LEGISLATIVE

2024-2025 Year End Report

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

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

1. Did your **Auxiliary** promote, participate, host or co-host activities regarding

the VFW Priority Goals with or without your VFW Post? \_\_\_\_\_

2. How many **Auxiliary** **members** contacted their legislators on veterans issues by any

means? (Example: emails, letters, postcards, phone calls, etc.) \_\_\_\_\_

3. How many **Auxiliary** **members** attended events where they could interact with

legislators? (Example: legislative conferences, town halls, meet-and-greets,

Etc.) \_\_\_\_\_

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

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

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

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

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

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