



Chaplain

District # _____ District Chaplain _____
Phone # _____ Email: _____
of Units Reporting _____ # of Units with No Activity: _____

1. How many Gold Star members in your District? _____
2. Total Number of Units reporting deaths in their Unit? _____
3. Total number of Deaths reported in the District? _____
4. How many Units held a Memorial Service? _____
5. How many Units draped their Charter? _____
6. How many Units donated to the "In Loving Tribute Fund? _____
How much? _____
7. How many Units attended or hosted a "Four Chaplains" Memorial Event? _____
8. Did your District hold a "Four Chaplains" Memorial Event? Yes _____ No _____
9. How many total greeting cards were sent by your Units and the District Chaplain?

Please mark the quantity for each type:

Anniversary		Birthday		Sympathy	
Congratulations		Encouragement		Thinking of You	
Get Well		Other			

10. How many Units attended (A), Hosted (H), or Participated (P), in events for any of the following holidays?

Memorial Day		9/11		Flag Day	
Independence Day		Veterans Day		Any Service's Birthday	

Please attach a supplemental report describing your District's success stories in working the Chaplain Program. Please include pictures on a separate sheet at the end of your report. All pictures must be submitted in either .jpg or .pdf format.

Department Chaplain: Melanie Taylor
457 Muscat Drive, Cloverdale, CA 95425
707-953-7240 mtaylor95425@gmail.com

Submit this completed form to your Department Chaplain no later than May 1, 2025