MOCA Auxiliary Chaplain

MONTHLY (Due 15 th of Month)	YEAR-END(Due immediately following the strength of the	(E-Mail / mail to your Grand Chaplain) lowing Grand Convention)
•		Grand of:
Number of Auxiliarie AS GRAND CHAPI		mber of Auxiliaries reporting:
	Get Well:	\$ Amount Spent on:
Sympathy:		Memorials: \$
Thinking of You:		Flowers, Gifts, Food: \$
(NOTE: include e-mail messages in the card cour		nnt) Postage: \$
Number of phone calls made to the sick:		Number of visits made to the sick:
Number of funerals a		
AUXILIARY REPO		
Cards sent by members: Get Well:		\$ Amount Spent on:
Sympathy:		Memorials: \$
Thinking of You:		Flowers, Gifts, Food: \$
(NOTE: include e-mail messages in the card count)		nnt) Postage: \$
Number of phone calls made to the sick:		Number of visits made to the sick:
Number of funerals a		
Please PRINT the nar		MONTHLY REPORT pers in your Auxiliary (Please state illness)
Supreme Chaplain &	es (separate form) are to l & Supreme Treasurer	be sent to the Grand Chaplain to be forwarded to the
		·, ·
(Mailing address)	(City) (State) (Zip)
(Home Phone)	(Cell Phone)	,