## **AUXILIARY MEMBERSHIP YEAR-END REPORT**

Auxiliary Name:	Auxiliary #:
District Number:	Date:
Please complete this year-end report with a <b>Yes or No f</b> 1. Did your Auxiliary utilize any of the Membe Membership Resources?2. Did your Auxiliary promote, participate, ho	rship material/resources available in Malta
regarding VFW or VFW Auxiliary education and Membe	·
3. Did your Auxiliary regularly educate your members on the benefits of their membership? (Examples: insurance plans, travel benefits, cancer grants, hearing plans, etc.) ?	
4. Did your Auxiliary educate your members or	n the National Membership Program Awards?
5. How many <u>Auxiliary Members</u> participated	in any recruiting event on any level? (a number)
6. Did your auxiliary recruit at least one new member?	
Membership Chairman Signature:	
Auxiliary President Signature:	Date:

RETURN THIS YEAR-END REPORT TO YOUR DISTRICT PRESIDENT BY APRIL 1, 2024.