



Veterans of Foreign Wars Program Chairperson Appointments

Post # _____ City: _____
or Report for the District # _____

Attn: Brent Jones
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Sioux Falls, SD 57104
brent@vfwdeptsd.com

Following are the **Program Chairperson Appointments** as required by the Department of South Dakota VFW:

Community Service:
(Reporting to the Dashboard)

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Email: _____
Phone Number: _____

Buddy Poppy:
(Fundraisers, Poppy Displays, Poppy Use, etc.)

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Email: _____
Phone Number: _____

Citizenship:
(LE, EMT, Firefighter and Teacher of the Year, School, Church Events, etc.)

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Email: _____
Phone Number: _____

Voice of Democracy:

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Email: _____
Phone Number: _____

Patriot's Pen:

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Email: _____
Phone Number: _____

Signed: _____

Printed Name: _____

Title: _____

Date: _____

Please return to Department Office **via email or USPS**
no later than 1 July