

American Legion Auxiliary Department of Arizona Annual Report Form
Past Presidents Parley 2024-2025

Please complete this form and return to me either by regular Mail or Email:
Cindy Queen, 4718 S. Adelle Circle, Mesa, AZ 85212 OR cynqueen53@cox.net

REPORT FORM MUST BE RECEIVED BY MAY 1, 2025

UNIT NAME AND NUMBER: _____ **Unit Membership count** _____

UNIT CHAIRMAN: _____

HOME ADDRESS: _____

1. Does your Unit have an active Past President Parley? Yes _____ No _____

2. If so, number of members in your Parley? _____

3. Does your Parley include other Units? Yes _____ No _____

If yes, how many Units and include the name and how many members of the Unit

4. Did your Parley contribute to the Department Nurses Scholarship Fund?

Yes _____ No _____ If so, donation amount. \$ _____

5. Does your District have an active Past Presidents Parley? Yes _____ No _____

If so, number of members in the Parley. _____

6. Did your District Parley contribute to the Department Nurses Scholarship Fund?

Yes _____ No _____ If so, donation amount. \$ _____

7. Does your Unit or Parley honor Female Veterans? Yes _____ No _____

If so, please give a short explanation. _____

8. Are your Parley members attending the Department Past Presidents Parley Luncheon held at Convention: Yes _____ No _____

9. Do your Unit past presidents' mentor members? Does your Unit or District honor Past Presidents? If so, please give a short explanation. _____

9. Are you entering a narrative for the following Department Plaques?

Arizona Active Past Presidents Plaque Yes _____ No _____

Cora Grigg Past Presidents Parley Plaque Yes _____ No _____