



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