



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

**Christmas Gift Program Reimbursement-Form
#2 Deadline to Department January 15th, 2027**

Date: _____ Reimbursement Number: _____

District: _____ Total Check Amount: _____

Institution Name and address: _____

Check payable to and recipient's address: _____

1. All forms must be postmarked or email by January 15th, 2027, sent to Department and copy sent to Department Children and Youth 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 30th, 2024, if not sooner. A letter must be sent by the facility letterhead with receipts attached. Letter should state the amount of the check and to whom the check should be made payable.
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 facility appreciation letters sent with this form.
Please send this form and information to American Legion Auxiliary-Dept. of Illinois P.O. Box 1426, 61702-1426 ilmembership@ilala.org

Copy sent to Department Children and Youth Chairman
Suzanne King 200 Melbrooke Rd, Elgin, IL 60123 or email
Suzyjulyfaithk1988@gmail.com
Please call Suzanne King Children and Youth Co-Chairman if you have any questions. 847-736-5525.