

**LADIES AUXILIARY of the FLEET RESERVE ASSOCIATION**

**REGIONAL PRESIDENT'S ANNUAL REPORT**

YEAR SERVED: \_\_\_\_\_

REGION: \_\_\_\_\_

How many Units in your Region?	_____
How many Units officially visited?	_____
How many Units you Installed?	_____
How many Unit Installations you attended?	_____
Number Quarterly Reports Submitted?	_____
Did you submit Regional Annual Report Winners?	_____
Membership at beginning of Fiscal Year?	_____
Membership at the end of Fiscal Year?	_____
How many deceased members?	_____
Membership Gain (+) or Loss (-) at end of Fiscal Year?	_____

**SUMMARY OF UNITS' PARTICIPATIONS:**

UNIT ACTIVITIES

Units Submitting Reports	_____
Total members in Units	_____

AMERICANISM

Units Submitting Reports	_____
Total members in Units	_____

HOSPITAL

Units Submitting Reports	_____
Total members in Units	_____

PUBLICITY

Units Submitting Reports	_____
Total members in Units	_____

WELFARE

Units Submitting Reports	_____
Total members in Units	_____

YOUTH

Units Submitting Reports	_____
Total members in Units	_____

**SUMMARY OF YOUR REGIONAL PRESIDENT'S TERM:(use only the space provided below)**

Signature \_\_\_\_\_ Email \_\_\_\_\_