

AMERICANISM ANNUAL REPORT 2025-2026

Please return your Unit's report/narrative by May 1, 2026
Monika Monize 602-549-1583 mcmonize@icloud.com

Unit Number _____ Americanism Chairman _____ Number of Members _____

1. How did your Unit promote Star Spangled Kids, educating children and youth about the U.S. Constitution from the aspect of patriotism and Americanism? Incorporate how you utilized the Star Spangled Kids kits provided by National, including any success story highlights.
2. What training on flag history, etiquette, and proper disposal methods did you Unit provide in the community?
3. How did your Unit identify itself as the resource for training and assistance in promoting patriotism and Americanism in your community? *eg, Color and Honor Guards, celebration of patriotic holidays, activities to honor or assist veterans, speeches*
4. What avenues did you use to increase participation in the Americanism Essay Contest? How many essays were submitted?
5. How did your American Legion Family contribute to the advancement of The American Legion's Americanism Program? *Baseball, Oratorical Contest, Operation Comfort Warriors, Scouting, ALLECA, Jr. Shooting Sports, Boys and Girls State/Nation, Flag Education, Citizenship Programs, School Programs*
6. Are you applying for any Department Americanism Awards? --*Keske Americanism Plaque for Units 150 and under, --Sawyer Americanism Plaque for Units 151 to 350, --Stebbins Americanism Plaque for Units 351 and over, --Elizabeth Ann Brown-Paxson Americanism Award*
BE SURE TO CHECK SPECIFIC AWARD RULES IN DEPARTMENT AWARDS MANUAL

Department of Arizona
Auxiliary Emergency Fund Year End Report
2025-2026

Please Return to:
Barbara Shields
928-856-1949 shields_barb@yahoo.com
Your Year End Report form is due to me by May 1, 2026.

Unit # _____ Unit Chairman: _____

Unit Mailing Address _____

1. Did your Unit donate to the National Auxiliary Emergency Fund?

Yes _____ No _____ What was the total donated amount? \$ _____

2. Did an individual(s) donate to AEF? Yes _____ No _____

Name(s) _____	amount _____
_____	amount _____
_____	amount _____
_____	amount _____

3. Did you have a special fund raiser for AEF: Yes _____ No _____

Describe _____

4. Did member(s) in your unit receive assistance from the National AEF in 2025-2026?

Yes _____ No _____ How Many? _____

5. **What resources were used to assist your members?**

6. **Does your unit have an assistance fund to help members?**

Yes _____ No _____

7. **Is your unit submitting a narrative detailing the way the AEF program was promoted to compete for the "Patricia M Lee - Gloria Elliott Memorial Plaque?**

Yes _____ No _____

Be sure to include a copy of this report as the last page.

ALA Unit Chaplain's Report Form 2025-2026

Due May 1st 2026 to DeDe Dexter

AzDeptChaplain@gmail.com or mail 480 S. Calvary Way Cottonwood, AZ 86326

Unit Name/Unit #: _____

Chaplain's Name: _____

Chaplain's Email and Phone Number: _____

Introduction

This report summarizes the activities, spiritual support, and overall wellbeing of the unit during the reporting period.

Unit Spiritual Activities

- Conducted Invocation and Benedictions at unit meetings? Y/N
- Provided spiritual counseling and support to unit members and their families? Y/N
- Performed Draping Charter ceremonies Y/N How many unit members lost by death? ____
- Reported names of members who are ill at meetings? Y/N
- Visited ill members and veterans in nursing homes and/or hospital? Y/N How many ____
- Sent get well cards? Y/N How many _____
- Sent Sympathy Cards? Y/N How many _____
- Sent Thinking of You/Joy Cards? Y/N How Many _____
- Made Phone calls to members? Y/N How many _____
- Attended Memorial Service/Funerals/Celebration of Life? Y/N How many _____
- Participated in Initiation of New Members Ceremony? Y/N How many new members ____
- Participated in Hall Dedication Ceremonies? Y/N How many _____
- Participated in Four Chaplain Ceremony? Y/N Date: _____
- Participated in Wreath's Across America? Y/N Where _____
 - Donations? Y/N
 - Placed Wreaths? Y/N
 - Picked up Wreaths? Y/N
- Did your Unit prepare a Prayer Book for the Unit President? Y/N
- Did your Unit send a prayer in for the Department President's Chaplain Gift? Y/N
- Did your Unit participate in the ALA Arizona Chaplain Circle? Y/N

Conclusion

The chaplaincy continues to play a vital role in maintaining the spiritual and emotional resilience of the unit. Ongoing efforts will focus on expanding support services and fostering a supportive environment for all members. Thank you for all your efforts to keep your unit's faith in God and Country strong!

Please use a separate sheet to elaborate and/or submit an entry for the **Sharon Alley Service to God and Country Award** (Please follow the department guidelines for award submission)

Children & Youth Year End Report Form 2025/2026

Unit_____ Total Membership_____

Chairman Name_____

Address_____

Phone_____ email_____

Did your unit involve the Legionnaires, the Sons and the Legion Riders? _____

How many of each group participated? _____

Describe how they participated. _____

What events were held to support children and youth? _____

This includes Kids of Deployed are Heroes 2 (KDHD). Please include how many children were helped, volunteer hours, funds raised and used, and online materials used. Please separate programs for veterans and military families from other children and youth activities.

What was the amount of money raised or donated to the ALCWF? _____

How was the Child Well-Being Foundation promoted? _____

How did you celebrate the Month of the Military Child in April, including Purple Up! Day on April 15th? _____

How did you promote the ALA's Youth Hero and Good Deed Awards? _____

Is there something your members accomplished this year for which you are exceptionally proud? _____

UNIT Children & Youth Year-End Report Form (form on back side of this paper). You may use separate paper if needed. Attach photos if possible.

Please return this form, Unit Year-end report, to:

Dept of AZ Children & Youth

Barbara Whitney

12556 East 50th Lane

Yuma, AZ 85367

or email: barbaraw527@icloud.com

on or before May 1, 2026.

(When emailing, please put your unit number in the subject area.)

Children and Youth Plaques

Reminder: A typed narrative, of not more than 1,000 words, must be submitted to be eligible for:

The Arizona Child Welfare Plaque (awarded to a unit with membership of 151 and over).

The Jeanne McQuown Memorial Child Welfare Plaque (awarded to a unit with membership of 150 and under).

or

The Mary Bean Children And Youth Plaque (awarded to the unit for the most outstanding Children and Youth program during the month of April).

Monthly Unit Request:

I am asking that each unit submit to me by the 12th of each month something related to Children & Youth that happened in their unit.

It can be a synopsis of the activity to include the unit name and number. Pictures are definitely welcomed. I would be thrilled if every unit submitted something each month.

For God and Country,

Barbara Whitney

ALA Dept. of AZ C&Y chairman

Barbaraw527@icloud.com

Due date May 1 , 2026

Community Service 2025 – 2026
Year End Report Form

Unit Chairman

Unit Name and number

Chairman Address

1. What specific things did your unit do to make your community a better place to live?

2. What did your unit do to mobilize community support for those who are serving our country?

3. How did your unit participate in the Martin Luther King Jr. Day of Service and the 9/11 National Day of Service? Please give as many specific details as possible.

4. Did your unit find new and creative ways to promote the ALA Community Service program? Please give specific examples.

5. How did your Post, Unit, Squadron, and Chapter work together to promote and carry out an American Legion Family Day activity? Please send a description of the activity with photos.

Program	Miles Driven	Money Spent	Hours
Adopt a Highway			
Assisting with Blood drives			
Community Beautification			
Community Support for Troops			
Food Banks			
Habitat for Humanity			
Homeless Shelters			
Individual Community Needs			
Libraries			
Make a Difference Day			
Nursing Homes			
Recycling			
Schools			
Senior Citizen Centers			
Welcome Home Troops			
Youth Appreciation Week			
Martin Luther King Jr. Day of Service			
9/11 National Day of Service			
American Legion Family Day activity			
Other			
Totals			

If you are competing for a Department Award, please submit a narrative following the rules in the Department Awards Manual.

Mail by May 1 , 2026

Joanie Whitsett 707-478-2102 joanieala86@gmail.com

**EDUCATION YEAR-END REPORT FORM
2025-2026**

Unit Number _____

Total Membership _____

Chairman Name _____

Address _____

Phone Number _____ e-mail address _____

Supporting the Program

Number of Unit Members involved in support of the program _____

Number of Juniors involved in support of the program _____

Number of Legionnaires involved in support of the program _____

How did the Unit promote the National Scholarships?

How did your Unit promote the Department Scholarship, the Wilma Hoyal-Maxine Chilton Memorial Scholarship?

Number of Unit Scholarships awarded _____ Dollar value _____

Did your Unit participate in American Education Week? Briefly describe the activities.

Did your Unit participate in the *Give 10 to Education* program? How many *Give 10 to Education* certificates were given in your Unit? _____ Briefly describe the activities.

Did your Unit present the *Veterans in the Classroom* program? Briefly describe the activities.

Did your Unit actively support any Veterans associations on college or university campuses? Briefly describe the activities.

Did your Unit help assist needy students? Briefly describe the activities.

Did your Unit involve the Legionnaires, the Sons and the Legion Riders? How many of each group participated? In what way did they participate?

What were the other community resources or activities your Unit used to assist students, teachers or support personnel?

You may use separate paper, if needed.

Please return this form to the Education Chairman, **Julie Vietri, 7663 E. 6th St., Scottsdale, AZ 85251 or jvietri@msn.com , on or before May 1, 2026.**

Reminder: A typed narrative, not to exceed 1000 words, must be submitted to be eligible for the **Jean Batley Plaque** or the **Chrysteen Fritzinger Plaque**.

**AMERICAN LEGION AUXILIARY
2025-2026 FINANCE REPORT FORM**

Complete and Return by May 1, 2026 to:

Yolanda Bonilla

15606 S. Gilbert Rd. #103

Chandler, AZ 85225 Or Email to yodobo@msn.com

Unit Name No. ALA _____

(Please list exactly as registered with the Internal Revenue)

EIN No. _____

Unit/District Treasurer: _____

Address: _____

Email: _____ Phone _____

Fiscal Year: _____

Date Last Filed 990 with IRS: _____ If so, Which One? _____

#####

Did You File Incorporation with the Arizona Corporation Commission? _____

ACC No. _____

Unit/District Name and No. _____

(Please list exactly as registered with the Arizona Corporation Commission)

Filing Date: _____

Statutory Agent: _____

Address: _____

Email: _____ Phone _____

Fiscal Year: _____

This information is a requirement for maintaining compliance with the National organization, Internal Revenue and the Arizona Corporation Commission for Non-Profit Organization status. This information is ONLY USED FOR REFERENCE PURPOSES and will become part of the American Legion Auxiliary Department of Arizona files after review by the Finance Committee.

Any questions? Call/email Yolanda Bonilla – 602-989-3321 or yodobo@msn.com

**AMERICAN LEGION AUXILIARY
GIRLS STATE REPORT FORM
2025-2026**

Please complete and return no later than May 1, 2026, to:

Penny Maklary 1354 12th St. Douglas, AZ 85607 520-850-1951 ahhpenny@aol.com

UNIT NAME_____ **UNIT NUMBER**_____

UNIT CHAIRMAN_____

ADDRESS_____

TOTAL MEMBERSHIP_____ **PHONE**_____

1. Number of delegates sponsored?_____

2. How were schools contacted?_____

3. Did your UNIT hold or participate in an Orientation?_____

4. Did your UNIT hold an activity where Girls State Citizens were asked to speak?_____

Please describe activity:_____

5. How many girls were eligible to be Auxiliary members?_____ **How many joined?**_____

6. Describe any publicity coverage:_____

7. What type of fundraising events did you hold?_____

8. How many members signed up for the Fry's Rewards Program?_____

9. Did you make an "extra" donation (not registration fees)?_____ **Amount?**_____

What was it designated for?_____

10. Please give names of those contributing for our delegates here, on back or on separate sheet:_____

11. Please include any comments or information you would like to share here, on back or on separate sheet:_____

12. Are you submitting an entry for the YVONNE GRAINGER PLAQUE?_____

Year-End History Report

Due May 1, 2026

Unit Name:

Unit Number:

District Name:

District Number:

Name of person completing the report:

You're phone & email address

If you had a **Department Officer** officially attend a unit/district function (including mission training), please provide the following:

Date of Officer Visit:

Officer Name and Title:

Briefly, what events did the officer attend while visiting your unit?

Were junior members involved or attending function? Yes: _____ No: _____

Were any significant gifts presented to the office in attendance? Yes: ____ No: ____

Please provide any other details for the Arizona Department History for 2025-2026 below (**or attach information**).

Please describe one effort that your Unit/District completed this year of which you are most proud about.

Will you Unit/District be submitting History Book at the Department Convention?

Yes: _____ No: _____

You may send in pictures with this entry, and please make copy to keep for our Unit History. We wish you a successful year with great stories to share.

Please return your report back to me at the information listed below:

US Mail: Stephanie McMullen / 16575 W. Moreland St. Goodyear, AZ 85338

Email Address: stephaniemcmullenala62az@gmail.com **Questions:** Text (623) 910-4716

JUNIOR ACTIVITIES REPORT FORM 2025-2026

Please return form no later than May 1, 2026

Jacque Solis 520-234-7909 jacquelinesolis24@gmail.com

Unit Name and Number _____ Membership _____

Chairman _____

Address _____ Phone _____

1. How did your Unit involve your Junior members in mission-related activities, such as poppy distribution, community service projects, helping military families, or supporting veterans?

2. What leadership opportunities did you provide to actively involve your Junior members in Unit, District, and/or Department meetings?

3. What did you do to increase involvement in the ALA Patch Program for Junior members and young Sons of the American Legion?

4. How did you promote and encourage participation in the both the Junior Member of the Year Award AND the Rising Star Junior Award?

5. How did you make Junior meetings fun and informative?

6. Are your Juniors applying for any Department Awards?

--Ethel M. Jarvis Service to Veterans Plaque, --Moulton Junior Auxiliary Scrapbook Plaque, --Miss Poppy Plaque, --Ronnie Sterling Junior Recruiter of the Year Award, --Connie Erickson Middlebrook Junior History Plaque, --Kory Lynn Jarvis Junior Auxiliary Member of the Year Plaque, --Evelyn Hoff Junior Prayer Book Plaque
BE SURE TO CHECK SPECIFIC AWARD RULES IN DEPARTMENT AWARDS MANUAL

7. Is your Senior Unit applying for any of the Department Awards reflecting their involvement with the Juniors?

--Elizabeth Ann Brown-Paxson Americanism Award, --Department Junior Activities Plaque to Unit with membership 150 and under, --Kitchen Junior Activities Plaque to Unit with membership of 151 and over, --Barbara Freda Junior Involvement Award

BE SURE TO CHECK SPECIFIC AWARD RULES IN DEPARTMENT AWARDS MANUAL

**American Legion Auxiliary
Department of Arizona
Leadership/Arizona Mission Training
2025 - 2026 End of Year Report**

Unit # _____ **Unit Name** _____ **Membership** _____
Contact Person _____ **email** _____

1. As part of the ALA Centennial Strategic Plan, did your Unit participate in any ALA Academy courses? _____ **How Many?** _____ **Please name them** _____

2. Did you have Unit members above the Unit level who mentored your members?
How many mentors? _____ **How many members mentored?** _____

3. How many Mission Training's did your members attend? _____

4. Of members attending these training's, did you receive feedback concerning what they learned? If so, what was included in the feedback?

5. Did your Unit submit narratives for any Leadership Awards?

Yes _____ **No** _____
_____ **Unit Member of the Year**
_____ **LaVan Erickson Leadership Plaque**
_____ **Vickey J. Zwall Mentor of the Year Plaque**

6. Were there any highlights or information taken from your training's that you would like to share? If so, please use back of this form. Thank You.

Karen Smith ksmith111@cox.net or 1133 Carmelita Drive, Sierra Vista 85635

**AMERICAN LEGION AUXILIARY DEPARTMENT OF
ARIZONA**

LEADERSHIP/ARIZONA MISSION TRAINING UNIT

MEMBER OF THE YEAR

APPLICATION

- 1. Application open to senior members who are not currently, nor have ever been, in an elected or appointed position leadership role higher than Unit President.**
- 2. Each Unit may submit one entry only.**
- 3. Unit must submit a narrative of 1,000 words or less describing the nominee's accomplishments and activities together with the following information. Please include and send this form and narrative together.**
- 4. Due to Leadership chairman by May 1, 2026.**

Karen Smith

1133 Carmelita Drive

Sierra Vista 85635

ksmith111@cox.net

(520) 249-1119

NAME _____ **DATE** _____

ADDRESS: _____

CITY _____ **ZIP CODE** _____

EMAIL _____ **TELEPHONE** _____

NOMINEE'S MEMBERSHIP NUMBER: _____

NOMINEE'S YEARS OF MEMBERSHIP _____

NAME AND # OF UNIT SUBMITTING APPLICATION:

_____ **MEMBERSHIP** _____

PLEASE CHECK aladeptaz.org FOR CRITERIA REQUIRED FOR THIS AWARD.

How to Complete the Legislative Year-End Report

A simple walkthrough for every Unit

Box 1 – Unit Information

This one is easy! Just fill in your Unit name, number, and contact information.
This helps me reach you if I have questions — especially if your handwriting gets a little creative.

Box 2 – What Your Unit Did to Promote Legislation

Tell me what your Unit did this year at the **Unit level**. Examples include:

- Sharing monthly updates on grassroots bills with your members
- Encouraging members to write letters during Legislative Month
- Promoting “Get Out the Vote” efforts for the state
- Or the most common answer: **N/A — we didn’t do anything**
 - And yes... **that is completely OKAY!**
 - Reporting “nothing” still counts and still helps Arizona.

Box 2, Question 2 – Did you do any of the following?

This section is simply a checklist to help jog your memory.

If you didn’t do something, just check **No**.

(Hint: This is a state election year with races for Governor, Attorney General, U.S. House seats, and State Legislature seats.)

Box 3 – Campaigns (Grassroots Advocacy)

This refers to actions taken through the American Legion’s grassroots system:

<https://www.votervoice.net/AmericanLegion/Register>

If you participated:

- How many actions did you complete

- Did you receive any responses
- How did you keep track

For example, in my Unit we report in March how many actions we submitted and whether we received replies. Personally, I save all response emails in a special folder so I can easily count them at year-end.

(And yes... Arizona is rarely in the top 20 for participation. Wouldn't it be great to change that? Just do your best!)

You can also report if you:

- Hand-wrote and mailed letters
- Called or texted an official
- Contacted national, state, or local leaders

How did you promote these efforts?

Examples:

- Mentioned them in meetings
- Included them in your newsletter
- Or... didn't promote them at all — and that's fine, just report it.

Box 4 – Final Page

- Did your Unit promote the Auxiliary at the local, state, or national level?
 - If not, simply mark **N/A**.
- Is there anything else you want me to highlight or promote for you?
- Are you including a narrative?
 - If yes, I'll make sure it stays attached.
 - If no, I'll use the contact information from Box 1 if I need clarification.

Submitting Your Report

 **Email your Year-End Report by May 1, 2026**
alalegislativeaz@gmail.com

Subject line:

Unit # – Leg 25-26 Year-End

I will respond within 24 hours.

If you don't hear from me, please call **623-640-0134**.



If you prefer to mail:

Kathy Amery

9902 W Desert Hills Drive

Sun City, AZ 85351

Please reach out anytime (except during sleeping hours!) if you have questions or want to send photos.

Legislative Report Year-End 2025-2026

Department Arizona Box 1

Unit Number _____

Unit Name _____

Unit Chairman _____

Contact email _____

Contact Phone _____

Unit meetings- Tell me about it! Box 2

What have you done to promote Legislative at your meetings?

Did you do any of the following?

Legislative Rallies No ☐ Yes ☐ Town Hall Meetings No ☐ Yes ☐

Meet the Candidates Night No ☐ Yes ☐

Did you do something else to promote legislative activities? No ☐ Yes ☐

Did you promote outside your unit? For example, to Legion, Riders or SAL?

No ☐ Yes ☐

Voting

Did the Unit promote voting to its members? No ☐ Yes ☐

Give details on a separate sheet or make sure to include them in the narrative.

Are you including pictures? No ☐ Yes ☐ If so, please make sure to include event, who is in pictures, date.

Please provide details here or on another sheet or in your narrative.

Campaigns **Box 3**

Are anything you did writing letters, conversations or grass roots efforts. Give details on a separate sheet or make sure to include them in the narrative.

Were there any campaigns to White House, U. S. Senators, Reps, State or Local Officials?

No ☐ Yes ☐

How many emails through Grass Roots action center sent?

U.S. Senators _____ U.S. Reps _____ State Officials _____ Local Officials _____ White House _____

How many letters were sent to:

U.S. Senators _____ U.S. Reps _____ State Officials _____ Local Officials _____ White House _____

Number of Other Contacts (visits, telephone calls, or direct e-mails etc.) with?

U.S. Senators _____ U.S. Reps _____ State Officials _____ Local Officials _____ White House _____

Number of Replies Received:

U.S. Senators _____ U.S. Reps _____ State Officials _____ Local Officials _____ White House _____

How did you promote these activities?

Box 4-Last page

Did you or your unit write a resolution, or petition for rights for our Veterans, for example go to your local Mayor and petition for Be the One Day 1st day of each month?

No ☐ Yes ☐

Describe any other Legislative activity that you would like to share. Give details on a separate sheet or make sure to include them in the narrative.

Narrative included? No ☐ Yes ☐

E-MAIL YEAR-END REPORT BY MAY 1, 2026

alalegislativeaz@gmail.com

- **in the subject line put Unit # Leg 25-26 Year End-**

I will respond within 24 hours of receiving. If you do not hear from me- call 623 640 0134

If you prefer to mail Kathy Amery | 9902 W Desert Hills Drive Sun City, AZ 85351

Membership Report 2025-2026

Due May 1, 2026

Marge Christianson alaunit62az@gmail.com or 9611 W Bonita Ct, Sun City AZ 85373

Unit Name and Number: _____

Person completing form: _____ Email Address: _____

of Senior members _____ # of Junior members _____

RETENTION OF MEMBERS:

1. Please describe any Unit/Post membership renewal/rejoin incentives such as discounts, early bird rewards (dinner, drink coupon), prizes, event drives-- including which ones were most effective?
2. Please describe how your Unit reached out to members who did not renew -- via email, text, phone or mail? Did you send out any "America 250" postcards? Which efforts were most effective?
3. Please describe your most effective on-going efforts to engage Senior Members in the ALA mission:
4. Please describe your most effective on-going efforts to engage Junior members in the ALA mission:

RECRUITING NEW MEMBERS

1. Please describe any public event(s) where you recruited new members and if and why you found the effort worthwhile.
2. Please describe any recruitment efforts such as family & friends promotions, popular activities at Post home, Legion Family cross-recruitment etc. that you found effective.

Thank you for sharing information that will help other Units benefit from your experience!

American Legion Auxiliary Department of Arizona

Year-End Music Report Form

Due to Chairman no later than May 1, 2026

Unit / District Name & Number: _____

Unit / District President: _____ Unit / District Music Chairman: _____

No. of Unit Members: _____

1. Does the Unit/District have a Music Chairman? _____.

2. If so, does that person choose the songs for all meetings? _____

3. If the Unit / District does not have a Music Chairman, who decides which songs to sing or play? _____

4. How is music incorporated into the various functions at the Unit / District or Post? _____

5. Do members regularly participate in music programs in their individual houses of worship and communities?___ If so, give some examples: _____

6. Are regular visits made to hospitals / facilities to entertain with song? _____

If so, what locations were visited and what kind of programs were held? _____

Email / Text / Snail Mail to me.

Alma Mattingly, Department Music Chairman
16575 W. Moreland St.
Goodyear, AZ 85338
amblonde01@gmail.com
602-999-4054

NATIONAL SECURITY
ANNUAL REPORT FORM 2025-2026

Send completed form by May 1, 2026

Stacey Mayberry

702-403-4903

Email: mayberry.stacey@gmail.com

Membership Count _____

Name and Number of Unit _____

Unit Chairman _____

Activity	Number ALA Members Participated	Number of Hours	Money Spent	Miles Driven
Host/Attend a CERT Program				
Post POW/MIA at Unit Meetings	Yes NO			
Support Active Military Families. How Many _____				
USO Support				
Military Family Readiness Group				
Other Items: yard work, social calls, childcare, cooking meals, etc				
Award a Quilt of Valor	How many?			
Welcome Home Project				
ROTC/JROTC Programs				
Donate Blood				
Blue Star Families Blue Star banners given out?				
Gold Star Families Gold Star banners given out?				
Clip Coupons	Dollar Amount of Coupons?			

National Security continued

List other activities your Unit did for the active military.

Is your Unit entering a narrative for a Department Plaque?

1. Steffen Memorial Plaque for Units with membership of 150 and under Y or N

2. Speth Plaque for Units with membership of 151 and over Y or N

3. Helen Johnson Bone Civil preparedness (cert) plaque Y or N

Is your Unit entering a narrative for a National Award? If so, be sure to let me know.

American Legion Auxiliary Department of Arizona Annual Report Form

Past Presidents Parley 2025-2026

Please complete this form and return to me by regular SNAIL MAIL ONLY:

Patricia Lugo, 5421 W. Fremont Rd. Phoenix, AZ 85339 602-475-0208

REPORT FORM MUST BE RECEIVED BY MAY 1, 2026

UNIT NAME AND NUMBER: _____ Unit Membership count _____

UNIT CHAIRMAN: _____

HOME ADDRESS: _____

1. Does your Unit have an active Past President Parley? Yes _____ No _____

2. If so, number of members in your Parley? _____

3. Does your Parley include other Units? Yes _____ No _____

If yes, how many Units and include the name and how many members of the Unit

4. Did your Parley contribute to the Department Nurses Scholarship Fund?

Yes _____ No _____ If so, donation amount. \$ _____

5. Does your District have an active Past Presidents Parley? Yes _____ No _____

If so, number of members in the Parley. _____

6. Did your District Parley contribute to the Department Nurses Scholarship Fund?

Yes _____ No _____ If so, donation amount. \$ _____

7. Does your Unit or Parley honor Female Veterans? Yes _____ No _____

If so, please give a short explanation. _____

8. Are your Parley members attending the Department Past Presidents Parley Luncheon held at Convention? Yes _____ No _____

9. Do your Unit past presidents' mentor members? Does your Unit or District honor Past Presidents? If so, please give a short explanation. _____

9. Are you entering a narrative for the following Department Plaques?

Arizona Active Past Presidents Plaque Yes _____ No _____

Cora Grigg Past Presidents Parley Plaque Yes _____ No _____



POPPY REPORT 2026

Unit Name _____ Unit Number _____

Unit Chairperson _____ Phone _____ email _____

POPPY STATISTICS

2024-25 Poppy order _____ 2025-2025 _____

Money received from donations _____ Fundraiser amount _____

VOLUNTEERS

Seniors _____ Juniors _____ SAL _____ Veterans _____ Non-Members _____

HOURS

Seniors _____ Juniors _____ SAL _____ Veterans _____ Non-Members _____

Total Volunteers _____ Total Volunteer Hours _____

Number of Poppy Makers _____ Hours _____ Number of poppies made _____

Number of Certificates of Appreciation awarded _____ Poppies to Elected Officials _____

PROMOTING POPPY PROGRAM AND BENEFITS

Explain promotion to veterans

Explain promotion to community

--	--

Veterans assisted _____ Total Volunteer Hours _____ Total Money awarded _____

Explain assistance

--

Total veteran/community events utilizing poppies _____

Explain

Explain National Poppy Day Promotion

MISS POPPY PARTICIPATION

Age Category 6-12 _____ Age Category 13-18 _____ Explain participation during year:

Competing for Department Award _____

National Award _____

POPPY POSTER CONTEST

Number of schools _____ Number of posters _____ Number of Certificates Awarded _____

Number of Posters received in the different categories

Class I	Grades 2-3	_____	Class V	Graded 10-11	_____
Class II	Grades 4-5	_____	Class VI	Grade 12	_____
Class III	Grades 6-7	_____	Class VII	Special Needs	_____
Class IV	Grades 8-9	_____			

ALL POSTERS MUST BE RECEIVED BY MAY 10TH TO BE CONSIDERED. ATTACH COMPLETED APPROPRIATE DOCUMENT

Is the Unit competing for:

Marie Townshend Memorial Plaque _____

Marie Cooney Memorial Plaque _____

Patriotic Poppy Decoration Plaque _____

Nita Kimball Community Poppy Awareness Plaque _____

IDENTIFY ENTRY CATEGORY

MARIE COONEY PHOTO MUST HAVE EXPLANATION ON BACK, REMEMBER THE

RULES ALL REPORTS AND NARRATIVES DUE MAY 1, 2026

Kat Sticklin, Department Poppy Chair 928-322-1550

katsticklin2025@gmail.com

PLEASE EMAIL COMPLETED FORMS FOR EVERY EFFORT TO THE PSP to
PSP CHAIRMAN- ALADawnDavidson@gmail.com OR
SNAIL MAIL TO --11070 S. CaminoSanClemete, Vail, AZ 85641

Today's DATE_____

UNIT or DISTRICT from_____

CONTACT Person for UNIT or DISTRICT --***phone contact and email***

WHAT ACTIVITY OR PROJECT WAS PREFORMED FOR THE PRESIDENT'S
SPECIAL PROJECT?

WHO PARTICIPATED?_____

DATE OF DONATION / ACTIVITY- EFFORT FOR PSP_____

**American Legion Auxiliary
Department of Arizona
Public Relations 2025-2026
End of Year Report**

Unit #_____ Unit Name:_____ Membership:_____

Public Relations Chairman:_____ email:_____

1. Does your Unit have an online presence? ☐ Yes ☐ No

Website address:_____ Social Media: @_____

2. Does your Unit have a monthly bulletin or newsletter? ☐ Yes ☐ No ☐ Available Online

3. Will your Unit be submitting a Press Book at Convention? ☐ Yes ☐ No

4. Did you find the tools and packet provided from Fall Conference useful during your year as Public Relations Chairman? ☐ Yes ☐ No

5. Do you have any changes or recommendations on the PR Packet for next year? ☐ Yes ☐ No
List here:_____

6. Did you coordinate with your local media outlets to help cover your events? ☐ Yes ☐ No
If so how:_____

7. If our Department President visited your Unit, how did you promote her visit?

Year end reports are due to the Department PR Chairman no later than May 1, 2026

Shannon Mead, Department Public Relations Chairman
8938 W. Hilton Avenue, Tolleson, AZ 85353
shannonmead@live.com
623-521-1263 for questions

American Legion Auxiliary Department of Arizona Annual Report Form

2025 - 2026 VA&R Report Form - Due May 1, 2026

Return to Lynda Griffin, Lynda4ala@gmail.com, (623) 349-3979 (call or text)

Unit Name and Number: _____

NOTE: You can complete this report form or if you want to send a narrative answering the following questions, it can be used for Department or National award submissions.

1. How did your Unit/members support rehabilitation and healing of veterans through **Art, Crafts, and Hobbies?**
2. How did your Unit/members support veteran **caregivers, family members, and survivors?**
3. How did your Unit/members support your local **VA (Gift Shop, Arts, Bingo, Donations, etc) or Veteran State Home facility (cards, parties, donations, etc)?**
4. How did your Unit/members help the American Legion, AZ Department of Veterans Services, and Chamber of Commerce to promote or assist with **job fairs or standdowns for veterans and their families?**
5. How did your Unit/members support veterans and their families in the community by collaborating with **external like-minded organizations such as P.A.W.S.S., Honor Flight, Wreaths Across American, Quilts of Valor, etc?**
6. What **other** opportunities did your Unit/members take to support your local veterans and their families in your community?

Service to Veterans Annual Report Form
Please complete and return by May 1, 2026
Sara C. Decker 1256 W. Ivanhoe St., Chandler, AZ 85224
480-580-3269 saradeckeraz@gmail.com

Unit name and number _____
Chairman _____

Did the Unit/Members participate in:

Hospital Service:	Where _____	Hours _____	Cost _____
Gift Shop:	Where _____	Hours _____	Cost _____
Creative Arts:	Where _____	Hours _____	Cost _____
State Home Service:	Where _____	Hours _____	Cost _____
Stand Downs:	Where _____	Hours _____	Cost _____
Care of a Homebound Veteran:		Hours _____	Cost _____
Assist Homeless Veterans:		Hours _____	Cost _____
Salute to Veterans:		Hours _____	Cost _____
Adopt a Veteran:	How Many _____	Hours _____	Cost _____
Anything not listed:	Describe _____	Hours _____	Cost _____

Please account for all hours donated by the volunteers listed below:

<u>Number of Volunteers</u>	<u>Hours</u>	<u>Number of Veterans Served</u>
Legionnaires	_____	_____
Auxiliary	_____	_____
Sons	_____	_____
Juniors	_____	_____
Riders	_____	_____
Non Affiliated	_____	_____
TOTALS OF ABOVE	_____	_____
TOTAL MILES DRIVEN _____	TOTAL EXPENSE _____	

MAKE SURE TO ATTACH YOUR NARRATIVE FOR DEPARTMENT AWARDS

**Carmelite Staker Creative Arts Award Annual
Report Form
2025 - 2026**

Please complete and send to: Anita Ritter
8020 E Thomas Road, Unit 128
Scottsdale, AZ 85251-6668
Ritmar@cox.net
602-679-1785

Reports MUST reach me no later than May 1, 2026

Unit Name _____

Unit Number _____

Nwnber of Members _____

Unit Chairman or person completing this report: _____

Contact address or email: _____

Phone number _____

Did your Unit have a special fundraiser or event for Creative Arts this year? Please briefly describe.

Did anyone from your Unit volunteer at a Veteran's Hospital Creative Arts Festival this year? _____

How many _____

Total Hours _____

Did others attend a Creative Arts Festival, not as a volunteer? _____ How many _____

Total \$ amount donated for Creative Arts this year from your Unit _____