AUXILIARY TO SONS OF UNION VETERANS OF THE CIVIL WAR
DEPARTMENT PATRIOTIC INSTRUCTOR'S REPORT

(Send one copy to the National Patriotic Instructor by July 1st and retain one copy for Department records)

Department Name _____ Date (MM/DD/YYYY) _____

1. Number (#) of flags distributed by the Auxiliary: _____
2. Number (#) flags flown by Sisters on Memorial Day: _____
3. Number (#) of Patriotic Programs given by the Auxiliary: _____
4. Number (#) of National Anniversaries observed by the Auxiliary: _____
5. Number (#) of occasions Auxiliary and Camp have united for Patriotic Work: _____
6. Amount expended for Patriotic Work: $_____
7. Amount of Cash or Monetary Donations for the Patriotic Instructor's Fund: $_____

Special Mention:

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Department Patriotic Instructor Signature