MILITARY ORDER OF THE PURPLE HEART AUXILIARY

Unit Installation Report _____ (year) Region _____

The following Officers were ELECTED and/or APPOINTED and INSTALLED in Unit # _____ in _____
(state)

THE NATIONAL BYLAWS REQUIRE THAT THIS FORM BE RECEIVED BY THE NATIONAL SECRETARY NOT LATER THAN MAY 31st . A member may not hold more than one elected position in the Unit.

EIN#_____ Unit Name _____ City_____ State_____

TITLE	Member #	NAME	ADDRESS	PHONE	EMAIL
President					
Sr Vice President					
Jr Vice President					
Treasurer					
Parliamentarian					
Sgt-At-Arms					
Trustee 1 Year					
Trustee 2 Year					
Trustee 3 Year					
		APPOINTED			
Secretary					
Chaplain					
Patriotic Instr.					
Historian					
Marshal					
Musician					

Unit (only) meets on: _____ at _____
Time and date/day of month (address)

_____ Installing Officer Name and Title

_____ Installation Date

_____ Retiring Unit Secretary

IMMEDIATELY UPON INSTALLATION, SEND FORM TO: Nat'l. Secretary, Region President, and Dept. Secretary (where a dept. exists).
Member changes in address, email, etc. should be provided to the National Membership Officer and National Secretary.

Revised 2018

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