

Sons of Union Veterans of the Civil War
CAMP ANNUAL REPORT (Form 27)

(Two copies are due at the Department Headquarters on or before April 30 of each year. Retain a copy for Camp records.)

Camp Name: _____ Camp No. _____ City: _____

Department of: _____ Report for Current Year _____

INSTRUCTIONS: This form is the annual report of your camp to your department. It also serves as an update for your camp status by reporting items since you last submitted a Camp Status Report (Form 30). All brothers who are new to your camp or have left your camp since your last Camp Status Report will be reported on this form. Ensure you are using the current version of SUVCW forms. These are available on the National website under "Governance." See additional instructions on page 5 of this form.

CAMP STRENGTH SUMMARY

LAST ANNUAL REPORT	Members		Associates		Jr. Members		Jr. Associates		Total
1. IN GOOD STANDING	_____	+	_____	+	_____	+	_____	=	_____
GAINS	Members		Associates		Jr. Members		Jr. Associates		Total
2. By Organization (new camps, only)	_____		_____		_____		_____		_____
3. By Application/Initiation	_____		_____		_____		_____		_____
4. By Junior to Member/Associate	_____		_____		_____		_____		_____
5. By Transfer In	_____		_____		_____		_____		_____
6. By Reinstatement	_____		_____		_____		_____		_____
7. By Dual Status	_____		_____		_____		_____		_____
8. Gained from lifted suspension	_____		_____		_____		_____		_____
9. TOTAL GAINS (Add lines 2 thru 8)	_____	+	_____	+	_____	+	_____	=	_____
LOSSES (Note 1)	Members		Associates		Jr. Members		Jr. Associates		Total
10. By Death	_____		_____		_____		_____		_____
11. By Drop (Gen. Discharge)	_____		_____		_____		_____		_____
12. By Honorable Discharge	_____		_____		_____		_____		_____
13. By Junior to Member/Assoc	_____		_____		_____		_____		_____
14. By Transfer Out	_____		_____		_____		_____		_____
15. By Termination of Dual Status	_____		_____		_____		_____		_____
16. By Suspension	_____		_____		_____		_____		_____
17. TOTAL LOSSES (Add Lines 10 thru 16)	_____	+	_____	+	_____	+	_____	=	_____
THIS ANNUAL REPORT	Members		Associates		Jr. Members		Jr. Associates		Total
18. IN GOOD STANDING	_____	+	_____	+	_____	+	_____	=	_____
(Line 1 + Line 9 - Line 17)									

Note 1: Report totals since last annual report.

SUMMARY INFORMATION

	Members		Associates		Total
19. Dual Brothers:	_____	+	_____	=	_____

The following "New Members" and "New Members Under Age 40" information is used by the Commander-in-Chief to determine eligibility for certain awards. If the information is not furnished by the camp, it cannot be considered by the CinC.

20. New Members since last annual report: _____

21. New Members underage of 40 since last annual report: _____

BROTHERS EXEMPT FROM NATIONAL PER CAPITA

22. National Life Members *(List on page 4)* _____ 25. National Honorary Members _____
 23. Real Sons *(List on page 4)* _____ *(Only Nationally approved Honorary Members are exempt – List on page 4)*
 24. Brothers in War Zone _____ 26. Juniors *(List on page 4)* _____
(Attach letter with name, rank, branch, & location of service – List on page 4) 27. Junior Associates *(List on page 4)* _____

28. TOTAL EXEMPTIONS *(Add lines 22 thru 27)* _____**PAYMENT CALCULATIONS****NATIONAL PER CAPITA**

29. Total Number of Brothers in Good Standing *(Enter number from Line 18)* _____
 30. Total Number of Brothers Exempt from National Per Capita *(Enter number from Line 28)* _____
 31. Total Number of New Brothers with Applications Previously Submitted Between Jan 1 and Mar 31 _____ (Excluding Jrs.)
 32. Total Number of Brothers Subject to National Per Capita *(Subtract Lines 30 and 31 from Line 29)* _____
 33. National Per Capita Rate as of January 1, 2023 \$33.00
 34. Multiply Line 32 times \$33. This is the total National Per Capita due _____

NEW BROTHERS APPLICATION FEES

35. New Brothers since Last Annual Report *(Enter Total for Line 3)* _____
 36. Enter Number of Brothers for whom Applications Were Previously Submitted _____
 37. Amount for Individual Application Fees \$5.00
 38. Subtract Line 36 from Line 35 and multiply times Line 37. This is the total of application fees due _____

REINSTATED BROTHERS SUBJECT TO REINSTATEMENT FEE

39. Reinstated Brothers since Last Annual Report *(Enter Total for Line 6)* _____
 40. Enter Number of Brothers Whose Reinstatements Were Previously Submitted _____
 41. Amount for Reinstatement Fees \$10.00
 42. Subtract Line 40 from Line 39 and multiply times Line 41. This is the total reinstatement fees due _____

DEPARTMENT DUES

43. Note: If applicable to your camp, enter Life Members subject to Department dues. _____
 44. Brothers Subject to Department Dues *(include line 43)* _____
 45. Total Number of New Brothers with Applications Previously Submitted Between Jan 1 and Mar 31 _____
 46. Total Number of Brothers Subject to Department Dues *(Subtract Lines 45 from Line 44)* _____
 47. Enter Amount of Department Dues, if applicable _____
 48. Multiply Line 46 times Line 47. This is the amount of Department Dues _____
 49. **TOTAL AMOUNT DUE TO DEPARTMENT** *(Add Line 34 + Line 38 + Line 42 + Line 48)* _____

CAMP SECRETARY CERTIFICATION

Signature of Secretary _____ Printed Name _____

CAMP FINANCE REPORT

50. Balance on Hand Shown on Last Camp Annual Report \$ _____
 51. Balance on Hand as of This Camp Annual Report \$ _____
 52. Camp EIN Number _____ 53. Date Camp last filed IRS 990 with IRS _____

NOTE: In accordance with National Regulations Chapter I, Article I, Section 4, all monies and other assets, including real and personal property held by Camps, Departments, and the National Organization are charged with a trust for the purposes for which the Order exists, as stated in its Act of Incorporation. Any use of said monies or other assets, including real and personal property for other purposes is illegal and shall subject the parties concerned to disciplinary action under Article VI of Chapter V and may be restrained by the Commander-in-Chief or Council of Administration to the extent, if necessary, of taking possession and control of the money or assets involved. For record keeping, please furnish the names of each financial institution in which Camp funds are being held. Please attach a separate sheet if necessary.

54. The following is a listing of all financial institutions in which camp funds are being held:

	Bank/Financial Institution Name	Street Address	City/State
54a.	_____	_____	_____
54b.	_____	_____	_____
54c.	_____	_____	_____
54d.	_____	_____	_____

*Attach Additional Sheet, if Necessary***CAMP TREASURER CERTIFICATION**

Signature of Treasurer _____ Printed Name _____

Report of Change of Address Since Last Camp Status Report (Form 30)

<i>Name</i>	<i>Address & Email</i>

*Attach additional sheets, if necessary***National Life Members / National Honorary Members / Real Sons****(List all approved National Life Members, approved National Honorary Members, and Real Sons Who Belong to the Camp)**

<i>Name</i>	<i>National Life Member #</i>	<i>Name</i>	<i>National Life Member #</i>

*Attach additional sheets, if necessary***Camp Junior Member and Junior Associate Roster****(List all Junior Members and Junior Associates who belong to the Camp)***Junior Members and Junior Associates will automatically be upgraded to Member or Associate, as appropriate, in the National database on their fourteenth birthday, if their date of birth has been reported.*

<i>Name</i>	<i>Street Address/City/State/Zip</i>	<i>Date of Birth*</i>

**Provide Date of Birth, if possible.
(mm/dd/yyyy)**Attach additional sheets, if necessary***Brothers Assigned in War Zone**
(Brother must currently be assigned in a designated War Zone.)

<i>Name</i>	<i>Duty Station Location</i>

*Attach additional sheets, if necessary***CAMP COMMANDER APPROVAL**

	Signature of Commander _____	Date Approved _____
	Printed Name: _____	

Date Submitted to Department Headquarters: _____

Additional instructions:

The camp must submit two (2) copies of the Camp Annual Report (Form 27) to the Department Secretary, along with all supporting documentation, including the check for all monies due to the department, on or before April 30 of each year. The camp must also retain a copy of the report for its records. A camp roster must also be included with the report. This roster must have the following information:

1. Full name. Only use a brother's proper name in all reports, do NOT use nicknames.
2. Mailing address, to include street address or P.O. box number, city, state, and Zip code+4. Also, include country for international addresses
3. Status of Brother (Member, Associate, Junior Member Junior Associate, Real Son, Life Member, etc.)
4. Phone number
5. Email address
6. Date of birth (especially for Junior Members and Junior Associates)

Include two (2) copies of the application and supporting documents for each new brother not previously reported. Use the most recent version of the form from the National website.

Check your arithmetic on pages 1 and 2 before calculating the totals. Please assure the numbers under 'This Annual Report' reflect the data listed above that category; otherwise, your exemption numbers will not subtract correctly!

Once the Form 27 has been submitted to the department, all additions, deletions, and changes to the Camp membership will be reported through the Department Secretary using a Form 30 with supporting documentation, as required.

Junior Members and Junior Associates do not receive the *Banner* unless they specifically pay for a subscription.

Do not submit page 5 with your completed report!