Women’s Army Corps Veterans’ Association (WACVA)
Army Women United
Chapter Handbook

FOREWORD
The information contained in this handbook represents the combined effort of the 1983-1984 National Board of Directors of the Women’s Army Corps Veterans’ Association (WACVA).

The information provided within is intended to be a guide and can be depended upon in all cases to which it is applicable and is not inconsistent with the National Constitution and Bylaws. All changes must be approved by the National Board of Directors and changes and comments are always encouraged.

It is recommended that every chapter obtain an additional copy of this Handbook to keep on file for new members.

The cost of this Handbook is dependent upon the current cost of printing or reprinting and postage.

THIS IS THE FIRST EDITION
Prepared by Doris L. Caldwell, National Constitution and Bylaws Chairperson; Edna M. Dryden and Martha J. McBroom, Past National Presidents; and Eldora M. Engebretson, National Sergeant-at-Arms; under the administration of: Mary “Cathy” Aleshire, National President, Women’s Army Corps Veterans’ Association.

Updated: 23 Nov 2002, 27 Apr 2010 & 22 June 2013
Eldora M. Engebretson

PREAMBLE
We, the members of the Women’s Army Corps Veterans’ Association, humbly petition the blessings of our Heavenly Father upon all our activities, that we may grow in grace and glorify our purpose to be of service to all veterans. We pledge allegiance to the United States of America and to the members in whose name we serve. We are resolved to promote justice, tolerance, peace, and good will among all men toward the end that all wars may cease.
Women’s Army Corps Veterans’ Association (WACVA)
Army Women United
Handbook
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SECTION A - NATIONAL

POLICY
The Women’s Army Corps Veterans’ Association shall have its existence in perpetuity and as such its purpose is to promote the general welfare of all veterans, especially the veterans of the Women’s Army Corps and of the Women’s Army Auxiliary Corps, in hospitals or wherever they may be; to provide publications pertaining to its members; and to further the general education and civic betterment programs for the general welfare of the community.

HISTORY
Veterans and active members of the Women's Army Corps met in Chicago, Illinois, in 1946, under the sponsorship of the WAC Mother's Association, to organize a Women's Army Corps Veterans' Association. On May 14, 1946 the Chicago Women’s Army Corps Veterans’ Association was formed. On July 26, 1946, they were chartered as a general non-profit corporation in the State of Illinois.

Efforts to organize in other cities began and in August 1947 with a membership of approximately 150 members from five cities (Chicago, Illinois; Cleveland and Columbus Ohio; Milwaukee, Wisconsin; and Pittsburgh, Pennsylvania) the first meeting was held to establish a national association.

The first WAC-Veterans Flag was presented to the Association at the second National Convention held in Cleveland, Ohio, in 1948. In 1956 the original flag was sent to the WAC Center at Fort McClellan, Alabama.

On May 11, 1951, the National Certificate of Incorporation was notarized for signatures and on May 14, 1951 it was received for the record in the Office of the Recorder of Deeds, District of Columbia.

At a National Convention held in August 1951, the National Honor Guard was established by a resolution. Its purpose and formation of twenty-two (22) members was further amplified by a recommendation which was accepted at the 1952 mid-year board meeting. Members were selected from those who lived closest to Washington, DC to provide representatives for participation in ceremonies held in the District of Columbia.

The National Executive Council approved the formation of chapters within the Association, at a mid-year board meeting in 1953. As we enter into our 51st year we can be proud of our many accomplishments and contributions, and it is with this same pride and dedication that we can anticipate success in our future endeavors.
SECTION B - CHAPTER

SUGGESTED CHAPTER BYLAWS

The material presented in this section is intended to provide a guide for chapters in the preparation of their Bylaws. Chapter Bylaws should not be a duplicate of the National Bylaws, since a number of the Articles in the National Bylaws pertain only to the operation of the National Organization. The suggested Model has combined several articles in an effort to make Chapter Bylaws easier to develop at the local level. A chapter must give precedence to its needs and capabilities and of its members and insure there is no conflict with national policy.

Chapters must submit their Bylaws and any changes thereof, to the National Constitution and Bylaws Chairperson, for review to insure there is no conflict with national policy. They will become effective upon receipt of her approval and of course any decisions rendered by the National Constitution and Bylaws Chairperson are subject to appeal to the National Executive Board.

A chapter's Bylaws are a reflection of its abilities and goals and it is for those reasons that they need to be kept current and in keeping with national policy.

The information contained in these model bylaws can be depended upon in all cases to which it is applicable and is not inconsistent with the National Constitution and Bylaws.

WOMEN'S ARMY CORPS VETERANS' ASSOCIATION
ARMY WOMEN UNITED

SUGGESTED MODEL OF BYLAWS

The following information is provided as a guide to assist you in writing your Chapter Bylaws. You are cautioned that your Bylaws must not conflict with the National Bylaws. However Chapters may combine any of the offices except President. Chapters may also deviate from officers duties as required by local circumstances. The National Chairperson of the Constitution and Bylaws will review your Bylaws to insure conformity with the National Bylaws and issue final approval.

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PREAMBLE

We, the members of the Women's Army Corps Veterans’ Association, humbly petition the blessings of our Heavenly Father upon all our activities, that we may grow in grace and glorify our purpose to be of service to all veterans. We pledge allegiance to the United States of America and to the members in whose name we serve. We are resolved to promote justice, tolerance, peace, and good will among all men toward the end that all wars may cease.

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CERTIFICATE OF INCORPORATION

In conformity with the Certificate of Incorporation filed by the Women’s Army Corps Veterans’ Association on May 14, 1951, pursuant to the Code of Laws for the District of Columbia, we do certify as follows:

FIRST: The name of this organization shall be the _______ Chapter of the Women’s Army Corps Veterans’ Association – Army Women United, herein after referred to as the Sample Chapter, WACVA.

SECOND: The object of the _______ Chapter of the WACVA shall be the promotion of the general welfare of all veterans, especially the veterans of the Women's Army Corps and of the Women's Army Auxiliary Corps, in hospitals or wherever they may be; to provide publications pertaining to the members; to further the general education and civic betterment programs for the general welfare of the community; and to promote social contacts among the members to further benefit the Chapter.

BYLAWS

ARTICLE I - POLICY

Refer to National Bylaws.

ARTICLE II - MEMBERSHIP

Refer to National Bylaws.

Committee Guidance:

Caution is given in selecting Honorary Members that the order of precedence be approved by the Chapter Executive Board prior to a vote by the Chapter members.

ARTICLE III - DUES

Refer to National Bylaws.

Committee Guidance:

Dues for the Chapter should be in excess of that required for National Dues to cover local operating expenses such as printing and postage for the local newsletter, and participation in community and veteran projects.

ARTICLE IV - OFFICERS

Refer to National Bylaws.

Committee Guidance:

Chapters may combine any of the elected offices except President. Term limits for Chapters shall be determined by local circumstances.

Nominations: A nominating committee of at least 3 members will be elected at the April meeting to present a slate of officers to the floor at the May
Additional nominations may be made at the May and June meetings, prior to the elections.

This Article is an appropriate place to include elections, vacancies and duties of officers.

ARTICLE V- BOARDS COMMITTEES AND DUTIES
Refer to National Bylaws

Committee Guidance:
Care must be taken to differentiate between Executive Board and Board of Directors.

The following listed standing committees are required:
- Constitution and Bylaws/Parliamentarian
- Historian/Publicity
- Hospital/VAVS
- Community Projects
- Ways and Means

Assignment of duties may be as the local situation warrants.

Publication of a newsletter is at the discretion of the Chapter.

Special Committees may be appointed as dictated by local circumstances
Included in ARTICLE V.

ARTICLE VI - REPORTS
Section 1. All Officers and Chairperson of Standing and Special Committees shall submit to the membership a written report at each meeting. Those not able to attend a regular scheduled meeting will relay their reports to the Corresponding Secretary prior to the meeting. An annual written report will be submitted to the Chapter President and forwarded to the National Committee Chairperson as appropriate.

ARTICLE VII - MEETINGS
Section 1. Meetings of the chapter shall be held at the time and place designated by the Chapter Executive Board

Section 2. A special meeting of the chapter may be called by the President, or a majority of the Board of Directors or by the Executive Board, or by written request of one-third (1/3) of the chapter members.

ARTICLE VIII - QUORUM
Section 1. One-fifth (1/5) of the voting membership shall constitute a quorum at a regular chapter meeting.
Committee Guidance:
Where local circumstance preclude the above special permission may be granted by the National Constitution/Bylaws Chairperson.

Section 2. One-half (1/2) of the members of either the Executive Board or the Board of Directors shall constitute a quorum at their respective meetings.

ARTICLE IX - ORDER OF BUSINESS
Section 1. The order of business at each meeting shall be in accordance with Robert's Rules of Order Newly Revised.

ARTICLE X - NATIONAL CONVENTION
Section 1. Authorized representation at the annual convention shall be in accordance with the National Bylaws. Delegates and Alternates to attend the National Convention shall be elected at the last chapter meeting of the fiscal year, and they shall be certified as required in the National Constitution and Bylaws.

Section 2. Registration fees of the president and of the delegates may be paid by the chapter if the treasury warrants.

Section 3. To be eligible to attend as a Chapter Delegate, Alternate, or the Chapter president or her representative, national dues for the current fiscal year must have been paid not later than sixty days prior to the end of the fiscal year. Members who have not paid their dues by May 1st may not represent the chapter at the National Convention as a representative for the chapter.

ARTICLE XI - FISCAL YEAR
Section 1. The fiscal year for the Chapter shall be from July 1st of each year through June 30th of the following year.

ARTICLE XII - DUTIES OF THE CHAPTER
Section 1. It shall be the responsibility of the Chapter to comply with the provisions of ARTICLE XIII of the National Constitution and Bylaws.

ARTICLE XIII - PARLIAMENTARY AUTHORITY
Section 1. The rules of parliamentary practice comprised in Robert’s Rules of Order Newly Revised, shall govern all proceedings of the chapter, its Board of Directors and its Executive Board, and are subject to any special rules as may have been or may be adopted by the chapter.
ARTICLE XIV - AMENDMENTS

Section 1. These Bylaws may be amended by two-thirds (2/3) vote of the voting members present, provided the changes have been submitted in writing at a previous meeting to the Constitution/Bylaws Chairperson, and has been read to all of the members present, and a written notice has been provided to all of the chapter members, prior to the meeting in which a vote is to be taken upon such amendment.

Section 2. To avoid conflicts all proposed amendments to these Bylaws shall be submitted to the National Constitution / Bylaws Chairperson for approval and shall only become effective for the chapter upon receipt of approval.

ARTICLE XV - NATIONAL EMERGENCY

Section 1. In the event of a National Emergency, the Board of Directors will set up the machinery to carry on the work of the Chapter.
APPENDIXES

This portion of the Handbook is designed to supplement the information contained in the Suggested Chapter Constitution/Bylaws.

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APPENDIX A

INSTALLATION OF OFFICERS

OFFICERS WILL BE FORMED AS FOLLOWS:
Left to Right this puts the President to the right of all the officers Install: Sergeant-at-Arms to President

President
First Vice-President
Second Vice-President
Recording secretary
Corresponding Secretary
Treasurer
Chaplain
Sergeant-at-Arms

THE FOLLOWING IS TO BE READ BY THE INSTALLING OFFICER:

TO ALL OFFICERS:
You are doubtless fully aware that the price of privilege is responsibility. In assuming the position of an officer in the Chapter of the Women’s Army Corps Veterans’ Association, you will be looked upon as a representative of the Association.

TO THE SERGEANT-AT-ARMS:
(Call the Name). As the Sergeant-at-Arms, yours is an important trust. You will perform the duties of your office with dignity and dispatch. You will see to it that the National Colors are properly displayed at all regular meetings and at all functions where indicated. Following the presentation of the Colors, you will lead the assembly in the Pledge of Allegiance, and the Preamble. You will be ready at all times to assist the presiding official.

TO THE CHAPLAIN:
(Call the Name). As the Chaplain, yours is a sacred responsibility. You will lead each meeting in prayer; you will aid the sick, comfort the distressed, offer condolences, and render such other kindred services as are pertinent to your office.

TO THE TREASURER:
(Call the Name). As the Treasurer and keeper of the funds of the Chapter, you will perform your duties with honor and dignity. It will be your duty as Treasurer to receive all funds, pay all authorized bills, and keep accurate records of all properties belonging to the Chapter.

TO THE CORRESPONDING SECRETARY:
(Call the Name). As the Corresponding Secretary, you will write all the business correspondence approved by the President or the membership. You will hold yourself in readiness to carry out the aims of the President through the medium of your office. Communications sent out by you will be the silent messengers of your chapter. Exercise caution that they will reflect the best abilities you possess and that not only you, but your chapter will be benefited and recognized by your efforts.
TO THE RECORDING SECRETARY:
(Call the Name). As the Recording Secretary you will record all the minutes of the Chapter’s meetings, with the knowledge that accuracy of your records is essential to the proper conduct of the business of the Chapter.

TO THE SECOND VICE-PRESIDENT:
(Call the Name). As the Second Vice-President, in the absence of the First Vice-President, you will assume her responsibilities. You will be the Chairperson of Membership and, in this capacity, you will work diligently toward increasing chapter membership.

TO THE FIRST VICE-PRESIDENT:
(Call the Name). As the First Vice-President you will acquaint yourself with the duties of the Office of the President. You will hold yourself ready to assist her at all times, and to conduct the meetings of the Chapter in her absence. You will also serve as the Program Coordinator for the Chapter, and render assistance and advice as needed.

TO THE PRESIDENT:
(Call the Name). As the President to you goes the highest honor this group has to bestow; the arrow of distinction or failure of its aims and purposes will point to you. You will uphold the constitution of the Association and the Chapter. You will earnestly endeavor to conduct the business of the Chapter, honestly and democratically, to the best of your ability. You shall be worthy of the faith placed in you by virtue of your office. You will serve the Chapter unselfishly, and further its aims to be of service to its members, and to the United States of America.

TO ALL THE OFFICERS BEING INSTALLED:
To each of you, consider and perform well the duties of the office which you have been elected to hold. In so doing, you again pledge allegiance to the government of the United States of America, promising to uphold its Constitution and earnestly endeavoring to foster its true ideals of democracy and Americanism.

WITH THIS KNOWLEDGE, DO YOU DESIRE TO ACCEPT THE OFFICE TO WHICH YOU HAVE BEEN ELECTED?
Response: I DO.

AS A MEMBER OF THE WOMEN’S ARMY CORPS VETERANS’ ASSOCIATION, DO YOU SOLEMNLY PROMISE TO EXERCISE YOUR KNOWLEDGE OF RULES AND REGULATIONS SO AS TO PROMOTE FELLOWSHIP, HARMONY AND THE WELFARE AND DIGNITY OF THE CHAPTER?
Response: I DO.

Acquaint yourselves with the duties of your office immediately so that you may conduct the affairs of the chapter in a businesslike manner, impartially and impersonally, and promote the progress and well-being of the Association.

TO THE ENTIRE ASSEMBLAGE:
IT IS THE DUTY OF EACH OF YOU AT THIS TIME TO PLEDGE YOUR FULL SUPPORT AND COOPERATION TO THESE, YOUR NEWLY-ELECTED AND INSTALLED OFFICERS THAT THEIR BURDENS MAY BE LIGHTENED AND THEIR DUTIES MAY BE A PLEASURE.
APPENDIX B

CHAPLAIN

Each Chapter Chaplain should have available, to her, "The Chaplain's Handbook", which may be obtained from the National Office.

Be available to lend your advice, counsel, and services to members of your chapter.

In the event the chapter publishes a newsletter prepare a "Chaplain's Corner" column to report the death of members, non-members and immediate family members. Also, report the names of members who are ill and would benefit from cards and prayers from the membership.

Send get-well cards to those who are ill and sympathy cards to next of kin of the deceased. Get Well cards may be ordered through the National Chaplain.

Offer condolences and assistance. (Contact next of kin; advise them of the importance of having the deceased's DD214 or Discharge in order to obtain a flag and any benefits that might be available). Participate at funerals or services of members or family, when requested to participate by the family.

The National Chaplain shall be notified by using the Form WACVA-CHAP-2 found in Section D. Report the death of any member, parent of a member, immediate family member, or former member, as soon as possible. If the Chapter Chaplain is aware of the death of a women who served in the Army she may report her name.

The National Chaplain should be notified by letter of ill members. Please list the complete name and address. (NOTE: Report serious illness only - such as: Heart attacks, strokes, terminal illness, broken bones and surgery).

Arrange to have flowers sent as appropriate (if this is the policy of your chapter). NOTE: Floral displays for funerals are not always permitted at funeral services. It is advisable to consult with the local priest, pastor, or rabbi or with a member of the bereaved family before sending flowers.

Be responsible for invocations and benedictions at business meetings, social functions and such other prayers as required, and shall be in charge of Memorial Services.
APPENDIX C

EDITOR

If your Chapter publishes a newsletter the following information is provided as guidance:

a. All those who submit reports or other informative data shall bear in mind the need for brevity.

b. Officers and Chairperson are responsible for submitting reports, informative material, or other pertinent material within the deadline set by the Editor. The Editor should not publish any committee or officer’s report on her own initiative, but may request submission of material from Officers and Chairpersons for publication. The responsibility of disseminating material in the publication rests with the Board of Directors.

c. The Editor shall familiarize herself with the provisions of the Chapter’s Constitution and Bylaws, and shall review all material for publication to preclude any conflict. If any question, concerning the material submitted for publication, should arise the matter will be referred to the Chapter’s President for a final decision.
APPENDIX D

HISTORIAN/PUBLICITY

HISTORIAN:

An accurate record of the history of the Chapter is of vital concern to all members.

The Historian will record the history that occurs throughout her term. She shall gather news items, clippings, pictures and any other material concerning the activities of the chapter and/or the WACVA.

She will be responsible for the maintenance of a scrapbook and use the materials she has gathered in each year of her term in office. Additionally, she should provide the National Historian with pictures and any other pertinent material for enclosure into the National Scrapbook. All pictures sent to the National Historian must be documented with the date, place, event, and properly spelled first and last names. The National Historian presents the scrapbook to the National President at the end of the President's term in office.

The Historian will also be responsible for writing the history of the chapter and should have access to all of the minutes of chapter meetings and Board meetings. Additional information can be obtained from chapter correspondence and personal notes taken of any social gatherings.

PUBLICITY:

Publicity for a chapter is very important. The Community needs to become aware of our purpose and activities. There are also many former service women who may be unaware of our Association that may be willing to provide the chapter with additional support.

Chapters need to establish contact with the editors of the local newspapers, radio and television offices/stations. When an event of importance is scheduled at the chapter, be sure the editor(s) is notified with strict adherence to individual deadlines.

A follow up to the editor just prior to an activity should include an invitation to attend. Remember, the press never pays a tab.

Whenever photographs are submitted to the print media, be sure to first query the editor as to their specific requirements. Color photos are never acceptable and most newspapers require at least 5"x7" and usually 8"x10", black and white glossies. Type your caption with proper identification of persons pictured – always with first and last names -- on a separate piece of paper. Put your own name, the chapter name and number, and your phone number on a slip of white paper and attach to the bottom edge of the picture, in case the editor needs more information. NEVER WRITE ON A PHOTO. Don't expect your photos to be returned.

For more specific information, including detailed examples of actual news releases and radio spots contact the National Historian/Publicity Chairperson. A Historian/Publicity Handbook is available from the National Office. Form WACVA CHAP 17 found in Section D will be used to report the Chapters Publicity efforts to the National Historian/Publicity Chairperson.
APPENDIX E

HOSPITAL VAVS

One of the major activities of the Association is to provide volunteer services in Veterans Administration (VA) Hospitals wherever possible.

Chapters shall achieve representation at VA hospitals to assist the National Association to obtain and maintain membership on the National Hospital Veterans Affairs Voluntary Service (VAVS) Board. Our objective is to obtain voting privileges on the National Committee for the Veterans Administration Voluntary Services (VAVS) Committee.

The National VAVS Representative must certify the Chapter VAVS Representative and the Deputy VAVS Representative to the area VA Hospital.

Each VA Hospital has a VAVS Committee. The committee is the best way to determine the needs of the hospital and to avoid duplication of the work of other groups.

The Chapter VAVS Representative and/or the Deputy VAVS Representative shall provide reports to the chapter members concerning the various activities and any other pertinent information that has been obtained from the VAVS Committee meetings.

Form WACVACHAP found in Section D shall be used to request the certification of the Chapter VAVS Representative and the Deputy VAVS Representative has been provided in the forms section of this handbook.

Various activities include participation in voluntary services in not only VA Hospitals but in any hospital or medical facility where they may be needed.

Projects and activities at these institutions may include but are not limited to:

- Decorating
- Distributing gifts and party favors.
- Furnishing and/or serving refreshments.
- Furnishing prizes
- Holidays and associated parties
- Operating booths at the VAVS Carnival

Cash donations are usually made by the chapter to support the members participation at the Hospitals for parties.
APPENDIX F

COMMUNITY PROJECTS

To assure a growth posture is maintained a chapter shall become involved within the Community. A community may be defined as an individual, a group, an immediate neighborhood, city, state.

Chapter members shall provide the Chapter Community Projects Chairperson their volunteer activities using form WACVA CHAP found in Section D.

The Chapter will provide information on participation in community projects on form WACVA CHAP 5 and 6 found in Section D.

Suggested list of activities: Collect for various community drives, such as: Cancer, Heart, MD, March of Dimes, etc.

Volunteer to participate in disaster activities with Civil Defense or the American Red Cross.

Collect items for recycling and assist in any way to preserve our natural resources.

Participate in local civic patriotic activities/programs.

Offer personal assistance to foreign visitors.

Adopt a child through one of the non-sectarian organizations that support orphanages and/or schools.

Contribute to CARE with money, clothes or books.

Assist at various Society for Prevention of Cruelty to Animals (SPCA) or local humane societies with fund-raising activities.

The Army Community Services of a nearby military installation is continuously seeking volunteers.

Committee guidance

Monthly volunteer reports will result in a more complete annual report.

It is recognized that a chapter cannot participate in all of the activities suggested. It is recommended a selection of one major program that would be best suited to the capabilities of the chapter and of its members be pursued.
APPENDIX G

WAYS AND MEANS

Ways and Means is a method of raising funds and the type of fund raising activities is limited only by the imagination of the members of the Chapter.

The National Ways and Means Chairperson has many items for sale such as, the WAC Veterans Seals, the Chapter Past President Pins, WAC Veterans pins and charms. A list will be published in the "THE CHANNEL" and will indicate current items and prices.

A few suggestions from reported successful methods are:
   a. Rummage Sales
   b. Candy and Cake Sales (CAUTION - there may be some local/state restrictions on the sale of food items - be sure to check with the local government to determine if a vendor's license is required.)
   c. Promotional Dinners.
   d. Sale of Greeting Cards.
   e. Card Parties.
   f. Mini-Conventions.
   g. Sale of items purchased or donated by members.
   h. Raffles.
   i. Recycling of aluminum cans.
APPENDIX H

CHAPTER PROGRAMS

The program of the chapter is the sum of all of its activities. It represents the recommendations, thoughts, desires and ambitions of all of its members who strive to enhance the operation of the chapter.

When the chapter is first started, the first part of any program should be to become familiar with the National Constitution and Bylaws. This should provide the basis for the chapter to then plan their own program, keeping their capabilities as foremost and insuring there is no conflict with national policy.

The chapter should have a representative at each Pre-Convention Board, of Directors meeting and at each National Convention. There is ample opportunity to present Chapter ideas, or to ask questions, and to solve problems associated with your chapter.
APPENDIX I

RECOMMENDED ORDER OF BUSINESS

I. CALL TO ORDER
II. ADVANCEMENT OF COLORS
III. INVOCATION
IV. PLEDGE OF ALLEGIANCE
V. WAC PREAMBLE
VI. ROLL CALL - OR ESTABLISH A QUORUM
VII. READING OF MINUTES
VIII. REPORTS OF OFFICERS
IX. REPORTS OF COMMITTEES
   A. STANDING COMMITTEES
   B. SPECIAL COMMITTEES
X. INTRODUCTION OF NEW MEMBERS
XI. UNFINISHED BUSINESS
XII. NEW BUSINESS
XIII. RETIREMENT OF COLORS
XIV. BENEDICTION
XV. ADJOURNMENT
APPENDIX J

LETTER OF TRANSFER

A letter of transfer may be issued to any member upon her request. She may request a transfer to another chapter provided she has been accepted for membership in that chapter; or she may request to transfer to a Member-at-Large status. The member asks her present chapter to prepare a letter of transfer, see form WACVA-CHAP-7 found in Section D. The letter is then sent to either the President of the gaining chapter or is sent to the National Office in the case of a transfer to become a Member-at-Large.
APPENDIX K

NATIONAL PUBLICATIONS

The publications indicated below may be obtained from the Website, National Office and/or reproduced from the Chapter Handbook. There will be printing and shipping and handling costs for all items ordered from National Headquarters, except those noted below.

CHAPLAIN'S HANDBOOK:
CONVENTION MINUTES: Normally available in January following the National Convention in August
CONVENTION PLANNING PROCEDURE BOOK
HANDBOOK FOR THE HONOR GUARD
*NATIONAL CONSTITUTION AND BYLAWS
NATIONAL HANDBOOK FOR CHAPTERS
RESUME OF HISTORY AND POLICIES OF THE WOMEN'S ARMY CORPS VETERANS' ASSOCIATION

National publicity handbook
Available from National Office at no cost:
MEMBERSHIP BROCHURES:
MEMBERSHIP CARDS:

NATIONAL OFFICERS AND NATIONAL COMMITTEE CHAIRPERSONS ONLY
National Letterhead Stationery, Envelopes, and Inter-organizational Memorandums may be obtained by sending a request, specifying the quantity of each item needed.

AUTOMATIC DISTRIBUTION OF PAMPHLETS/PUBLICATIONS: When Association publications are printed or revised there is an automatic distribution to the National Board of Directors.

All proposed changes to national publications must be sent to the National Officer or the National Chairperson having responsibility for the publication, for review. Upon concurrence with the recommended changes, she must obtain the approval of the current Board of Directors prior to implementation.

All proposed changes to the National Constitution and Bylaws must be sent to the Chairperson for review who then has the recommended changes published in THE CHANNEL not later than 60 days prior to the National Convention. If the 60 day requirement cannot be met then the changes must be unanimously approved by the National Convention Body.
APPENDIX L

CALENDAR

FEBRUARY 15 February Profiles for candidates for National Office submitted Chairperson of the nominating committee.

Proposed Bylaw changes submitted to National Constitution/Bylaws Chairperson.

Proposed resolutions submitted to National Resolutions Chairperson whose name shall be announced in THE CHANNEL.

APRIL Chapter Nominating Committee presents slate of Officers to Membership.

National dues are required for those who will attend the National Convention as a voting member.

JUNE Annual election of Chapter Officers

Election of Chapter Delegates and Alternates to National Convention

30 June: End of fiscal year

JULY 1 July: Dues of all members are payable and are to be sent to the National Treasurer.

3 July: Final Reports are due in the National Offices of the First Vice-President, Second Vice-President, National Hospital Chairperson, National Historian/Publicity Chairperson, and National Community Projects Chairperson.

NOV 1 Nov. ALL MEMBERS whose dues have not been paid by this date are delinquent.

ANNUALLY NATIONAL CONVENTION - date and location is decided two years prior.

SUGGESTED HOLIDAYS TO BE OBSERVED

JANUARY Martin Luther King Day (3rd Monday in January)

FEBRUARY Washington's Birthday (3rd Monday)

MAY Armed Forces Day (Usually 3rd Saturday)

Women's Army Corps Anniversary (14 May)

Memorial Day (Last Monday)

JUNE Flag Day (14 June)

JULY Independence Day (4 July)

SEPTEMBER Constitution Day (Citizenship Day, 17 September)

OCTOBER Columbus Day (Second Monday)

NOVEMBER Veterans Day (11 November)

DECEMBER Bill of Rights Day (15 December)
APPENDIX M

NATIONAL HONOR GUARD

The National Honor Guard for this Association was established in 1951 with 22 members who resided closest to the Washington, DC area. This was done to assure the Association was well represented, amid the other veteran groups, when participating at various ceremonies held in the District of Columbia.

The overall supervision of the Honor Guard is under the direction of the Captain of the Honor Guard. With the exception of the election of the Captain and Lieutenant of the Honor Guard which is conducted by the National Sergeant-at-Arms.

Application for membership in the National Honor Guard is always encouraged from any member of this Association. A sample application form is located in the form section of this handbook.

Additional information may be found in the "Handbook for the Honor Guard", which was developed by the National Board of Directors, and is available for purchase from the National Office. New members to the Honor Guard will be provided a copy of the Handbook.
APPENDIX N

CONTRIBUTIONS

The organizations listed in this appendix are only a partial list of those to which this Association makes contributions to.

SEMPERVIRENS FUND - WAC VET REDWOOD MEMORIAL GROVE:

The grove was purchased as an everlasting tribute to all those who have served in the Women's Army Corps. The grove is 10 acres of land located in the Big Basin Redwoods State Park, in the Santa Cruz Mountains, in California. The land cost $8,500 and was adopted as a National WACVA project in 1972 and was paid in full in less than two years.

Donations are still being used to save even more Redwood trees by bringing them into the State Park where they will be preserved.

Send donations to: Sempervirens Fund, WAC Vet Redwood Memorial Grove, Los Altos, CA 94022.

THE US ARMY WOMEN’S MUSEUM

1. The Army Women’s Foundation (AWF) (founded c. 1969 as the WAC Foundation), continuing through several name changes to today. See web site www.awfdn.org. The AWF supports women soldiers and the Museum. The almost one million dollar addition to the museum (for the education program) will be dedicated Mar 19th. MG Dee McWilliams is president. The AWF is sponsoring a symposium on Capitol Hill in mid-March to call attention to women soldier issues.

2. The Friends of the Army Women’s Museum Association (AWM), founded c. ’08, and provides support to the education programs for the AWM. They had some 11,000 students attend last year. The education program has expanded to include special programs for handicapped youngsters and home schooled kids.

HOSPITALIZED VETERANS WRITING PROJECT (HVWP):

The HVWP began in 1946 by Elizabeth Fontaine, a journalist, who felt writing, was good therapy for the men and women veterans in VA Medical Centers. The Veterans Administration first accepted creative writing as a recreational activity and today it is considered to be an aid to rehabilitation.

In 1952, another journalist, Margaret Sally Keach began the "Veterans' Voice", a publication to allow the veterans to see their efforts in print.

The efforts of these and many other journalists has required countless hours of dedication to insure this project is carried on in all VA Medical Facilities.

Donations may be sent to the Hospitalized Veterans Writing Project, 5920 Nail, Mission, Kansas 66202.
CATHEDRAL OF THE PINES:

This memorial was dedicated in 1946 to all the dead of WWII. In 1966 the Association approved a resolution to donate a sum of money to aid in the maintenance of the Bell Tower and to have the Association's name placed on a plaque which is permanently affixed to the wail of the Bell Tower.

Donations for the care and maintenance of this memorial may be sent to:
Cathedral of the Pines Trust
Ringe, New Hampshire 03461
APPENDIX O

CHAPTER PARAPHERNALIA

Prices are not quoted below because they are constantly changing. It is suggested that you contact the company and verify prices before placing the order.

ITEM

*WAC VET Flag - Nylon

Single

Double

8' Staff (Oak)

Spear

8' Aluminum Pole w/Spear

Cord and Tassel

Carrying Belt, White Web

Single

Double

Dust Cover

Eagle

*NOTE:  WAC VET Flag: Gold Background

Green Letters (Cost per letter is

Green WACVA LOGO (ADD PICTURE OF FLAG)

These items are handled by:

Colonel R. K. Walker Flag Company

PO Box 14008

Iroquois Station

Louisville, KY 40214

(Phone:  (502) 366-6516 or (502) 363-2188)

24 hour FAX Number: (502) 361-9994

Offices also in:  Jacksonvile,  FL;  Baltimore,  MD;

Memphis, TN; Brigham City, UT; and Washington, DC

Optional:

Caps  Keystone Uniform Corporation

428 N. 13th Street

Philadelphia, PA 19123

Attention:  Jean Touhey

Phone (215) 922-5493
APPENDIX P

INSTRUCTIONS FOR NATIONAL DUES TRANSMITTAL

Chapter Dues are due and payable on July 1 of each fiscal year. They will be considered delinquent if not received by the National Treasurer by October 1st. Transmittals should be forwarded as frequently as necessary and the last one of the Fiscal Year should be in the hands of the national Treasurer by June 30th. The distribution of “THE CHANNEL” is based on the paid membership.

Members listed on the Transmittal Form are to be in alphabetical order and numbered in sequence, starting with #1 at the beginning of each fiscal year. Each additional Transmittal Form forwarded after #1 should commence with the next number in sequence. Do not list auxiliary or associate members. Please code the Transmittals as follows:

**CODE**

R   Renewal - Chapter members renewing their membership.

N   New - New Person Joining - Indicate under remarks - NEW

TRF   A chapter Member who was formerly a MAL or member transferring from one chapter to another. In remarks section, indicate if member is a MAL transfer with MAL number or state if member is a “Former Member of Chapter ____”. If a member transfers from one chapter or another or from MAL, National Dues for that year will normally have been paid. **DO NOT FORWARD ANY MONEY.** List them on the Transmittal, assigning a membership number in your current sequence.

RE   Use the RE Code when a member asks to be reinstated into the Association when they fail to pay their dues for the past Fiscal Year.

If a member has a name change and/or address change, indicate such in the “Remarks Section” on the Transmittal.

If a member pays dues in advance of the current fiscal year their name should still appear on the FY Transmittal that advance dues were paid.

**Current dues are:**

- $25.00   All Renewals and New Members for the Full year effective July 1st.
- $12.50   New members joining January 1st through June 30 of the current Fiscal Year.

**CHECKS ARE TO BE MADE PAYABLE TO:**

WACVA- not to the Treasurer by name.

Reproducible forms are found in Section D of the Handbook.
The above sample shows the codes and way to prepare your Transmittal. Take just a moment and review - if done properly it will same time for both the Chapter Treasurer and the National Second Vice President (Membership). Accurate records are a must and will prevent duplication of names.
APPENDIX Q

ANNUAL BULLETIN

Annually the editor of THE CHANNEL publishes the Chapter Officer's names and addresses. A reproducible form can be found in Section D, WACVA-CHAP-8.
APPENDIX R

HONORARY CERTIFICATES FOR MOTHERS

Certificates may be awarded to a member’s mother as a means of showing respect and honor. A reproducible form can be found in Section D, WACVA-CHAP-11.
APPENDIX S

This page is for historical purposes only. President’s Annual Report is no longer required 2 March-2010

PRESIDENT’S ANNUAL REPORT

Each Chapter President is required to submit an annual report of the Chapter’s activities to the National First Vice President. A reproducible form can be found in Section D, WACVA-CHAP-12.
APPENDIX T

ANNUAL CONVENTION

A chapter member wishing to run for a National Office must submit a Candidate Profile Form and be approved by her Chapter. A reproducible form can be found in Section D, WACVA-CHAP-14. This form must be submitted to the Chairperson of the Nominating Committee no later than 15 February.

Each Chapter elects delegates and Alternates to attend the Annual Convention. See the National Bylaws for the number eligible. A reproducible form can be found in Section D, WACVA-CHAP-15. This form must be forwarded to the National Credentials Chairperson.

A Chapter Presidents or delegate may exercise a proxy vote (See National Bylaws). A reproducible form can be found in Section D, WACVA-CHAP-16. The completed form needs to be signed by the elected Chapter member and presented to the Credentials Chairperson.
APPENDIX U

National Office Functions

Listed below are the administrative functions to be carried out by the National Office:

a. Maintain the membership files of members-at-large including preparation of transmittals and membership cards, posting of current information to the files, forwarding all funds received to the National Treasurer, on a weekly basis, and forwarding of National Dues Transmittal copies to the required officers and chairpersons.

b. Prepare and mail membership packets to prospective members-at-large.

c. Maintain supplies of organizational emblem imprinted stationary, envelopes, membership cards, etc., reordering when required.

d. Maintain supply of convention ribbons (to be used with badges) to be provided annually to the current convention committee upon request. Ribbons are to be purchased in bulk, replenishing the supply as needed.

Standard Ribbon Colors:

National White  Alternate Blue
Delegate Yellow  Host Red
Member Green  Honorary Pink

e. Maintain a supply of the association membership brochures.

f. Provide storage for scrapbooks and other memorabilia, from Past National Presidents, if they desire.

g. A computer shall be located in the National office and the mailing list for THE CHANNEL shall be maintained and updated by the office. The office shall have the responsibility of coordinating matters with the Editor of THE CHANNEL and the publisher/printer.

h. Retain files on active and inactive chapters.

i. The National office shall have the responsibility for printing, distribution and maintaining adequate supplies in stock for the following association publications:

1. National Constitution and Bylaws
2. National Handbook for Chapters
3. Handbook for the Honor Guard
5. Resume of History and Policies of the WACVA
6. Convention Planning Procedure Book
7. Minutes of the Annual National Convention
8. Any other publication, as may be directed by the Executive Board.

The responsibility for revising and updating the above items remains with the officer or chairperson to whom the duty has previously been associated, or to whom it has been assigned. The responsible officer, or chairperson, will provide camera ready copy to the National Office when changes and reprinting are required.
SECTION D

FORMS TO BE USED BY CHAPTERS

This portion of the Handbook is designed to supplement the information contained in the suggested Chapter Bylaws.

The forms included in this section shall be used in transmitting information to the National Association. They may be reproduced at the local level. Computer generated forms shall be exact duplicates.

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Death Notice ------------------------------------------------ WACVA-CHAP-2
VAVS Certification and Re-Certification---------------------- WACVA-CHAP-3
Hospital/VAVS annual Report--------------------------------- WACVA-CHAP-4
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HISTORIAN/PUBLICITY ANNUAL REPORT ------------------------- WACVA-CHAP-17
REQUEST FOR PAYMENT --------------------------------------- WACVA-CHAP-18
Women’s Army Corps Veterans’ Association (WACVA) Army Women United
APPLICATION FOR MEMBERSHIP

Name: ____________________________________________
Address: ______________________________________________________________________________________
City: ______________________ State: ______ Zip + 4: ____________________________
Telephone No: (__________) ___________ Date of Birth: ____________________________
Email Address: _________________________________________________________________
Name(s) while in Service: ______________________________________________________________________
Branch of Military Service: ________________________________________________________________
__________________________________________________________ Beginning date of Service:
__________________________________________________________ End date of Service:
__________________________________________________________ Places served:

__________________________________________________________

Signature: ___________________________________________ Date: ______________________
How did you hear about our organization? __________________________________________

Please do not write below this line

Directions:
If you are a woman who wishes to join WACVA – Army Women United as a chapter member you may submit this application to the Membership Chair of that chapter. If there is no chapter in your area, and you wish to join as a member-at-large; mail this application along with your annual dues to WACVA-Army Women United.
All applications for membership must be accompanied by a copy of your DD 214 (Certificate of Release or Discharge from Active Duty) or official retirement documents or equivalent official evidence of service. If currently serving, a copy of your military ID will suffice.
1. Eligibility: Women who provide evidence that they are: current, former or retired members of the U.S. Army, Army National Guard or the U.S. Army Reserve, regardless of rank, may join WACVA – Army Women United as Regular Members. Women who provide evidence that they have served, retired from, or are now serving honorably with any branch of the military other than the Army may join as Affiliate Members.
2. Regular Membership dues are $35.00 per year; this does not include chapter dues; our fiscal year is July 1 thru June 30. For NEW members joining after Jan 1st, dues to the end of that fiscal year are $17.50 and then $35.00 per fiscal year thereafter, no matter when you renew.
3. Affiliate member dues are at the discretion of the applicable Chapter.
4. Attach a COPY of your discharge paperwork and/or official documents, BLACK OUT YOUR SOCIAL SECURITY NUMBER. These copies WILL NOT be returned to you because WACVA – Army Women United is required to securely maintain these documents to preserve our veteran organization status.
5. All Regular Members will receive six (6) issues of the official national publication, “THE CHANNEL”, per year. Associate Members do not receive “THE CHANNEL”. Regular and Associate Members will receive monthly issues of their local publication where applicable.

Name and date of approving authority: _________________________________________________
Amount of dues received: _______ Card number issued: ____________________________

Mail to:
WACVA – Army Women United National Headquarters
P.O. BOX 663 Weaver, AL 36277
DEATH NOTICE FORM - Information for National Chaplain

NAME OF DECEASED: ________________________________

NAME IN SERVICE: ____________________________ SERVICE SERIAL NUMBER: ________________________

DATE OF DEATH: ____________________________ CHAPTER NO.: _____________________ MAL: ______

NAME OF NEXT OF KIN: ____________________________ RELATIONSHIP: _________________________

ADDRESS: ________________________________________________________________

CITY: ____________________________ STATE: ____________ ZIP +4: ____________

REPORTED BY: ____________________________ CHAPTER NO.: _____________________ MAL: ______

ADDRESS: ________________________________________________________________

CITY: ____________________________ STATE: ____________ ZIP +4: ____________

DEATH NOTICE FORM - Information for National Chaplain

NAME OF DECEASED: ________________________________

NAME IN SERVICE: ____________________________ SERVICE SERIAL NUMBER: ________________________

DATE OF DEATH: ____________________________ CHAPTER NO.: _____________________ MAL: ______

NAME OF NEXT OF KIN: ____________________________ RELATIONSHIP: _________________________

ADDRESS: ________________________________________________________________

CITY: ____________________________ STATE: ____________ ZIP +4: ____________

REPORTED BY: ____________________________ CHAPTER NO.: _____________________ MAL: ______

ADDRESS: ________________________________________________________________

CITY: ____________________________ STATE: ____________ ZIP +4: ____________

DEATH NOTICE FORM - Information for National Chaplain

NAME OF DECEASED: ________________________________

NAME IN SERVICE: ____________________________ SERVICE SERIAL NUMBER: ________________________

DATE OF DEATH: ____________________________ CHAPTER NO.: _____________________ MAL: ______

NAME OF NEXT OF KIN: ____________________________ RELATIONSHIP: _________________________

ADDRESS: ________________________________________________________________

CITY: ____________________________ STATE: ____________ ZIP +4: ____________

REPORTED BY: ____________________________ CHAPTER NO.: _____________________ MAL: ______

ADDRESS: ________________________________________________________________

CITY: ____________________________ STATE: ____________ ZIP +4: ____________
FROM: Chapter (Name & No.)____________________ Date:________
TO: National Hospital/VAVS Representative

SUBJECT: VAVS Representative and/or Deputy Representative Certification and Re-certification Request

1. Name and complete address of the VA Medical Center: ________________

2. Name of the Chief of Voluntary Service for the VA Medical Center: ______

3. VAVS Representatives for (RE)Certification
   Name: _______________________________________________________________
   Address: __________________________________________________________________
   Home Phone Number: (   ) _________ Work Phone: (   )

4. VAVS Deputy Representative for (RE)Certification
   Name: _______________________________________________________________
   Address: __________________________________________________________________
   Home Phone Number: (   ) _________ Work Phone: (   )

This is a New Certificate: __________ This is a Re-certification: __________
Request that the named Representative be certified for a period of:
One year: ______ Two years: ______ Until Replacement is named: ______
If the Chapter has more than one Deputy Representative, Check here: ______
and provide complete information on each, as above, on the reverse side of this form.

Chapter President: ___________________________ Date: ______________
**Women’s Army Corps Veterans’ Association**  
**Army Women United**  
**Inter Organizational Memorandum**

| FROM: | Chapter (Name & No.) __________________ Date: ____________ |
| TO: | National Hospital/VAVS Representative |

**SUBJECT:** Hospital VAVS Annual Report

### Volunteering as Hospital VAVS Representative

1. Name of VA Hospital(s): ____________________________________________________________

2. Non-VA Hospital(s): ____________________________________________________________

3. VAVS Representatives, Number: ____________________________  
   Deputy Representatives, Number: ____________________________  
   Number Regular Scheduled Volunteers: ____________________________  
   Number Non-Chapter Volunteers: ____________________________  
   Total Number of Volunteers: ____________________________
   Total Number of Hours: ____________________________

4. Number VAVS Meetings Attended:  
   Representatives: _______________  
   Deputy Representatives: _______________

5. Services to which Volunteers assigned: _____________________________________________

6. Certificates/Awards: (Annual only) Give Names: ____________________________

7. Parties: Number: _______________ Types: ________________________________________


9. Chapter participated in the following activities:  
   National Salute: ______ Holiday Events: ______ Memorial Day: ______
   Patient Carnival: ______ Veterans Day: ______ Ward Parties: ______
   National Hospital Day Blood Drive: ____________ Other: ________

10. Refreshments furnished: ________________________________________________________

11. Special assistance to Female Patients: ____________________________________________

12. Remarks: __________________________________________________________________

13. Hospital/VAVS Chairperson: ____________________________________________

Chapter President Approval: ____________________________

---

WACVA-CHAP-4  
6 September 1997

Previous editions of this form are obsolete.  
This form may be photocopied or duplicated.
TO: Community Projects Chairperson

FROM: Name/Chapter___________________________________

Date: ________________

SUBJECT: Annual Report on Community Projects-2012

**Activity**

<table>
<thead>
<tr>
<th>Activity</th>
<th>Monthly Total</th>
<th>Yearly Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Volunteering for Organizations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>NON Veteran Hospital /Clinic</td>
<td></td>
<td></td>
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<tr>
<td>NON Veteran Retirement Center/Nursing Home</td>
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<tr>
<td>Senior Center</td>
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<td>Handicapped</td>
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<tr>
<td>School/Library</td>
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<tr>
<td>Other:</td>
<td></td>
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<tr>
<td><strong>Aiding and Volunteering for Individuals:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Driving People to appointments, etc.</td>
<td></td>
<td></td>
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<tr>
<td>Helping shut-ins/Handicapped</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Meals on Wheels or similar projects</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assisting Neighbors/Friends</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Funds Drives: i.e., United Way, Cancer, Heart, Arthritis Walks, etc.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other:</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Special Projects:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Collecting Clothing, Coupons, Can Labels, Tabs, etc.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Working in Soup Kitchen, Shelters, etc.</td>
<td></td>
<td></td>
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<tr>
<td>Reading for the Blind/Eyes for the Needy</td>
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<tr>
<td>Tutoring</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Aiding Local Community Groups</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total hours:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Money donation to National</td>
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<tr>
<td>Money donations to Chapter</td>
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</tr>
<tr>
<td>Money donations - Individual</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Monies donated:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Please use additional sheet(s) if necessary to describe a community service not covered.

Signature:_________________________ (MAL, President or Community Chairperson)
TO: Community Projects Chairperson

FROM: Name __________________________________________

Date: ________________ Please print

SUBJECT: Annual Report on Community Projects- __________ Year

Approximate Hours

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</table>

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Signature: __________________________________________ (MAL, President or Community Chairperson)
Women’s Army Corps Veterans’ Association
Army Women United
Inter Organizational Memorandum

FROM: Chapter (Name & No.): _________________ Date: ________

TO: Chapter (Name & No.): _________________ MAL status: _____

SUBJECT: Letter of Transfer

This is to certify that: (name of member) ________________________________
is and has been a member in good standing in our Chapter of the WACVA since:
__________________________________________.

She has requested a transfer of her membership from this chapter to become a
Member-at-Large (MAL) or a member of a new chapter for the following reason(s):
________________________________________
________________________________________

Note: She has held the following offices: ________________________________
________________________________________
________________________________________

Signatures: President: _____________________________________________
Second Vice President: ___________________________________________
Treasurer: _______________________________________________________
Women’s Army Corps Veterans’ Association
Army Women United
Inter Organizational Memorandum

FROM: (Applicant's name) ________________________________ Date: ______

TO: National President
     Sergeant-at-Arms
     Captain of the Honor Guard

SUBJECT: Membership in the National Honor Guard

Copies of the following sample form may be obtained from the National Sergeant-at-Arms or Captain of the Honor Guard and may be reproduced locally by the Chapter.
Submit the form in triplicate.

Application for Membership in the National Honor Guard

I would like to volunteer to be a member of the National Honor Guard. I pledge to participate in one or more of the required appearances each Fiscal Year.

I am a: Member of Chapter # _____, or a Member-at-Large ______

I further affirm that I am able to meet the physical requirements necessary to be a member of the Honor Guard, as indicated in the Honor Guard Handbook.

Height: ________________________ Weight: ________ Date of Birth: ________

Street Address: _________________________________________________________

City_________ State ________ Zip Code+4 ____________

Date of Birth:

Phone Number: ( ) ____________________________

Applicant’s Signature:

* * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * *

On (date): _______ Chapter (Name & No.): __________________________
Approved the application for the above applicant, for membership in the National Honor Guard and have verified the information above.

Chapter President: ______________________________________________________
(or 1st Vice Pres. If Applicant is Chapter President)

* * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * *

Dates:

Appointed: __________________________ Applicant Notified: __________________________

Not Appointed: ______________________ Lieutenant Notified: ______________________

Notice to Channel: __________________________

Captain’s Signature: ________________________________________________

National President’s Signature: ________________________________
Women’s Army Corps Veterans’ Association
Army Women United
Inter Organizational Memorandum

FROM: Chapter (Name & No.): ___________________ Date: __________

TO: National Treasurer

COPY TO: National 2nd Vice President
National Headquarters

SUBJECT: National Dues Transmittal

TRANSMITTAL FORM NUMBER: ___________________ DATE: __________

A check in the amount of $___________ is enclosed for the National membership
dues of the following, for fiscal year ending June 30, ____________________.

Please list members alphabetically in numerical sequence by chapter membership
card number.

<table>
<thead>
<tr>
<th>CARD NO.</th>
<th>CODE</th>
<th>NAME, ADDRESS, &amp; ZIP +4</th>
<th>AMOUNT</th>
<th>REMARKS</th>
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Remitted by Chapter Treasurer: ___________________________

Page: _____ of ________
Women’s Army Corps Veterans’ Association  
Army Women United  
Inter Organizational Memorandum

FROM: Chapter (Name & No.): ______________________  Date: ______
SUBJECT: National Dues Transmittal Continuation Sheet

TRANSMITTAL FORM NUMBER:____________________  DATE:

<table>
<thead>
<tr>
<th>CARD NO.</th>
<th>CODE</th>
<th>NAME, ADDRESS, &amp; ZIP +4</th>
<th>AMOUNT</th>
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See form WACVA-CHAP-9 for Chapter Treasurer Signature.
Page: ______ of ______

WACVA-CHAP-9a  
Previous editions of this form are obsolete.  
6 September 1997 Updated 22 June 2013  
This form may be photocopied or duplicated.
FROM: Corresponding Secretary ____________________________
Chapter (Name & No.): ____________________________ Date: __________

TO: THE CHANNEL Editor:
National Corresponding Secretary
Chapter File

SUBJECT: Chapter Officers

The following is a list of the Chapter Officers for publication in the annual bulletin.

President: ____________________________ Phone: __________
Mailing Address: ____________________________
City: __________ State: ________ Zip +4 __________

First Vice-President: ____________________________ Phone: __________
Mailing Address: ____________________________
City: __________ State: ________ Zip +4 __________

Second Vice-President: ____________________________ Phone: __________
Mailing Address: ____________________________
City: __________ State: ________ Zip +4 __________

Recording Secretary: ____________________________ Phone: __________
Mailing Address: ____________________________
City: __________ State: ________ Zip +4 __________

Corresponding Secretary: ____________________________ Phone: __________
Mailing Address: ____________________________
City: __________ State: ________ Zip +4 __________

Treasurer: ____________________________ Phone: __________
Mailing Address: ____________________________
City: __________ State: ________ Zip +4 __________
FROM: Chapter (Name & No.): ______________ Date: __________
TO: THE CHANNEL Editor
    Corresponding Secretary
    Chapter File
SUBJECT: Chapter Officers Continued

Chaplain: __________________________ Phone: ______________
Mailing Address: __________________________
City: ______________ State: ________ Zip +4 ______________

Sergeant-at-Arms: ______________ Phone: ______________
Mailing Address: __________________________
City: ______________ State: ________ Zip +4 ______________

Meetings: ______________________________________

Chapter Paper: ______________________________________
Editor: __________________________ Phone: ______________
Mailing Address: __________________________
City: ______________ State: ________ Zip +4 ______________

Signatures: (Corresponding Secretary) __________________________
           (Chapter President): __________________________
FROM: Chapter (Name & No.): ___________________ Date: __________
TO: National President:

SUBJECT: Honorary Membership for Mothers of WACVA Members

Please issue a Certificate of Honorary Membership for Mothers for the following:
Mother’s name: _______________ Mother of: ____________________
Mother’s Mailing Address: _______________________________________
City: _______________ State: _________ Zip +4 _______________

Please issue a Certificate of Honorary Membership for Mothers for the following:
Mother’s name: _______________ Mother of: ____________________
Mother’s Mailing Address: _______________________________________
City: _______________ State: _________ Zip +4 _______________

Please issue a Certificate of Honorary Membership for Mothers for the following:
Mother’s name: _______________ Mother of: ____________________
Mother’s Mailing Address: _______________________________________
City: _______________ State: _________ Zip +4 _______________

Please issue a Certificate of Honorary Membership for Mothers for the following:
Mother’s name: _______________ Mother of: ____________________
Mother’s Mailing Address: _______________________________________
City: _______________ State: _________ Zip +4 _______________

Please issue a Certificate of Honorary Membership for Mothers for the following:
Mother’s name: _______________ Mother of: ____________________
Mother’s Mailing Address: _______________________________________
City: _______________ State: _________ Zip +4 _______________

Signatures: (Chapter______________________President):

WACVA-CHAP-11
Previous editions of this form are obsolete.

6 September 1997 Updated 17 June 2013
This form may be photocopied or duplicated.
FROM: Chapter (Name & No.)____________________ Date:__________
TO: National First Vice-President

SUBJECT: Presidents Annual Report

Provide the following, as applicable:

Membership:
Total Number of members: __________

Community Projects:
Services Rendered: ____________________________
________________________
________________________
Total Number of members: __________

Hospital/Nursing Home Service:
Services Rendered: ____________________________
________________________
________________________
Total Number of members: __________

Patriotic Activities:
Veteran’s Day: ____________________________
Memorial Day: ____________________________
Other: ____________________________
Total Number of members: __________

Cash Donations:
Amount Given: __________

Publicity:
TV: ____________________________
Radio: ____________________________
Newspapers: ____________________________
Other: ____________________________
Number which gave publicity: ________

Chapter President: ____________________________ Date: __________
Women’s Army Corps Veterans’ Association  
Army Women United  
Inter Organizational Memorandum

FROM: Chapter (Name & No.): ________________ Date: ________

TO: National Second Vice President

SUBJECT: Membership Annual Report

1. Annual Membership Report for Fiscal Year: ________ (Year ending 30 June)

  Total paid members *: _______________________________________

  New Members since 1 July, ________________________________

  Number Dropped as of 30 June, ______________________________

  Transferred into Chapter from MAL Status: ____________________

  Transferred into Chapter from other Chapter(s): _______________

  Total transferred out of Chapter: _____________________________

  * ACTUAL NUMBER OF MEMBERS AS OF 30 JUNE, ________

  (Dues must have been received by National Treasurer by 30 June)

  Note: DO NOT include Affiliate, Associate or Honorary Members in your total.

2. Comments: ______________________________________________

   __________________________________________________________

   __________________________________________________________

   __________________________________________________________

   __________________________________________________________

   __________________________________________________________

Chapter Membership Chairperson: ______________________________
FROM: Chapter (Name & No.):_________________________ Date:___________
or Member-at-Large:_________________________

TO: National Nominating Committee Chairperson

SUBJECT: Candidate Profile

Note: Article VI Section 2a states: Candidates for President shall have served as
a national officer or chairperson of a national standing committee

*Profile Form - Candidate for National Office*

Name of Candidate: __________________________________________
Address of Candidate: _________________________________________

 __________________________________ __________________________________
STREET

 __________________________________ ____________________________
CITY STATE ZIP CODE

Phone Number of Candidate: ( ______ ) __________________________

The name of: __________________________ is submitted as a candidate for the
office of __________________________ in the Women’s Army Corps
Veterans’ Association and offers the following profile in support of its submission:

1. Service at the National Level:

 __________________________________ __________________________________
 __________________________________ __________________________________
 __________________________________ ____________________________

2. Service at the Local Level:

 __________________________________ __________________________________
 __________________________________ ____________________________
 __________________________________ ____________________________

3. Other pertinent information: (This may include other veterans work, service
in the Army, employment, education, and membership in other organizations.)

 __________________________________ __________________________________
 __________________________________ ____________________________
 __________________________________ __________________________________

Signature of Sponsor: _________________________________________

This form must be submitted in duplicate.
Women’s Army Corps Veterans’ Association
Army Women United
Inter Organizational Memorandum

FROM: Chapter (Name & No.)____________________ Date:__________
TO: National Credentials Chairperson
     National Treasurer
     National Corresponding Secretary

SUBJECT: Chapter Delegates to Annual Convention

**Delegates to Annual Convention**

Name of Chapter President (for current year ending 30 June): __________

Chapter President **WILL:** ______ WILL **NOT:** ________ attend in her capacity as a National Officer or Standing Committee Chairperson. If the Chapter President will not attend the convention, or will be attending in her capacity as a National Officer or Standing Committee Chairperson, the following **Chapter member is named as Chapter President Representative:**

<table>
<thead>
<tr>
<th>CHAPTER DELEGATES</th>
<th>CHAPTER ALTERNATES</th>
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Note:
INDICATE IF THE DELEGATE OR ALTERNATE IS TO HAVE A PROXY VOTE.

Signed Chapter President or Secretary (specify which): ________________
FROM:  Chapter (Name & No.) __________________________ Date: ____________

TO:  National Credentials Chairperson, Annual Convention, WACVA

SUBJECT:  Proxy Authorization

**Proxy**

Please be advised that I, __________________________ Delegate
From Chapter (number and name): __________________________
In (City and State): __________________________
to the Annual Convention of the Women’s Army Corps Veterans’ Association
scheduled to be held at the (name of hotel): __________________________
in (name of City and State): __________________________
hereby appoint the following as my Proxy, to vote and act in my name at all
meetings and on all matters where authorized by the National Bylaws, with the
same effect as if I were personally present.
Appointed member holding Proxy: __________________________

Status of Proxy Holder:
  Chapter Delegate: __________________________
  Chapter President or her Representative: __________________________
  National Officer or National Standing Committee Chairperson from my
  Chapter: __________________________

I hereby revoke any Proxy or Proxies heretofore given by me to any person.

Signed: __________________________ Date: __________________________
Place: __________________________
FROM: Chapter (Name & No.)________________________ Date:_________
TO: National Publicity Chairperson

SUBJECT: Annual Report on Publicity

Annual reports will be sent to the National Publicity Chairperson by 3 July. The report should include: (Use extra sheets of paper if necessary.)
1. Newspaper publicity: (Include clippings, name of publication and date.)

2. TV stations and cable: (List type of coverage.)

3. Radio: (List type of coverage.)

4. Speeches: (List events and name of person giving speech, including date and place.)

5. Other events where publicity was presented about the Women’s Army Corps Veterans’ Association.

Chapter Publicity Chairperson: ________________________________
Chapter President: ________________________________
**Women’s Army Corps Veterans’ Association**  
**Army Women United**  
**Inter Organizational Memorandum**

FROM: Name: ____________________________ Date: __________

TO: National President

SUBJECT: Request for Payment

Make check payable to: ____________________________

Send to: _______________________________________

_____________________________________________

Reimbursement requested for the following items:

<table>
<thead>
<tr>
<th>CHARGE TO POSTAGE, SUPPLIES, TRAVEL, ETC.</th>
<th>AMOUNT</th>
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______________________________________________ TOTAL ____________

Each item for which payment is requested must be accompanied by a valid receipt or invoice attached to this Request for Payment.

Requested by: ________________________________

Approved by (National President): ________________

Date Approved: ________________________________