



Ladies of the Grand Army of the Republic, Inc.



Chaplain's Report

- Department of _____, number of circles _____
- Circle Name _____ No. _____
- Member at Large _____

1. Number of Sisters passed away during the year _____

Name _____ Date (Month/Year) _____

Name _____ Date (Month/Year) _____

Name _____ Date (Month/Year) _____

If more, please write on back or attach sheet. The names will be read aloud at the memorial service at the National Encampment so please print. Please note Past National/Dept Presidents.

2. Number of Honorary Members (male) passed away during the year _____

Name _____ Date (Month/Year) _____

3. Number of Veterans', Sisters' and Honored Members' graves decorated _____

4. Number of Sisters who attended Memorial Day Services _____

5. Number of Flags used or distributed on Memorial Day _____

6. Number of Children who participated in Memorial Day activities _____

7. Other Memorial Day or Remembrance Activities (examples: flowers strewn upon the water, reenactments, marched/rode in parade, church service participation). Please list:

What is needed from the Department or National Chaplain in the coming year?

Ideas: _____

Respectfully submitted in F. C. & L. by

_____ (Name)

Address _____ City _____ State _____ zip _____

Phone _____ email _____

Circles send to Department Secretary

Departments send to National Secretary