## Veterans of Foreign Wars Auxiliary Department of Connecticut 2023 – 2024 Auxiliary Outreach

<ol> <li>Did your Auxiliary utilize any of the Auxiliary Outreach r in MALTA Member Resources?</li> </ol>	naterials/res	ources available
<ol><li>Did your Auxiliary volunteer/partner with another organi VFW or VFW Auxiliary?</li></ol>	zation not af	filiated with the
<ol><li>Please list the total number of organizations your Auxili with during the year.</li></ol>	ary voluntee	red/partnered
4. Which organizations did you volunteer with?		
a. First Responders		
b. Churches		<u>.</u>
c. Towns		
d. Disaster relief		
e. Cancer, Heart, ALS Association, etc		
f. Other		
5. Number of Auxiliary members who volunteered with an organization not affiliated with the VFW or VFW Auxilia	other	
6. Number of combined hours volunteered for the above?		
Please supply details of your projects on an attac	ched sheet.	Thank you!
Auxiliary Name & Number:	_ District:	Division
Submitted By / Title:		Date:

"Remember Your Why" by "Banding Together for Our Veterans".

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