



Send to Company Recording Secretary by June 15

# Camp Annual Year-End Statistical Report June

(Bylaws page 24)

Camp \_\_\_\_\_ Date \_\_\_\_\_

This report is to be completed by the Camp Secretary who served prior to June 1<sup>st</sup> and is to be sent to the Company Recording Secretary by June 15<sup>th</sup>.

Company \_\_\_\_\_ State or Province \_\_\_\_\_ Date \_\_\_\_\_ 20\_\_

List below names, registration # and death dates of deceased members from June 1 to May 31

Name	Reg. #	Death date
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Total Active** Members (dues paid) as of May 31. \_\_\_\_\_

**Total Inactive** enrolled members as of May 31. \_\_\_\_\_

Total number **new** members registered this year. (June 1 – May 31). \_\_\_\_\_

Total number **eligible** ladies that have attended but have not registered. \_\_\_\_\_

**Associates** of DUP who made a donation fee \_\_\_\_\_

Number attending company training seminar (August) \_\_\_\_\_ Number attending District Convention \_\_\_\_\_

Total number of DUP bound lesson books purchased by camp & members. \_\_\_\_\_

(Museum Memories, Pioneer Pathways, Chronicles of Courage, or Enduring Legacy)

Total number of pioneer histories read at camp meetings. \_\_\_\_\_

Total number of **new** pioneer histories **read** at camp meeting \_\_\_\_\_ and submitted \_\_\_\_\_

Total number of **new** locality histories read at camp meeting \_\_\_\_\_ and submitted \_\_\_\_\_

Date camp elections were held (biennial of even numbered years). \_\_\_\_\_

Do you have an 'Outreach' representative? \_\_\_\_\_ Name \_\_\_\_\_ Phone \_\_\_\_\_

Do you have a Computer/IT person? \_\_\_\_\_ Name \_\_\_\_\_ Phone \_\_\_\_\_

Do you have Publicity Representative? \_\_\_\_\_ Name \_\_\_\_\_ Phone \_\_\_\_\_

Are you responsible for a DUP museum? \_\_\_\_\_ Director/Contact \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

\*List members of your Museum Board on the reverse side of this report.

Signature of Secretary preparing report \_\_\_\_\_ Reg. # \_\_\_\_\_ Signature of Captain preparing report \_\_\_\_\_ Reg. # \_\_\_\_\_

Current Secretary \_\_\_\_\_ Reg. # \_\_\_\_\_ Current Captain \_\_\_\_\_ Reg. # \_\_\_\_\_

Address \_\_\_\_\_ Phone # \_\_\_\_\_ Address \_\_\_\_\_ Phone # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_