LEGISLATIVE REPORT FORM

Auxiliary	_ District	Group	#	_ Date:	Report #	
Chairman or Pe	erson Subm	nitting				
No. of Volunteers		Total Hours		N	Mileage	
Total Money Sp	ent					
Were the VFW	Priority Go	als Pror	noted?	Yes	No	
Did your Auxiliary participate in or host/cohost any activities regarding the VFW Priority Goals with or without the VFW Post?						
How were they promoted?						
How many members contacted Legislators on Veterans' Issues?						
Personal	_ Email		Social	Media	Letters	
Number of members who attended events such as Town Hall Meetings, Meet and Greet, Rally or Legislative Conferences						
How many new	members j	ioined A	ction Co	orp Weekly	7?	

EXPLANATIONS, DESCRIPTIONS AND DATES ARE NECESSARY

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