

**Official Poppy Order Form 2025-2026**  
**American Legion Auxiliary Department of New York, Inc.**

<b>OFFICE USE ONLY</b>
Check# _____
Date _____
Amt. _____
Date Rec. _____

**Mail this form & check made payable to:**

American Legion Auxiliary, Department of New York  
1580 Columbia Turnpike, Bldg. #1, Suite #3,  
Castleton-on-Hudson, NY 12033

**Place your order prior to December 1, 2025**  
**Orders received after due date may not be filled**

(The Department of New York will continue to have poppies made by Veterans in hospitals or special workshops supervised by the American Legion Auxiliary.) In consideration of your furnishing and shipping the following material, we hereby agree to conduct ourselves under the rules and regulations set forth by our Department and National Organizations. It is understood that the merchandise is not returnable. **Upon receipt of your poppy order, please store it in a dry place.**

**PLEASE TYPE OR PRINT LEGIBLY**

**Minimum order**

**Poppy Order: 1000 poppies \$250. \_\_\_\_\_ 500 poppies \$125. \_\_\_\_\_ minimum**

\_\_\_\_\_ **Poppy Can Labels - Minimum order 4/\$1.00**

Unit/Post Name \_\_\_\_\_ # \_\_\_\_\_ County \_\_\_\_\_ District \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Phone : (\_\_\_\_) \_\_\_\_\_ E-mail \_\_\_\_\_

**Rules Governing American Legion Auxiliary Poppy Drive**

*Poppies offered to the public in New York State under the name and emblem of the American Legion Auxiliary and American Legion are still being made by Veterans who are being paid for their work. Posts and Units sponsoring Poppy Drives and offering poppies are prohibited from buying or selling poppies other than those offered on the above order blank. A resolution amended and adopted on May 9, 2013, by the American Legion National Executive Committee replaces and supersedes all previous American Legion National Poppy Program Resolutions. Orders shall be sent to the name and address appearing on this order blank. Service on the Poppy Drive shall be voluntary. There are no paid workers. Net proceeds from the Poppy Drive shall be used for Veterans, military, and their families.*

**Maureen F. Morgan**  
**Department President**

**Kathy Soule**  
**Department Poppy Chairman**

**Ship To: (Please open and inspect poppies when received.)**  
**PLEASE TYPE OR PRINT CLEARLY**

**Name** \_\_\_\_\_

**Address** \_\_\_\_\_ **(No PO Box or RD Numbers)**

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_