

Monthly Activities Report Area Commander

Report for Month of	Area
Name	
Made contact with Area Chairmen (list na	mes and Chairmanship)
Miles traveled: Posts Contacte	ed:
Letters written: (Please attach copy)	
Post Visitations made (attach copy of Pos	t Visitation Report to this report):
Post	
Area/District/Post Activities attended:	
Problems encountered:	
My major program pushes and goals for n	ext month:
Signed:	

Send to Rachel Castleberry at Department Headquarters by the 2nd Monday of each month.

Mail: P.O. Box 547859, Orlando, FL 32854 Email: rcastleberry@floridalegion.org

Fax: 407-299-0901