

Representative's Report – District Meetings

DATE _____ **DISTRICT** _____ **NUMBER OF MILES** _____

Dist. President _____ Dist. Commander _____

Aux. President _____ Post Commander _____

Was the District President prepared? _____ Yes _____ No

Check the Programs covered and by whom?

Program	Dist. Pres.	Dist. Chrmn	Dept. Chrmn	Aux Dept Rep	VFW Dept Rep	Aux Nbr	Pres in Attend	Mbrs Present
Americanism								
Extension/Healthy Aux								
Historian								
Hospital & VAVS								
Legislative								
Membership								
Vets & Family Support								
National Scholarships								
Youth Activities								
Mayberry Scholarship								
SPECIAL PROJECT								

List Other items covered

Did the members feel involved? _____ Yes _____ No
 Were you contacted prior to the meeting? _____ Yes _____ No
 Do you feel the officers were well informed? _____ Yes _____ No
 Do you feel the Trustees functioned well? _____ Yes _____ No
 Number in Attendance _____

Auxiliaries not represented: _____

LIST ANY PROBLEMS & OTHER COMMENTS YOU WISH TO MAKE:

SIGNED _____ DATE: _____

MAIL THIS REPORT AND YOUR VOUCHER FOLLOWING THE MEETING TO:

**Ivy Blueher, Department President
 203 W. D Street, Erwin, NC 28339
 Email: damiensbride@gmail.com**

