

Membership Manual 2008-2009

This is a guide to assist members at the Post level to maintain and complete membership properly and efficiently. Examples of all commonly used forms are located at the back of the membership section.

- Processing members
- Revalidation
- Membership rosters
- Review

Processing Membership

- 1.) Upon receiving a membership check or cash from a veteran, log the payment into the Post's accounting books and deposit the dues into the Post's bank account.
- 2.) If it is a Life Member fill out a Life Member Transmittal Form, if it is an Annual Members or New Members fill out a Dues and Remittance Form (D&R).

NOTE: It is the Post's responsibility to ensure that all New Members are Honorably Discharged Veterans or are presently serving under the Army, Navy, Air Force, Marines, Coast Guard, National Guard or Reserves.

- 3) How to fill out a D&R form (Please type or print legibly):
 - o Fill in Department, Post, Date, Name, Address, and Phone Number accordingly.
 - o At the beginning of the membership year the membership director will receive a set of labels and membership cards for all the current annual members.
 - o If it is a new member, indicate new in the box and write in full name. The new member application or copy will be sent with a D&R.
 - o If it is a renewed member then use the label provided and properly place one label on D&R instead of writing in all the members information. If a label is not available than write in members information as described below.
 - o For a renewal member, fill in full name and member ID number in the box provided.
 - o The next step would be to count how many Renewal Members their are and put the total in the Renewals row in the Recap Information Section; do the same with New Members and put the total in the New Member Row in same section, then add all New Members and Renewals and put the sum of these two in the row that says Total. In the check number column, fill in the check number and in Amount, fill in the amount of the check.
- 4) The next step would be to have the Post Finance Officer prepare one check for \$16 (\$13 for National, \$3 for State) times total members paid, made payable to AMVETS Department of Illinois. Send everything to State Headquarters, first ensuring a copy of the D&R is maintained in your post records.

Example: If there is 5 Renewal and 4 New Members paying then the check would be \$16 times 9 veterans which is \$171 and State would get \$3 times 9 veterans which is \$27.

AMVETS State Headquarters will process the check and pay National Headquarters online as members are renewed.

- 5) The next step is preparing to send. Send all this along with the check to State Headquarters. Send member receipt (if applicable) and their membership card. Finally, send State HQ the check, applications (from members) and a copy of the dues & remittance form.

Life Member Forms

- 1) How to fill out a Life Member Transmittal Form:
 - o Fill in Department/State, Date, Post Number, City, and Post Name accordingly.
 - o The next section is Membership Status check one of the following choices
 - If the Member is New then check New Member
 - If the member was an Annual Member and is becoming a Life Member then check Current Member and fill in their Member ID Number and the Date they had joined (Annual Members who have paid their dues for the year will receive credit for their prepaid annual dues).
 - If the Member Joined Prior to 12/31/47 then check National Charter Member.
 - o Fill in Member Name, Phone Number, Address, Sex, Date of Birth, Branch of Service, Character of Discharge, Dates of Enlistment, Name of Spouse (if applicable), and in the "Send Card To:" section indicate where to mail permanent Life Membership Card (member, post, etc.)

Preparing Checks

- 1) The next step would be to have the Post Finance Officer prepare a check;
 - o Check made out to AMVETS Department of Illinois for \$112.50 per Life Member.
 - o If a member has paid annual dues and decides to become a Life Member, then subtract annual dues already paid from Life Membership dues. (\$16 Annual - \$112.50 = 96.50).
 - o All membership will be paid to State Headquarters, and HQ will input into the national database.
 - o Send life transmittal and check into State Headquarters keeping a copy for your post records.

Change of Address Form

- Fill out Name, Address, and City, State & Zip of Post at top of the form.
- Insert members Name, Membership Number, and check if the Veteran is a Life or Annual Member.
- Fill in the Veteran's previous address (if applicable) and new address ensuring they are complete.
- Send form into State Headquarters keeping a copy for your Post's records.
- Department will change in National database, as well as Department.

Note: Every change of address is important! Please notify your Post or State Headquarters of change of addresses.

Transfer Forms

- 1) How to fill out and turn in a Transfer Form:
 - Fill out Name, Address, City, State & Zip, Membership's Number, check the box for Life or Annual Member, Dues paid for, which is the last year the Veteran paid his dues (only if Annual Member), Telephone Numbers, Former Address (if veteran has moved), Date of Birth, Service Dates, and most important the Signature of Member.
 - Ensure the Post the Member is transferring from has the Adjutant sign and date the bottom of the Transfer Form.
 - Ensure the Post the Member is transferring to has the Adjutant sign and date the bottom of the Transfer Form.
 - Send State Headquarters and maintain a copy for the posts' records.

Note: According to National, once a transfer has been prepared by the gaining Post and sent to the losing Post, the losing Post has 30 days on which to act on the form or the transfer is automatic. The 30 day period is for the losing post to contact the new Post with any derogatory information on the member.

Deceased Forms

- 1.) How to fill out a deceased form:
 - Fill out Name, Address, City, State & Zip, Membership ID Number, check the box for Life or Annual Member, Date of Death (if unknown, date of receipt will be used), Department and Post number. Send form into State Headquarters keeping a copy for your Post's records.

Note: A Memoriam Certificate will be sent to Post Commander for all Deceased Members for presentation to family of deceased.

Sponsors

How to process sponsors:

Note: Utilize a Sponsor form or a D&R form to process Sponsors, but keep the Sponsors on separate D&R form from regular members.

- Fill in Department, Post, Date, Name, Address, and Phone Number accordingly.
- The column that says TYPE, fill in an S for Sponsor.
- The column where it says year, fill in the current fiscal year.
- Dues for a sponsor may vary from post to post but should be a minimum of \$6 a year.
- The Post will maintain 50% of the sponsorship dues and State Headquarters retains 50%.
- Process the same as a regular member, except only one check will be sent out (to State Headquarters).

Paper Work Checks

- 1) How to prepare all the paper work for turn in:
 - Double-check everything ensuring all information, totals, and amounts are correct and accurate.
 - Ensure all D&Rs, checks and applications (if new member) are included with membership.
 - Place all paperwork in sufficient size envelope and mail to:

**AMVETS Department of Illinois
2200 South 6th Street
Springfield, IL 62703
Attention: Membership**

Revalidation

Revalidation is a yearly requirement for all Posts in which they will have to renew their AMVETS charter status. The Posts will have to provide the following items No Later Than July 15th of each year. If these items are not turned in then the Posts will have their charter suspended and cannot participate in the National Convention until they do comply in accordance with Article X, Section 3 of the National Constitution.

The items required are as follows:

- 1) Current Post Revalidation and Officers form must be completed and sent in after May 1st and before July 15th.
- 2) IRS Form 990 (Posts with incomes of less than \$25,000 do not have to file a 990 with the IRS except for their first year)
- 3) Current Constitution and By-Laws (must be updated or reviewed every five years)
- 4) Current Post Insurance if Post owns or leases a facility (Posts that have a club room are required to have at least \$300,000 Certificate of Insurance, if they lease at least \$100,000 Certificate of Insurance). This also includes Liquor Liability, if post sells alcohol then they must provide proof of insurance.
- 5) Post must have 10 members in good standing.

Review

Here are some quick reminders on how to maintain Post membership properly and efficiently.

- Do not hold membership, process and turn into State Headquarters as soon as possible.
- Edit all membership rosters thoroughly and neatly and turn into State Department expediently. *If a roster is needed, please contact State HQ.*
- Ensure all forms include all the information required such as zip codes, Member ID Numbers, etc.

- Make sure all dollar amounts on checks are correct and checks are made payable to AMVETS Department of Illinois
- Complete and turn in all revalidation materials before July 15th.
- Send all paperwork to State Headquarters. It will be forwarded accordingly from there.
- Always Type Or Print Legibly

Any questions? Please call AMVETS Department of Illinois at 800.638.8387, and ask for the Membership Director. Or, you may call the AMVETS National Headquarters Membership Department at 877.726.8387.

Post Revalidation and Officers 3-Part Form

Part 1: Post Revalidation

Part 2: Officers Form

Part 3: Quality Post Form



AMVETS National Headquarters
4647 Forbes Boulevard
Lanham, Maryland 20706-4380
Telephone: (301) 459-9600
Toll Free: (877) 726-8387
Fax: (301) 459-7924

State	<u>IL</u>	Post #	<u>200</u>
Membership Year:	<u>08-09</u>		
City	<u>SPRINGFIELD</u>		
County	<u>SANGAMON</u>		

Please type or print legibly all applicable information on this form. Prepare 3 copies of form (Post, Department and National files). Completed form must be received at National Headquarters PRIOR TO JULY 15.

OFFICIAL CONTACT

Send Post Mail To: AMVETS POST 200 Work (217) 528-4713
Address: 2200 SOUTH SIXTH ST. Home (217) 555-0011
City, State, Zip: SPRINGFIELD, IL 62703 FAX (217) 528-9896
E-mail Address: KEITH@ILAMVETS.ORG

RENEWAL CONTACT

Send Renewals To: JOHN H. SAILOR Work (217) 544-7894
Address: 1234 BOAT AVE., APT 8 Home (217) 432-7654
City, State, Zip: SPRINGFIELD, IL 62704 FAX (217) 456-7890
E-mail Address: USSAMVETS.AOL.COM

POST INFORMATION

Meeting Night(s) & Time(s): 1ST MONDAY OF EACH MONTH
7 PM
Address of the (Check one): Meeting location Post Home address
Address 8877 1ST ST.
City, State, Zip SPRINGFIELD, IL 62703
Post Telephone # (217) 789-9456 Post Website or E-mail: WWW.AMVETSPOST200.ORG

Bank: <u>BANK OF VETERAN</u>	Bank Acct. Number: <u>1234567890</u>	Fiscal Year: <u>2008</u> - <u>2009</u>
Dues amounts must be filled in:		IRS Employer ID# <u>9876543210</u>
*Annual Dues: Post Dues \$ <u>20</u> Post Portion \$ <u>4</u>		*Life Dues: Life Dues \$ <u>150</u> Post Portion \$ <u>37.50</u>

All Posts are required to send a copy of IRS Form 990 to HDQTRS and **must file with the IRS** in order to maintain tax-exempt status

Check one (per National Bylaws, Article VII):

- No Post home
- Facility owned or leased-maintained primarily for meeting purposes (requires \$100,000 Certificate of Insurance)
- Facility with clubroom (requires Articles of Incorporation, Certificate of Corporate Good Standing (i.e. any annual non-profit corporation report required by state government) and \$300,000 Certificate of Insurance, with current copies of each on file at National Headquarters)

Check one (status of Post Constitution & Bylaws):

- Have been reviewed annually, but not amended since (year) 2005, and are on file at Department and National Headquarters
- Have been amended within the past year and approved by the Department Judge Advocate prior to submission

POST REVALIDATION CERTIFICATION

I certify that AMVETS Post # 200 has complied with all local, state and federal laws and statutes in the operation of the Post and its facilities, has a minimum of 10 members in good standing, is fully paid up in all Post accounts with National Headquarters and has complied with all revalidation requirements of the National Constitution, Article X.

TITLE & NAME	MAILING ADDRESS	PHONE #s
Commander: WALTER T. SOLIDER	9876 TANKER BLVD	W: (217) 789-1234
	SPRINGFIELD, IL 62703	H: (217) 546-5460
	E-mail: USARMY1@YAHOO.COM	F: (217) 546-5461
1st Vice: JOE H. MARINE	1234 DEVIL DOG DR.	W: (217) 789-4561
	ROCHESTER, IL 62711	H: (217) 789-6312
	E-mail: LEATHERNECK@SBCGLOBAL.NET	F: (217) 789-6321
2nd Vice: KEN A. FORCE	4597 WILD BLUE YONDER WAY	W: ()
	SPRINGFIELD, IL 62704	H: (217) 528-9871
	E-mail: FLYBOY@AOL.COM	F: (217) 546-4561
Adjutant: CORBIN O. GUARD	4567 WATERWAY ST.	W: (217) 546-7894
	RIVERTON, IL 62712	H: (217) 528-8971
	E-mail: COASTY@INSIGHT.COM	F: ()
Finance Officer: WILMA L. DOLLARS	9999 FINANCE DR.	W: (217) 546-6451
	CHATHAM, IL 62714	H: (217) 622-7894
	E-mail: BOOKKEEPER@AOL.COM	F: (217) 622-1234
Judge Advocate: JESS A. GREEN	1234 LEGAL BLVD.	W: (217) 546-7894
	JEROME, IL 62701	H: (217) 546-7894
	E-mail: ATTRNY@AOL.COM	F: (217) 546-7894
Provost Marshal: CARRIE B. LAW	6500 REGULATION RD.	W: ()
	BUFFALO, IL 62532	H: (217) 546-6725
	E-mail: PROVO@INSIGHT.COM	F: (217) 544-6879
Service Officer: VICTOR S. OTHELLO	7800 ASSISTANCE AVE.	W: ()
	ROCHESTER, IL 62743	H: (217) 789-4566
	E-mail: VBENEFITS@AOL.COM	F: ()
Chaplain: ROBERT W. HOLY	1111 CHURCH WAY	W: (217) 528-8971
	SPRINGFIELD, IL 62704	H: (217) 528-6564
	E-mail: HOLY@YAHOO.COM	F: ()
Trustee (for clubroom): JOHN T. RESERVE	1234 VETERAN DR.	W: ()
	WILLIAMSVILLE, IL 62511	H: (217) 528-8974
	E-mail: RESERVE@ILG.NET	F: (217) 564-5847
Public Relations Officer: (per Dept/Post CBL)		W: ()
		H: ()
	E-mail:	F: ()

POST OFFICERS CERTIFICATION

This is to certify that the officers of Post # 200 in the city of SPRINGFIELD and the state of ILLINOIS have been duly installed and that they have read and subscribe to the AMVETS oath of office.

Date 5-1-08 Installing Officer _____



AMVETS

National Headquarters
 4647 Forbes Boulevard
 Lanham, MD 20706-4380
 (301) 459-9600

DUES REMITTANCE FORM

SUBMITTED BY		
DEPARTMENT	POST	DATE
NAME		
STREET		
CITY, STATE, ZIP		
PHONE(INCLUDE AREA CODE)		

POST RECAP	
CHECK #:	
AMOUNT	
NEW MEMBER:	
RENEWAL	
TOTAL	

DEPARTMENT REVIEW	
INITIALS	DATE
NATIONAL REVIEW	
AMOUNT RECEIVED	
AMOUNT DUE	
+ / -	

MEMBERSHIP PROCESSING INSTRUCTIONS

For Renewals: Place barcode labels in boxes; attach cards only to report changes or if labels are missing.

For New Members: Type or legibly print names in boxes below; attach tissues, with all blocks completed.

Insert Barcode Label or Print Name Attach Tissue/Card	Insert Barcode Label or Print Name Attach Tissue/Card	Insert Barcode Label or Print Name Attach Tissue/Card
Insert Barcode Label or Print Name Attach Tissue/Card	Insert Barcode Label or Print Name Attach Tissue/Card	Insert Barcode Label or Print Name Attach Tissue/Card
Insert Barcode Label or Print Name Attach Tissue/Card	Insert Barcode Label or Print Name Attach Tissue/Card	Insert Barcode Label or Print Name Attach Tissue/Card
Insert Barcode Label or Print Name Attach Tissue/Card	Insert Barcode Label or Print Name Attach Tissue/Card	Insert Barcode Label or Print Name Attach Tissue/Card
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Insert Barcode Label or Print Name Attach Tissue/Card	Insert Barcode Label or Print Name Attach Tissue/Card	Insert Barcode Label or Print Name Attach Tissue/Card
Insert Barcode Label or Print Name Attach Tissue/Card	Insert Barcode Label or Print Name Attach Tissue/Card	Insert Barcode Label or Print Name Attach Tissue/Card



AMVETS National Headquarters
4647 Forbes Boulevard
Lanham, MD 20706-4380
(301) 459-9600

LIFE MEMBERSHIP TRANSMITTAL FORM

INSTRUCTIONS

1. Complete Life Membership Transmittal Form and send two copies to your state Department office. Save one copy for your Post's records.
2. Submit check or money order for dues and identify the *purpose*, i.e., National or Department portion of Life Membership dues. (Minimum Life Membership dues are \$150, of which (50%) \$75.00 is National portion, (25%) \$37.50 is Department portion and the Post retains (25%) \$37.50.)
3. Indicate special mailing instructions in the "Send Card To:" section.

Posts in Non-Department states should submit this form along with (75%) \$112.50 to the above address. The Department portion of the Life dues will be placed in an escrow account for 2 years or until a Department is organized (whichever comes first).

Please Type or Print Clearly

Department/State _____ Date _____
Post Number _____ City _____
Post Name _____

Membership Status: New Member
(check one) National Charter Member (Joined prior to 12/31/47)
 Current Member – Number _____

Date Joined _____

Member Name _____ Phone (____) _____
Address _____
City _____ State _____ Zip _____
E-mail _____

Sex: Male Female Date of Birth _____
Branch of Service _____ Character of Discharged _____
Year Entered _____ Year Discharged _____
Name of Spouse _____
Sponsor _____
Send Card To: _____



Post Roster Update Change of Member Data Form

Please ensure Post,
Department, and
National records
are all changed.

OFFICIAL INITIATING CHANGE(S):

SIGN AND DATE WHEN CHANGES ARE VERIFIED/ENTERED:

Name: _____

IN POST RECORDS: _____

Title: _____

IN DEPT RECORDS: _____

Department/Post: _____

IN NATL RECORDS: _____

Phone Number: _____

(National Headquarters will return form to Post upon completion)

Address: _____

City: _____

State: _____ ZIP: _____

	Old Data	New Data
<input type="checkbox"/> Life <input type="checkbox"/> Annual Member ID#: _____ Name: _____		
<input type="checkbox"/> Life <input type="checkbox"/> Annual Member ID#: _____ Name: _____		
<input type="checkbox"/> Life <input type="checkbox"/> Annual Member ID#: _____ Name: _____		
<input type="checkbox"/> Life <input type="checkbox"/> Annual Member ID#: _____ Name: _____		
<input type="checkbox"/> Life <input type="checkbox"/> Annual Member ID#: _____ Name: _____		
<input type="checkbox"/> Life <input type="checkbox"/> Annual Member ID#: _____ Name: _____		
<input type="checkbox"/> Life <input type="checkbox"/> Annual Member ID#: _____ Name: _____		
<input type="checkbox"/> Life <input type="checkbox"/> Annual Member ID#: _____ Name: _____		
<input type="checkbox"/> Life <input type="checkbox"/> Annual Member ID#: _____ Name: _____		
<input type="checkbox"/> Life <input type="checkbox"/> Annual Member ID#: _____ Name: _____		
<input type="checkbox"/> Life <input type="checkbox"/> Annual Member ID#: _____ Name: _____		

When review is completed at Post, **sign and mail** this form to Department Headquarters for action

When update is completed at Department, **sign and mail** this form to National Headquarters for action



MEMBERSHIP TRANSFER FORM

Transfer Processing Instructions

- ✓ A current member in good standing who makes request to a Department/Post of choice may initiate a member transfer—or a Department/Post may initiate the action by inviting a member to transfer.

- ✓ **Three signatures/dates are required to transfer:** the member, the adjutant of the accepting post and the adjutant of the former post—usually in that order. The former post may *not* delay or deny a member’s transfer request unless there is a cause, such as the member owes money or has possession of post property that must be returned. **NOTE:** If a transfer is denied for cause, the reason for denial must be submitted in writing to the department headquarters, along with the unsigned transfer form, within 10 days. The department will notify all parties involved regarding this action. **PRINT AND SUBMIT—DO NOT EMAIL.**

- ✓ The completed and signed transfer form should be mailed to the department office where it is signed and dated, copied, and forwarded to the appropriate Department/Post official and to the National Headquarters.

- ✓ Questions may be directed to AMVETS National Membership Department, 4647 Forbes Blvd, Lanham, MD 20706-4380; Phone 1-877-726-8387; Fax (301) 459-7924; or the Department/Post in your area.

Name:		Date:	
Address:		Member ID#:	
Home Phone:	()	Member Type:	Life <input type="checkbox"/> Annual <input type="checkbox"/>
Work Phone:	()	Date Joined AMVETS	
Former Address: (if moving)		Email:	
		Gender:	M <input type="checkbox"/> F <input type="checkbox"/>
Branch of Service:		DOB:	
Date Entered:		Date Discharged:	
Signature of Member:		Date:	

Transferring Information			
Transfer To:	Post Number:	Department:	
Adjutant Signature: (new Post acceptance)		Date:	
	Transfer From:	Post Number:	Department:
Adjutant Signature: (former Post release)		Date:	
Department Signature: (acknowledgement)		Date:	

AMVETS DECEASED MEMBER NOTIFICATION FORM
And
AMVETS NATIONAL MEMORIAL ROSTER ENROLLMENT

Submitted by _____

Please complete the notification and enrollment section of this form, and forward through the Department office to: AMVETS National Headquarters, 4647 Forbes Blvd., Lanham, MD 20706. Please type or print legibly.

AMVETS Deceased Member Notification Form

Member ID No:		Member Status: (check one)	<input type="checkbox"/> Life <input type="checkbox"/> Annual
Name of Deceased:		Date of Death:	
Address:			
City:		State:	Zip:
Department: (state)		Post No.:	
Issue date of In Memorium Certificate		Presented By:	

AMVETS National Memorial Roster Enrollment

The National Memorial Carillon, located on the grounds of AMVETS National Headquarters, rings in honor of deceased veterans who are enrolled. The memorial bell preserves the everlasting memory of America's deceased veterans and serves as a lasting tribute of their sacrifices.

Enrollment is free. AMVETS invites the next of kin, family member, or friend to enroll the deceased veteran – who served honorable in the U.S. armed forces – in the AMVETS National Memorial Roster.

Simply complete and forward the enrollment to AMVETS National Headquarters. Names properly received will be respectfully inscribed by order of hour and date.

Name of Deceased:			
Branch of Service:		Approximate Date of Service:	From: To:
Requested hour and date carillon bells should toll:			
Enrollment Submitted By:			
Name:			
Address:		City:	
State:		Zip:	
Telephone:		Relationship:	

Note: The above information is requested solely for the purpose specified herein and will not be released in any form or for other use whatsoever.

REPORTING

Programs Reporting

Each Post should report Volunteer hours either by filling out a Programs Reporting Form (which can be found on pages 61-62) or go online to www.amvets.org. Here are some examples of the programs that should be reported on: Americanism, Child Abuse & Welfare, Community Service, Hospital/VAVS, Safety, Scholarship, Scouting, Special Olympics, etc.

Program Reporting Forms are to be sent to the Programs Director at State Headquarters for that particular Standing Committee. The online program reporting can be accessed online at www.amvets.org and reported straight to National. This is a new an improved way to report your program volunteer hours.

Note: Program Reporting online is designed to make program reporting a much easier and also to lighten the department's administrative load. This does not mean the paper report has been eliminated. It simply is another option for those that have access to the Internet.

For those Posts electing to continue using the paper report, they must continue to forward them to the Department at least twice a year to meet the reporting requirements for the six month reporting period ending in June and in December respectively.

FOR 2008-2009 CHAIRMAN OF STANDING COMMITTEES, SEE PAGE 13.

Three Ways to Report Programs:

- 1) Online at www.amvets.org
- 2) Paper form
- 3) Call the Programs Director at (217) 528-4713 and give the information over the phone.

Steps to Reporting Online

Sign in with your Member ID number and password. Passwords can be case sensitive.

- If you are reporting for the first time your Member ID and password are the same.

1. Once signed in you can review reports, add new data, and analyze reports.
2. To ADD NEW DATA: Click on the second grey box option titled, "ADD NEW PROGRAM DATA"
3. A grid will come up that will allow you to in put data. The first box is the Program Category. This will drop down and allow you to choose a program. Please use your best judgment.
4. Comments box look small but it will allow more room to describe your event. Please be concise.
5. The rest the boxes: volunteers, hours, miles, etc. please put in your number the program will calculate the rest for you.
6. Once you have enter your report please hit the preview data button at the bottom left this allows you to preview your data and makes changes before finalizing your report.
7. If everything looks correct, hit the submit button at the bottom left corner of the page. This completes your data submission.

Program Categories Definitions

AADAA - AMVETS Against Drugs & Alcohol Abuse, administering poster/essay contests.

Americanism - Poster & essay contest, parades, public ceremonies, etc.

AMVETS Task Force DVD - Collect new or used DVDs to be sent to troops overseas

Blood Drives - Sponsoring/hosting a blood drive on behalf of the American Red Cross or providing members to donate for other sponsored drives.

Care Bears - Raising money and purchasing teddy bears to donate to police agencies for distribution to children in emergency situations.

Clothing & Food Drives - Pretty straight forward, conducting your own or providing manpower to assist other organizations.

Fund Raising - Do not report donations you give to others here! (Donations given to your post by other groups/individuals could be reported here. The amount would not go in the donation column, you would put the amount received and from who in the comment field.) This category should be used to report what fund raising projects you are doing.

Homeless Veterans - Conducting or supporting Stand Downs, counseling, donations to agencies working on behalf of homeless veterans.

Juniors - Report any activity by Post Juniors

Military Funeral Honor Guard - For Posts with volunteers and/or formal Honor Guards that participate in conducting MFH for our veterans at any cemetery.

Organ & Bone Marrow Donor Program - Cooperating with local community grounds or doing stand-alone education programs using out literature. Soliciting members to serve as Bone Marrow Donors.

Prisoner of War/Missing in Action - Provide support to families, conduct POW/MIA ceremonies at community military and veterans gatherings.

Reserve Officer Training Corp - Donating, presenting the AMVETS ROTC awards and/or conducting JROTC drill competitions.

Scholarship Assistance - Report local scholarship awards by Post & Departments. Report promotional efforts made to disseminate information on National Scholarship Awards.

Scouting - Chartering Boy Scout and/or Girl Scout units, serving a merit badge counselors, facilitating the presentation of AMVETS Eagle Scout Certificates.

Sick or Hospitalized Veterans - Visiting/Helping home bound vets and/or hospitalized vets. Not to be confused with VAVS hours that should only be reported through the VA Medical Centers.

Special Olympics - Serving as volunteer trainers, judges, and support staff for local competitions. Providing financial aid.

Support Our Troops (Guard Specific) - Conducting deployment farewells and returning celebrations for National Guard, providing assistance to families by helping with children, doing repairs, etc. Providing financial aid for phone cards, voices from home, and time/money directly to base family support units.

Support Our Troops (Not Guard Specific) - Conducting deployment farewells and returning celebrations, providing assistance to families by helping with children, doing repairs, etc. Providing financial aid for phone cards, voices from home, and time/money directly to base family support units.

Veterans History Project - Facilitating the gathering of veterans stories in an organized manner and within the parameters established by the Library of Congress.

White Clover - There are variations on this program, but the classic is the sale of the AMVETS White Clovers for the specific purpose of raising funds to assist our hospitalized veterans.

Other (Community Service - Be specific) - This category should only be used if one of the other (18) specific categories do not match the program you are conducting. In the comment field, briefly include: "what" community service, for "who" or "what" agency?

* **AMVETS Riders** - Community Programs specific to our AMVETS Riders.



ILLINOIS AMVETS PROGRAMS REPORTING FORM



POST NUMBER: _____ REPORTED BY: _____

Program Categories #	Comments	Number of Volunteers	Number of Hours	Number of Miles	Number of Vehicles Used	Expenses Spent	Donations

ALL REPORTS SHOULD BE SENT TO STATE HEADQUARTERS PROGRAMS DIRECTOR CRYSTAL BALES

Program Categories:

- | | |
|---|---|
| <ul style="list-style-type: none"> 1 AADAA 2 Americanism 3 Blood Drives 4 Care Bear 5 Clothing & Food 6 Fund Raising 7 Homeless Veterans 8 Sick & Hospitalized Veterans 9 Military Funeral Honor Guard 10 Organ & Marrow Donor 11 POW/MIA 12 ROTC | <ul style="list-style-type: none"> 13 Scouting 14 Special Olympics 15 Support for Troops (Not Guard Specific) 16 Veterans History Project 17 White Clover 18 Other- Community Service (Be Specific) 19 Communications PRO Activity 20 Legislative Activity 21 Membership Activity 22 Veterans Service/ Claims Act 23 Riders Chapters 24 Juniors |
|---|---|

- 25 Scholarship Assistance
- 26 AADAA
- 27 AMVETS Task Force DVD

HONORS & AWARDS

Honors & Awards

The purpose of the Honors and Awards is to recognize an individual, a Post, Ladies Auxiliary, or civilian firm for the greatest service/s to Veterans and/or AMVETS.

Rules and Regulations:

1. NO ENTRIES will be accepted at the Department Convention for any awards.
2. Awards are to be submitted to State Headquarters ON or prior to April 1st of each year.
 - o To ensure that a Post entry has been received, at Headquarters, send all nominations and entries for all awards certified mail with a return receipt requested.
3. Entries may be sent in to State Headquarters starting in March.
4. A statement of facts must accompany each entry as specified on the form.
5. All entries will be judged on the statement of facts listed in detail, by both the Post and Auxiliary activities.
6. All entries must be verified and signed by the Commander and Adjutant of the Post who will assume responsibility for its authenticity.
7. All winners will be announced at the Department Convention.
8. Entry forms may be reproduced or obtained from State Headquarters.
9. No member of the committee will judge an entry that is submitted from their own Post and/or Ladies Auxiliary.
10. Winners will not be notified until sometime during the State Convention.
11. The winning Post/s and Auxiliary/s must be in attendance at the State Convention.
12. Mail entries and nominations to:

**AMVETS Department of Illinois
State Headquarters
Attn: Honors & Awards
2200 South Sixth Street
Springfield, IL 62703**

TYPES OF AWARDS AND SPONSORS

<u>HONORS & AWARDS</u>	<u>SPONSOR</u>
Commander's Award	AMVETS Department of Illinois
Post of the Year	AMVETS Department of Illinois
Auxiliary of the Year	AMVETS Department of Illinois
Outstanding Individual Recognition Award	AMVETS Department of Illinois
Outstanding Firm Recognition Award	AMVETS Department of Illinois
Outstanding AMVETS of the Year Award	AMVETS Department of Illinois
POST AMVET of the Year Award	AMVETS Department of Illinois
Peter J. McKiernan Memorial Hospital Award	Ted Knusman Post # 13
Department of Illinois AMVETS Child Welfare Award	PNC John Sisler & PNP Susan Sisler
Scout Achievement Award "Post"	Phillip Carpenter Post # 66
Scout Achievement Award "Individual"	Phillip Carpenter Post # 66
Boy Scout Award	Crete Memorial Post # 84
Explorer Scout Award	Crete Memorial Post # 84
Bill Kipp, Sr. Memorial Membership Award	AMVETS Department of Illinois
Thomas J. McDonough Memorial Membership Award	Colin Kelly Post # 17
AMVETS Membership Award	PDC Donald Russell
100% Plus Division Membership Award	PDC Norman Bess
Irwin F. Hayden Memorial Blood Donor Award	Colin Kelly Post # 17
Eddie Joe Sperry Memorial Community Service Award	Willeane Schave
Americanism Award	PDC Bob Dant & PDP Debra Dant
American Essay	AMVETS Department of Illinois
Francis Swinnen Service Award	PDC Ben Flerlage

Qualifications for Each Award

Commander's Award (*Appendix A*)

1. This Award is to be given to a Post and Auxiliary.
2. The committee will decide the merits of each entry on the facts submitted, points system and grading by each member of the committee.
 - a. Community Service Program 25 points
 - b. Hospital Activities 25 points
 - c. Child Welfare Program 25 points
 - d. Americanism Program 25 points

For a Total of: 100 points

 - Community Service – Any project or service rendered for the benefit of the community.
 - Hospital Activities – Any project rendered to improve the morale, health, living conditions and recreation of those confined in a hospital.
 - Child Welfare Program – Any activities concerned with improving the health, home conditions, recreation and vocational training of children.
 - Americanism – Any activities to promote loyalty to the United States, its traditions, interests or ideas.

Post and Auxiliary are to prepare a brief Statement of Facts about their activities in the above categories and have them signed by the Commander and Adjutant who will assume responsibility for their authenticity.

Commander's Award Judging Criteria

(The Commander's Award is based and judged with the following membership categories.):

Category One: All Posts with 150 Members and Over

Category Two: All Posts with 100 Members to 149 Members

Category Three: All Posts with 99 Members and Under

Outstanding Individual Recognition Award (*Appendix B*)

1. This award is to be given to the individual (NOT a member of AMVETS or AMVETS Ladies Auxiliary) for the greatest contribution to the AMVETS in general.
2. Any AMVET Post, District, or Division may submit such nomination as they feel are qualified.
3. All nominations must be in writing, listing in detail the facts pertaining to the nominations.

Outstanding Firm Recognition Award (*Appendix C*)

1. This award is to be given to the civilian firm, who in the opinion of the committee, from the facts submitted, has made the greatest contribution of assistance to AMVETS or Veterans in general.
2. Any AMVET Post, District, or Division may submit such nominations as they feel are qualified.
3. All nominations must be writing, listing in detail the facts pertaining to the nominations.

Outstanding AMVET of the Year (*Appendix D*)

1. This award is to be given to the individual AMVET, who in the opinion of the committee, based on the facts submitted, has rendered the greatest service to the Post, District, Division, and Department during the past year.
2. Nominations may be submitted by an individual, a Post, or a District and/or a Division.
3. All Nominations must be in writing and list details for the basis of the nominations.

Post AMVET of the Year Award (*Appendix E*)

1. This award is to be made to one (1) individual AMVET from each Post, who in the opinion of the Post has rendered the greatest service to the Post.

Peter J McKierman Memorial Hospital Award (*Appendix F*)

1. This award will be given to the Post or Post and Auxiliary, who in the opinion of the committee, based on the facts submitted, has rendered the greatest activities in improving the morale, health, living conditions and recreations of those confined in a hospital, rest home or private institutions.

Department of Illinois AMVETS Child Welfare Award (*Appendix G*)

1. This award will be given to the Post contributing the most to improve the health, home conditions, recreation and vocational training of children.
2. Post or Post and Auxiliary must perform working projects to qualify for this award.
3. Service provided by AMVETS and AMVETS Ladies Auxiliary will be considered for the joint award. Only projects performed jointly will be considered.

Philip Carpenter Post #66 Scout Achievement Award (*Appendix H*)

1. This is a Post award and will be given to the outstanding Post in the Department that contributes the most to the Scouting Program.
2. Contributions may include the sponsoring of the Scout units; individual AMVETS serving in Scout Programs.

3. Providing funds or equipment for the Scout units.
4. Post using the Scout Programs in the activities of local Post for the betterment of the community.
5. SCOUTING- is to be interpreted to be of any of the Scout Programs, namely the Cub Scouts, Boy Scouts, or Explorer Scouts.
6. All nominations must be in writing and list in detail the basis for the nomination.
7. Application to be certified by the Commander and Adjutant of the Post submitting the entry.

Philip Carpenter Post #66 Dave Mohr Scout Award Individual Award (*Appendix I*)

1. This award will be given to the individual AMVET that contributes the most, in the opinion of the committee, to the Scout Program.
2. Qualifications should include the serving as Leader or Counselor for the Scout Units, Committee work in Scout Units or in the Community's Programs for Scouts.

Crete Memorial Post #84 Scout Award (*Appendix J*)

1. This award is to be given to the Scout and/or Explorer who has been outstanding in the Troop or Post during the current year.
2. Advancement (must be better than average)
3. Attendance
4. Community Service
5. Outstanding Contributions to the Troop and/or Post
6. Living up to the Scout Oath
7. Have form signed by Scoutmaster or Advisor, Parents or Guardian, Commander

Eddie Joe Sperry Memorial Community Service Award (*Appendix K*)

1. This award is awarded to the individual Post and/or Auxiliary, who in the opinion of the Honors & awards committee, based on the facts submitted, has rendered the greatest assistance to their local community by projects which are sponsored or initiated by the local Post and/or Auxiliary.
2. All entries will be based on accomplishments starting with April 2nd of the previous year to and including the close of the entry date of April 1st of the current year.

Francis Swinnen Service Award (*Appendix L*)

1. This award will be awarded to the Green Hat AMVET, who in the last year, has developed and demonstrated an outstanding Service Project.
2. A Post, a District, or a Division must submit the nominations.
3. All nominations must be in writing and list details for the basis of the nominations.

AMVETS Membership Award (Donald R. Russell) (*Appendix M*)

1. This award is intended to stimulate interest.
2. The nominee must be a member of the Department of Illinois AMVETS in good standing.
3. This award will go to the nominee who signed up the most new members in the Post.
4. All entries will be based on the activities from the State of the membership year to the cut-off date (April 1st) for the Department Convention.
5. The application form must be completed by the nominee and signed by him.
6. The application must be verified and signed by the Post Commander and the Post Membership Chairperson, who will assume the responsibility for its authenticity.

Nominee cannot be a paid employee of AMVETS.

Bill Kipp SR Membership Award

1. Only Posts who have renewed 50% or more of their membership by Dec 31st are eligible. (Remittances postmarked as of that date will be counted.)
2. New Posts organized are not eligible for their first year.
3. Competition for this award will close April 1st of each year, and will be based on the Dues and Remittance forms in the files of the State Department as of that date. (All remittances must be in the Department Headquarters as of that date.) Those received after that date will not be counted, regardless of the postmark dates.
4. Points will be awarded as follows with the Post receiving the most points declared the winner:
 - One (1) point for each percentage point renewed
Example:
Renewals...100%....100 points87%...87 points
New Members...45%...45 points...110...110 points
5. Nominations are not necessary, as Department records will be used.

Thomas J McDonough Memorial Membership Award

1. Only Post of 100 or more members are eligible.
2. New Posts organized during the year are not eligible for the first year.
3. Competition for this award will close on April 1st of each year and will be based on remittances recorded in the files of the State Department as of that date. (Dues remittance forms postmarked as of that date will be included.)
4. Points will be awarded. The Post receiving the most points will be declared the winner.
 - a. One (1) point for each percentage point renewed.
 - b. Ten (10) points for each new Life Member.
5. Percentage points will be based on members renewed by Dec 31st. Remittances postmarked Dec 31st will be included.
6. Points for new and new Life Members will be counted for all such members submitted between Sept 1st and May 1st. (Remittances postmarked May 1st, included.)

Example:	Renewals 76%	76 points	100%	100 points
	New Members 10	10 points	4%	4 points
	New Life 2	20 points	1%	10 points
7. Nominations are not necessary, as Department records will be used.

Norm Bess 100% Plus Division Membership Award

1. This award is for the Division that has the highest percentage, over a 100%, of membership renewed for the year.
2. Department Headquarters records will be used.
3. No nominations required.
3. Cutoff date is April 1st.

Commander's Award/Auxiliary of the Year/Post of the Year Application

Mark the award you are applying for:

___ Commander's Award ___ Post of the Year ___ Auxiliary of the Year

Entry for: _____
 Full name of Post and/or Auxiliary

All the entries for the Commander's Award will automatically be judged for the Post of the Year and the Auxiliary of the Year. Posts and Auxiliaries entering individually, please specify. We, the undersigned, certify that we have read and will abide by the Rules & Regulations of the Honors & Awards Committee, as adopted by the State Executive Committee, AMVETS Department of Illinois.

Post Commander's Signature _____
 Post Adjutant's Signature _____
 Aux. President's Signature _____
 Aux. Secretary's Signature _____

A.

<u>Membership for</u>	<u>2007</u>	<u>2008</u>	<u>Renewals</u>	<u>New</u>	<u>Total</u>
AMVETS					
Ladies Auxiliary					

All Life Members as of December 31, 2008, are to be included in renewals.

B.

Officers list sent to national	Did	Did Not	Bonded	Yes	No	In good standing with National	Yes	No	In good standing with Dist/Div/State	Yes	No

C. 1. Community Service 2. Hospital Activities 3. Child Welfare 4. Americanism

- In submitting this entry blank for any of the above awards, it will be necessary for the Post and Auxiliary to prepare a statement of facts about their activities in the above categories. **The statement of fact sheets must be signed by the post commander and adjutant who will verify and assume responsibility for their authenticity.**
- All entries will be judged on the statement of facts sheets submitted. A, B and C will be verified by the Department of Illinois Headquarters.
- All entries must be submitted to the Honors & Awards Chairperson, either AMVETS or Ladies Auxiliary, and mailed to Department Headquarters.
- All nominations close April 1st of each year.

Post AMVET of the Year Award Application

This award is to be made to one (1) individual AMVET from each post, who in the opinion of the post, has rendered the greatest service to the post.

Nominee cannot be a paid employee of AMVETS. Nominations close April 1 of each year.

Date: _____

I (we) do hereby nominate:

Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

For Post AMVET of the Year Award.

Commander: _____ **Post:** _____ **City:** _____

Adjutant: _____ **Post:** _____ **City:** _____

No write-up is required.

Crete Memorial Post #84 Scout Award Application

This award is to be given to the Scout and/or Explorer who has been outstanding in his/her troop or post during the current year. Fill out the form below and have it signed by the proper person. If more space is needed, attach extra sheets to this form.

The boy will be judged on the following:

- Advancement (Must be better than average)
- Attendance
- Community Service
- Outstanding contributions to the troop and/or post
- Living up to the scout oath (most important)

Date: _____

Name Troop or Explorer #: _____

Address: _____

City: _____ State: _____ Zip: _____

Rank: _____ Position/Office Held: _____

I recommend the above Scout for this award for the following reasons:

Signed Scout Master or Advisor: _____

The Scout should live up to the Scout Oath at all times; therefore, we should like a few words from his parents to this fact:

Signed Parent or Guardian: _____

The Scout states, "On my honor, I will do my duty to God." A few words from his clergyman or Sunday School Teacher as to how well he has lived up to this:

Other reasons why this boy should receive this award:

Submitted by: _____ Commander's Signature: _____

Post: _____ City: _____ Zip: _____

AMVETS Membership Award (Donald R. Russell) Application

1. This award is intended to stimulate interest.
2. The nominee must be a member of the Department of Illinois in good standing.
3. The award will go to the nominee signing the most new members in his post. Members signed may include any eligible veterans.
4. All entries will be based on the activities from the state of the membership year to the cut-off date for the Department Convention.
5. The application form must be completed by the nominee and signed by him.
6. The application must be verified and signed by the Post Commander and the Post Membership Chairperson, who will assume the responsibility for it's authenticity.

Nominee cannot be a paid employee of AMVETS. Nominations close April 1 of each year.

Date: _____

We wish to submit the name of (First, MI, Last): _____

Who is a member in good standing of Post #: _____

City: _____ **Zip:** _____ **Division:** _____

Of the _____ membership year to the cut-off of the Department Convention.

Number of new members signed for the year: _____

We, the undersigned, verify this application to be a true statement.

Nominee _____ **Post** _____

Commander _____ **Post** _____

Membership Chair _____ **Post** _____

The period of September 1st - August 1st Dates will be corrected _____

SCHOLARSHIP

Scholarships

AMVETS Scholarships

Every year AMVETS gives out approximately 50 new scholarships a year. Some of these scholarships are sponsored Illinois AMVETS Service Foundation, Illinois AMVETS SAD SACKS, and the Illinois AMVETS Ladies Auxiliary.

Scholarship applications are sent to all Illinois High Schools in November of each year. Applications are to be postmarked by March 1st of each year. *Note: Official transcripts must be attached to the scholarship application.* All Scholarship Applications (except LADIES AUXILIARY Scholarship) will be sent to AMVETS State Headquarters, 2200 South 6th Street, Springfield, IL 62703.

Following are sponsored scholarships for 2008-2009 and requirements for each:

Illinois AMVETS Service Foundation Scholarship – 1-Year, \$3,000 Non-renewable

Eligibility Requirements:

1. Applicant must be an Illinois High School Senior
2. Applicant must have taken the ACT or SAT

Illinois AMVETS JROTC - 1-Year, \$3,000 Non-renewable

Eligibility Requirements:

1. Be an Illinois High School Senior
2. Have taken the ACT or SAT
3. Participate in a Junior ROTC program

Illinois AMVETS Trade School Scholarship – 1-Year, \$3,000 Non-renewable

Eligibility Requirements:

1. Applicant must be an Illinois High School Senior who has been accepted in a pre-approved trade school program (A copy of an acceptance letter must accompany the application.)

Illinois AMVETS Sad Sacks – One Year Scholarship, Monetary Amount To Be Determined

Eligibility Requirements:

1. Applicant must be an Illinois High School Senior who has been accepted in a pre-approved nursing program (A copy of the acceptance letter must accompany the application.)
2. Applicant may already be a college student in an approved School of Nursing in the State of Illinois.
3. Prove satisfactory academic record, character, interest and activity record, and financial need.

Scholarships

AMVETS Ladies Auxiliary Scholarships

All Ladies Auxiliary scholarship applications will be sent to:

AMVETS Ladies Auxiliary
c/o Penelope Goins
PO Box 372
Groveland, IL 61535

Illinois AMVETS Ladies Auxiliary Memorial Scholarship – One year scholarship for \$500.00

Eligibility Requirements:

1. Applicant must be an Illinois High School Senior
2. Applicant must be a child or grandchild of a Veteran who served after September 15th, 1940 and who was Honorably Discharged or who is presently serving in the military.
3. Must have taken the ACT or SAT

Illinois AMVETS Ladies Auxiliary Worchid Scholarship – One year scholarship for \$500.00

Eligibility Requirements:

1. Applicant must be an Illinois High School Senior
2. Applicant must be a child of a deceased Veteran who served after September 15th, 1940 and who was Honorably Discharged. They need not be killed in action or died as a result of a service-connected disability.
3. Must have taken the ACT or SAT.

GRANTS

Grants

Post/Division/District Grant

1. Each Post/Division/District may apply for a \$400.00 Service Foundation grant every year by completing a Grant Application.
2. Grant money must be spent for the purpose of Service or Rehabilitation of Veterans.
3. Post must have been in existence for at least one year before a request can be granted.
4. Grant must be requested between August 1st & May 15th of each year.
5. The Receipt of Distribution form must be filled out and returned to State Headquarters within 30 days.

Ladies Auxiliary/Sad Sack Units Grant

1. Each Ladies Auxiliary may apply for a \$200.00 Service Foundation grant every year by completing a Grant Application.
2. Grant money must be spent for the purpose of Service or Rehabilitation of Veterans.
3. Auxiliary must have been in existence for at least one year before a request can be granted.
4. Grant must be requested between August 1st and May 15th of each year.
5. The Receipt of Distribution form must be filled out and returned to State Headquarters within 30 days.

VAVS Grant

1. Each VAVS Representative may apply for a \$1,500.00 Service Foundation grant every year by completing a Grant Application.
2. Grant money must be spent for the purpose of Service or Rehabilitation of Veterans.
3. Grant requests must be made between August 1st and May 15th of each year.
4. Each VAVS Representative receiving a grant must turn in a detailed letter and receipts of how grant expenditures were used and must arrive at Headquarters no later than June 15th.

Because We Care Grant

1. Each Because We Care Days Representative may apply for a \$300.00 Service Foundation grant every year by completing a Grant Application.
2. Grant money must be spent for the purpose of Service or Rehabilitation of Veterans.
3. Grant requests must be made between August 1st and May 15th of each year.
4. Each Because We Care Day Representative receiving a grant must turn in a detailed letter and receipts of how grant expenditures were used and must arrive at Headquarters no later than June 30th.

Division Commander's Travel Voucher

1. Vice Commander for I and II, and Vice Commander for III, IV, and V will receive up to \$1,000.00 per year upon request for their funds and will receive a 1099 the following February for tax

- purposes.
2. Division Commanders, Sr Vice, and Jr Vice must obtain the signature of the Post Commander or Adjutant when attending a meeting. They will need to fill out their travel vouchers (Appendix C) with mileage and return it to the Programs Director for reimbursement by the end of the year and Convention.
 3. Post must be at least a radius of 25 miles one way before reimbursement will be granted.

Public Relations Grant

1. The Illinois Service Foundation has available a grant to Posts throughout Illinois for advertising.
2. This grant is to be used for advertising expenses for recruiting new members and will be on a 50/50 basis.
3. A Post may request this grant one (1) time per year.
4. Post will receive 50% of cost back, not to exceed \$200.00.
5. Post must submit a copy of the ad(s) and receipts to Headquarters.
6. National AMVETS has a similar program. Please contact their headquarters for more information.

Dreams Unlimited Grant

1. Child must be terminally ill or seriously ill.
2. Must complete a Dreams Unlimited Questionnaire
3. Dreams will not exceed \$1,500.00
4. All Dreams are presented before the SEC or Annual Convention
5. Contact State Headquarters for further information.

Post Color Guard Parade Grant

Each Post Color Guard must consist of at least four members, two flag bearers and two guards.

- 1) The Color Guard members must participate in a parade in a town/city that is at least 25 miles from the town of their home Post.
- 2) The parade must be in a town/city in Illinois.
- 3) The signature of the Parade Coordinator must be on the Post Color Guard Parade Funds Form.
- 4) The Post Color Guard Parade Funds Form must be submitted no later than July 15th.
- 5) A Post can receive \$25.00 per parade (riding or marching in) that the Post Color Guards participate in.

Reimbursements will run from August 1st through July 15th. If the Post Color Guard participates in a parade any time during this time frame, and the attached form is not submitted prior to the end of the fiscal year, you will not receive funds. However, all requests for Color Guard funds must be in to State Headquarters no later than July 15th of each fiscal year.

Receipt of Distribution: All grants will be required to have a receipt of distribution signed and returned 30 days after grant check has been received. For explanation see the Letter of Distribution and the Receipt of Distribution.

ILLINOIS AMVETS SERVICE FOUNDATION GRANT APPLICATION • PAGE 2

What's your idea or event? _____

When and where will it, or did it happen? _____

Who is involved in the event? _____

What make this event beneficial to veteran ? _____

Are there any other facts you believe are important to this event or story idea?

Please note: Both pages of the grant application form must be filled out, otherwise the application will be returned.

RULES FOR SPENDING POST AND AUXILIARY GRANTS FROM THE SERVICE FOUNDATION

- 1) The Illinois AMVETS Service Foundation is a not-for-profit corporation organized under the laws of Illinois. Its purpose as detailed in the corporate charter is for “Service and Rehabilitation” for Veterans.
- 2) All Funds raised by the Service Foundation belong to the people of the State of Illinois. The Service Foundation is the trustee for those funds, and is obligated under the law to insure that all funds are spent for corporate purposes.
- 3) All grants must be spent for the purpose of service or rehabilitation of veterans. Grants will be given as follows:
 - a. Posts/Divisions/Districts \$400.00
 - b. Ladies Auxiliaries/ Sad Sack Units \$200.00
- 4) All Post and Auxiliaries must be in good standing.
- 5) A Post or Auxiliary must have been in existence for at least one year before they can request a grant.
- 6) The Service Foundation requires the participation of Post and Auxiliary members in any projects in which grants funds are used. You cannot purchase an item and give it away, such as purchasing tables, chairs, beds, etc., and giving them to a veteran home.
- 7) Recipients may request this grant in advance. The request must be signed by the Post Commander or Auxiliary President.
- 8) You may not donate any of the funds received from the Service Foundation. Donations to charities of any type are appropriate for donations of Post and Ladies Auxiliary funds only and not the Service Foundation Grant.
- 9) Some examples of correct expenditures would be:
 - a. Parties for hospitalized Veterans-Bingo, bowling, etc., but no cash winners.
 - b. Purchasing clothing/comfort items for Veterans in nursing homes and physically presenting the items.
 - c. Distribution of food and other necessities to Veterans’ families suffering economic

hard hip at various time of the year.

NOTE: These programs MUST have the participation of the Post and/or Auxiliary members.

- 10) Some examples of incorrect expenditure would be:
 - a. Paying all or part of a utility bill for a Veteran.
 - b. Donating all or part of Post or Auxiliary grant to another organization.
 - c. Giving cash or check to a Veteran or family
- 11) The expenditure of grant by Post and Auxiliary that do not follow the guideline will not be renewed for the next year.
- 12) Your grant fund cannot be held over from year to year. If Post or Auxiliary does not spend their total grant during the year in which acquired, you must return the unspent portion to the Illinois AMVETS Service Foundation in order to be eligible for the following year.
- 13) The guidelines also apply to grants made to District, Division, and Sack.
- 14) All requests for this grant must be made between August 1st and May 15th of each year. No grants will be given after May 15th.
- 15) If you have any question or problem concerning the proper spending of Post/Auxiliary grant, please contact State Headquarters.

RULES FOR SPENDING VAVS or BECAUSE WE CARE GRANTS FROM THE SERVICE FOUNDATION

1. The Illinois AMVETS Service Foundation is a not-for-profit corporation organized under the laws of Illinois. Its purpose as detailed in the corporate charter is for “Service and Rehabilitation” for veterans.
2. All funds raised by the Service Foundation belong to the people of the State of Illinois. The Service Foundation is the trustee for those funds, and is obligated under the law to insure that all funds are spent for corporate purposes.
3. All requests for these grants must be made between August 1st and May 15th of each year. No grants will be given after this date.
4. All grants must be spent for the purpose of service or rehabilitation of veterans. Request for grants for VAVS and Because We Care Days, must be signed by the VAVS Representative for that particular hospital or state home. Grants will be given as follows:
 - a. Each VAVS Representative at VA Hospitals \$1,500.00
 - b. Because We Care, VAVS Representative per establishment \$ 300.00
5. The Service Foundation requires the participation of volunteers in any project in which grant funds are used.
6. The grant request form must be filled out completely and signed by the VAVS Representative.
7. You may not donate any of the funds received from the Service Foundation. Donations to charities of any type are appropriate for donation of Post funds only and not the Service Foundation Grant.
8. The expenditures of grants that do not follow these guidelines will not be renewed for the next year.
9. Your grant funds cannot be held over from year to year. If you do not spend all the grant during the year in which acquired, you must return the unused portion to the Illinois AMVETS Service Foundation with your grant expenditure letter in order to be eligible for the following year.

10. Each representative receiving a grant must turn in a letter of how the grant was used. A detailed report and receipt showing your grant expenditure must be mailed to the State Headquarter and must arrive no later than June 30. It is suggested that your letter be sent by certified or registered mail, return receipt requested. Your report should be in letter format, dated, and signed by the VAVS Representative in your particular hospital/home and should include amount of each expenditure for various items, listing the total, including the number of volunteer.

Remember, your grant cannot be given to any individual or organization. Please indicate what you did to help the Veteran and include copies of receipts for amounts spent with your letter for the different items.

NOTE: DO NOT send in your expenditure report and in the same letter request the new grant for the next year. A separate letter requesting the grant must be sent after August 1 of the year in which applying. Your request is filed in one separate fiscal year records, and your reply is filed in a different fiscal year.

LETTER OF DISTRIBUTION

Post/Aux/Other: _____

Dear _____:

We have enclosed a check for a grant by Illinois AMVETS Service Foundation (the "Foundation") to Post/Aux/Other _____ in the amount of \$_____. We have also enclosed a Receipt of Distribution form, which the Foundation requests that you execute and return to us within thirty (30) days. In addition, as you are aware, it is the policy of the Foundation that the Post/Aux/Other sends a report to the Foundation accounting for your Post/Aux/Other expenditure of the grant funds and must provide the Foundation with "contemporaneous written acknowledgement" of its donation. We have enclosed a form of acknowledgement that meets the contemporaneous written requirement. To insure that this requirement is met, we request that you provide an acknowledgement to the Foundation within thirty (30) days of your receipt of the grant.

Please contact me if you have any questions.

Very truly yours,

Illinois AMVETS Service Foundation

Len Baumgartner

Leonard Baumgartner, Executive Director

RECEIPT OF DISTRIBUTION

The undersigned, Post/Auxiliary/Other # _____, hereby acknowledges receipt of its Illinois AMVETS Service Foundation grant in the amount of \$ _____.

We hereby consent to the rules set forth by the Illinois AMVETS Service Foundation and agree to administer these funds in the fiscal year beginning August 1st, 2008 and ending July 31st, 2009 in accordance with said rule. Furthermore, we realize this does not relieve the Post/Auxiliary/Other of the obligation to submit an expenditures report by July 31st, 2009, and failure to comply will disqualify the post from applying for a grant during the following fiscal year and thereafter until such time as all documentation is submitted.

Post/Auxiliary/Other # _____

By: _____

Its: _____

Date _____

Division Commander's Post Travel Voucher Policy

1. This form is to be utilized by Division Commanders, Sr Vice and Jr Vice for reimbursement of mileage for travels on behalf of AMVETS during the year of your term.
2. Division Commanders, Sr Vice and Jr Vice will be reimbursed up to \$500.00 during the year of their term.
3. Vice Commander I & II and Vice Commander III, IV, and V will be receive \$1,000.00 during the year of their term without filling out this form. Funds must be requested by May 31st.
4. This form is not to be utilized for personal travels. You must obtain the signature of the Post Commander or Adjutant when you attend a meeting. Your form must be turned into your Division Commander for his/her approval, who will then submit to Department of Illinois Headquarters. This form is to be turned in to Department of Illinois Headquarters in December and no later than the Department Convention.

When to use this form to record mileage

1. When visiting a Post for Post meetings.
2. When visiting a Post to help with a membership drive.
3. When visiting a Post that is having trouble of any type, such as teaching them how complete membership forms, or other problems.
4. When helping to form a new Post in your Division.

Post visits must be at least 25 miles one way before reimbursement will be granted.

When not to use this form to record mileage

1. When visiting a Post to help with a cook out other or fund raiser.
2. When attending Division Meetings.
3. When attending SEC Meetings.
4. When attending 4th National District and NEC Meetings.
5. When Attending National Convention.
6. When attending your own Post meetings.

Note: If you are asked by the Department Commander to represent him at a special function, such as, a Monument Dedication ceremony, you can be reimbursed for the mileage and receive per diem. The Commander must notify the Department Headquarters of these travels and authorize reimbursement.

Public Relations Service Foundation Grant

The Illinois AMVETS Service Foundation has available a grant to Posts throughout Illinois for advertising. A Post may request this grant one time per year, with a maximum of \$200 to be granted.

Qualifications For Grant:

- 1) The ads placed in papers must be used for membership drives.
- 2) The membership drive must be for new members and not an early bird party.
- 3) The Post places the ad in the paper and pays for the ad.
- 4) A copy of the ad and a copy of the receipt are to be sent to Department Headquarters for reimbursement.
- 5) If it is determined that Post ad meets the requirements, Post will receive 50% of their cost back, not to exceed \$200.
- 6) A Post can only apply once each year for this grant.

Example: Post places an ad in the local newspaper for a Membership drive for Post #400. The ad cost the Post \$150.00 for running the ad.

To apply:

After the ad has been in the paper, send a copy of the ad and a copy of the bill for the ad to Department Headquarters.

If Post ad meets the criteria, Post will receive \$75.00 for the membership drive.

Note: If Post ad is \$500.00, Post will only receive a maximum of \$200.00

Note: AMVETS National Headquarters has a similar program, if done correctly posts could utilize both programs and pay nothing for their advertisement. Call National Headquarters for details.

Illinois State Dreams Unlimited Grant

Purpose: Dreams Unlimited is a program designed to grant “dreams” to terminally ill or seriously ill children under the age of majority (18).

Requirements:

1. The child must be terminally ill or seriously ill.
2. Terminally ill children will have priority over seriously ill children in determining whether a dream is granted.
3. Children of Veterans, Veteran’s family, Active Duty Military, or Reserve Military will have priority over other civilian children in determining whether a dream is granted.
4. Dreams Unlimited Questionnaire is to be completed by the family and submitted to the State Headquarters.
5. Statements detailing the child’s illness and prognosis from the child’s physician(s) are to be forwarded to the State Headquarters.
6. The number of dreams granted is wholly dependant upon the operating budget of the Dreams Unlimited Program.
7. Each dream will not exceed \$1,500.00
8. All dreams must be presented before the members present at the State Executive Committee or Annual Convention. The dream must be approved by the SEC body before any dream can be granted.
9. Any questions are to be directed to the AMVETS State Headquarters.

Public Relations

We have been making every effort to create a Public Relations' Program with an objective to educate people outside of our organization on what our AMVET and Ladies Auxiliary Members do best, "Veterans Serving Veterans". This is key to promote membership and gain more overall support for the AMVETS organization. We, the AMVETS Organization, have had a number of Posts and Ladies Auxiliaries who have sent in information on their respective events that we were able to get public relation information on and inevitably media coverage. Please choose to support this effort of this program by showing your participation.

Please fill out the public relations form, including all of the event's necessary information and return it back to AMVETS State Headquarters at 2200 South Sixth Street, Springfield, Illinois 62703. Please include any photos, newspaper articles, or any other forms of event coverage that may be of use in the overall reporting effort of our AMVETS organization. With our public relations program, it is recommended that your respective Posts and/or Ladies Auxiliaries submit your public relations reporting form within a 30-day period prior to the date of the event. This particular time frame is needed to insure that our public relations department has an adequate period of time to accurately gather the facts on the given event and line up the proper media and/or newspaper coverage of the particular event in a timely manner. In addition, this time frame will allow for the proper procedures to be executed in order to have successful coverage of the event throughout each of the media avenues. Media coverage is not, however, guaranteed. If your respective Post and/or Ladies Auxiliary cannot provide State Headquarters with the necessary information in this given period of time, the program can still be reported on within a newspaper article after the event; however, media coverage would be unlikely.

A copy of the PR form is attached to each grant request. In order to receive your grant, you must fill out the form to the best of your ability.

In order for our organization to thrive in our Public Relations' Program, we need to have participation from all Posts and Auxiliaries to see outstanding success. Overall participation is a vital component with this program. As a result, we ask that each of your respective Posts and Ladies Auxiliaries begin to participate in this program. Your cooperation with this effort would be greatly appreciated.

There is a media list is available at State Headquarters or online at www.ilamvets.org.

If you have any further questions regarding the public relations' program, please feel free to call Ashley Murphy at State Headquarters at (217) 528-4713 or email her at ashley@ilamvets.org .

Illinois AMVETS Newspaper Guidelines

If you would like to submit a story or photo for our Department newspaper, please keep in mind the deadline is the **first (1st)** of the month, 30 days in advance. (For example, the July newspaper deadline is June 1st.)

What is public relations?

Public relations (PR) essentially means managing the relationship between AMVETS and the people we serve. That includes current members, potential members, the media, local residents who have an interest in veterans' organizations and even local, state and federal legislators.

Why is PR important?

On a continuing basis, PR evaluates public opinion on practically everything that surrounds the AMVETS organization. In order for the perception of AMVETS success and the reality of success to become one, the discussions between AMVETS and these other groups must be continuous.

Through stories we'll place in the media, events and promotions we help organize, speeches, and informative materials that may include direct mail, film/video productions or other advertising, public relations serves as a conduit for the message we want the public to hear about Illinois AMVETS.

What can you do?

The AMVETS Department of Illinois has had a public relations program established for several years now. On a Department-level, much is being done to inform the community about all the good works you, as AMVETS, are doing for your fellow veterans and communities. This packet is designed to help individual posts create their own public relations, should you so choose.

Please remember, the Public Relations Director at State Headquarters is here for you! This person is available to contact the media for you and your post and provide any assistance. Ashley can be reached at 217-528-4713, or by email at ashley@ilamvets.org.

Press Releases

The press release is the most common way of getting information about your organization to the public. The best press releases use the 5 W's: who, what, when, where and why. A good release will contain the following:

- A crisp headline
- Introductory paragraph with the more important information
- Additional paragraphs describing details
- At least one quote from a credible source
- Closing paragraph to include the "boilerplate" (information that clearly identifies your organization)

In addition, an ideal press release is a single page. One should never be longer than two pages. Always follow-up with a call to make sure the appropriate person received the information and to offer any assistance.

Editorials

Every newspaper offers an editorial section, or an opinion section, to voice the position of a person or group

of persons on an issue. There are three basic ways to express an opinion via the newspaper:

1. An “editorial” prepared by the newspaper’s editorial staff. This is the publication’s official position on an issue.
2. A “letter to the editor,” which is available for members of the community to react to a news article in their local paper.
3. An “op-ed,” which is an opinion piece written and submitted by someone not working for the newspaper.

Editorials are usually written about the issue of the day. A front page issue that can impact your local community and relates to your post’s interests presents an opportunity for you to have input. You can request a meeting with the editorial board to discuss the issue and offer any useful background.

A Letter to the Editor is a useful way of expressing your post’s opinion. With letters to the editor, you are the speaker, as most are published in letter format as submitted. Utilizing this method of editorials is best when timely—a response to a recent article or story that is applicable to your post/the veteran community.

Make sure you contact the editorials section to determine the guidelines required for submission.

An Op-Ed is a piece you’ve written that is published on the editorials page. These have significant impact when used, though they are not easily placed. It’s worth the effort if the issue you want to write about is current, controversial and has a local angle. If you choose to do this, it is recommended you contact the Public Relations Director at State Headquarters for some talking points and suggestions.

Interviews

If you are a Post Commander, Division Commander or State Officer, it is likely that at some point you will be called upon to represent the AMVETS in an interview. To make the interview process as simple as possible, here are some tips:

- Watch news stories to detect trends and gather background.
- Interview your reporter before the interview. Know their name, the news organization, where and when the interview will be, why AMVETS was chosen and who else will be interviewed. Also, know what the deadline is.
- Decide what you want to gain from this interview. Figure out what message is the most important and appropriate, then craft your message.
- Be yourself!
- Be truthful! (Do not be afraid to say “I don’t know” to something.)
- Don’t speak off the record, say “no comment” or let an incorrect statement go unchallenged.
- Don’t argue with a reporter.



Illinois AMVETS Posts' Public Relations Fact Sheet

Post Number _____ Contact Name _____

Address _____

City _____ Zip code _____

Telephone () _____ Fax () _____

E-mail _____

What's your idea or event? _____

When and where will it, or did it happen? _____

Who is involved in the event? _____

What makes this event interesting to veterans? _____

Is there any other information you believe is important for the community to know?

Please send, fax or e-mail this form to Ashley Walz at: AMVETS Department of Illinois, 2200 South 6th Street, Springfield, IL 62703. Fax to: 217-528-9896 or e-mail to: ashley@ilamvets.org. If you have additional questions, please call Ashley at 217-528-4713.

Draft Sample Letter from Field to Senators

(Date)

The Honorable (fill in the Legislators first and last name)

(Fill in address – see enclosed listing)

Dear Senator (fill in Senator's last name)

Or

Representative (fill in the Representative's last name)

As a Veteran (member of AMVETS Post # ____), I strongly urge your support of SB533, which, when passed, will elevate the Veterans Administration to the Cabinet-level Department of Veterans Affairs. The time for this action is long overdue.

Your support and vote for this measure will carry a strong message to Illinois Veterans and our Nation's Veterans that you recognize their contributions and sacrifices made in service to America.

Thank you for your time and consideration.

Respectively yours,

(Your signature and title if you hold a Post/Department Office)

There are a number of things you should not do in writing your Legislator...

- DON'T sign and send a form letter.
- DON'T begin on the righteous note of "As a citizen and taxpayer," they assume that you are not an alien and they know that we all pay taxes.
- DON'T apologize for writing and taking their time. If your letter is short and expresses your opinion, they are glad to give you a hearing.
- DON'T be rude or threatening. It will get you nowhere.
- DON'T be vague. Some letters are written in such general terms that they leave the legislator wondering what in the world the writer had in mind.
- DON'T send a carbon copy to your other legislators when you have addressed the letter to one. Write each one individually.
- DON'T write to the members of the House while the bill is being considered in the Senate and vice versa. The bill may be quite changed before it leaves the chamber.

Remember---It is the straightforward letter carrying the appeal of earnestness that commands the interest and respect of legislators. It is especially helpful if you can state how the bill would affect you and your community. Legislators must decide how to vote on hundreds of bills at each session, and they need and want your help in telling them how these bills would affect their district.

Follow through: Almost all Legislators answer their mail, but if your reply is just a brief acknowledgment, write again to ask for more specific information, e.g., precisely how he stands on the issue, how he feels toward its success, and if he proposes to support or oppose it. It is highly unlikely that he will ignore your second "follow-up" request and he will appreciate your proven interest in the bill. In short, persistence pays.

Timing: Another important factor is when you send your letter. A deluge of mail just as a measure is about to be voted on is much less effective than a single intelligent letter months before while the legislator is still formulating his opinions. When the bill is introduced, send a letter to the chairman of the committee to which it is referred. Sometimes a bill may never get out of committee for a floor vote. When possible, always refer to the bill under discussion by its title and number.

Address Correspondence as shown below:

SENATORS

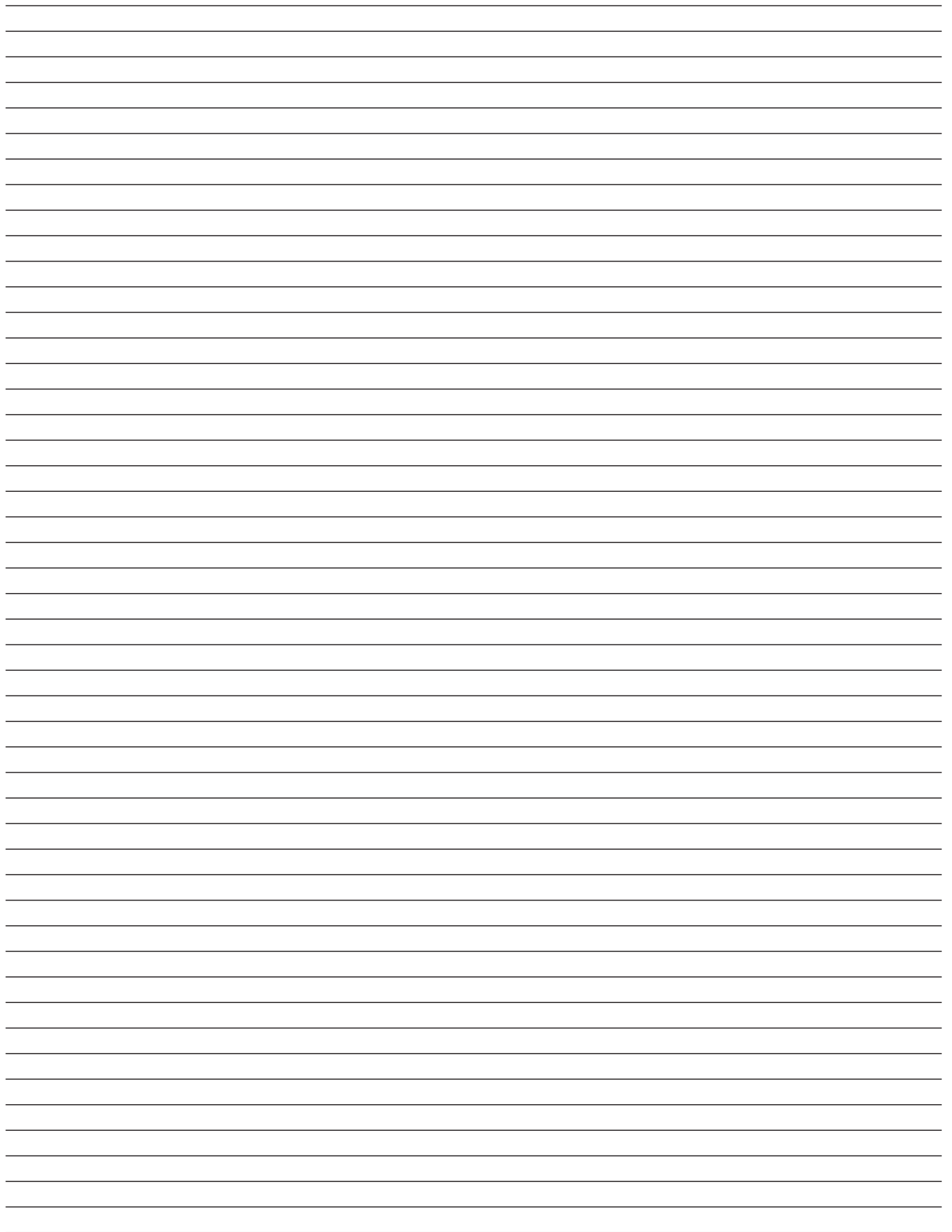
The Honorable Frank Watson
Room 309A
Capitol Building
Springfield, Illinois 62706
(Dear Senator Watson)
(217) 782-5755

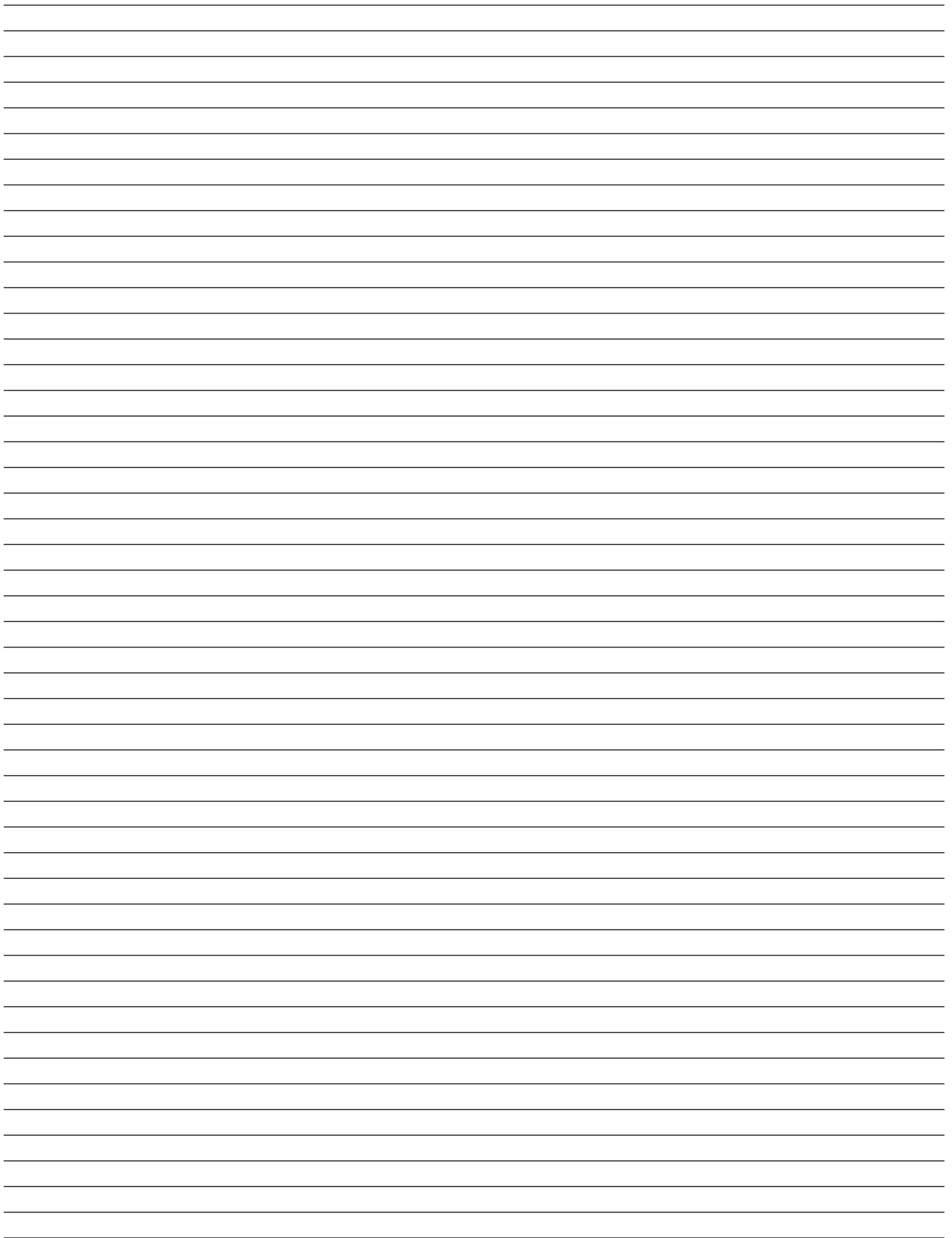
The Honorable James Emil Jones
Capitol Building
Springfield, Illinois 62706
(Dear Senator Jones)
(217) 782-2728

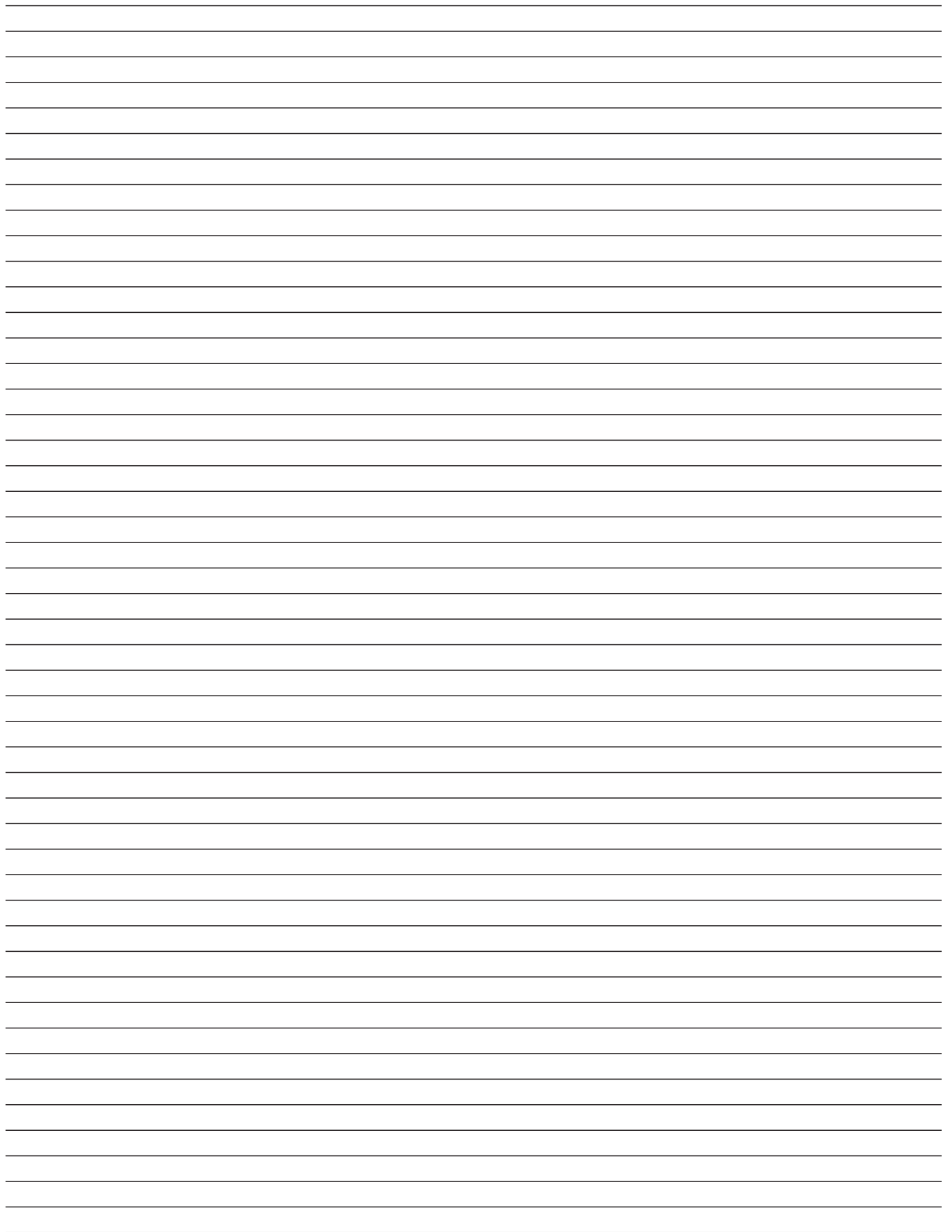
REPRESENTATIVES

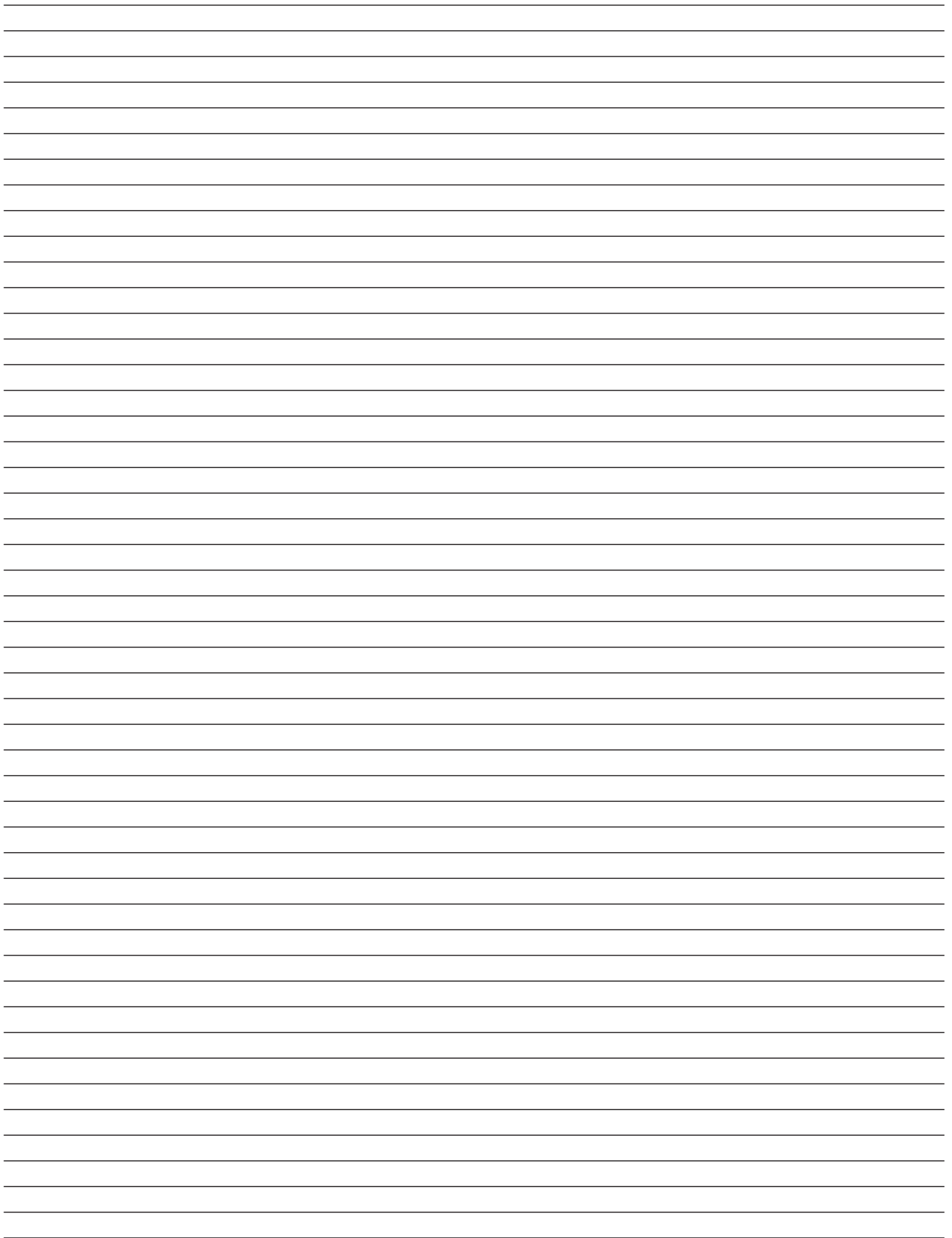
The Honorable Michael J. Madigan
300 State House
Springfield, Illinois 62706
(Dear Representative Madigan)
(217) 782-5350

The Honorable Thomas Cross
316 Capitol Building
Springfield, Illinois 62706
(Dear Representative Cross)
(217) 782-1331











AMVETS Department of Illinois
2200 South Sixth Street
Springfield, IL 62703
217-528-4713

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