LEGISLATIVE

2023-2024 Year End Report

Submit 2 Copies To Your District President by March 31, 2024

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

1. Did your **Auxiliary** utilize any of the Legislative material/resources available in

 MALTA Member Resources? \_\_\_\_\_

2. How many **Auxiliary** **members** subscribe to VFW's *Action Corps Weekly*

E-Newsletter? \_\_\_\_\_

3. Did your **Auxiliary** promote, participate, and/or host activities regarding

 the VFW Priority Goals? \_\_\_\_\_

4. Did your **Auxiliary** promote, participate or co-host with your VFW Post activities

 regarding the VFW Priority Goals? \_\_\_\_\_

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

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

6. 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: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_