

**PROGRAM: CHAPLAIN / MUSIC**  
Unit Annual Narrative Report 2017-2018  
Department of Wisconsin

Unit Number and Name \_\_\_\_\_ District \_\_\_\_\_

Unit City \_\_\_\_\_ Unit President's Name \_\_\_\_\_

Complete Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

1. How many unit members passed away during the past year? \_\_\_\_\_
2. Does your unit hold a Memorial Service for your deceased members?  Yes  No
3. Was your Charter draped for your deceased members?  Yes  No
4. Do you participate with the American Legion Family in observing:  
Independence Day?  Yes  No  
Memorial Day?  Yes  No  
Veterans Day?  Yes  No

List Other Joint Events:

5. Do you participate in the Prayer Book Contest?  Yes  No
6. Do you send prayers for Department President Bonnie Jakubczyk's Prayer Book?  Yes  No
7. Do you incorporate Music with your unit meetings and events?  Yes  No
8. How does your unit provide emotional and spiritual support for our American Legion Family members?

**Please list any Chaplain/Music activities, events and projects your Unit was involved in**  
(continue on the back or add a separate piece of paper if necessary).

**Please Complete and Return by APRIL 13, 2018 to:**

American Legion Auxiliary, Dept of Wisconsin  
PO Box 140, Portage, WI 53901-0140