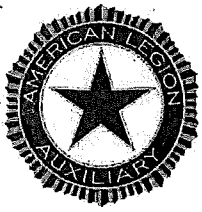
- What did your Unit do to mentor the Junior members leading them into Senior membership? _____

- How did your Unit/Juniors participate in the Star-Spangled Kids program? _____

- What did your Unit do to promote the Conference Covers for the 73rd Department Junior Convention with your Juniors? _____

- How did your Unit promote the Americanism Essay contest with your Juniors? _____

- How did your Unit promote the Poppy Posters Contest? _____



Unit LEGISLATIVE Report

CITATION OF MERIT



REQUIREMENT

CHAIRMAN

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



REPORT DUE: April 15, 2026

Department Report Form

This Form must 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 to earn the Citation of Merit.**

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			
Specific Award Name (if applicable)					

- Did your members subscribe to the American Legion Legislative Action Alerts? _____ If so, how many? _____
- Did your members utilize the **Grassroots Action Center** voter voice page from www.legion.org/action. If so, how many? _____
- How did you educate members on the legislative issues of the 118th and 119th Congressional legislative agenda promoted by The American Legion and how did your members employ those methods? _____
- Did your members write, email, or call their representatives, other than www.legion.org/action on American Legion priorities? _____ How many members? _____ How many responses? _____ Please attached copies of letters sent/received.
- Please describe how members were able to connect with their local, state and US officials and what were their successes? _____
- What legislative activities (town hall meetings, legislative receptions, working the polls, etc.) did members attend in your communities? _____

NARRATIVE:

Must be typed and not exceed 1000 words.
Include; answers from above, photographs and news articles.



LEADERSHIP



CHAIRMAN

Deb Meyer
90 N. Lincoln St.
Minster, OH 45865-1053
937-441-6497
Email – debmeyer69@gmail.com

Report & Narrative can be emailed
NARRATIVES DUE: April 15, 2026

Department Report Form

This Form must be attached to each narrative that is submitted for information and possible Department award. Please fill out the information as completely and accurately as possible.

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 _____		
Specific Award Name (if applicable) _____				

Did you submit a Unit Member of the Year? Yes _____ No _____

How did the unit share and review the following documents: The Leadership Plan of Action, Buckeye Messenger, Bulk Mailing, District Newsletter, Governing Documents and the Unit Guidebook?

How many members attended Unit, District and Department meetings including School of Instruction and Mid-Winter Conference? _____

Were members encouraged to attend leadership workshops and Mission Training? _____

How were unit members encouraged to use the National Senior Auxiliary Basic Course, the ALA Academy Courses or Webinars, and the Department on-line courses? _____

How were new members mentored to help their understanding of the ALA mission and to participate in the Auxiliary programs? _____

Are the unit members encouraged and mentored to hold a unit office and/or program chairmanship? _____

NARRATIVE: Must be typed and not exceed 1000 words.
Include; answers from above, photographs and news articles.



MEMBERSHIP



CHAIRMAN

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

REPORT DUE: April 15, 2026

Department Report Form

This Form must be attached to each narrative that is submitted for information and possible Department award. Please fill out the information as completely and accurately as possible

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 _____			
Specific Award Name (if applicable)					

Elaborate the following Questions in your narrative.

Narrative must be typed and not exceed 1000 words.

Narrative may include photographs and news articles.

- Please share how your Unit is using membership tools – other Auxiliary programs to engage, retain and recruit members. _____

- How did your Unit recruit Junior members? Please explain. _____

- How did your Unit recruit male spouses? Please explain. _____

- How did you utilize the Legion Family to recruit new members (i.e. mailing lists, Post meetings, Post social gatherings, etc.)? _____

NARRATIVE:

Must be typed and not exceed 1000 words.

Include; answers from above, photographs and news articles.



Unit NATIONAL SECURITY Report

CITATION OF MERIT



REQUIREMENT

CHAIRMAN

Pam Brenneman
2209 Valley Brook
Toledo, Ohio 43615
(419) 283-5655

Email – pam7352@buckeye-express.com

REPORT & NARRATIVE DUE: April 15, 2026



Department Report Form

This Form must 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 to earn the Citation of Merit.**

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 _____		
Specific Award Name (if applicable)				

• What National Security activities and/or projects were done by your Unit that were not near a military installation? _____

• When preparing care packages to send to our troops, how did you utilize the community? Please explain. _____

• Please check off the other things listed under National Security your Unit participated in. Please give a brief explanation of the activities.

➤ Present Blue Star and Gold Star Banners? _____

➤ Host a blood drive? _____

➤ Write letters to the troops? _____

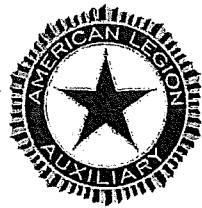
- Have a POW/MIA chair at meetings? _____
- Recognize ROTC and JROTC cadets? _____
- How did your Unit participate and recognize family during National Military Appreciation Month? Local Military Appreciation Recognition? _____
- Wear RED on Friday in honor of our deployed service members? _____

NARRATIVE: Must be typed and not exceed 1000 words.
 Include; answers from above, photographs and news articles.

You must provide a copy of this report to your Unit President so the below totals can be included in the Unit Impact Report. The line numbers are only a reference for the Unit Impact Report.

Our ALA Service for Military Families

	Service for Military Families	Total
Line 8	Total hours members volunteered	
Line 9	Total dollars spent	\$
Line 10	Number of military families served	



Unit POPPY Report

CITATION OF MERIT



REQUIREMENT

CHAIRMAN

Vicki Monroe
7988 Asbury Hills Dr.
Cincinnati, OH 45255
(513) 706-0524

Email – vmonroe9652@gmail.com

REPORT & NARRATIVE DUE: April 15, 2026



Department Report Form

This Form must 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 to earn the Citation of Merit.**

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		
Specific Award Name (if applicable)				

- How many poppies were distributed by your Unit throughout the year and where were these poppies distributed?

- What other poppy items were sold throughout the year, and what were these items?

- What was the amount of money that was raised by your Unit for the Poppy Fund? _____

- How did your Unit celebrate National Poppy Day? _____

- How did you share the Poppy Story with the community? _____

NARRATIVE: Must be typed and not exceed 1000 words.
 Include; answers from above, photographs and news articles.

Please provide a copy of the information below to your Unit President to be included in the Unit Impact Report. The line numbers are only a reference for the Unit Impact Report.

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

	Service for Veterans/Military	Total
Line 6	Number of poppies or poppy items distributed	
Line 7	Dollars raised from poppies	\$



Unit PUBLIC RELATIONS Report



CHAIRMAN
 Rebecca Long
 2951 Gallant Rd
 Radnor, Oh 43066
 614-314-3746
 Rebecca.ohala@gmail.com

REPORT & NARRATIVE DUE: April 15, 2026

Department Report Form

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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 _____		
Specific Award Name (if applicable)				

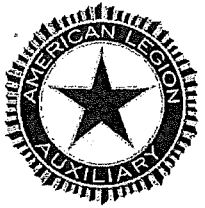
- How did your Unit maintain communication with your membership? _____

- How did your Unit promote the ALA and its mission within your community? _____

- What type of response have you received from the community (i.e., new members, volunteers, attendance at events, etc.). _____

- How does your Unit create/maintain an active/updated media contact list? _____

NARRATIVE: Must be typed and not exceed 1000 words.
 Include; answers from above, photographs and news articles.



Unit VETERANS AFFAIRS & REHABILITATION Report Form

CITATION OF MERIT



REQUIREMENT

CHAIRMAN
 Deb Sutterlin
 950 Twp. Rd. 2506
 Perrysville, OH 44864-9713
 (330) 465-9230

VICE CHAIRMAN
 Robyn Cooper
 901 W High St
 Piqua, Ohio 45356
 (937) 214-6307

Email –
 debutterlin270@gmail.com

Email –
 ronaldcooper901@gmail.com



REPORT & NARRATIVE DUE TO DISTRICT CHAIRMAN
April 15, 2026
BY:

Your District VA&R Chairman is listed below.

District VA&R Chairmen

DNO	UNO	First Name	Last Name	Address	City	State	Postal Code	Cell Phone	Email Address
01	553	PEGGY	SHERWOOD-HAYES	156 ROSEANNA	TOLEDO	OH	43615	(419)386-7020	peggysherwoodhayes@yahoo.com
02	444	SHIRLEY	MAURER	062647 ST RT 219	NEW KNOXVILLE	OH	45871	(419)733-3397	dmaurer@nktelco.net
03	707	CATHY	HUTTON	316 W WENGER RD	ENGLEWOOD	OH	45322-1828	(937) 620-7661	cathyhutton73@gmail.com
04	450	JUDY	MAUPIN	3194 BEECH RD	BETHEL	OH	45106	(513) 560-0534	hudi@aol.com
05	292	DARLENE	LEITER	2886 MYERS RD	SHELBY	OH	44875	(419) 651-6598	darleiter@yahoo.com
06	085	LOLA	NIXON	44 CURTIS AVE	NEWARK	OH	43055	(740) 345-1567	nix7lo@roadrunner.com
07	047	BETTY	TAYLOR	207 HIGH ST	WHEELERSBURG	OH	45696	(740) 250-3249	alaunit47@yahoo.com
08	021	LYNN	LAFFERTY	P.O. BOX 164	CHAUNCEY	OH	45719	(254) 245-4399	lynnlafferty@aol.com
09	103	CAROLYN	RICE	4611 NEW LONDON RD	ASHTABULA	OH	44004	(814) 512-6371	newwheels76@gmail.com
10	436	JULIE	MARTIN	12574 ISLANDVIEW AVE NW	UNIONTOWN	OH	44685	(330) 730-3795	msjulieamartin@gmail.com
11	071	JANE	KLUG	937 PEARL ST	MARTINS FERRY	OH	43935	(740) 310-7179	janeklug@sbcglobal.net
12	164	KAY	HAYMAN	2649 MCCOMB RD	GROVE CITY	OH	43123	(614)537-4359	kaybh@juno.com
13	002	CINDY	BOEHLEIN	6669 ROCHELLE BLVD	PARMA HTS	OH	44130	(440) 212-5150	cboehnlein55@gmail.com
14	685	CINDY	MASOWICK	9320 ROOT DR	STREETSBORO	OH	44241	(330) 714-3873	cjidgy@gmail.com

Department Report Form

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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 _____			
Specific Award Name (if applicable)					

1, How many senior members participated in VA&R projects/events? _____
 How many junior members participated in VA&R projects/events? _____

2. How did you support rehabilitations and healing of veterans through arts, crafts, and hobbies? Please include hours and money spent. _____

3. How did you support veterans/ caregivers? Family members? Veterans' survivors within a year of a veteran's passing? (Include hours and money spent).

4. How did you support a VA facility? _____

5. What did the members and auxiliary do to support veterans in your community? Include hours and money spent for each project/event.

6. Did you recruit new members to volunteer at a VA facility? _____ How many? _____
 What did you do? _____

NARRATIVE: Must be typed and not exceed 1000 words.
 Include; answers from above, photographs and news articles.

IMPACT REPORT: Provide a copy of the information below to your Unit President to be included in the Unit Impact Report. The line numbers are only a reference for the Unit Impact Report.

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

	Service for Veterans/Military	Total
Line 1	Total hours members volunteered	
Line 2	Total dollars spent (include VA&R Assessment here)	\$
Line 3	Total number of veterans/military assisted	
Line 4	Total number of "Veterans in Community Schools" presentations facilitated	

