

VETERANS OF FOREIGN WARS AUXILIARY
DEPARTMENT OF CONNECTICUT

“BUDDY” POPPY & VFW NATIONAL HOME REPORT FORM
2024-2025

Chairman: Virginia Livernoche - P.O. Box 228 – Quinebaug, CT 06262
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Please attach a chronological list of all activities your auxiliary did on the program that includes: Date, Activity, # of Members, Hours and Cost/Value.

VFW “BUDDY” POPPY

1. Did your Auxiliary hold a VFW “Buddy” Poppy Drive with or without your Post? _____
2. Number of VFW “Buddy” Poppies distributed. _____
3. Did your Auxiliary participate in the VFW “Buddy” Poppy Display Contest? _____
4. Describe how you used the VFW “Buddy” Poppy to educate the Community about the program. _____

VFW NATIONAL HOME FOR CHILDREN

1. Describe how your Auxiliary promoted the VFW National Home. _____

2. Did your Auxiliary promote the VFW National Home Helpline? _____
Describe _____

3. Did your Auxiliary purchase at least one VFW National Home Life Membership in the current program year? _____. Total # purchased _____
4. Did your Auxiliary purchase at least one VFW National Home Tribute Brick in the current program year? Total # purchased _____

Auxiliary Name & Number _____

Division # _____ District # _____

Chairman signature: _____ Date: _____