

UNIT _____

Check # _____

Date _____

UNIT SUGGESTED DONATION CHECK LIST

AMERICAN LEGION AUXILIARY – DEPARTMENT OF OREGON

P.O. BOX 1730 WILSONVILLE, OREGON 97070-1730

Phone 503-682-3162

alaor@alaoregon.org

INSTRUCTIONS

Units have the opportunity to support American Legion Auxiliary programs through donations from members and special event fundraising. These listings are the programs at the Department and National level that you are encouraged to promote within your Unit.

DEPARTMENT OF OREGON

Make checks payable and mail along with this form to: American Legion Auxiliary, Department of Oregon,

P.O. Box 1730, Wilsonville, OR 97070-1730

- \$_____ Department Scholarship Fund
- \$_____ Veterans Affairs & Rehabilitation Fund (includes Christmas Gift Shops, Christmas Cheer, Hospital & Veteran Home facility needs) See next page
- \$_____ Department President's Project

Send check and completed form to the department headquarters.

NATIONAL PROGRAMS

For additional information on each of the national programs visit the American Legion Auxiliary website, www.ALAforVeterans.org and review the "National Programs Action Plan" under the "Members Only" section.

American Legion Auxiliary-National Organization

Make checks payable and mail to: American Legion Auxiliary, National Headquarters, 8945 N Meridian St., Indianapolis, IN 46260

- National Scholarship Fund (includes Children of Warriors-National Presidents' Scholarships; Non-Traditional Student Scholarship; Spirit of Youth Scholarship)
- Auxiliary Emergency Fund (AEF)
- National President's Project (different annual focus)

American Legion Auxiliary Foundation

Make checks payable and mail to: American Legion Auxiliary Foundation, National Headquarters, 8945 N Meridian St., Indianapolis, IN 46260

- Veterans Creative Arts Programs
- Veteran Projects Fund
- Mission Endowment Fund

Please see back page for Veteran Affairs & Rehabilitation Funds Accounts Choices

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Veterans Affairs & Rehabilitation Fund

Direct Aid to Veterans and their families 450-101 \$ _____

Department Scholarship Fund 450-102 \$ _____

Check of the Month (Hospitals year round programs) 400-572 \$ _____

Christmas Cheer (Gifts for patients in hospital) 400-574 \$ _____

Portland Transplant Unit 400-570 \$ _____

Portland Gift Shop 400-426 \$ _____

Roseburg Gift Shop 400-527 \$ _____

Oregon Veterans Home Gift Shop 400-525 \$ _____

Lebanon Veterans Home 400-529 \$ _____

Lebanon Veterans Home Gift Shop 400-524 \$ _____

SORCC Gift Shop 400-528 \$ _____

Total Amount Enclosed: \$ _____ Check # _____

Make check payable to: American Legion Auxiliary Department of Oregon

**Please mail check and this form to Department:
American Legion Auxiliary Department of Oregon
PO Box 1730
Wilsonville, OR 97070**

For Department use only

Date Received: _____ Received by: _____

Acknowledgement Sent Date: _____

Sent By: _____