

# DEPARTMENT DISTRICT REPRESENTATIVE REPORT FORM

District \_\_\_\_\_ Date \_\_\_\_\_ Location and Time \_\_\_\_\_

District Officers Present: \_\_\_\_\_ District Officers Absent: \_\_\_\_\_ District Officers Excused: \_\_\_\_\_ Total # Members Present: \_\_\_\_\_

Was meeting IAW to Rituals  District minutes Read & Approved:  Were the GOs and other Bulletins read and discussed:

Post	Quota	Present Membership	Present Percentage	Cmdr	REP.	Members	Remarks
				<input type="checkbox"/>	<input type="checkbox"/>		
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				<input type="checkbox"/>	<input type="checkbox"/>		

REMARKS: (Please indicate good and bad points observed, especially those that should be addressed by Department Officers.)

Department Representative \_\_\_\_\_

[If form is accurate please print a copy for your records]

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