

American Legion Auxiliary – Department of California
Mid Year **Unit Children and Youth** 2011-2012

Name Unit # District #
Chairman Name Phone #
Address City/Zip
Email

Did your Unit participate in Operation Military Kids
Dollars Spent \$
Hours
Children receiving Hero Packs

Did your Unit participate in Halloween safety?
Briefly Describe activities?

Did your Unit donate to the Department Children and Youth Fund?
Dollars
Did your Unit make a financial contribution to a Veteran's family with Children? Yes No
Dollars

Please describe any other Children and Youth Activity.

Due Date to District Chairman December 16th