## Legislative

1- Did your Auxiliary promote	e, participate and/or h	nost or co-host	
activities regarding the VF	W Priority Goals with	or without your	
VFW Post.			
Describe this activity:			(Yes or No)
2- Number of times Auxiliary Members contacted their legislators			
on Veteran issues by any means (example: emails, letters,			
postcads, phone calls, ec)	postcads, phone calls, ec)		
3- Number of Auxiliary memb	pers who attended eve	ents where they	
could interact with legislat	ors . (example: legisl	ative conferences,	
town halls, mmet-and-greets, etc.)			#
4- Use the box below to desc	ribe anv Legislative e	vent or activity	
participated in that is not		-	
Auxiliary #	District #	Group #	
		Members #	
Hours	Mileage	Dollars \$	
hairman contact info:	Name		
nairman contact imo.			
Dhor	Email:		
PIIUI	ne Number:		
uxiliary President's Name	<u> </u>		