Auxiliary Americanism Report 2022-2023

Please Return to your Program Chairman NO LATER than March 31, 2023.

Department Program Chair Jill Fishler Email: fishler540@yahoo.com

Address: 540 Indian Wells Ct. Pahrump, NV 89060-1803 Phone: 810-394-6891

- 1. How many special programs did you participate in/ or patriotic holidays: (Memorial Day, Veterans Day, POW/MIA Remembrance Day, etc.) Please explain.
- 2. Number of American Flags distributed and/or presented (at least 2" x 3" or larger):
- 3. Did your Auxiliary participate or host a POW/MIA ceremony?
- Number of POW/MIA flags presented (at least 2" x 3" or larger): ______
- Number of certificates presented to businesses or citizens in recognition of their displaying the U.S., POW/MIA flags or other displays of American pride:
- 6. Did your Auxiliary recognize Blue Star Mothers and Families, Gold Star Mothers and Families and/or Silver Star Mothers and Families? If so, how?
- 7. Did your Auxiliary conduct patriotic education in your community? If so, how? _____
- 8. Did your Auxiliary conduct patriotic education in your Auxiliary and/or community?
- 9. Did your Auxiliary conduct a Family Freedom Festival?_____
- 10. Did your Auxiliary recognize Blue Star Mothers and Families and/or Gold Star Mothers and Families?

District:
Auxiliary Program Chair:
Auxiliary Name & Number:
Address:
Email:
Phone Number:

Auxiliary Community Outreach Report 2022-2023

Please Return to your Program Chairman NO LATER than March 31, 2023.

Department Program Chair Bonnie DarrellEmail: hdgramy@aol.comAddress: 740 Gally Road Pahrump, NV 89060-2553Phone: 702-250-7861

- 1. Did your Auxiliary implement an Auxiliary Community Outreach Program?
- Number of Auxiliary members who participated in Auxiliary Community Outreach: (For example, neighborhood/highway beautification, civic or faith-based volunteerism that benefits the community at large, assisting individuals with special needs or the elderly, etc.)
- 3. Number of hours volunteered by Auxiliary members for programs or projects NOT AFFILIATED with VFW or VFW Auxiliary Programs:
- 4. Did your Auxiliary plan or participate in projects or programs to support and/or recognize first responders:_____

strict:
xiliary Program Chair:
xiliary Name & Number:
dress:
nail:
one Number:

Auxiliary Buddy Poppy & National Home Report 2022-2023

Please Return to your Program Chairman NO LATER than March 31, 2023.

Department Program Chair Barbara Silva Email: vfwsilvacats@gmail.com

Address: 17198 Aquamarine Drive Reno, NV 89058-6879 Phone: 415-305-9056

Buddy Poppy

- 1. Did your Auxiliary promote the "Buddy"[®] Poppy through distribution and education within the Post/Auxiliary?
- 2. Did your Auxiliary promote the "Buddy"[®] Poppy through distribution and education in the community (outreach)?
- Number of "Buddy"[®] Poppy drives that were hosted with the Post: ______
- 4. Number of "Buddy"[®] Poppy drives that were hosted without the Post: ______
- 5. Did your Auxiliary participate in the Department "Buddy"® Poppy Display Contest?

VFW National Home for Children

- 6. Did your Auxiliary promote the National Home within the Post/Auxiliary? ______
- 7. Did your Auxiliary promote the National Home in the community (outreach)? ____
- 8. Did your Auxiliary promote the National Home Helpline within the Post/Auxiliary?
- 9. Did your Auxiliary promote the National Home Helpline in the community (outreach)?
- 10. Did your Auxiliary purchase at least one National Home Life Membership for an Auxiliary member?
- 11. Total number of National Home Life Memberships purchased for Auxiliary members:

District:
Auxiliary Program Chair:
Auxiliary Name & Number:
Address:
Email:
Phone Number:

Auxiliary Extension & Revitalization Report 2022-2023

Please Return to your Program Chairman NO LATER than March 31, 2023.

Department Program Chair Pam ThomasEmail: pthm74@aol.comAddress: 5638 Sea Breeze Ave. Las Vegas, NV 89110Phone: 702-493-3409

- 1. Number of Good Job Awards presented to Auxiliary members:
- 2. Was your Auxiliary presented with a Certificate of Good Health?
- 3. Did anyone in your Auxiliary develop Talking Points for District Presidents to use during Auxiliary Official Visits? YES _____ NO _____
- 4. If YES, did the District Presidents use the Talking Points? YES _____ NO _____
- 5. Did anyone in your Auxiliary give a presentation to an unaffiliated Post about starting an Auxiliary?
- 6. Number of Auxiliaries instituted after giving a presentation to an unaffiliated Post:

istrict:
uxiliary Program Chair:
uxiliary Name & Number:
ddress:
mail:
hone Number:

Auxiliary Historian & Media Relations Report 2022-2023

Please Return to your Program Chairman NO LATER than March 31, 2023.

Department Program Chair:	Email:
Address:	Phone:

- 1. Did your Auxiliary send a printed or mailed monthly or quarterly newsletter/ bulletin to their members?
- 2. Did your Auxiliary send an electronic (PDF, Word document or via an email service provider such as Constant Contact, Mail Chimp, Vertical Response, etc.) monthly or quarterly newsletter/bulletin to their members?
- 3. Did your Auxiliary have a joint Facebook page with the Post?
- 4. Did your Auxiliary have their own Auxiliary Facebook Page? _____
- 5. Did your Auxiliary have a joint website with the Post?
- Did your Auxiliary have their own Auxiliary website? _____
- 7. Did your Auxiliary present a Communications Award to local media?
- 8. Did your Auxiliary members attend a media relations training hosted by their Department Historian & Media Relations Chairman?
- 9. Did your Auxiliary use media to promote the Auxiliary and its Programs?

 What media was used? (Check all that apply) TV: _____ Radio: _____

 Newspapers: _____ Social Media: _____ Fliers:

District:
Auxiliary Program Chair:
Auxiliary Name & Number:
Address:
Email:
Phone Number:

Auxiliary Hospital Report 2022-2023

Please Return to your Program Chairman NO LATER than March 31, 2023.

Department Program Chair Sharon FrederickEmail: sharonfrederick@cox.netAddress: 7152 Flora Lam St. Las Vegas, NV 89166-8058Phone: 702-370-9872

- 1. Number of Auxiliary members that volunteered at any VA and/or non-VA medical facility. (Auxiliary members are counted one time only per year.)
- 2. Total number of hours that Auxiliary members volunteered at any VA and/or nonVA 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 or host any activity listed below.

Honors Escort

National Salute to Veteran Patients-Valentines for Veterans

Veterans Health Care (VHA) _____

Women Veterans Health Care Program ____

5. Did your Auxiliary promote, participate or co-host with their VFW Post, any activity listed: Honors Escort _____

National Salute to Veterans Patients-Valentines for Veterans

Veterans Health Care (VHA)

Women Veterans Health Care Program ____

6. Total dollar amount spent on all Hospital Program related items and/or projects.

District:	
Auxiliary Program Chair:	
Auxiliary Name & Number:	
Address:	
Email:	
Phone Number:	

Auxiliary Legislative Report 2022-2023

Please Return to your Program Chairman NO LATER than March 31, 2023.

Department Program Chair Lori Bagwell Email: loribagwell@charter.net

Address: 3662 Jarrad Ct. Carson City, NV 89701 Phone: 775-220-3646

1. Did your Auxiliary utilize any of the Legislative material/resources available on the National VFW Auxiliary website?

2. Number of Auxiliary members who are subscribed to VFW's Action Corps Weekly E-Newsletter.

3. Did your Auxiliary promote, participate and/or host activities regarding the VFW Priority Goals? _____

4. Did your Auxiliary promote, participate or co-host with their VFW Post activities regarding the VFW Priority Goals?

5. Number of Auxiliary members who contacted their legislators on veterans issues by any means (example: emails, letters, postcards, phone calls, etc.)

6. Number of Auxiliary members who attended events where they could interact with legislators (example: legislative conferences, town halls, meet-and-greets, etc.)

District:	
wxiliary Program Chair:	
uxiliary Name & Number:	
ddress:	
mail:	
hone Number:	

Auxiliary Membership Report 2022-2023

Please Return to your Program Chairman NO LATER than March 31, 2023.

Department Program Chair Suzan Aguiar Email: suzieaguiar@gmail.com Address: 5830 Alfano Ave. Pahrump, NV 89061-7035 Phone: 253-720-3363

1. Did your Auxiliary utilize any of the Membership material/resources available on the National VFW Auxiliary website?

2. Did your Auxiliary promote, participate, host or co-host with their VFW Post, activities regarding VFW and/or VFW Auxiliary education and Membership Recruitment?

3. Did your Auxiliary regularly educate their members on the benefits of their membership? (Example: insurance plans, travel benefits, cancer grants, hearing plans, etc.)

4. Did your Auxiliary educate their members on the National Membership Program Awards?

5. How many Auxiliary Members participated in any recruiting event on any level?

6. Did your Auxiliary recruit at least one new member?

District:	
Auxiliary Program Chair:	
Auxiliary Name & Number:	
Address:	
Email:	
Phone Number:	

Auxiliary Mentoring for Leadership Report 2022-2023

Please Return to your Program Chairman NO LATER than March 31, 2023.

Department Program Chair Saundra Marshall Email: tsjmarshall@gmail.com Address: 536 Rancho Del Sol Way N. Las Vegas, NV 89031-2872 Phone:301-213-3283

1. Did your Auxiliary utilize any of the Mentoring for Leadership material/resources available on the National VFW Auxiliary website?

2. Did your Auxiliary educate their members on the National Mentoring for Leadership Program Awards?

3. Did your Auxiliary have members who stepped up to the role of mentor?

4. Did your Auxiliary hold a special recognition for their mentors in their Auxiliary?

trict:	_
xiliary Program Chair:	
xiliary Name & Number:	
dress:	
ail:	
one Number:	

Auxiliary Scholarships Report 2022-2023

Please Return to your Program Chairman NO LATER than March 31, 2023.

Department Program Chair: ______ Email: _____

Address:	Phor	e:

Continuing Education Scholarship

Young American Patriotic Art Contest

1. Did your Auxiliary promote the Patriotic Art Contest?

- 2. Number of students who submitted an entry to your Auxiliary:
- 3. Number of entries judged at the Department level: _____

4. Did your Auxilia	ry make a monetary dona	ation to the Youn	g American C	reative Patriotic A	٩rt
Scholarship fund?					

3-Dimensional Patriotic Art Contest

- 1. Did your Auxiliary promote the 3-Dimensional Patriotic Art Contest?
- 2. Number of students that submitted art entries to your Auxiliary for judging?

3. Number of art entries submitted to the Department for judging?

4. Did your Auxiliary make a monetary donation to the 3-Dimensional Patriotic Art Conte	est
Scholarship fund?	

VFW Scholarships

1. Did your Auxiliary assist their VFW Post in the Patriot's Pen Essay Contest?

2. Did your Auxiliary assist their VFW Post in the Voice of Democracy Audio Essay Contest?

Recognition

1.	Did your Auxiliary host an awards ceremony to recognize contest winners?
2.	Total dollar amount of awards presented by your Auxiliary in any/all contests?

District:	
Auxiliary Program Chair:	
Auxiliary Name & Number:	
Address:	
Email:	
Phone Number:	

Auxiliary Veterans & Family Support Report 2022-2023

Please Return to your Program Chairman NO LATER than March 31, 2023.

Department Program Chair Ganise Vance Email: gan@comnett.net

Address: P.O. Box 1144 Overton, NV 89040-1144 Phone: 702-397-6304

1. Did your Auxiliary utilize any of the Veterans & Family Support resources available on the National VFW Auxiliary website?

2. Did your Auxiliary promote, participate, host or co-host with their VFW Post activities for any VFW Program listed below?

a. Disaster Relief _____

b. Military Assistance (MAP) _____

c. National Veterans Service (NVS) ______

d. Unmet Needs _____

e. Veterans & Military Suicide Prevention and Mental Health Awareness

3. Did your Auxiliary provide direct aid to veterans, service members and/or their families?

4. Approximate number of veterans, service members and/or their families assisted.

5. Total monetary donations and/or value of donations and goods/services provided to veterans, service members and/or their families.

District:	 	
Auxiliary Program Chair:	 	
Auxiliary Name & Number:	 	
Address:	 	
Email:	 	
Phone Number:		

Auxiliary Youth Activities Report 2022-2023

Please Return to your Program Chairman NO LATER than March 31, 2023.

Department Program Chair Jennifer Shawk	Email: 9211aux.js@gmail.com
Address: 400 Charlene Dr. Sparks, NV 89436-8986	5 Phone: 707-489-2368

- 1. Number of youth groups that your Auxiliary worked with during the Program Year ______
- 2. Number of youth that your Auxiliary worked with during the Program Year
- 3. Number of Youth Groups Supporting Our Veterans Citations awarded ______

Get Excited for the Red, White and Blue National Anthem Singing Contest

1.	Did your Auxiliary promote the Get Excited for the Red	, White and Blue National Anthem
siı	nging contest?	

2. Number of students that submitted entries for judging

3. Number of entries submitted to the Department for judging

4. Did your Auxiliary host an awards ceremony to recognize awardees and participants in this contest ?

5. Total dollar amount and/or value of awards presented by your Auxiliary?______

Illustrating America Art Contest

1. Did your Auxiliary promote the Illustrating America art contest ______

2. Number of students that submitted art entries to the Auxiliary for judging _____

3. Number of art entries submitted to the Department _____

4. Did your Auxiliary host an awards ceremony to recognize awardees and participants in this contest ?

5. Total dollar amount and/or value of awards presented by your Auxiliary ______

District:	 	
Auxiliary Program Chair:	 	
Auxiliary Name & Number:	 	
Address:	 	
Email:		
Phone Number:		