

"FOR INFORMATION ONLY - NOT FOR JUDGING"

LADIES AUXILIARY of the FLEET RESERVE ASSOCIATION

UNIT CHAPLAIN'S REPORT

Unit Number: _____ Unit Name: _____ Region: _____

Date Submitted: _____ Year: _____ Group: _____

1. Have the Regional and National Chaplains been notified of deceased members, with names and addresses of next of kin provided? _____
2. Have the MSA been notified of deceased members? _____
3. Did your Unit have Memorial Services for deceased members? _____
4. Did your Unit make donations in memory of deceased? _____
5. Number of members attending FRA/LA FRA Memorial Services or FRA/LA FRA funerals/services _____
6. Number of funerals attended _____
7. Number of members providing food for family of deceased _____
8. Number of get-well & cheer cards sent to members - by members _____
9. Number of sympathy cards sent to members - by members _____
10. Number of phone calls to members _____
11. Number of deceased members: **July 1, 2017 - June 30, 2018** _____
12. List noteworthy activities in Chaplain's work in the Unit: _____

UNIT PRESIDENT

UNIT SECRETARY

UNIT CHAPLAIN

MAIL ORIGINAL COPY TO THE REGIONAL CHAPLAIN 15 DAYS
PRIOR TO CONVENING OF REGIONAL CONVENTION.
KEEP ONE COPY FOR THE UNIT FILES

Rev.2013

GALE NATHAN NCHAP
9345 Blue House Road
Ladson SC 29456