

(ANB) ANS **Camp** _____
(Circle one) (Fill in) (Add your camp's name)

LOCAL CAMP ANNUAL REPORT 2020 ANB-ANS GRAND CAMP

Number of Regular Members in good standing on the date when delegates were elected _____

Number of Lifetime Members on the date when delegates were elected _____

Number of Junior members on the date when delegates were elected _____

Total Division-of-Dues to be paid (Multiply by \$6.00/Regular & Life)(\$1.00/Junior) \$ _____

Donation to Grand Camp \$ _____

Donation to Grand Camp's Scholarship fund \$ _____

Date on which current officers were elected _____

President _____ Secretary _____

Vice President _____ Treasurer _____

_____ Sgt. at Arms _____

Camp Council _____ Camp Council _____

Highlights of this Camp's activities since the last Grand Camp:

Names of deceased to call at Memorial Service: _____

Submitted by
Camp President _____
Phone _____ Email _____

Camp Secretary _____
Phone _____ Email _____