

**2018 LORA WATERS AUXILIARY PRESIDENT OF THE YEAR AWARD**

**REPORT MUST BE  
RECEIVED BY May 1, 2019**

Send To: Jennifer Viestenz  
e-mail: [foolsjay@msn.com](mailto:foolsjay@msn.com)  
Address in Roster!

**Auxiliary Name:** \_\_\_\_\_ **Auxiliary #** \_\_\_\_\_ **District #** \_\_\_\_\_

**Auxiliary President:** \_\_\_\_\_

1. Did your auxiliary reach 100% in membership by April 30, 2019? Yes\_\_\_ No\_\_\_
2. Was the warrant and installation report completed properly and forwarded to the National and Department Secretary by the deadlines? Yes \_\_\_ No\_\_\_
3. Does your Auxiliary have an EIN NUMBER? Yes \_\_\_ No \_\_\_ Does Department have it on file Yes\_\_\_ No \_\_\_
4. Did your Auxiliary submit the required 990-N (e-post card) to the IRS by November 15, 2018? Yes\_\_\_ No \_\_\_  
Was a copy of your 990-N confirmation sent to Department Treasurer? Yes\_\_\_ No \_\_\_
5. Were your quarterly audits sent to the Department Treasurer per National Bylaws? **(This will be verified by the Department Treasurer)** Yes\_\_\_ No\_\_\_
7. Did you attend School of Instruction? Yes\_\_\_\_\_ No\_\_\_\_\_ If No, please indicate the name of your representative\_\_\_\_\_.
8. Did you attend Mid-Winter Conference? Yes \_\_\_\_\_ No \_\_\_\_\_ If No, please indicate the name of your representative\_\_\_\_\_.
9. Were all year-end reports submitted to the Department Program Chairman, and a copy sent to your District President and received on time? Yes\_\_\_ No \_\_\_
10. Did your Auxiliary purchase Department President's Pins? Yes\_\_\_ No \_\_\_
11. Did your Auxiliary participate in Department Ways & Means fundraisers? Yes\_\_\_ No \_\_\_
12. Did your Auxiliary utilize Online Academies? Yes\_\_\_ No \_\_\_
13. Did your Auxiliary support the National Presidents Special Project? Yes\_\_\_ No \_\_\_  
Department Presidents Special Project? Yes\_\_\_ No \_\_\_
14. Were your Auxiliary District Dues paid by September 30<sup>th</sup> according to the ByLaws Sec. 506? Yes \_\_\_ No \_\_\_

**Programs**

A. **Americanism/Patriotic Instruction:** Did your Auxiliary Participate in the Family Freedom Festival \_\_\_

POW/MIA Event \_\_\_ Flag Retirement \_\_\_ Promote Patriotic Holidays \_\_\_ American Flags handed out # \_\_\_\_\_

B. **Extension /Chief of Staff:** Did you complete the Healthy Auxiliary Check List and submit to Department Chief of Staff? Yes \_\_\_ No \_\_\_

C. **Hospital:** Did your Auxiliary donate to Hospital Fund? (\$3.00 per-Member) Yes \_\_\_ No \_\_\_  
(This money is used to take care of our Veterans in Washington VA & Hospitals)

Did your Auxiliary promote Suicide Awareness? Yes \_\_\_ No \_\_\_

Did your Auxiliary submit applicant to Department for Outstanding Hospital Volunteer of the Year Award? Yes \_\_\_ No \_\_\_ or Home Hospital Pin Award for Auxiliary Members? Yes \_\_\_ No \_\_\_

D. **Legislative:** Did your Auxiliary promote subscriptions to VFW Action Corps? Yes \_\_\_ No \_\_\_  
Did your Auxiliary promote VFW Priority Goals? Yes \_\_\_ No \_\_\_

E. **Membership:** Did you hold a Recruiting Event. Yes \_\_\_ No \_\_\_

F. **Publicity:** Did your Auxiliary utilize Department Facebook Page? Yes \_\_\_ No \_\_\_

G. **Buddy Poppy/National Home:** Did your Auxiliary send a donation to National Home for Health. And Happiness? (.10 cents per member) Yes \_\_\_ No \_\_\_  
Did your Auxiliary have a Buddy Poppy Drive? Yes \_\_\_ No \_\_\_

H. **Scholarship:** Did your Auxiliary help with the Scholarship Programs? Yes \_\_\_ No \_\_\_  
Did your Auxiliary donate to the Young American Creative Patriotic Art fund to Department? Yes \_\_\_ No \_\_\_  
Did your Auxiliary Participate in the State Youth Essay program? Yes \_\_\_ No \_\_\_

I. **Youth Activities:** did your Auxiliary sponsor and work with youth groups. Yes \_\_\_ No \_\_\_  
Did your Auxiliary request a Youth Group Supporting Our Veterans Citation from National? Yes \_\_\_ No \_\_\_

J. **Veterans and Family Support:** Did your Auxiliary hold events to support any of the following? Veterans and Military Support programs \_\_\_ (ex: Unmet Needs, Operation Uplink, Help-a- Hero Scholarship), National Veterans Services \_\_\_ Military Family Month \_\_\_\_\_ Homeless Veteran Event or Stand-Down \_\_\_ or Adopt a Unit (MAP) \_\_\_\_\_.

\*If your Auxiliary did a project that you and your Auxiliary is proud of please feel free to share on a separate piece of paper.

\*NOTE ALL AUDITS MUST BE UP TO DATE. IF YOU'RE AUXILIARY HAS ANY MONEY SHORTAGES FOR DUES OR DELEGATE FEES. YOU MAY BE DISQUALIFIED.

**Auxiliary President (Please Print)**

Date: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Send Original to Awards Chairman

Send copy to District President

Copy for Auxiliary