



**DEPARTMENT OF TEXAS
VFW AUXILIARY REPORT FORM**

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	TOTAL VALUE OR DOLLARS SPENT

DESCRIPTION OF PROJECT(S):