



POPPY DISTRIBUTION FORM - REQUEST ONLY (One distribution only)

Unit Number / Location _____

is requesting _____ as a distribution date*

*Department approved distribution dates are Poppy Day, Memorial Day, and Veterans Day. All other dates must be approved by emailing the Department President at president@alafl.org.

We are distributing poppies that we currently have remaining from our previous order.

The Unit agrees to pay the American Legion Auxiliary, Department of Florida, twenty-five (25%) of the net proceeds of this distribution within 30 days, which is

_____ (date proceeds due to Department)

Signature _____

Title _____

Email _____

Phone Number _____

Please email this form to membership@alafl.org. A confirmation will be replied within 24 hours.