

The American Legion Department of Wisconsin Children & Youth Post Narrative Report Form

Post Name: _____ Post No: _____ District No: _____

Present Membership: _____ Address: _____

City: _____ State: _____ Zip: _____

Date: _____ Signature: _____

1. Did your Post file a Consolidated Post Report form? Yes _____ No _____
2. Did your Post participate in any of the following National Children & Youth Program objectives?

_____ Family Emphasis (National Family Week)	_____ Child Safety (Drug Abuse Prevention, Youth Suicide Prevention, etc.)
_____ Children's Miracle Network	_____ Halloween Safety
_____ Missing Children	_____ April is Children & Youth Month
_____ Temporary Financial Assistance	_____ Family Support Network
_____ Special Olympics	_____ Operation Military Kids
3. Estimate the number of volunteer service hours provided by the membership of your Post for the children and youth in your community. _____ hours
4. Please estimate the amount of money your Post has expended for administrative expenses for Children & Youth overhead. (Postage, printing, conferences, travel, salaries, etc..). \$ _____
5. Use the remaining space on this sheet to describe, in detail, specific Children & Youth activities promoted by your Post. (Please attach supporting articles, photos, letters, etc..) This section of the narrative is most important to your Department Children & Youth Committee in determining various awards.

ACTIVITIES	# OF HOURS