



American Legion Auxiliary  
Department of California  
Poppy  
**District** Mid-Year Report

District # \_\_\_\_\_ # Units in District \_\_\_\_\_ # Units Reporting \_\_\_\_\_

Chairman Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

1) Total 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) Were Poppy Seals ordered? Yes  No  How many \_\_\_\_\_

Did Units in the District participate in:

Poppy Usage Contest (DEC)	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Will	<input type="checkbox"/>	# of Units	_____
Poppy Poster Contest	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Will	<input type="checkbox"/>	# of Units	_____
Poppy window Display	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Will	<input type="checkbox"/>	# of Units	_____
Poppy Display (Convention)	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Will	<input type="checkbox"/>	# of Units	_____
Miss Poppy / Little Miss Poppy	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Will	<input type="checkbox"/>	# of Units	_____

How did Units in the District promote the Poppy Program?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please submit a supplemental report describing how the District promoted and raised awareness of the Poppy and how this program benefits our Veterans.

Send Report To: Tamra Duron Email: [Tamra1018@sbcglobal.net](mailto:Tamra1018@sbcglobal.net).

**REPORT DUE TO DEPARTMENT CHAIRMAN NO LATER THAN DECEMBER 15, 2017**