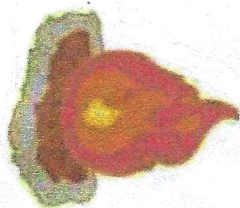


VFW Auxiliary Dept of Washington

2025 -- 2026 President's Pin Order Form



Auxiliary Name: \_\_\_\_\_ # \_\_\_\_\_ Dist: \_\_\_\_\_

Order Quantity: \_\_\_\_\_ @ \$3.00 each TOTAL: \$ \_\_\_\_\_

Make checks payable to: VFW Auxiliary Department of Washington.

Complete Check Summary form on this page - it will be forwarded to Dept.

**ALL ORDERS must have this order form, check and Check Summary form.**

**Mail to: Pin Chairman: Laura Bondurant, 3718 11th Street C, Lewiston, ID 83501-5449**

Send Pins to:

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

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

City: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

XX

Chairman use only:

Date Received: \_\_\_\_\_ Aux. No: \_\_\_\_\_

Delivered by: \_\_\_\_\_ Date: \_\_\_\_\_

Delivered to: \_\_\_\_\_ Date: \_\_\_\_\_

Signed: \_\_\_\_\_

Send to: VFW AUXILIARY, DEPT. OF WA  
P.O. BOX 13193  
SPOKANE VALLEY, WA 99213

**CHECK SUMMARY**

**Amount Due**

**Annual New Rejoin**

Current Nat'l Dues on \_\_\_\_\_ Members \$ \_\_\_\_\_ (\$10.00)

Current Dept Dues on \_\_\_\_\_ Members \$ \_\_\_\_\_ (\$ 6.00)

Fees for # \_\_\_\_\_ Life Members @ \$ \_\_\_\_\_ \$ \_\_\_\_\_

Fees for # \_\_\_\_\_ Life Members @ \$ \_\_\_\_\_ \$ \_\_\_\_\_

Fees for # \_\_\_\_\_ Convert to Life @ \$ \_\_\_\_\_ \$ \_\_\_\_\_

Hospital (\$3.00 per member as of 6/30) # \_\_\_\_\_ \$ \_\_\_\_\_

Other Donations to VA Hospitals/Veterans Homes \$ \_\_\_\_\_

Cancer Aid & Research (\$1.00 per member as of 6/30) \$ \_\_\_\_\_

President's Pin (\$3.00 each) \$ \_\_\_\_\_

President's Special Project \$ \_\_\_\_\_

Patriotic Art \$ \_\_\_\_\_

National Home Fund (Cottage) \$ \_\_\_\_\_

National Home (Family Support Svcs.) \$ \_\_\_\_\_

Fisher Houses \$ \_\_\_\_\_

USO Military Lounges \$ \_\_\_\_\_

Ways & Means (Fundraising) ... Put on separate C/S \$ \_\_\_\_\_

Department Convention Delegates Fees \$ \_\_\_\_\_

Number of Delegates @ \$4.50 each \$ \_\_\_\_\_

No. of Other Officers @ \$4.50 each \$ \_\_\_\_\_

OTHER DONATIONS \$ \_\_\_\_\_

OTHER DONATIONS \$ \_\_\_\_\_

TOTAL \$ \_\_\_\_\_

Check # \_\_\_\_\_ Date \_\_\_\_\_

Auxiliary # \_\_\_\_\_ District # \_\_\_\_\_