

Veterans & Family Support
2021 Year End Report

Submit to Sue Gregg, Department Chairperson by April 15, 2021

Auxiliary name: _____ Number: ____ District: ____

1. Did your Auxiliary host or cohost with the Post any fundraising activities for National Veterans Service (NVS). Yes___ No___
2. Did your Auxiliary host or cohost with the Post any fundraising activities for Veterans & Military Support Programs and what did you do:
Military Assistance Program (MAP) Yes: ____ No: ____
Stars,Stripes,Support! Yes: ____ No: ____
Honor Flight Yes: ____ No: ____
Sport Clips scholarships Yes: ____ No: ____
3. Did your Auxiliary sponsor or participate in events or projects for homeless veterans: (for example, Stand Downs, clothing drives, goody bags, etc.) Yes: ____ No: ____ and how was this carried out?
4. Did your Auxiliary provide direct aid to Veterans, Service members and/or their families? (for example: with a breakdown of meals, transportation, cards, packages, donations)

Total monetary value of donations and goods/several provided \$_____
Total monetary donations provided \$_____
Approximate number of Veterans/Military personnel assisted ____
5. Did your Auxiliary promote Veterans and military suicide prevention and mental awareness?
Yes__ No__ How and when?
6. Did your Auxiliary provide support for Veteran and military caregivers? Yes__No__
7. Did your Auxiliary participate in the National Presidents Fundraiser Stars, Stripes and Support?
Yes: ____ Amount: _____ No: ____
8. Did your Auxiliary use the media to promote Veterans & Family Support projects and or programs in the community and which media form was utilized?
TV__ Radio__ Newspaper __ Social Media-which type_____ Fliers__
9. If you wish, you may attach an extra sheet with answers to the questions.

Chairperson_____ Phone number _____ email _____
Mailing address_____

Submit to: Sue Gregg sue9332000.sg@gmail.com
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