



Military Order of the Stars and Bars

Annual Chapter Report

Period ending December 31, 20 ____

Chapter Name _____ No. _____ City _____

Commander _____

Address _____

City _____ State _____ Zip _____

Phone _____

Home _____ Work _____ Cell _____

Email _____

Adjutant _____

Address _____

City _____ State _____ Zip _____

Phone _____

Home _____ Work _____ Cell _____

Email _____

Army of Northern Virginia

Army of Tennessee

Army of Trans Mississippi

Form prepared by:

Printed Name

Signature

1) Total Members Last Year _____

2) New Members _____

3) Transfers From Other Chapters _____

4) Sub Total (Add lines 1-3) _____

5) Members Delinquent _____

6) Transferred to Other Chapters _____

7) Members Deaths _____

8) Sub Total (Add lines 5-7) _____

9) Total Members In Good Standing _____

Subtract line 8 from line 4) _____

Chapter Meets

Monthly _____ Bimonthly _____

Quarterly _____ Semi-Annually _____

Annually _____

This reporting period

Number of meetings _____

Number of special meetings _____

Memorial Day _____

Meeting Location _____

Elections

Officers are elected for a term of

1 Year

2 Years

Officers take office in _____, 20____

Comments

Accomplishments: _____

Distribution: 1-MOSB IHQ, 1-Chief of Staff, 1-Army Commander, 1-Society Adjutant 1-Society Commander, 1- Chapter file

A copy of your current chapter roster must be attached to this report

Mail to the current MOSB International Headquarters address