UNIT CHAPLAIN'S – REPORT FORM 2024-2025 (Please print or type)

Reporting Date: Before May 1, 2025

Name of CHAPLAIN:	UNIT:		
Unit does not have a Chaplain			
No. of invocations:	Benedictions:		
Charters Draped:	Memorial Service held:		
Courtesies of Gold Star Families: Dues	Cards Gifts Total Cost:		
Total amount of Memorial donations: \$			
No. of Funerals attended:	No. Of Members attended:		
Grave markers placed	Total Cost		
Did your Unit prepare a Prayer Book for the Unit President?			
Were Prayers sent in for the Department President's Book?			
Were Prayers sent in for the National President's Prayer Book?			

** No activities, hours, expenses, donations, or dollars spent for this committee are to be included in the Impact report.

Send this report to your District Chaplain

Keep a copy for your records

Unit/District Chaplain Year-End Report Form (Due May 1, 2025)

Stephanie McMullen 16575 W. Moreland St. Goodyear, AZ 85338 stephaniemcmullenala62az@gmail.com

Unit/District Nam	e & Number		# of Members
Chaplain name			Chaplain phone:
Chaplain Address			
	•	et celebrated God in your ralls, other meetings where o	neetings? Please include senior and Junior God was celebrated:
letters/activities,	Junior Activities, Ch	<i>aplain</i> activities like Praye	ALA programs? Please include <i>Poppy</i> r books, <i>National Security</i> such as cards to es where God was celebrated:
	•	•	events? Please include Four Chaplains, ities, other events where God was celebrated:
Please use a sepa	rate sheet to elabor	ate and/or submit an entr	y for the Sharon Alley Service to God and
• ''	ou've already done include them in my	•	eleting this report!). Please send photos (not
How many: Sym	pathy cards	Get well cards	Thinking of You cards
"Joy" Cards	Phone calls	Memorial Services_	Charter Drapes
\$\$ donated in Memoriam: \$ Recipients of donations:			ns:

Thank you for your efforts to keep our organization's faith in God and Country strong!