Did your Unit participate in any of the following National Children & Youth program objectives? (please check)

1. _____ Family Emphasis (National Family Week)
2. _____ Children's Miracle Network
3. _____ Missing Children
4. _____ April is Children & Youth Month Observance
5. _____ Halloween Safety
6. _____ Family Support Network
7. _____ Child Safety (Drug Abuse Prevention; Teenage Suicide Prevention, etc.)
8. _____ Other (please list)

9. How many hours of volunteer service were provided by the membership of your Unit for the children and youth of your community? _____ hours.

10. Please estimate the amount of money expended by your Unit for administrative expenses for Children & Youth overhead. (Postage, printing, seminars, travel, salaries, etc.) $ _____

Please use the space below to describe in some detail specific Children & Youth activities of your Unit. (Details of your Unit's Children & Youth activities are important to judging reports for various Department and National Awards.)

_____

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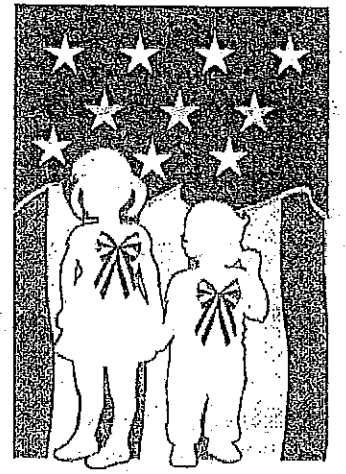
The American Legion Auxiliary

UNIT CHILDREN & YOUTH REPORT



TO BE COMPLETED BY:
Unit Children & Youth Chairman

TO BE MAILED TO:

Your District
Children & Youth
Chairman