

**DEPARTMENT OF TEXAS
VFW AUXILIARY REPORT FORM
2022-2023**

Auxiliary Member & Position _____ Email or phone _____

Auxiliary Name _____ Auxiliary Number _____ District Number _____

Reporting Period From: _____ Reporting Period To: _____

PROGRAM TITLE _____

AMERICAN FLAGS NUMBER USED	POW/MIA FLAGS NUMBER USED	BUDDY POPPIES NUMBER USED

TOTAL PROJECTS ON REPORT	NUMBER OF MEMBERS PARTICIPATING	TOTAL HOURS WORKED	TOTAL NUMBER OF MILES	TOTAL VALUE OR DOLLARS SPENT

DESCRIBE YOUR PROJECTS/EVENTS/ACTIVITIES FOR THIS PROGRAM:

Fillable form. Complete & email (or postal mail) to appropriate Department Chairman with a copy to District Chairman. Save copy for Auxiliary Files. Report only one program per form. Multiple projects (activities) for that program may be included.