

"BUDDY" POPPY / NATIONAL HOME

2020-2021 YEAR-END REPORT

Submit Two (2) Copies To Your District President by **March 31, 2021**

Auxiliary Name: _____

Auxiliary # _____ District # _____

Auxiliary Membership as of June 30, 2020 _____

"BUDDY" POPPY

Did your **Auxiliary** promote the "Buddy" Poppy through distribution and education:

Within the Post/Auxiliary: Yes ___ No ___ In the community (outreach): Yes ___ No ___

Did your **Auxiliary** use media to promote the "Buddy" Poppy in the community: Yes ___ No ___

What media was used? (check all that apply) TV ___ Radio ___ Newspapers ___

Facebook/Social Media ___ Fliers ___

Number of "Buddy" Poppy Drives that were hosted:

With the Post: _____ Without the Post: _____

Did your **Auxiliary** participated in a "Buddy" Poppy Contest: Yes ___ No ___

VFW NATIONAL HOME FOR CHILDREN

Did your **Auxiliary** promote the National Home through education:

Within the Post/Auxiliary: Yes ___ No ___ In the community (outreach): Yes ___ No ___

Did your **Auxiliary** use media to promote the National Home and/or the National Home Helpline:

Yes ___ No ___ What media was used? (Check all that apply) TV ___ Radio ___

Newspapers ___ Facebook/Social Media ___ Fliers ___

Did your **Auxiliary** make a donation to the National Home: (NOT including Health & Happiness donation): Yes ___ No ___ Amount Donated: \$ _____

Did your **Auxiliary** purchased at least one National Home Life Membership for an Auxiliary Member:

Yes ___ No ___

Total number of National Home Life Memberships purchased for Auxiliary members: _____

Use additional pages if necessary to complete comments.

Auxiliary President

Signed _____

Address _____

City/State/Zip _____

Phone Number _____

Auxiliary Chairman

Signed _____

Address _____

City/State/Zip _____

Phone Number _____