

## POPPY END OF YEAR REPORT 2025

Unit Name and Number
Unit Chairperson Name and Contact Information:
How Many Poppies did your Unit order this year
Number of Increase or Decrease from last year
How much money received in donations for the poppies
How much and way members received other poppy revenue
How do you promote the Poppy Program
Did you make veterans aware they were eligible to assistance and how
Did your Unit assist veterans from your Post
How many
With money or in other ways
Did your Unit encourage and increase number of poppy makers and how
Did your Unit publicize Poppy Days or other information about the Poppy Program and how
Hiow many Certificates of Appreciate did your Unit present
Did your Unit present Poppies to elected officials: who and how
Did you promote the Little Miss Poppy Contest and how
Did your Unit have a Miss Poppy Contest for 6-12 age category
Did your Unit have a Miss Poppy Contest for 13-18 age category
Did other Juniors participate and how
Is your Unit competing for the Miss Poppy Plaque

Did your l	Jnit promote and spo	nsor the Poppy Poste	er Contest						
How many	y Posters received in	the different categori	ies						
Class I:	Grades 2-3		Class V:	Grades 1	0-11				
Class II:	Grades 4-5		Class VI:	Grade 12					
Class III:	Grades 6-7		Class VII:	Special N	eeds				
Class IV:	Grades 8-9								
ALL POSTERS MUST BE RECEIVED BY MAY 10TH TO BE CONSIDERED. ORIGINAL POSTERS MUST BE SUBMITTED FOR CONSIDERATION (correction).									
Were the posters used in conjunction with window/public display contest and how									
Did your Unit use the Poppy in other creative ways and how									
Is your Ur	nit competing for Plac	ues and Awards							
Marie Tov Nita Kimb	oney Memorial Plaqu vnsend Memorial Pla all Community Poppy Poppy Decoration Pla	que / Awareness Award							
Total hours working with Poppies either making, soliticing donations or other projects involving Poppies									
Thank vo	u for answering this	s report form. Pleas	e utilize th	is report a	s a quide fo	or vour na	arrative		

Thank you for answering this report form. Please utilize this report as a guide for your narrative Kat Sticklin, Chair AZ Department Poppy Program 1519 S. 2nd Avenue Safford, AZ, 85546 928-322-1550 PLEASE SEND TO CHAIRMAN BY SNAIL MAIL ONLY. THANK YOU.