

Legislative/PAC Reporting Form

Auxiliary # _____

Auxiliary Name _____

District # _____

1. Amount of donation to PAC _____

2. How was the money raised? _____

Please give details of fundraiser or event.

3. How did you promote the program?

Please make copies of this form and mail to:

Barbara Alicie

119 Sugarleaf Dr.

Cedar Bluff, VA 24609

E-mail: radar1@aol.com

Phone: 276-964-9216