

VFW AUXILIARY DEPARTMENT OF WASHINGTON
DISTRICT PRESIDENT'S MONTHLY REPORT

District Number _____

Report for month ending _____

HAVE YOU HELD A DISTRICT MEETING DURING THIS REPORTING PERIOD?

Yes No **IF YES, PLEASE COMPLETE THE FOLLOWING.**

DATE OF MEETING _____ **LOCATION** _____

NUMBER OF MEMBERS PRESENT _____ **NUMBER OF GUESTS** _____

NUMBER OF AUXILIARIES REPRESENTED AT THIS MEETING _____ **OUT OF** _____

All District Meetings are School of Instruction and promotion of programs, with the exception of the District Convention. Check the following if they were presented and give highlights and/or comments on the back page.

- | | | |
|--|---|---|
| <input type="checkbox"/> Americanism | <input type="checkbox"/> Extension & Revitalization | <input type="checkbox"/> Membership |
| <input type="checkbox"/> Community Outreach | <input type="checkbox"/> Buddy Poppy/National Home | <input type="checkbox"/> Hospital |
| <input type="checkbox"/> Legislative | <input type="checkbox"/> Historian/ Media Relations | <input type="checkbox"/> Scholarships |
| <input type="checkbox"/> Veterans & Family Support | <input type="checkbox"/> Mentoring for Leadership | <input type="checkbox"/> Youth Activities |

Please list any Auxiliary Meetings or functions attended and purpose for attending beginning with the date and include Auxiliary name and number if applicable:

What activities are the Auxiliaries in your District participating in? Are they doing anything for Veterans, Family or Community Events: _____

What upcoming events/programs are they working on?: _____

(Please use additional sheet if necessary)

Is any Auxiliary in your District having problems requiring attention? Yes _____ No _____

If yes: Auxiliary Name _____ Auxiliary No. _____

Please give details of the problems and your recommendations for solving them:

If you deem it necessary to have a Department Officer assist with solving the problems of this Auxiliary, please **CONTACT DEPARTMENT PRESIDENT ROSE GREEN IMMEDIATELY.**

NOTE: These monthly reports are to be completed and sent not later than the following month (July report due by August 15th, etc.)

Additional Comments:

Signature _____

(May be typed)

EMAIL TO: Rose Green wecareaboutvets@gmail.com and Elaine Taylor taylor.90@comcast.net by the 15th of the following month, or send to:

Rose Green
Dept. President
4428 Sunnyslope Road
Port Orchard, WA 98367

Elaine Taylor
Dept. Chief of Staff
90 Ponderosa Drive
Oak Harbor, WA 98277

Keep a copy for your records