



American Legion Auxiliary
 Department of California
 Poppy
Unit Year End 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 the Unit order Poppy Seals? _____ How Many _____

Did the Unit participate in:

The Roadhouse Restaurant Poppy distribution _____	Location: _____
Poppy Usage Contest (DEC)	Yes <input type="checkbox"/> No <input type="checkbox"/>
Poppy Poster Contest	Yes <input type="checkbox"/> No <input type="checkbox"/>
Poppy window Display	Yes <input type="checkbox"/> No <input type="checkbox"/>
Poppy Display (Convention)	Yes <input type="checkbox"/> No <input type="checkbox"/>
Miss Poppy / Little Miss Poppy	Yes <input type="checkbox"/> No <input type="checkbox"/>

How did 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 APRIL 15, 2018

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