



Military Order of the Stars and Bars

Annual Army Report

Period ending December 31, 20 ____

Society _____

Commander _____
 Address _____

 City _____ State _____ Zip _____
 Phone _____
 Home Work Cell
 Email _____

Army of Northern Virginia
 Army of Tennessee
 Army of Trans Mississippi

Form prepared by:

Adjutant _____
 Address _____

 City _____ State _____ Zip _____
 Phone _____
 Home Work Cell
 Email _____

Printed Name

Signature

Societies										
1. New Members										
2. Transfers From Other Chapters										
3. Previous Members In Good Standing										
4. Sub TOTAL (1 + 2 + 3)										
5. Members Delinquent										
6. Transferred To Other Chapters										
7. Member Deaths										
8. Sub TOTAL (5 + 6 + 7)										
9. Total Members In Good Standing (4-8)										
10. Society Total (Add all columns, Line 9)										
11. Previous Year Total										
12. Net Gain/Loss (Line 10 - Line 11)										