THE AMERICAN LEGION DEPARTMENT OF SOUTH CAROLINA

P. O. Box 3309 Irmo, SC 29063

Phone: (803) 612-1171 - Fax (803) 213-9902

JUNE 1, 2012 - MAY 31, 2013 POST NARRATIVE REPORT FORM (Please print)

DUE DATE: JUNE 15, 2013

Applications will not be returned but can be picked up at Department Headquarters until June 30, 2013

Post	t Name Post #48 Chesnee	No 48	District No. 5		
Dep	partment of South Carolina	Pres	sent Membership_84		
City Chesnee		State	State_SC		
Addı	ress PO Box 323, Chesnee, SC 29323				
1.	Did your Post file a Consolidated Post Report form?	? Yes	X No		
2.	Did your Post participate in any of the following National Children and Youth program objective Please report the amount of money spent/donations on each program.				
	Family Emphasis (National Family Week) \$				
	Child Safety (Drug Abuse Prevention: Youth Suicide	e Prevention, etc.)	\$	_	
	Describe program(s)				
	Children's Miracle Network		\$	_	
	Halloween Safety		\$	_	
	Number of children:				
	Missing Children		\$	_	
	April is Children & Youth Month		\$	_	
	Temporary Financial Assistance		\$	_	
	Number of children assisted:				
	Family Support Network		\$	_	
	Number assisted:				
	_ Ronald McDonald House		\$	_	
	Estimate the number of volunteer service hours provide children and youth in your community.	~ ~	ship of your Post for the ours		