



American Legion Auxiliary
Department of California
Poppy
Unit Mid-Year Report

Unit Name _____ Unit # _____ District # _____

Chairman Name _____

Address _____

Phone _____

- 1) Number of Poppies Ordered? _____
- 2) Was this an increase from last year? _____ Amount of Increase _____
- 3) Was this a decrease from last year? _____ Amount of Decrease _____
- 4) Did or will the Unit order Poppy Seals? _____ How Many _____

Did or will the Unit participate in:

Poppy Usage Contest (DEC)	Yes _____	No _____	Will _____
Poppy Poster Contest	Yes _____	No _____	Will _____
Poppy Window Display	Yes _____	No _____	Will _____
Poppy Display (Convention)	Yes _____	No _____	Will _____
Miss Poppy / Little Miss Poppy	Yes _____	No _____	Will _____

How will the Unit promote the Poppy Program?

Please submit a supplemental report describing what the Unit did to promote the awareness of the Poppy and how this program benefits our Veterans.

REPORT DUE TO THE DISTRICT CHAIRMAN NO LATER THAN DECEMBER 1, 2016

