

American Legion Auxiliary, Department of New York, Inc.

**Unit Chaplain's Report Form
2009 – 2010**

CHAPLAIN _____ **UNIT** _____

No. of Invocations _____ Benedictions _____

No. of Grace Cards Distributed _____ Charters Draped _____

Memorial services held _____ Were Juniors included? _____

No. of members visiting shut-ins or hospitalized members _____ Hours _____

Courtesies to Gold Star Mothers _____ Dues _____ Cards _____ Gifts _____ Total Cost _____

List organizations receiving Memorial donations _____

_____ Total Amt. _____

No. of Funerals attended _____ No. of members attended _____

Grave markers placed _____ Total cost _____

Other courtesies to Bereaved _____

_____ Total Cost _____

Did your Unit/County conduct Chapel of Four Chaplains Program? _____

Did you include members of the Legion Family? _____

Did your Unit donate to the Chapel of Four Chaplains? _____ Amount donated _____

Did your Unit participate with the Legion Family in observing:
Veterans Day? _____ Memorial Day? _____ Independence Day? _____

Did your Unit prepare a Prayer Book for the Unit President? _____

Were prayers sent in for the Department President's Prayer Book? _____

Were prayers sent in for the National President's Prayer Book? _____

Did your Unit use the "Reflections" page as a resource for their Chaplains activities? _____

Report to be received by County Chaplain no later than:

Nov. 1, 2009 March 1, 2010 May 1, 2010

Please send a copy of this report to your County President too!