

VETERANS OF FOREIGN WARS AUXILIARY
CHIEF OF STAFF
YEAR END REPORT
2017-2018

AUXILIARY NAME _____ AUX.# _____ District # _____

1. Are you using the healthy auxiliary toolkit? YES ___ NO ___
2. Have you used the mentoring resources available to start/continue mentoring in your auxiliary? YES ___ NO ___
3. Do you have a greeting/mentoring committee for new or other members needing support and knowledge? YES ___ NO ___
4. Has your auxiliary received a certificate of good health? YES ___ NO ___

Please complete and return to your District President by April 1, 2018.

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