



Sons of The American Legion

Consolidated Squadron Report

The Consolidated Squadron Report (CSR) is perhaps the most critical document your squadron can complete. CSR information is combined with other squadrons in creating a final report used by The American Legion, forwarded to the U.S. Congress, and used to apply and verify awards.

Not all squadrons participate in every program; leave those fields blank. The key is to report on the activities your squadron participated in from **June 1st to May 30th**.

All detachment/district/squadron donations and activities should be reported individually to your detachment adjutant. Report only the items specific to each entity (no roll-ups). The CSR will require inputs, such as the number of veteran homes visited or volunteer hours contributed to a particular program. Other programs, such as The American Legion National Emergency Fund (NEF), enter the number of dollars donated or spent in whole numbers.

It is preferred CSRs are filled out and submitted online <https://www.legion.org/submit>

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CSRs are due to National Headquarters no later than the 3rd Friday in July of each year. Any CSRs received after the deadline will not be entered into the annual report and not considered for awards.

MAIL: THE AMERICAN LEGION
ATT: CHARLIE LAHAISE
1304 PAR BLVD
TROY NY 12180

EMAIL: charlie@nylegion.org

ESM

Artwork # 50/A02



SONS OF THE AMERICAN LEGION | CONSOLIDATED SQUADRON REPORT

JUNE 1, to MAY 31,

Please check **one** box indicating the reporting entity level: Detachment District Squadron

- | | |
|---|--|
| 1 _____ Detachment (State) | 2 _____ District |
| 3 _____ Squadron Number | 4 _____ Squadron Name |
| 5 _____ Paid-to-Date Membership Count, Current Year | 6 _____ Paid-Up Final Membership Count, Prior Year |
| 7 _____ City/Town | 8 _____ Zip Code |

If the reporting entity is a District (or Detachment) the entity agrees that their report of dollars and hours ONLY INCLUDES those approved and expended by Officers and Members of that entity, and ARE NOT cumulative of the Squadrons (or Squadrons and Districts) that they represent.

Please type or print all information clearly. For the program details below only mark lines for which you are reporting data (leave '0' values blank).

AMERICANISM

- | | |
|--|---|
| 1 _____ Donations, Boys State / Girls State | 2 _____ No. of Hours, Boys State / Girls State |
| 3 _____ Donations, 5-Star / 10-Ideals Education | 4 _____ No. of Hours, 5-Star / 10-Ideals Education |
| 5 _____ Donations, Flags Presented (All Sizes/Events) | 6 _____ No. of Hours, Flags Presented (All Sizes/Events) |
| 7 _____ N/A N/A | 8 _____ No. of Flags Presented (All Sizes/Events) |
| 9 _____ Donations, Flag Education Programs | 10 _____ No. of Hours, Flag Education Programs |
| 11 _____ Donations, Scholarships Awarded | 12 _____ No. of Hours, Other Educational Programs |
| 13 _____ Donations, Oratorical Contest | 14 _____ No. of Hours, Oratorical Contest |
| 15 _____ Donations, Color Guard | 16 _____ No. of Hours, Color Guard |
| 17 _____ Donations, Other Organizations | 18 _____ No. of Hours, Community Service |
| 19 _____ Donations, Scouting | 20 _____ No. of Hours, Scouting |
| 21 _____ Donations, Junior Shooting Sports | 22 _____ No. of Hours, Junior Shooting Sports |
| 23 _____ Donations, American Legion Baseball | 24 _____ No. of Hours, American Legion Baseball |
| 25 _____ Donations, Other Teams Sponsored | 26 _____ No. of Hours, Other Teams Sponsored |
| 27 _____ Donations, Blood Drives | 28 _____ No. of Hours, Blood Drives |
| 29 _____ Donations, National Emergency Fund | 30 _____ No. of Hours, National Emergency Fund |
| 31 _____ Donations, Legacy Scholarship Fund | 32 _____ No. of Hours, Legacy Scholarship Fund |
| 33 _____ Donations, Other Americanism Projects | 34 _____ No. of Hours, Other Americanism Projects |

CHILDREN & YOUTH

- | | |
|---|--|
| 1 _____ Donations, Child Welfare Foundation | 2 _____ No. of Hours, Child Welfare Foundation |
| 3 _____ Donations, Special Olympics | 4 _____ No. of Hours, Special Olympics |
| 5 _____ Donations, Children's Miracle Network | 6 _____ No. of Hours, Children's Miracle Network |
| 7 _____ Donations, Ronald McDonald House | 8 _____ No. of Hours, Ronald McDonald House |
| 9 _____ Donations, Children's Organ Trans. Assn. | 10 _____ No. of Hours, Children's Organ Trans. Assn. |
| 11 _____ Donations, T.A.L. Vets. and Child. Found. | 12 _____ No. of Hours, T.A.L. Vets. and Child. Found. |
| 13 _____ Donations, Other C&Y Projects | 14 _____ No. of Hours, Other C&Y Projects |

VETERANS AFFAIRS & REHABILITATION

- | | |
|---|--|
| 1 _____ Donations, V.A. Medical Ctrs. & Facilities | 2 _____ No. of Hours, V.A. Medical Ctrs. & Facilities |
| 3 _____ Donations, State Veterans Facilities | 4 _____ No. of Hours, State Veterans Facilities |
| 5 _____ Donations, Nat'l Veterans Assist. Day | 6 _____ No. of Hours, Nat'l Veterans Assist. Day |
| 7 _____ Donations, Operation Comfort Warriors | 8 _____ No. of Hours, Operation Comfort Warriors |
| 9 _____ Donations, Fisher House | 10 _____ No. of Hours, Fisher House |
| 11 _____ Donations, Other VA&R Projects | 12 _____ No. of Hours, Other VA&R Projects |

VETERANS EMPLOYMENT & EDUCATION

- | | |
|---|--|
| 1 _____ Donations, VE&E Projects | 2 _____ No. of Hours, VE&E Projects |
|---|--|

INTERNAL AFFAIRS

- | | |
|---|---|
| 1 _____ Other Donations, Not Covered Above | 2 _____ Other Hours, Not Covered Above |
|---|---|

Signature _____	Title _____	Date _____
Contact Phone Number: (_____) _____	Contact Email: _____	



SONS OF THE AMERICAN LEGION | CONSOLIDATED SQUADRON REPORT

JUNE 1, to MAY 31,

Please check **one** box indicating the reporting entity level: Detachment District Squadron

- 1 _____ Detachment (State)
- 2 _____ District
- 3 _____ Squadron Number
- 4 _____ Squadron Name
- 5 _____ Paid-to-Date Membership Count, Current Year
- 6 _____ Paid-Up Final Membership Count, Prior Year
- 7 _____ City/Town
- 8 _____ Zip Code

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AMERICANISM

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| 7 _____ N/A N/A | 8 _____ No. of Flags Presented (All Sizes/Events) |
| 9 _____ Donations, Flag Education Programs | 10 _____ No. of Hours, Flag Education Programs |
| 11 _____ Donations, Scholarships Awarded | 12 _____ No. of Hours, Other Educational Programs |
| 13 _____ Donations, Oratorical Contest | 14 _____ No. of Hours, Oratorical Contest |
| 15 _____ Donations, Color Guard | 16 _____ No. of Hours, Color Guard |
| 17 _____ Donations, Other Organizations | 18 _____ No. of Hours, Community Service |
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VETERANS AFFAIRS & REHABILITATION

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| 7 _____ Donations, Operation Comfort Warriors | 8 _____ No. of Hours, Operation Comfort Warriors |
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VETERANS EMPLOYMENT & EDUCATION

- | | |
|---|--|
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INTERNAL AFFAIRS

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Contact Phone Number: (_____) _____	Contact Email: _____	



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VETERANS EMPLOYMENT & EDUCATION

- | | |
|---|--|
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|---|--|

INTERNAL AFFAIRS

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Signature _____	Title _____	Date _____
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