

***American Legion Auxiliary***  
***Department of Georgia Annual Poppy Report Form 2016-2017***

Please complete and forward by May 1, 2017 to: **Phyllis Jones, Chairman, 3108 Abelia Drive, Augusta, GA 30906 706.833.5828 email: pjcjmj3108@gmail.com**

District \_\_\_\_\_ #Unit & Name \_\_\_\_\_  
Chairman \_\_\_\_\_ Address \_\_\_\_\_  
Phone \_\_\_\_\_  
E-Mail Address \_\_\_\_\_

1. Number of Poppies ordered by Unit: \_\_\_\_\_
2. Number of Poppies increasing over last years order: \_\_\_\_\_
3. Number of Poppies Decreasing over last years order: \_\_\_\_\_
4. Did your Unit sponsor Poppy Poster Contest: \_\_\_\_\_
5. Was Poppy Poster judged in your District: \_\_\_\_\_
6. Number of Poppy Appreciation Certificates presented: \_\_\_\_\_
7. Did your Unit contact the Media, describe: \_\_\_\_\_
8. Did members distribute Poppies to elected Officials: Total# \_\_\_\_\_
9. Total contributions from Poppy Distribution: \_\_\_\_\_
10. Did your Unit sponsor a Miss Poppy Contest 6-12 years of age: \_\_\_\_\_
11. Did your Unit sponsor a Miss Poppy Contest 13-18 years of age \_\_\_\_\_
12. Number of members distributing the Poppies: \_\_\_\_\_
13. Was 25% of Poppy contributions sent to Department: \_\_\_\_\_
14. How many Veterans have received assistance from the Unit Poppy Distribution: \_\_\_\_\_
15. Where Poppies used at Post and Unit Functions: \_\_\_\_\_
16. Where Juniors members involved in the Unit Poppy Program: \_\_\_\_\_

Please describe any additional information about your Poppy Program that is new and innovative. In a narrative and attach with Unit Name and Number, Chairman's name:

**Quote: Excellence is never granted to man, but as the reward of labor.**