## VFW AUXILIARY QUARTERLY REPORT FORM

Auxiliary #	District #	Rep	oorting Date	9
PROGRAM		(only one program per form)		
	n to use this form to report your pe eport by using our website: vfwau		Department	: Program Chairma
Quarter 1: Quarter 3:	May 1 to July 31 November 1 to January 31		August 1 to February 1	October 31 to April 20
DESCRIPTION	N OF PROJECT (provide specific de	tails and write lo	egibly):	
		** ************************************		
•				
Program To	tals: Members Projects	Hours	_ Miles	Monies
Program Ch	airman Name			_
Submitted b	oy:	Title		
E-Mail/Pho	ne			

Keep copy to your Auxiliary Secretary