DEPARTMENT OF TEXAS
VFW AUXILIARY REPORT FORM
2025-2026

Auxiliary Member Name: _____ Auxiliary Member Title: _____
Auxiliary Name: _____ Auxiliary Number: _____ District Number: _____
Reporting Period From: _____ Reporting Period To: _____

PROGRAM BEING REPORTED: _____

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	DOLLARS SPENT	TOTAL VALUE

DESCRIPTION OF PROJECT(S):