

American Legion Auxiliary
ANNUAL PROGRAM NARRATIVE REPORT
2011- 2012

Program or "Pod": _____

Unit or "Pod" Name: _____ **Unit Number:** _____

Chairman or Person Reporting: _____

Email: _____ **Phone:** _____

Note: This report is separate from the "**ALA Impact Report Form**" and is optional for Units, Counties/Districts, and Departments. Use this narrative form to report your program activity, stories and pictures showing activities that serve the ALA mission. You may submit this narrative report for any or all programs and by program groupings, aka "**Pods**". Submit this report to the appropriate program chairman or "Pod" chairman. **Please keep copies of everything you submit. Pictures and report materials will not be returned.**

Note: If preparing a "**Pod Report**" there is no need for separate program reports. For "Pod Reports", include the "Pod" name and "Pod" chairman, and email the report to the "Pod" Chairman.

Due Dates: Please use this form for your **YEAR-END REPORT**. There are specific deadlines in April and May, established at the unit, district/county, and department levels that precede the National Due Date of June 15th for reports from departments and national chairman or national "Pods". Contact your unit, district/county, or department for specific deadlines. When submitting your report, please copy yourself and another unit, district/county, or department officer.

Narrative: (you may attach/include as many additional pages and pictures as you wish)