South Dakota VFW Auxiliary Department Year-End Report

2024-2025

AMERICANISM

	Auxiliary Name & Number:	Location:				
	Program Chairman Name:					
	Address:	City:	, SD Zip:			
	Email:	Phone:				
1.	Did your Auxiliary promote, participate in, or recognize any patriotic day and/or branch of service birthdays, i.e., Marine's birthday? YES NO					
2.	Did you do an Americanism promotion	n of youth patriotism? YES	_NO If yes; explain			
	How many American Flags and/or POW/MIA Flags were distributed or presented within your community to individuals, businesses, or schools? American Flags #; POW/MIA Flags #					
	Certificate of Appreciation for Disp		#			
	Patriotic Appreciation (i.e. individual or business lending support Displays of American Pride (i.e. Americanism presentations, activities)		#			
	special patriotic projects etc.) Respect for the American Flag (i.e. recognition of outstanding Flag etiqu	ette, Flag Retirement, etc.)	#			
	POW/MIA Flag Displayed		#			
		Total Presented =				

REPORT DEADLINE: Send to Chairman by April 15, 2025

Americanism Chairman

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