

## MEMBERSHIP REPORT 2025-2026

YOUR AUXILIARY IS ENCOURAGED TO REPORT AFTER EACH PROJECT'S COMPLETION.

ALL REPORTS MUST BE SUBMITTED BY MARCH 31, 2026

District#: \_\_\_\_\_ Auxiliary #: \_\_\_\_\_ Auxiliary City: \_\_\_\_\_ Date Submitted: \_\_\_\_\_

Submitted by: \_\_\_\_\_ Phone and Email of Submitter: \_\_\_\_\_

**#1.** Did your Auxiliary participate in a recruiting event or Membership drive? Please give the location of the event in the Description of your project and forward (1) one picture to the Department Membership Chairman.

Hours Worked: \_\_\_\_\_ Dollars Spent: \_\_\_\_\_ Value of Goods/Services Donated: \_\_\_\_\_

Date of Activity: \_\_\_\_\_ # of Members Participating: \_\_\_\_\_ Description of Project: \_\_\_\_\_

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**#2.** Did your Auxiliary create your own letter informing your members about dues and activities for the year, or did you use the pre-generated letter from MALTA? Please answer in the Description of Project section.

Hours Worked: \_\_\_\_\_ Dollars Spent: \_\_\_\_\_ Value of Goods/Services Donated: \_\_\_\_\_

Date of Activity: \_\_\_\_\_ # of Members Participating: \_\_\_\_\_ Description of Project: \_\_\_\_\_

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**#3.** When did your Auxiliary send out the first round of dues notices? \_\_\_\_\_ 2<sup>nd</sup> round: \_\_\_\_\_

Hours Worked: \_\_\_\_\_ Dollars Spent: \_\_\_\_\_ Value of Goods/Services Donated: \_\_\_\_\_

Date of Activity: \_\_\_\_\_ # of Members Participating: \_\_\_\_\_ Description of Project: \_\_\_\_\_

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**#4.** Did your Auxiliary convert any Annual Memberships to Life? Yes \_\_\_\_\_ No \_\_\_\_\_

Please add the number of converted to Life in the Description of Project section.

Hours Worked: \_\_\_\_\_ Dollars Spent: \_\_\_\_\_ Value of Goods/Services Donated: \_\_\_\_\_

Date of Activity: \_\_\_\_\_ # of Members Participating: \_\_\_\_\_ Description of Project: \_\_\_\_\_

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**#5.** Did your Auxiliary recruit any NEW MEMBERS? Report the following:

# of ANNUAL \_\_\_\_\_ # of LIFE \_\_\_\_\_ # of REJOIN \_\_\_\_\_

**Send this form to:** Mike McCandless, 422 Winn Rd, Salina, KS 67401 or [mikevfw@yahoo.com](mailto:mikevfw@yahoo.com)

Send one copy to your District Chairman. Keep one copy for your Auxiliary file