

PROGRAM: POPPY

Unit Annual Narrative Report 2024-2025

Department of Wisconsin

Submit to Department Headquarters by 4/15/25 only if you participated in any of these activities:

Unit # _____ District # _____

Name/Title (of person completing form) _____

Email Address _____ Phone: _____

1. Does the unit distribute veteran made poppies for donations? Yes No

If so, how often? _____

2. If not veteran-made poppies, then what?

3. Does the unit distribute poppies for PR/branding purposes? Yes No

4. Describe how the unit promotes the Poppy Program year-round? (continue on back if necessary)

5. How did the unit increase poppy revenue? (continue on back if necessary)

6. Does the unit promote the Poppy Poster Contest? Yes No

If so, how many posters were received? _____

7. Does the unit promote the Little Miss Poppy Contest? Yes No

If so, how many young girls participated? _____

Describe the unit's Little Miss Poppy Contest (continue on back if necessary)

8. Describe unique poppy usage ideas the unit tried.

Please list any Poppy activities, events and projects the unit was involved in

(continue on the back or add a separate piece of paper if necessary).

Please complete and return by APRIL 15, 2025 to:

American Legion Auxiliary, Dept of Wisconsin
PO Box 140, Portage WI 53901-0140