



**American Legion Auxiliary Department of Illinois
Christmas gifting form 2**

**Christmas Gift Program Reimbursement-Form #2
Deadline to Chairman January 8th, 2026**

Date: _____ Reimbursement Number: _____

District: _____ Total Check Amount: _____

Institution Name and address: _____

Check payable to and recipients address: _____

1. All forms must be postmarked by January 8th, 2026 to the Department C&Y Chairman.
2. If purchased by District Chairman: This form is to be completed and returned with store receipts attached.
3. If there are no receipts submitted, the District Chairman will NOT be reimbursed until they are received by date above.

4. If purchased by the Institution/Auxiliary by December 29th 2025 A letter must be sent by the facility letterhead with receipts attached. Letter form #2 should state the amount of the check and to whom the check should be made payable **Jan.8th ,2026**

5. You will not be reimbursed if Form1 was not received by the October deadline, or if you have not included your receipts to form 2.

6. Need all thanks you's and letters at this time

Please send this form and information to Sue Johnson

americandancer13@gmail.com or 140 E. Russell st. Rockton, Il. 61072 and to get paid Sharon Conatser executivesecretary@ilala or Department of Illinois ALA, P.O.Box 1426, Normal/ Bloomington 61702-1426

Sue Johnson