



La Societe de Femme

Madame Presidente:

Enclosed are the following forms:

1.	Certificate & Awards Rules and Regulations	1 copy
2.	Ruth Mollahan Monetary Service Certificate Form	3 copies
3.	Mary Zold Hours/Mileage Service Certificate Form	3 copies
4.	Marcina Cahl Membership Certificate Form	3 copies
5.	H. Clyde Coppess Carville Star Certificate Form	3 copies
6.	Helen Payne Americanism Certificate Form	3 copies
7.	Cecilia Cannon POW/MIA Certificate Form	3 copies
8.	Louise Canellos Aid to the Voiture Certificate Form	3 copies
9.	Ann VanVooran Child Welfare Award Form	3 copies
10.	Eleanor Harris Nurses Training Award Form	3 copies
11.	Dorothy Blaha Youth Sports Certificate Form	3 copies
12.	Officers Report Form for next year Grande Rendezvous	3 copies
13.	Certified Delegates and Alternates to Grande Rendezvous	3 copies
14.	Sample of Grande Resolution From	1 copy

RULES GOVERNING QUALIFICATIONS FOR WINNING CERTIFICATE OR AWARDS

All entries for CERTIFICATE AND AWARDS are to be postmarked no later than **two weeks** before Grande.

Original of FORMS 2 THROUGH 4 IS TO BE MAILED TO GRANDE CERTIFICATE AND AWARDS CHAIRPERSON, and ONE COPY SENT OR GIVEN TO GRANDE CORRESPONDANTE Ethellynn Neville, 1515 N. Lincoln #24, Springfield, IL 62702. **CARVILLE STAR, AMERICANISM, POW/MIA, AID TO THE VOITURE, CHILD WELFARE, NURSES TRAINING, AND YOUTH SPORTS** to be mailed to the designated Chairperson and one to the Grande Correspondante no later than **two weeks** before Grande.

ORIGINAL OF FORMS 12 AND 13 is to be mailed to GRANDE CORRESPONDANTE Ethellynn Neville, 1515 N. Lincoln #24, Springfield, IL 62702 **30 days** before Grande Rendezvous.

Thank you for co-operating with us to make things go smoothly and efficiently for the Grande Rendezvous. Hope to see many of you at Grande Rendezvous.

Yours in Service
Grande Presidente



La Societe de Femme

CERTIFICATE AND AWARDS REGULATIONS FOR CABANES WITH 20 OR LESS MEMBERS

1. RUTH MOLLAHAN MONETARY SERVICE CERTIFICATE
2. MARY ZOLD HOURS/MILEAGE SERVICE CERTIFICATE
3. MARCINA CAHL MEMBERSHIP CERTIFICATE (Increase in Cabane membership)
4. H. CLYDE COPPESS CARVILLE STAR CERTIFICATE (Subscriptions sold by Cabane Locale)
5. HELEN PAYNE AMERICANISM CERTIFICATE (Americanism Projects)
6. LOUISE CANELLOS AID TO VOITURE CERTIFICATE (Aiding the Voiture Projects)
7. ANN VAN VOORAN CHILD WELFARE CERTIFICATE (Children Projects)
8. ELEANOR HARRIS NURSES TRAINING CERTIFICATE (Helping Nurse's Projects)
9. DOROTHY BLAHA YOUTH SPORTS CERTIFICATE (Youth Sports Projects)
10. CECILIA CANNON POW/MIA CERTIFICATE (POW/MIA Projects)

RULES GOVERNING QUALIFICATIONS FOR WINNING CERTIFICATE OR AWARDS

1. The Cabane year for Certificate and Awards will be from July 1 of one year to June 30 of the following year.
2. **Original report forms for each Certificate**, with the exception of History, Publicity, Photo Book, Carville Star, Americanism, Aid to the Voiture, Child Welfare, Nurses Training, Youth Sports, and POW/MIA reports, are to be mailed to the Certificate and Awards Chairperson, with the other being mailed to the Chairperson, postmarked no later than **two weeks** before the Grande Rendezvous, to be considered for that years Certificate and Awards. The Grande Directory is on the Illinois 40&8 website under LaFemmes.

CERTIFICATE AND AWARDS REGULATIONS

3. In addition to the regular Cabane or Voiture projects that are assisted by the Cabane, Nationale states. "IF YOUR VOITURE HAS PARTICIPATED IN ANY OF THE PROJECTS LISTED ON THE FOLLOWING PAGE, AND IF THE CABANE LOCALE HAS ASSISTED THEM WITH THESE PROJECTS, the Cabane Locale may take credit for hours of work, miles driven, or money donated." PLEASE REMEMBER TO KEEP MONEY DONATED SEPARATED FROM HOURS SPENT AND MILEAGE DRIVEN! They belong to two different types of Service Certificate. FOR CHILD WELFARE ACTIVITIES, KEEP A COUNT OF THE NUMBER OF CHILDREN INVOLVED.

- | | |
|--|---|
| a. All playground groups | m. Girl clubs and Girls State |
| b. Programs at Orphans and Children's homes | n. Girl Scouts and Brownies |
| c. Programs at hospitals and school | o. Easter egg hunts and parties |
| d. Band and high school groups | p. Little League |
| e. Boys clubs and boys ranches | q. Junior baseball |
| f. Boys Scouts and Cub Scouts | r. Parties (Halloween, Thanksgiving, Christmas, etc.) |
| g. Boys Town and Boys State | s. Salvation Army activities for children |
| h. Children's dental and health clinics | t. Schools for the blind, etc. |
| i. Distribution of toys and food, and clothing | u. Shriner Hospital Drive, etc. |
| j. Easter, T.B. Seals, March of Dimes, etc. | v. Service in children's hospitals |
| k. Drum and Bugle Corps | |
| l. Flag Presentation | |

4. RUTH MOLLAHAN CERTIFICATE - amount of **money** earned or contributed by Dames for Cabane and/or Voiture projects.

5. MARY ZOLD - list each project with **hours** spent and **miles** driven, extend to a money value column, convert hours to monetary value at the rate of **\$5.00 per hour**, and mileage at the rate of **\$1.00 per mile**. DO NOT COUNT HOURS SPENT IN MAKING OR SERVING REFRESHMENTS AT REGULAR PROMENADES OR RENDEZVOUS, NOR MILEAGE DRIVEN TO PROCURE REFRESHMENTS FOR THESE REGULAR FUNCTIONS.

6. MARCINA CAHL MEMBERSHIP CERTIFICATE - based on **numerical increase** over the previous years membership. NEW CABANES ARE NOT ELIGIBLE IN THEIR CHARTER YEAR.

7. H. CLYDE COPPESS - Carville Star **subscriptions sold** by Cabane Locale.

8. HELEN PAYNE AMERICANISM CERTIFICATE - based on Americanism Projects (refer to Americanism Rule Sheet).

9. LOUISE CANELLOS AID TO THE VOITURE - based on giving support to Voiture Locale Program (refer to Aid to the Voiture Rule Sheet)

10. ANN VAN VOORAN CHILD WELFARE - based on assistance to Voiture Locale (refer to Child Welfare Rule Sheet)

11. ELEANOR HARRIS NURSES TRAINING - based on monetary assistance to Voiture Locale (refer to Nurses Training Rule Sheet)

12. DOROTHY BLAHA YOUTH SPORTS - based on support of Youth Sports (refer to Youth Sports Rule Sheet)

13. DONNA JOHNSON POW/MIA - donations to the Scholarship fund (refer to POW/MIA Rule Sheet)

The original copy is to be mailed to Grande Certificate and Awards Chairperson, except for Carville Star, Americanism, Aid to the Voiture, Child Welfare, Nurses Training, Youth Sports, and POW/MIA to be mailed to the chairperson of those programs, and one copy to Grande Correspondante, and one copy retained for Cabane Locale files.

ALL CERTIFICATE TO BE AWARDED AT GRANDE RENDEZVOUS.

GRANDE CABANE d' ILLINOIS



La Societe de Femme

RUTH MOLLAHAN SERVICE CERTIFICATE - MONETARY

(For Cabanes with membership of 20 or less)

Cabane Name and Number _____ Year _____

Reports must be mailed to Certificate and Awards Chairperson no later than **two weeks** before Grande or they will not be considered by the Certificate and Awards judges.

Please check the enclosed copy of Certificate and Awards Regulations before completing this report - particularly Rules 3 and 4.

CABANE PROJECTS

DOLLAR VALUE

VOITURE PROJECTS

Send original of this report to: Certificate and Awards Chairperson.

Give or send one copy to Grande Correspondante, Ethel Lynn Neville, 1515 N. Lincoln, #24, Springfield, IL 62702, for Grande records.

Keep one copy for Locale Cabane files.

Chef de Gare or Correspondant Locale Voiture

Locale Cabane Presidente

Locale Cabane Chairperson



GRANDE CABANE d' ILLINOIS

La Societe de Femme

MARY ZOLD SERVICE CERTIFICATE - HOURS/MILEAGE (For Cabanes with membership of 20 or less)

Cabane Name and Number _____ Year _____

Report must be mailed to Certificate and Certificate Chairperson no later than **two weeks** before Grande or they will not be considered by the Certificate and Awards judges.

Please check the enclosed copy of Certificate and Awards Regulations before completing this report - particularly Rules 3 and 5.

To figure dollar value of hours, multiply number of hours by \$5.00 and mileage at \$1.00 per mile.

PROJECTS	MILEAGE	# OF HOURS	DOLLAR VALUE
TOTALS			

Number of children involved: _____

Send original of this report to the Certificate and Awards Chairperson.

Give or send one copy to Grande Correspondante, Ethel Lynn Neville, 1515 N. Lincoln, #24, Springfield, IL 62702, for Grande records.

Keep one copy for Locale Cabane files.

Chef de Gare or Correspondant Locale Voiture

Locale Cabane Presidente

Locale Cabane Chairperson

GRANDE CABANE d' ILLINOIS



La Societe de Femme

MARCINA CAHL MEMBERSHIP CERTIFICATE
(For increase in Cabane membership)
(For Cabanes with membership of 20 or less)

Cabane Name and Number _____ Year _____

Reports must be mailed to Certificate and Awards Chairperson no later than **two weeks** before Grande or they will not be considered by the Certificate and Awards judges.

Please check the enclosed copy of Certificate and Awards Regulations before completing this report - particularly Rule 6.

Cabanes formed during the Fiscal year of July 1 of one year to June 30 of next year are not eligible for this Certificate in the year they are formed and receive their Charter. They, having had no members the previous year, cannot show a numerical increase in membership in the year they are formed.

LAST YEARS TOTAL MEMBERSHIP	THIS YEARS TOTAL MEMBERSHIP	NUMERICAL INCREASE
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_____	_____	_____
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Mail this report to the Certificate and Awards Chairperson.

Give or send one copy to Grande Correspondante, Ethellynn Neville, 1515 N. Lincoln, #24, Springfield, IL 62702, for Grande records.

Keep one copy for Locale Cabane files.

Locale Cabane Presidente

Locale Cabane Chairperson



GRANDE CABANE d' ILLINOIS

La Societe de Femme

H. CLYDE COPPESS CARVILLE "STAR" CERTIFICATE
(For the Cabane Locale selling the most Carville Start subscriptions.)
(For Cabanes with membership of 20 or less)

Cabane Name and Number _____ Year _____

Reports must be mailed to Certificate and Awards Chairperson no later than **two weeks** before Grande or they will not be considered by the Certificate and Awards judges.

Please check the enclosed copy of Certificate and Awards Regulations before completing this report - particularly Rule 7.

A. Total Hours Worked	x \$10.00	\$
B. Total Miles Traveled	x \$ 1.00	\$
C. Total Money Donates		\$
D. Total Material Value		
Total of Lines A, B, C =		\$

Send original of this report to the Carville Star Chairperson .

Give or send one copy to Grande Correspondante, Ethellynn Neville, 1515 N. Lincoln, #24, Springfield, IL 62702, for Grande records.

One copy is to be retained for Locale Cabane files.

Chef de Gare or Correspondant Locale Voiture

Locale Cabane Presidente

Locale Cabane Chairperson



La Societe de Femme

HELEN PAYNE AMERICANISM CERTIFICATE
 RULES GOVERNING THIS CERTIFICATE
 (For Cabanes with membership of 20 or less)

This Certificate is awarded to the Cabane Locale that sends in the best report on Americanism. This includes all phases of "Americanism" such as donations of flags to groups, classes held in the proper care and respect due the American flag, assistance to people in their efforts to become American citizens. Any hours of work in assistance to your Voiture such as placing flags on graves for Memorial Day, Veterans Day parade functions. Boy Scouts and Girl Scouts to count if a Voiture sponsored event, like posting colors, placing flags on graves of Veterans, parade participation, etc. NEW per addition by Voiture Nationale to the Americanism programs is: "Veteran Administration Voluntary Service" or V.A.V.S. We may now count our time when we assist our Voiture. VAVS information must be obtained by the Voiture and through Voiture Nationale.

Cabane Name and Number _____ Year _____

Type of Activity Performed	A. Hours Worked	B. Miles Traveled	C. Money Donated	D. Value of Material Used

Total of each column _____

- A. Total Hours Worked _____ x \$5.00 = \$ _____
- B. Total Miles Traveled _____ x \$1.00 = \$ _____
- C. Total Money Donated \$ _____
- D. Total Value of Material Used \$ _____
- Total of A + B + C + D = \$ _____

Reports must be mailed to Certificate and Awards Chairperson no later than **two weeks** before Grande or they will not be considered by the Certificate and Awards judges.

Send original of this report to the Americanism Chairperson. Give or send one copy to Grande Correspondante, Ethellynn Neville, 1515 N. Lincoln, #24, Springfield, IL 62702, for Grande records. Keep one copy for Cabane Locale files.

 La Correspondante Locale
 Phone # () _____

 La Presidente Locale
 Phone # () _____



La Societe de Femme

CECILIA CANNON POW/MIA CERTIFICATE (For Cabanes with membership of 20 or less)

Cabane Name and Number _____ Year _____

CABANE RULES FOR POW/MIA:

This Certificate is awarded to the Cabane that turns in the best overall report in both large and small Cabanes. The purpose of the Nationale POW/MIA Program is to raise funds in Honor of Servicemen and Women who were Prisoners of War, or are considered Missing in Acton while serving in the defense of the United States of America, or its allies during times of conflict. The funds are raised to facilitate the formation and continuance of a Scholarship Trust Fund for the direct descendants of verifiable POW/MIA Servicemen and Women. Scholarships are limited to the Veteran, the Spouse of the Veteran, children and grandchildren of the Veteran. The primary source of fund raising is through sales of pins and decals each year. Other fund raisers may include raffles, bake sales, white elephant sales, silent auctions, etc. All fund raisers may be included in this report as long as the funds were donated to POW/MIA Program.

All Hours traveled to any POW/MIA event you participate in and work are to count @ \$10.00 per hour. Attendance only does not count. You must work. (If you drive to an event and do not work please do not count your travel time.) Also included all hours worked on computers and phone calls, letter writing etc. This is also logged @ \$10.00 per hour. Travels @ \$1.00 per mile for events you attend and work, not attend only. Cost of supplies: calculate at receipt value; postage, printing materials, supplies, etc.

A. Total hours worked _____ x \$10.00 = \$ _____

B. Total miles traveled _____ x \$1.00 = \$ _____

C. Money Donated \$ _____

D. Value of Material Used \$ _____

TOTAL OF LINES A + B + C + D = \$ _____

Correspondante Locale

Presidente Locale

Reports must be mailed to Certificate and Awards Chairperson no later than **two weeks** before Grande or they will not be considered by the Certificate and Awards judges.

Send original of this report to the POW/MIA Chairperson. Give or send one copy to Grande Correspondante, Ethellynn Neville, 1515 N. Lincoln, #24, Springfield, IL 62702, for Grande records.

Keep one copy for Cabane Locale files.



La Societe de Femme

LOUISE CANELLOS AID TO THE VOITURE CERTIFICATE (For Cabanes with membership of 20 or less)

Cabane Name and Number _____ Year _____

This trophy is awarded to the Cabane Locale giving the most support to its Voiture Locale in any Voiture Program and activity, such as Americanism, POW/MIA, Box Car, Nurses Training, Child Welfare, Carville Star, and Youth Sports, assistance at registration at Wrecks, meals cooked, etc., money donated to the Voiture Locale for use to buy Voiture Equipment, chairs, tables, etc. The mileage, hours and monies donated, value of material used shall also count.

Activity	# Dames	Hrs. Worked	Miles Traveled	Money Donated	Material Value
Americanism POW/MIA					
Box Car Assoc.					
Carville Star Museum fund					
Child Welfare Youth Sports					
Nurses Training					
Other: Aid to Voiture (itemize on attached sheet)					
Subtotal each Column					

A: Total hours worked @ \$10.00 per hour _____
 B: Total miles traveled @ \$ 1.00 per mile _____
 C: Total Money Donated _____
 D: Total Materials Value _____

Total of Lines A, B, C, D = _____

 Chef or Correspondane Voiture Locale

 La Presidente Locale

 La Correspondante Locale

Mail To Aid to the Voiture Chairman **two weeks** before Grande to be considered. One to Grande Correspondante, Ethellynn Neville, 1515 N. Lincoln, #24, Springfield, IL 62702, and one for your files.



La Societe de Femme

ANN VAN VOORAN CHILD WELFARE CERTIFICATE

(For Cabanes with membership of 20 or less)

Cabane Name and Number _____ Year _____

This trophy is to be awarded to the Cabane Locale submitting the best Child Welfare report in assistance to its Voiture Locale. This report to include direct monetary aid (cash), a reasonable value to be placed on other items donated, hours worked, miles traveled, and number of children assisted. Also, the type of activity must be specified. This report must be in conjunction with the Child Welfare Program of your Voiture Locale. **DO NOT INCLUDE:** Flag presentations, Scouting (Boy, Girl, Cubs, Brownies), Boy's State, Girl's State. These activities should appear on the Americanism Report.

Type of Activity Performed	A. Hrs. Worked	B. Miles Traveled	C. Money Donated	D. Value of Item or Material Used	E. Number of Children Assisted
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
Total of each column here:	_____	_____	_____	_____	_____

A. Total Hours Worked _____ x \$10.00 = \$ _____

B. Total Miles Traveled _____ x \$ 1.00 = \$ _____

C. Total Money Donated \$ _____

D. Total Value of Item or Material Used \$ _____

Total of lines A + B + C + D = \$ _____

E. Total Number of Children Assisted = _____

Chef or Correspondant Voiture Locale

La Presidente Locale

La Correspondante Locale

Mail To Child Welfare Chairman **two weeks** before Grande to be considered. One to Grande Correspondante, Ethellynn Neville, 1515 N. Lincoln, #24, Springfield, IL 62702, and one for your files.



La Societe de Femme

ELEANOR HARRIS NURSES TRAINING CERTIFICATE

(For Cabanes with membership of 20 or less)

Cabane Name and Number _____ Year _____

Monetary Assistance - any and all monies presented to the Voiture. (Be it from proceeds of functions taken in by the Cabane of donations from the general fund.) Monetary Assistance to the Voiture's Trainee. (Assisting the Trainee in personal needs, medical help, surgical or dental.) Hours - CREDIT ONLY ACTUAL HOURS WORKED, either assisting the Voiture or Cabane activities or functions designed for Nurses Training. Some are garage sales, bake sales, bingo, Monte Carlo or Las Vegas nights, card games. Tupperware parties, working dinners (serving or in kitchen), dances, raffles (money trees, afghans, baskets of cheer). Mileage - ONLY the driver may count her mileage, not the riders. NO CREDIT IF ATTENDING THE FUNCTION ONLY. **No Dame may take credit on the following:** Attending graduations of a Trainee for Nursing. Attending any function held by the Voiture (where she did not actually work). Volunteer work in V.A. Hospitals, Nursing Homes, etc. Hospital visitations. Sending get-well cards, etc. Visitations to relatives in hospitals. (These have nothing to do with Nurses Training.)

Type of Activity Performed	A. Hrs. Worked	B. Miles Traveled	C. Money Donated	D. Value of Item or Material Used
Total of each column here:				

- A. Total Hours Worked _____ x \$10.00 = \$ _____
- B. Total Miles Traveled _____ x \$ 1.00 = \$ _____
- C. Total Money Donated _____ \$ _____
- D. Total Value of Item or Material Used _____ \$ _____

Total of lines A + B _ C + D = \$ _____

Chef or Correspondant Voiture Locale

La Presidente Locale

La Correspondante Locale

Mail To Nurses Training Chairman **two weeks** before Grande to be considered. One to Grande Correspondante, Ethellynn Neville, 1515 N. Lincoln, #24, Springfield, IL 62702, and one for your files.

GRANDE CABANd'ILLINOIS



La Societe de Femme
LOCALE OFFICERS (for incoming year)

Cabane Name and Number _____ Year _____

In accordance with Article VIII, Section 7, Grande Constitution and Bylaws, officers shall be certified to Grande Correspondante **30 days** prior to convening of Grande Rendezvous. Send original and one copy of this form to Ethellynn Neville, 1515 N. Lincoln, #24, Springfield, IL 62702. List name as Mary Smith (Mrs. John), address with zip code, and telephone number with area code.

PRESIDENTE _____

SOUS PRESIDENTE _____

CORRESPONDANTE _____

COMMISSAIRE INTENDANTE _____

La SOUS COMMISSAIRE INTENDANTE _____

CONDUCTEUR _____

AUMONIER _____

GARDE DE LA PORTE _____

HISTORIEN _____

GRANDE CHEMINOT _____

ALTERNATE GRANDE CHEMINOT _____

CORRESPONDANTE _____

AVOCATE _____

DRAPEAU _____

AIDE TO VOITURE _____

AMERICANISM _____

CARVILLE STAR _____

CHILD WELFARE _____

CREDENTIALS _____

FINANCE _____

NURSE'S TRAINING _____

POW/MIA _____

RESOLUTIONS _____

RITUAL _____

RULE AND ORDER _____

TROPHY AND AWARDS _____

YOUTH SPORTS _____

WAYS AND MEANS _____



GRANDE CABANE d' ILLINOIS

La Societe de Femme

CERTIFIED DELEGATES AND ALTERNATES TO GRANDE RENDEZVOUS

Cabane Name and Number _____ Year _____

DELEGATES

Name

Address

ALTERNATES

Name

Address

In accordance with Article VI, Section 3, Grande Constitution and By-Laws, delegates and alternates shall be elected and certified to Grande Correspondante **30 days** prior to convening of Grande Rendezvous.

Send original and one copy of this form to Grande Correspondante, Ethel Lynn Neville, 1515 N. Lincoln Ave., #24, Springfield, IL 62702.

Article VI, Section 4, Grande Constitution and By-Laws - Each delegate present on Rendezvous floor shall be entitled to one vote. Alternate shall have all privileges of delegates except that of voting, unless representing an absent delegate.

Locale Cabane Presidente

Locale Cabane Correspondante

GRANDE CABANE d' ILLINOIS

La Societe de Femme

SAMPLE
GRANDE RESOLUTION

WHEREAS: Cabane Locale #_____ has a Dame who has diligently served her Cabane Locale (list the Dames Offices held in her Cabane Locale) and

WHEREAS: This Dame (list her Grande Offices - if no Grande Organized, omit.)

WHEREAS: Cabane Nationale needs to maintain the highest standards of leadership and this Dame has already served as (list Nationale Offices held, if any) now

THEREFORE, BE IT RESOLVED: That Cabane Locale #____ presents the name of _____ as a Candidate for the high office of _____ for the year 20____, with the knowledge that she is deserving, diligent, and capable, and

BE IT FURTHER RESOLVED: That this resolution be placed before the Grande Rendezvous (if Grande is organized) for its consideration.

Approved at regular Rendezvous duly assembled at _____
This _____ day of _____, 20_____.

ATTESTED BY:

La Correspondante Locale

La Presidente Locale

PLEASE NOTE: Send original copy of resolution to Grande Office AS EARLY AS POSSIBLE, BUT no later than two weeks before Grande.