American Legion Auxiliary

Department of Kansas

District Program Report Form

**The report form is due to your department chair by February 28th.**

Find your Department Chairperson at: [www.kansasala.org](http://www.kansasala.org), under the ALA Committee, Committee

chairperson list. Each district needs to complete a form for all ALA programs, if you did not work the program.

We should have 100% reporting each year.

Program Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Department Chair Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dept. Chair Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Units in District\_\_\_\_\_\_\_\_\_\_\_\_\_ Units Reporting\_\_\_\_\_\_\_\_\_\_\_\_\_

Hours Worked\_\_\_\_\_\_\_\_\_\_ Dollars Spent $\_\_\_\_\_\_\_\_\_\_\_\_ Mileage\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Veterans Helped\_\_\_\_\_\_\_\_\_\_\_\_ Active Duty helped\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Military kids\_\_\_\_\_\_\_\_\_\_

Number of non-military Children helped\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Summary of Activities\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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USE BACK OF FORM IF YOU NEED MORE SPACE.