

WI VFW Auxiliary Year-End Reports 24-25

Mail In Instructions

1. *Remember that you only need to report on the Programs that you participated in this year. Per National, you do not have to participate in every Program, BUT you must participate in at least one Program.*
2. You need to mail all the Year-End Program Reports that you fill out to your District President.
3. You can find fillable forms on the WI VFW Auxiliary website at: www.vfwauxwi.org and click on Programs and then click on Year-End Reports at the bottom of the menu. You can then type in your answers and print the report.
4. If there are any questions that you need more room to answer, you can write on the back of the printed form.
5. **THE REPORTS MUST BE IN YOUR DISTRICT PRESIDENT'S HANDS BY APRIL 1, 2025.**

District 1 & 3 – Send to:

President Cheryl Woodards
601 Malvern Hill Dr.
Madison, WI 53718-3133
608-692-4027
CherylWoodards8797@gmail.com

District 8 Lisa Wolfinger, Dist 8 President
407 Whitney St
Kaukauna, WI 54130-2247
920-766-7911
lisawolfinger86@gmail.com

District 2 Carol Welch, Dist. 2 President
1670 Arcadia Lane
Sun Prairie, WI 53590
608-216-6680
ctwelch1@frontier.com

District 9 Jody McKinney, Dist 9 President
752 19 1/2 St
Chetek, WI 54728-8501
715-651-8546
studebaker1971@gmail.com

District 4 Don Kressin, Dist. 4 President
4149 S Regal Manor Ct
New Berlin, WI 53151-9204
262-853-5253
DONKRESSIN@gmail.com

District 10 Victoria Newbauer, Dist 10 President
1909 E 14Th St Apt 17
Merrill, WI 54452-3877
715-257-2099
vnewbauer1950@gmail.com

District 6 Kathleen Lendosky, Dist 6 President
1183 Lakeview RD
West Bend, WI 53090-8201
262-692-9661
lendosky16@charter.net

District 11 Rita Byers, Dist 11 President
547 Front St
Cashton, WI 54619-8001
608-654-5470
rabyers66@gmail.com

District 7 Jane Bynum, Dist. 7 President
W7708 State Road 23
Endeavor WI 53930-9328
608-408-9222
hellofromjane@gmail.com

WI VFW Auxiliary Year-End Report Worksheet

2024-2025 Americanism Report

**REPORT YOUR RESPONSES AS INDICATED ON THE
INSTRUCTION SHEET, IF YOU PARTICIPATED IN THIS PROGRAM.**

Auxiliary #: _____

District #: _____

Auxiliary Name: _____

City: _____

Submitter's Email Address: _____

Did your Auxiliary:

1. promote, participate, recognize any patriotic day and/or branch of service birthdays. Yes or No

2. distribute and/or present American Flags and/or POW/MIA Flags. Yes or No

3. How many American Flags and/or POW/MIA Flags were distributed and/or presented # _____

4. How many Patriotic Appreciation Citations, Certificate of Appreciation or Respect for the Flag Citations presented to citizens and/or businesses in recognition of their displaying the American Flag, POW/MIA Flag and/or other displays of American pride. # _____

5. How did your Auxiliary conduct patriotic education in your Auxiliary, schools, community? (If doing on paper, use back of this page, be specific.)

6. How did your Auxiliary educate your community about the "lesser-known patriotic holidays"? (If doing on paper, use back of this page, be specific.)

7. How many photos did your Auxiliary send to the Dept WI Americanism Chair since July 1, 24? # _____

Americanism Chair Signature: _____

WI VFW Auxiliary Year-End Report Worksheet

2024-2025 Auxiliary Outreach Report

REPORT YOUR RESPONSES AS INDICATED ON THE INSTRUCTION SHEET, IF YOU PARTICIPATED IN THIS PROGRAM.

Auxiliary #: _____

District #: _____

Auxiliary Name: _____

City: _____

Submitter's Email Address: _____

Did your Auxiliary:

1. partner with another organization not affiliated with the VFW or VFW Auxiliary. Yes or No
2. How many organizations did your Auxiliary partner with during the year. # _____
3. How many combined member and/or Auxiliary hours did you volunteer with another organization not affiliated with the VFW or VFW Auxiliary. # _____

Aux. Outreach Chair Signature: _____

WI VFW Auxiliary Year-End Report Worksheet

2024-2025 "Buddy"® Poppy & VFW National Home Report

REPORT YOUR RESPONSES AS INDICATED ON THE INSTRUCTION SHEET, IF YOU PARTICIPATED IN THIS PROGRAM.

Auxiliary #: _____ District #: _____
Auxiliary Name: _____
City: _____
Submitter's Email Address: _____

VFW "Buddy"® Poppy

Did your Auxiliary . . .

1. hold a VFW "Buddy"® Poppy drive with or without their VFW Post? Yes or No
2. How many VFW "Buddy"® Poppies were distributed? # _____
3. participate in the VFW "Buddy"® Poppy Display Contest? Yes or No

VFW National Home

Did your Auxiliary . . .

4. promote the VFW National Home? Yes or No
5. promote the VFW National Home Helpline? Yes or No
6. purchase at least one VFW National Home Life Membership in the current Program Year. Yes or No
7. purchase at least one VFW National Home Tribute Brick in the current Program Year. Yes or No

Buddy Poppy/National Home Chair Signature: _____

WI VFW Auxiliary Year-End Report Worksheet

2024-2025 Historian & Media Relations Report

REPORT YOUR RESPONSES AS INDICATED ON THE INSTRUCTION SHEET, IF YOU PARTICIPATED IN THIS PROGRAM.

Auxiliary #: _____

District #: _____

Auxiliary Name: _____

City: _____

Submitter's Email Address: _____

Did your Auxiliary:

1. communicate quarterly with each of your members via email, printed mail, text or phone call? Yes or No
2. have a Facebook page with or without the VFW Post? Yes or No
3. have a website with or without the VFW Post? Yes or No
4. send pictures and/or newspaper clippings to the Department Historian Chairman? Yes or No

Historian Chair Signature: _____

WI VFW Auxiliary Year-End Report Worksheet

2024-2025 Hospital Report

REPORT YOUR RESPONSES AS INDICATED ON THE INSTRUCTION SHEET, IF YOU PARTICIPATED IN THIS PROGRAM.

Auxiliary #: _____

District #: _____

Auxiliary Name: _____

City: _____

Submitter's Email Address: _____

At your Auxiliary:

1. How many of your members volunteered at any VA and/or non-VA medical facility. (Each Auxiliary member to be counted one time only per # _____ year.)
2. Total number of hours that Auxiliary members volunteered at any VA and/or non- VA medical facility. # _____
3. Total number of hours that Sponsored Volunteers and/or students volunteered under the VFW Auxiliary sponsorship and supervision at any # _____ VA and/or non-VA medical facility.
4. Did your Auxiliary promote, participate, host or co-host any activity with Yes or No or without their VFW Post.
5. Total dollar amount spent on all Hospital Program-related items and/or projects. \$ _____

Hospital Chair Signature: _____

WI VFW Auxiliary Year-End Report Worksheet

2024-2025 Legislative Report

REPORT YOUR RESPONSES AS INDICATED ON THE INSTRUCTION SHEET, IF YOU PARTICIPATED IN THIS PROGRAM.

Auxiliary #: _____

District #: _____

Auxiliary Name: _____

City: _____

Submitter's Email Address: _____

Did your Auxiliary:

1. promote, participate, host or co-host with their VFW Post activities regarding the VFW Priority Goals. Yes or No
2. How many members contacted their legislators on veterans' issues by any means (example: emails, letters, postcards, phone calls, etc.) # _____
3. How many members attended events where they could interact with legislators (example: legislative conferences, town halls, meet-and-greets, etc.) # _____
4. How many members are signed up for VFW Action Corp & VoterVoice? # _____

Legislative Chair Signature: _____

WI VFW Auxiliary Year-End Report Worksheet

2024-2025 National Scholarships Report

REPORT YOUR RESPONSES AS INDICATED ON THE INSTRUCTION SHEET, IF YOU PARTICIPATED IN THIS PROGRAM.

Auxiliary #: _____ District #: _____
Auxiliary Name: _____
City: _____
Submitter's Email Address: _____

Continuing Education Scholarship Contest

Did your Auxiliary . . .

1. promote the National Continuing Education Scholarship Contest. Yes or No
2. make a monetary donation to the National Continuing Education Scholarship fund. Yes or No
3. How did you promote the Natl Continuing Education Scholarship program: (examples: talked about at meetings, social media posts, newspaper, radio, newsletters, pamphlet handouts, other- please specify)

Young American Creative Patriotic Art Contest

Did your Auxiliary . . .

4. promote the Young American Creative Patriotic Art Contest. Yes or No
5. How many students submitted art entries to your Auxiliary for judging. # _____
6. How many art entries were submitted to the Department from your Auxiliary for judging? # _____
7. make a monetary donation to the National Young American Creative Patriotic Art Contest fund? Yes or No
8. How did you promote the Patriotic Art program: (examples: talked about at meetings, social media posts, newspaper, radio, newsletters, etc.- please specify)

REPORT YOUR RESPONSES AS INDICATED ON THE INSTRUCTION

Auxiliary #: _____

District #: _____

3-Dimensional Patriotic Art Contest

Did your Auxiliary . . .

9. Did you promote the 3 Dimensional Patriotic Art program. How?: Yes or No
(examples: talked about at meetings, social media posts, newspaper,
radio, newsletters, pamphlet handouts, other- please specify)

10. How many students submitted art entries to your Auxiliary for judging. # _____

11. How many 3-Dimensional art entries were submitted to the Department # _____
from your Auxiliary for judging.

12. make a monetary donation to the National 3- Dimensional Patriotic Art Contest fund. Yes or No

VFW Scholarships

Did your Auxiliary . . .

13. assist the VFW Post in promoting or conducting the VFW National Patriot's Pen Essay Contest. Yes or No

14. assist the VFW Post in promoting or conducting the VFW National Voice of Democracy Audio Essay Contest. Yes or No

15. Please list the ways your Auxiliary assisted your Post with the VOD and/or Patriot's Pen program:

Recognition

Did your Auxiliary . . .

16. host or co-host with your VFW Post an awards ceremony to recognize awardees and participants in any/all contests. Yes or No

17. Total dollar amount and/or value of awards presented for any/all contests. \$ _____

Nat'l Scholarships Chair Signature: _____

WI VFW Auxiliary Year-End Report Worksheet

2024-2025 Veterans & Family Support Report

REPORT YOUR RESPONSES AS INDICATED ON THE INSTRUCTION SHEET, IF YOU PARTICIPATED IN THIS PROGRAM.

Auxiliary #: _____

District #: _____

Auxiliary Name: _____

City: _____

Submitter's Email Address: _____

Did your Auxiliary:

1. promote, participate, host or co-host with the VFW fundraising activities for any program? (Examples: Disaster Relief, Military Assistance Program (MAP), National Veterans Service (NVS), Unmet Needs, Veterans & Military Suicide Prevention and Mental Health awareness.) Yes or No

2. provide direct aid to veterans, service members and/or their families (Examples: meals, transportation, cards, packages, donations, etc.) Yes or No

3. Approximate number of veterans, service members and/or their families assisted. # _____

4. Total monetary donations and/or value of donations and goods/services provided to veterans, service members and/or their families. \$ _____

5. Did your Auxiliary use media to promote programs or increase the support of Veterans, active-duty service members, and their families in the community? Yes or No

6. What media was used? TV, Radio, Newspaper, Facebook/Media, or Fliers - Please list below.

V & FS Chair Signature: _____

WI VFW Auxiliary Year-End Report Worksheet

2024-2025 Youth Activities Report

REPORT YOUR RESPONSES AS INDICATED ON THE INSTRUCTION SHEET, IF YOU PARTICIPATED IN THIS PROGRAM.

Auxiliary #: _____ District #: _____
Auxiliary Name: _____
City: _____
Submitter's Email Address: _____

Youth Groups

1. What is the total number of **youth groups** that your Auxiliary worked with during the current Program Year? # _____
2. What is the total number of **youth** that your Auxiliary worked with during the current Program Year? # _____
3. How many Youth Groups Supporting Our Veterans Citations were awarded by your Auxiliary? # _____
4. Did your Auxiliary participate in Patriotism through Literacy? Yes or No
5. How many books did your Auxiliary donate in participation of Patriotism Through Literacy? # _____
6. How many youth were recognized by your Auxiliary with a Patriotic Youth Award? # _____
7. How many R.A.P. (Random Act of Patriotism) Cards were given out by your Auxiliary? # _____

Illustrating America Art Contest

8. Did your Auxiliary promote the Illustrating America art contest? Yes or No
9. How many students submitted an art entry to your Auxiliary for judging? # _____
10. How many art entries did your Auxiliary submit to the Department? # _____
11. Did your Auxiliary host an awards ceremony to recognize awardees and participants in this contest? Yes or No
12. What was the total dollar amount and/or value of awards presented by your Auxiliary? \$ _____
13. Please describe some of the activities that your Auxiliary did with the youth in your area.

Youth Activities Chair Signature: _____

WI VFW Auxiliary Year-End Report Worksheet

2024-2025 Extension & Revitalization Report

SEE SPECIAL INSTRUCTIONS BELOW, IF YOU PARTICIPATED IN THIS PROGRAM.

Auxiliary #: _____

District #: _____

Auxiliary Name: _____

City: _____

Submitter's Email Address: _____

At your Auxiliary:

1. Did you utilize any Extension & Revitalization materials/resources available in MALTA member resources? Yes or No
2. Check the resources your Auxiliary used:
 - Healthy Auxiliary Checklist _____
 - Healthy Auxiliary Member Questionnaire _____
 - Auxiliary Meeting Clinic _____
 - Communication, Phone/Text Tree _____
 - Good Job Certificate _____
 - Healthy Auxiliary Certificate _____
 - VFW Auxiliary Mentoring Guide _____
 - Online Auxiliary Academy _____
 - Other _____
3. Did your Auxiliary contact the Chief of Staff for help, suggestions and direction for an Auxiliary/member issues? Yes or No
4. How many times did your Auxiliary contact the Chief of Staff for help, suggestions and direction for an Auxiliary/member issues? # _____
5. When was the last time you voted in a new member? DATE: _____
6. Did your Auxiliary print out a copy of Building on the Auxiliary Foundation to use as a resource? Yes or No
7. Who in your Auxiliary is exceptional at keeping your Auxiliary Healthy?
Name: _____

Mail or email this form or report on-line - Report Due by April 15, 2025

Linda Moran (Chief of Staff)
1225 Suburban Dr., De Pere, WI 54115
or email Loopylin1950@gmail.com