



## DEPARTMENT OF FLORIDA VFW AUXILIARY OFFICIAL VISIT

### REPORT FORM 2025-2026

- District \_\_\_\_\_ Auxiliary \_\_\_\_\_  
(Name and Number)
3. Location \_\_\_\_\_  
(Address) (City) (Zip)
4. Name of Auxiliary President \_\_\_\_\_  
(If Auxiliary President did not preside, provide name and title of person that did preside over the meeting).
5. Are those serving in the positions of President, Secretary, Treasurer and Trustee (all three) the same as who were submitted to Department Secretary? YES \_\_\_\_\_ NO \_\_\_\_\_ (check one)  
**If NO, complete their information (name, address, phone number, email and Member I.D. number) on a separate sheet and attach it to this sheet when submitting this visit report.**
6. The office of the President shall hold the original bond of both offices. Ask the President to see the Bond. Does the Bond show both the office of President and Treasurer Bonded?  
YES \_\_\_\_\_ NO \_\_\_\_\_ (check one)  
Bonded by Whom? \_\_\_\_\_ Date Bond Expires \_\_\_\_\_
7. How many regular Business Meetings are held in the year? \_\_\_\_\_  
If less than 12, what are the blackout months? \_\_\_\_\_  
Day/Date of regular Business Meeting \_\_\_\_\_ Meeting start time \_\_\_\_\_
8. What does the Auxiliary charge as an admission fee for new members? \$ \_\_\_\_\_
9. What are the **Annual dues** for this Auxiliary? \$ \_\_\_\_\_
10. Previous year's membership as of June 30 \_\_\_\_\_ Membership at time of visit \_\_\_\_\_
11. Average attendance at monthly business meeting \_\_\_\_\_
12. Does the Auxiliary hold active recruiting events? YES \_\_\_\_\_ NO \_\_\_\_\_ (check one)
13. Is Business Meeting set up Roundtable, Contemporary or Traditional? (circle one)
14. Is the President using the current *Podium Edition: Bylaws and Ritual* during the meeting?  
YES \_\_\_\_\_ NO \_\_\_\_\_ (check one)

15. Are the meetings following the Auxiliary Order of Business according to the Ritual?

YES \_\_\_\_\_ NO \_\_\_\_\_ (check one)

16. Do newly obligated members receive the Auxiliary membership pin and current *Podium Edition: Bylaws and Ritual*? YES \_\_\_\_\_ NO \_\_\_\_\_ (check one)

17. With a show of hands during the meeting, how many members present are:

Logged on to Malta? \_\_\_\_\_

Use the Resources page on the National website? \_\_\_\_\_

Receive the e-newsletter? \_\_\_\_\_

**18. DOES THE SECRETARY:**

a. Keep the minute book according to the Booklet of Instructions? YES \_\_\_\_\_ NO \_\_\_\_\_

b. Are the minutes kept in a bound book **OR** typed in a binder? (circle one)

c. Is the book of the Secretary audited quarterly according to the Bylaws? YES \_\_\_\_\_ NO \_\_\_\_\_

d. Do elected Trustees sign all pages of the Secretary's minutes? YES \_\_\_\_\_ NO \_\_\_\_\_

e. Is the Bond incorporated into the minutes? YES \_\_\_\_\_ NO \_\_\_\_\_

f. Is the Treasurers report incorporated in the Minute Book of the Secretary? YES \_\_\_\_\_ NO \_\_\_\_\_

g. Is the Audit incorporated in the Minute Book of the Secretary? YES \_\_\_\_\_ NO \_\_\_\_\_

h. What is the date of the last Audit noted in the Secretary's Minute Book? \_\_\_\_\_

i. Does Secretary read the minutes as part of the order of business? YES \_\_\_\_\_ NO \_\_\_\_\_

j. Are Department and/or National Communications read by the Secretary? YES \_\_\_\_\_ NO \_\_\_\_\_

**19. DOES THE TREASURER:**

a. Maintain Treasurers Books according to the Bylaws and Booklet of Instructions?

YES \_\_\_\_\_ NO \_\_\_\_\_

b. Is the Treasurers work kept in a bound book **OR** typed in a binder? (circle one)

c. Are the Treasurer's book and **all records** (bank statements, savings books, bingo accounts, receipt books etc.) of the Treasurer audited quarterly according to the Bylaws and signed by the Trustees (must be at least one (1) elected trustee)? YES \_\_\_\_\_ NO \_\_\_\_\_

d. What is the date of the last audit noted in the Treasurers Book? \_\_\_\_\_

e. Does the Treasurer read her report as part of the Order of Business? YES \_\_\_\_\_ NO \_\_\_\_\_

f. Are all funds audited (relief, savings, ways and means, Bingo, cancer insurance, kitchen, etc.)?

YES \_\_\_\_\_ NO \_\_\_\_\_

g. Has the 990N been filed with the IRS? YES \_\_\_\_\_ NO \_\_\_\_\_

File date of 990 form \_\_\_\_\_ Date copy of form sent to Department Office \_\_\_\_\_

h. Does the Treasurer have a computer or access to one to complete all the duties of the office?

YES \_\_\_\_\_ NO \_\_\_\_\_

i. Ask the Treasurer if he or she has accessed MALTA, the Treasurer's webpage on the National website and if he or she has printed out the Treasurer's Guide and needed forms for the office of Treasurer (membership applications, etc.)

Accessed MALTA? YES \_\_\_\_\_ NO \_\_\_\_\_

Accessed the Treasurer's webpage on the National website? YES \_\_\_\_\_ NO \_\_\_\_\_

Printed out the Treasurer's Guide? YES \_\_\_\_\_ NO \_\_\_\_\_

**20. DO THE TRUSTEES (ask them directly):**

*If not present prior to the meeting, ask them to stay a few minutes after the meeting. Please do not take up a lot of their time.*

a. Hold audits and have all the books and paperwork in their possession when performing the audit?  
YES \_\_\_\_\_ NO \_\_\_\_\_

Do they do the actual audit **OR** does the Treasurer? \_\_\_\_\_

b. Follow the "How to Do an Audit" Guidelines available from Department? YES \_\_\_\_\_ NO \_\_\_\_\_

c. Does the #1 Trustee call the audit and send the completed audit to Department?  
YES \_\_\_\_\_ NO \_\_\_\_\_

If **NO**, give the position of the person who mails the audit \_\_\_\_\_

d. Read the Quarterly Audit and ensure it is acted upon at the meeting? YES \_\_\_\_\_ NO \_\_\_\_\_

e. Do the Trustees get the bills from Conductor/Conductress, sign them for approval or reject the bills and make or give a report under REPORT OF TRUSTEES in the meeting?  
YES \_\_\_\_\_ NO \_\_\_\_\_

**21. Have Chairmen been appointed to correspond with ALL National and Department Programs?**

YES \_\_\_\_\_ NO \_\_\_\_\_

If no, what programs are lacking a chairman and why? \_\_\_\_\_

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**22. Did the Auxiliary President have his or her Chairmen promote Programs or talk about Program projects involving the members?** YES \_\_\_\_\_ NO \_\_\_\_\_

**23. Is the Auxiliary participating in reporting on Programs?** YES \_\_\_\_\_ NO \_\_\_\_\_

**24. Do you consider this Auxiliary to be in good working order?** YES \_\_\_\_\_ NO \_\_\_\_\_

Why or why not? \_\_\_\_\_

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**25. List any questions or concerns that arose during the visit for which our Department needs to respond that will help or encourage this Auxiliary.** \_\_\_\_\_

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***I Certify I have visited the Auxiliary listed above*** \_\_\_\_\_

(Signature of District President/Visiting Officer)

**THE RECORDS OF THE SECRETARY AND TREASURER  
MUST BE SIGNED BY THE VISITING OFFICER**

Three copies are needed:

- One copy for the Auxiliary President
- One copy for the District President
- One copy for the Department President to be sent within seven (7) days after the visit date

Mail to: Michael Yates  
1620 W. Evergreen Drive  
Citrus Springs, FL. 34434

Date mailed to Department President \_\_\_\_\_

