"BUDDY" POPPY & VFW NATIONAL

2024-2025 Year End Report

Submit 2 Copies To Your District President by March 31, 2025

Auxiliary Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ District Number: \_\_\_\_\_\_\_\_\_\_\_\_\_

**"Buddy" Poppy**

1. Did your **Auxiliary** hold “Buddy” Poppy drives with or without the VFW Post. \_\_\_\_\_

2. Number of VFW “Buddy” Poppies that were distributed. \_\_\_\_\_

3. Did your **Auxiliary** participate in or plan to participate in the VFW “Buddy”

 Poppy Display contest. \_\_\_\_\_

**VFW National Home for Children**

1. Did your **Auxiliary** promote the VFW National Home. \_\_\_\_\_

2. Did your **Auxiliary** promote the VFW National Home Helpline. \_\_\_\_\_

3. Did your **Auxiliary** purchase at least one (1) VFW National Home

 Life Membership. \_\_\_\_\_

4. Did your **Auxiliary** purchase at least one (1) VFW National Home

 Tribute Brick in the current program year. \_\_\_\_\_

**Auxiliary President:** (Please Print) **Auxiliary Chairman:** (Please Print)

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City/State/Zip Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_