

Department of NY VFW Auxiliary

Buddy [®]Poppy & VFW National Home

Year-End Report

Must Reach Department Chairman BEFORE April 1, 2025

Auxilia	ary Name:	#
District # Auxiliary Chairman:		
	VFW Buddy [®] Poppy	
1.	Did your Auxiliary hold a Buddy [®] Poppy drive with or without your Post?	Y / N
2.	Number of VFW Buddy [®] Poppies distributed	
3.	Did your Auxiliary participate in the VFW Buddy [®] Poppy Display Contest?	Y / N
	VFW National Home	
1.	Did your Auxiliary promote the VFW National Home?	Y / N
2.	Did your Auxiliary promote the VFW National Home Helpline?	Y / N
3.	Did your Auxiliary purchase at least one VFW National Home Life Membersl	hip
	during this Program year?	Y / N
4.	Did your Auxiliary purchase at least one VFW National Home Tribute Brick	
	during this Program year?	Y/N
5.	Did you participate by sending a 100 th Birthday Card to the National Home of	on
	1/7/2025 or make a donation to the 100 th Celebration?	Y/N
6.	Did you participate in the Cash Bash Raffle to benefit "Guitars for Heroes	
	Program" at the National Home?	Y/N
Au	xiliary Chairman signature	

Chairman Phone number: ______ Email ______