



# VETERANS AND FAMILY SUPPORT



Ann Barnet  
6652 Bienvenue St  
Mansura LA 71350  
[Ann-is-a@doglover.com](mailto:Ann-is-a@doglover.com)  
318-623-3140 or 318-964-5758

Auxiliary Name _____	Aux # _____	District # _____
Reporting Date: _____	1 Dec 2023	_____ 1 Apr 2024
Membership as of 30 Jun 2023 _____	Membership Cat _____	

1. Did your auxiliary use any of the Veterans & Family Support materials or resources available in Malta Member Resources? \_\_\_\_\_
2. Did your Auxiliary promote, participate, host or co-host with your Post any activities in the below listed activities?
  - a. Disaster Relief \_\_\_\_\_ How Many? \_\_\_\_\_
  - b. Unmet needs? \_\_\_\_\_ How Many? \_\_\_\_\_
  - c. Military Assistance (MAP)? \_\_\_\_\_ How Many? \_\_\_\_\_
  - d. National Veterans Service (NVS) \_\_\_\_\_ How Many? \_\_\_\_\_
  - e. Veterans and Military Suicide Prevention? \_\_\_\_\_ How Many? \_\_\_\_\_
  - f. Mental Health Awareness? \_\_\_\_\_ How Many? \_\_\_\_\_
3. Describe your Auxiliaries most outstanding activity and/or event to increase support of veterans, military, and their families. \_\_\_\_\_
4. Describe your Auxiliaries' most outstanding activity and/or event to increase awareness of veteran/military suicide or mental health. \_\_\_\_\_
5. Approximate number of veterans, military and/or family members assisted.  
\_\_\_\_\_
6. Suggestions to other Auxiliaries to increase their membership involvement in this program? \_\_\_\_\_

**ALL YES' AND SUGGESTIONS MUST BE EXPLAINED ON THE BACK OF REPORT OR ON A SEPARATE SHEET OF PAPER**

Chairman's Name and Signature \_\_\_\_\_