**AMERICAN LEGION AUXILIARY EMERGENCY FUND (AEF)**

**END OF THE YEAR REPORT FORM**

**DEADLINE April 30, 2025**

**Unit Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Unit #: \_\_\_\_\_\_\_\_\_\_\_**

**Division #: \_\_\_\_\_\_\_\_ District #: \_\_\_\_\_\_\_\_**

**AEF Unit Chairman Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Send To: Susan Campbell**

**By Mail: 114 Bayview Trail By Email: susan.campbell@chowan.nc.gov Edenton, NC 27932**

**PLEASE INCLUDE PICTURES OF HOW YOU RAISED YOUR MONEY FOR AEF.**

1. **How many disaster AEF applications did your unit members submit? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
2. **How many hardship AEF applications did your unit members submit? \_\_\_\_\_\_\_\_\_\_**
3. **How much money was collected by the unit and submitted to either the department office and/or directly to AEF at the National office? \_\_\_\_\_\_$ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
4. **Did your unit participate in our Department of NC Statewide Project “Thinking about walking in their shoes across NC from the beach in the east to the mountains in the west”? Yes \_\_\_\_\_ No \_\_\_\_\_**
5. **If yes, did you collect and send in to the department office the $.25/mile for a total of $142.50? Yes \_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_**
6. **Did your unit also submit a narrative report? Yes \_\_\_\_\_ No \_\_\_\_\_**