

INSTRUCTIONS FOR COMPLETING 2011-2012 POST CHILDREN & YOUTH NARRATIVE REPORT

TO POST CHILDREN & YOUTH CHAIRMAN:

1. Before completing this form, please be sure that your section of the Post Consolidated Report form has been completed.
2. Fill out this narrative report form completely.
3. Send the original narrative report form and any attached narrative sheets to your Department Children & Youth chairman in care of your Department Headquarters **no later than May 25, 2012.**
4. This narrative report form is NOT to be attached to the Post Consolidated Report. It is intended for the use of the Department Children & Youth Committee in determining the Post Children & Youth awards and for substantiating to National Headquarters that our Department has attained **100 percent Children & Youth narrative reporting** for the 2011-2012 Legion year. The number in parenthesis, example: Health & Child Safety (98) is the same as the item number on the Consolidated Post Report.
5. In order to make your total report more effective, please make the following appropriate copies of this form:
 - (a) Original to Department Children & Youth Chairman
 - (b) Copy to your District Children & Youth Chairman
 - (c) Copy for your Post records
6. Please mail the Original to the following address:

The American Legion
Department of Virginia
ATTN: Children & Youth Chairman
PO Box 11025
Richmond, VA 23230

7. If you have any questions please feel free to contact me via E-mail: marty@valegion.net

Marty Rhyne
Chairman
Children & Youth Committee
Department of Virginia

FORM **MUST** BE AT DEPARTMENT HEADQUARTERS
NO LATER THAN CLOSE OF BUSINESS
25 May 2012

POST CHILDREN & YOUTH NARRATIVE REPORT
2011-2012

(Please Print or Type)

Post Name _____ No. _____ District No. _____

Department of Virginia Membership as of April 30, 2012 _____

City _____ Address _____

Date _____ Signature _____

A. Did your Post file a Consolidated Report? Yes ___ No ___

B. Did your Post contribute to the American Legion Child Welfare Foundation?
Yes ___ No ___ If Yes, amount contributed. \$ _____

C. Miscellaneous:

No. of C&Y Activities (Total all activities) (93) _____	Cash Aid Given to Benefit Children (94) _____	Value of Goods given to Children (95) _____
--	--	--

No. of Children given Aid (cash or goods) (96) _____

D. Did your Post participate in any of the following National Children & Youth activities?

___ Halloween Safety (97) ___ Health & Child Safety (98) ___ Family Support Network (99)

___ April is Children &
Youth Month (100) ___ Operation Military
Kids (101) ___ Special Olympics (102)

___ Children's Miracle
Network (CMN) ___ National Family Week

___ Other Programs (Please Explain) _____

E. Estimate the number of volunteer service hours provided by the members of your Post for the
Children & Youth in your community.

Number of Hours: _____

(over)

Administrative Expenses (Postage, printing, conferences, travel, etc.) (103) \$ _____

All Other Expenses (105) \$_____

Children's Organ Transplant Association (106) \$_____ Family Support Network (107) \$_____

Children's Miracle Network Hospital (110) \$_____

All other child service charities (112) \$_____

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

Use back of page if necessary or attach additional pages as needed.