

FOR INFORMATION ONLY – NOT FOR JUDGING

COMBINED CHAPLAIN’S REPORT

REGION _____ YEAR _____

UNITS IN REGION _____ NUMBER UNITS SUBMITTING REPORTS: _____

1. NUMBER OF UNITS THAT NOTIFIED NATIONAL & REGIONAL
CHAPLAINS OF DECEASED MEMBERS’ NEXT OF KIN
2. NUMBER OF UNITS THAT NOTIFIED MSA OF DECEASED
MEMBERS
3. NUMBER OF UNITS HAVING MEMORIAL SERVICES FOR DECEASED
MEMBERS
4. NUMBER OF UNITS THAT GAVE DONATIONS IN MEMORY OF
DECEASED.....
5. NUMBER OF UNITS ATTENDING FRA & LA FRA MEMORIAL SERVICES
OR FRA/LA FRA FUNERAL/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: July1, 20__ to June 30, 20__.....

RECOMMENDATIONS TO UNITS AND/OR REPORT FOR CHANGES: _____

CHAPLAIN

APPROVED: _____
REGIONAL PRESIDENT

MAIL COPY OF THIS REPORT TO NATIONAL CHAPLAIN
IMMEDIATELY UPON COMPLETION OF
REGIONAL CONVENTION