

VFW AUXILIARY DEPT OF FLORIDA SUGGESTED PROGRAM GIFT CONTRIBUTIONS

For 2026-2027 PROGRAM YEAR

(Auxiliary Gift Contributions are posted monthly at www.vfwauxfl.org)

DISTRICT #: _____ **AUXILIARY NUMBER:** _____

PROGRAM	CONTRIBUTION AMOUNT
HOSPITAL PLEDGE (.25 PER MEMBER AS OF 6/30/2026)	
HOSPITAL FUND Specify VA Facility – Bay Pines; Tampa; WPB; Gainesville; Lake City; Miami; Orlando	
HOSPITAL CHRISTMAS IN OCTOBER (\$60) Specify VA Facility – Bay Pines; Tampa; WPB; Gainesville; Lake City; Miami; Orlando	
DEPARTMENT PRESIDENT'S SPECIAL PROJECT	
FLORIDA HOUSE – National Home	
SCHOLARSHIPS	
VFW NATIONAL HOME	
VFW VETERANS' VILLAGE (FT. MCCOY)	
YOUTH ACTIVITIES	
CHECK NUMBER # _____ CHECK AMOUNT: _____	

MAKE ALL CHECKS PAYABLE TO [VFW AUXILIARY](#)
Mail Checks with this Completed Program Contributions Form to:
Department Treasurer Cindy Estell
PO Box 55850
St Petersburg FL 33732-5850

THIS FORM IS TO BE USED ONLY FOR
Contributions made to the Dept of FL VFW Auxiliary for the Programs listed above.

DO NOT include Donations for 'Health & Happiness' and the 'National President Special Project'. These Gift Donations MUST be made and paid through MALTA under the Auxiliary Treasurer Duties