



NAVY LEAGUE OF THE UNITED STATES

## 2016 Council Annual Report

*(Revised 01/17)*

**DUE March 17, 2017**

Questions? Contact [annualreport@navyleague.org](mailto:annualreport@navyleague.org)

**Navy League of the United States  
COUNCIL ANNUAL REPORT**

**DUE March 17, 2017**

**Why must Councils report on Council programs, activities, and finances?**

- Submission of an Annual Report is a requirement for Councils to receive semi-annual rebates.
- Financial information is required to accurately portray our tax-exempt status.
- Council Awards are based in part on a timely submission and content.
  - It is acceptable to add additional pages or other documentation to demonstrate the Council's fulfillment of the requirements for awards.
  - Photos or any additional supporting documents are greatly appreciated and will enhance your council's story; however, it is **not** required.
- The accuracy of your responses will ensure we maintain a high standard of public service and will encourage public support of our programs.
- Accurate reporting assists in tell the correct Navy League story about what members are doing in their communities.

**When you have completed the report, please submit via e-mail to: [annualreport@navyleague.org](mailto:annualreport@navyleague.org)**

**In the subject line of your email, please write: "Council Name" Annual Report Submission. With 220+ councils, this will help us quickly identify your specific annual report should you have follow up queries about the information submitted. We thank you in advance for your assistance with this request.**

**E-mail a copy to your council's: [Region President and Area President](#)**

We recommend you keep a copy of this report for your council's records.

**Notice and Reporting Time Period**

Failure to submit this report will result in forfeiture of Council dues rebates for the 2017 calendar year. For those Councils that participate in the group exemption, delayed submission may also endanger the Council's Section 501(c) (3) federal income tax exemption, coverage under the Group Insurance policy, and exemption from any state sales/use taxes. This report is submitted in accordance with the National Bylaws of the Navy League of the United States, the National Policies adopted by the National Board of Directors and in satisfaction of the Council's obligation of compliance therewith.

Council activity and financial information is for the *previous* calendar year. **Council officer information is for the current calendar year.** The 2016 Annual Report will list 2016 activities and financial data and your 2017 Council incoming officers.





**Navy League of the United States  
COUNCIL ANNUAL REPORT FOR 2016**

**Questions? Contact [annualreport@navyleague.org](mailto:annualreport@navyleague.org)**  
(Revised 1/17)

**DUE March 17, 2017**

Council: \_\_\_\_\_  
Region: \_\_\_\_\_ Area: \_\_\_\_\_  
Charter Date: \_\_\_\_\_  
Form Completed by: \_\_\_\_\_ Date Form Completed: \_\_\_\_\_

**PERMANENT COUNCIL ADDRESS AND COMMUNICATION INFORMATION**

Council Address Line 1: \_\_\_\_\_  
Council Address Line 2: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Country: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_  
Phone 1: \_\_\_\_\_  Home  Cell  Business  
Phone 2: \_\_\_\_\_  Home  Cell  Business  
Fax: \_\_\_\_\_  
Council Email: \_\_\_\_\_ Council Website URL: \_\_\_\_\_  
Blog URL: \_\_\_\_\_  
Facebook URL: \_\_\_\_\_  
Twitter Handle: \_\_\_\_\_  
Instagram Name: \_\_\_\_\_  
YouTube Channel Name: \_\_\_\_\_  
Other (Flickr / Tumblr): \_\_\_\_\_



## COUNCIL ANNUAL REPORT - 2016 REPORTING OFFICERS

President: \_\_\_\_\_ Member #: \_\_\_\_\_  
Address Line 1: \_\_\_\_\_  
Address Line 2: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Country: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone 1: \_\_\_\_\_  Home  Cell  Business  
Phone 2: \_\_\_\_\_  Home  Cell  Business

Treasurer/Other: \_\_\_\_\_ Member #: \_\_\_\_\_  
Address Line 1: \_\_\_\_\_  
Address Line 2: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Country: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone 1: \_\_\_\_\_  Home  Cell  Business  
Phone 2: \_\_\_\_\_  Home  Cell  Business

## 2017 INCOMING OFFICERS and COMMITTEE CHAIRS

**Month Council Officer Elections Held:** \_\_\_\_\_ **Date New Officers Take Office:** \_\_\_\_\_

President: \_\_\_\_\_ Member #: \_\_\_\_\_  
Address Line 1: \_\_\_\_\_  
Address Line 2: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Country: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone 1: \_\_\_\_\_  Home  Cell  Business  
Phone 2: \_\_\_\_\_  Home  Cell  Business



Treasurer: \_\_\_\_\_ Member #: \_\_\_\_\_  
Address Line 1: \_\_\_\_\_  
Address Line 2: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Country: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone 1: \_\_\_\_\_  Home  Cell  Business  
Phone 2: \_\_\_\_\_  Home  Cell  Business

Council Contact: \_\_\_\_\_ Member #: \_\_\_\_\_  
Address Line 1: \_\_\_\_\_  
Address Line 2: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Country: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone 1: \_\_\_\_\_  Home  Cell  Business  
Phone 2: \_\_\_\_\_  Home  Cell  Business

Membership: \_\_\_\_\_ Member #: \_\_\_\_\_  
Address Line 1: \_\_\_\_\_  
Address Line 2: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Country: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone 1: \_\_\_\_\_  Home  Cell  Business  
Phone 2: \_\_\_\_\_  Home  Cell  Business

Legislative Affairs: \_\_\_\_\_ Member #: \_\_\_\_\_  
Address Line 1: \_\_\_\_\_  
Address Line 2: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Country: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone 1: \_\_\_\_\_  Home  Cell  Business  
Phone 2: \_\_\_\_\_  Home  Cell  Business



Other: \_\_\_\_\_ Member #: \_\_\_\_\_  
Address Line 1: \_\_\_\_\_  
Address Line 2: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Country: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone 1: \_\_\_\_\_  Home  Cell  Business  
Phone 2: \_\_\_\_\_  Home  Cell  Business

Other: \_\_\_\_\_ Member #: \_\_\_\_\_  
Address Line 1: \_\_\_\_\_  
Address Line 2: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Country: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone 1: \_\_\_\_\_  Home  Cell  Business  
Phone 2: \_\_\_\_\_  Home  Cell  Business



## 2016 COUNCIL FINANCIAL AND GIVING INFORMATION

### Council's Tax Exempt Status

1. How is your Council legally organized?  Unincorporated  Corporation  Other (describe below)  
Other: \_\_\_\_\_
2. What is the status of your Council's tax exemption?  Group  Individual  None  
Date of IRS tax determination letter (if individual exemption): \_\_\_\_\_
3. Federal Tax ID or Employer Identification Number (EIN): \_\_\_\_\_
4. Has the Council filed all necessary state and local charitable registration forms?  Yes  No  
*Failure to file the appropriate forms with STATE and LOCAL regulator may also jeopardize the Council's tax exempt status.*
5. Is the Council up to date in its IRS and State filings?  Yes  No  
If **yes**, please submit a copy of your last filing. If **no**, what was the last date filed? \_\_\_\_\_
6. Date of last financial audit: \_\_\_\_\_
7. Total Council assets (cash and investments) as of December 31, 2016: \$ \_\_\_\_\_
8. Did the Council employ a paid Executive Director or Administrator as of December 31, 2016?  Yes  No

**IMPORTANT NOTE:** All members of the Group Tax Exemption Program must email Ryan Donaldson (groupexemption@navyleague.org) of any change that may affect their tax-exempt status. Please note Councils **are not automatically** part of the Group Tax Exemption Program. Information on how to apply may be found in the Operations Manual.

### Council Rebate Information

Complete this section only if you have not reported this information to the Finance Controller at Headquarters. If you prefer to all in with this information, please contact the Finance Controller at: 800-365-5760. International Councils do NOT need to submit this information.

1. Account Name (exactly as it appears on Council Financials): \_\_\_\_\_
2. Institution Name: \_\_\_\_\_
3. Routing Number: \_\_\_\_\_ Account Number: \_\_\_\_\_  
Type of Account:  Checking  Savings

## SUMMARY OF MAJOR COUNCIL ACTIVITIES FOR THE PAST YEAR (2016)

This section is a snapshot of your Council's activities last year. ***If you need more space*** for any of the questions, please continue and attach the information on separate sheets. Please notate the Section heading (i.e. "Sea Services-Related Events/Support") and related information on the attachment for which additional information is being provided.

### Council Operations

1. Did your Council hold Directors meetings? Yes  No  **If Yes:** How many? \_\_\_\_\_
2. Did your Council hold General Membership meetings? Yes  No  **If Yes:** How many? \_\_\_\_\_
3. Did your Council actively recruit Community Affiliate members? Yes  No  **If Yes:** How many? \_\_\_\_\_

### Council Fundraising Events

List all council fundraising events, purpose and net profit for each event. If your council supports more activities, please provide a separate listing.

Event Name: \_\_\_\_\_  
Activity: \_\_\_\_\_

Date: \_\_\_\_\_  
Net Profit: \_\_\_\_\_

Event Name: \_\_\_\_\_  
Activity: \_\_\_\_\_

Date: \_\_\_\_\_  
Net Profit: \_\_\_\_\_

Event Name: \_\_\_\_\_  
Activity: \_\_\_\_\_

Date: \_\_\_\_\_  
Net Profit: \_\_\_\_\_

Event Name: \_\_\_\_\_  
Activity: \_\_\_\_\_

Date: \_\_\_\_\_  
Net Profit: \_\_\_\_\_

Event Name: \_\_\_\_\_  
Activity: \_\_\_\_\_

Date: \_\_\_\_\_  
Net Profit: \_\_\_\_\_





## Council Youth Support

1. Did the Council support Youth Programs?  Yes  No

If **YES**, state which type of youth group, and the name of the group that was supported. Complete each statement for each group (i.e. number of scholarships, number of awards given, and funding amounts, etc. – **see example**).

| List Type<br>(use only<br>abbreviations)<br>USNSCC,<br>USNLCC<br>NJROTC<br>MCNROTC<br>YM, or OTHER | Unit Name             | Is this a New<br>Adoption?<br>(Y or N) | # of<br>Scholarships<br>Awarded | Total Amount<br>of<br>Scholarships<br>Awarded | # of<br>Awards<br>given | Total Amount<br>of Annual<br>Support<br>(excluding<br>scholarships) | Did you<br>provide<br>Seapower<br>magazine to<br>this group?<br>(Y or N) |
|----------------------------------------------------------------------------------------------------|-----------------------|----------------------------------------|---------------------------------|-----------------------------------------------|-------------------------|---------------------------------------------------------------------|--------------------------------------------------------------------------|
| Ex: USNSCC                                                                                         | Desert Eagle Squadron | N                                      | 1                               | \$500                                         | 4                       | \$2500                                                              | Y                                                                        |
|                                                                                                    |                       |                                        |                                 |                                               |                         |                                                                     |                                                                          |
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|                                                                                                    |                       |                                        |                                 |                                               |                         |                                                                     |                                                                          |





3. List all schools, libraries, units to whom your Council provides *SEAPOW*ER subscriptions and any other Youth Programs your Council supports:

Group Name \_\_\_\_\_  
 Group Name \_\_\_\_\_  
 Group Name \_\_\_\_\_

**Science, Technology, Engineering, Math (STEM)**

1. Does your council participate in any science, technology, engineering or math (STEM) activities?  
 Yes (please describe activities below; if school-based program, indicate YES or NO)  
 No (please answer # 2)

Activity Name: \_\_\_\_\_ Date: \_\_\_ / \_\_\_ / \_\_\_ School-based program? \_\_\_\_\_

Activity Name: \_\_\_\_\_ Date: \_\_\_ / \_\_\_ / \_\_\_ School-based program? \_\_\_\_\_

Activity Name: \_\_\_\_\_ Date: \_\_\_ / \_\_\_ / \_\_\_ School-based program? \_\_\_\_\_

2. *Is your council interested in starting a STEM program in 2017?*  
 Yes  No

3. Estimated annual expense for Council STEM Program(s). \$ \_\_\_\_\_

4. Do any of your council members mentor a Sea Cadet/NJROTC student/program?  
 Yes  No If **YES**, please describe the relationship?

\_\_\_\_\_

5. Did you receive external funding source for STEM?  
 Yes  No If **YES**, from whom? \_\_\_\_\_ Amount of external funding: \$ \_\_\_\_\_



## Sea Services Support

Did the Council provide sea services support to Commands, Units and Squadrons?  Yes  No

If **YES**, state which sea service was supported, and **how** they were supported (financial, awards or scholarship, and the total amounts for each event).  
*(see example.)*

|     | List Service Type (use only abbreviations)<br>USN, USMC<br>USCG, USNS<br>or OTHER | Unit Name (List Unit, Command, Squadron, Ship)          | Is this a New Adoption?<br>(Y or N) | # of Scholarships Awarded | Total Amount of Scholarships Awarded | # of Awards given | Total Amount of Annual Support (excluding scholarships) | Did you provide Seapower magazine to this group?<br>(Y or N) |
|-----|-----------------------------------------------------------------------------------|---------------------------------------------------------|-------------------------------------|---------------------------|--------------------------------------|-------------------|---------------------------------------------------------|--------------------------------------------------------------|
| Ex: | USN                                                                               | Naval Air Facility El Centro (alternate: NAF El Centro) | N                                   | 0                         | 0                                    | 25                | \$5000                                                  | Y                                                            |
|     |                                                                                   |                                                         |                                     |                           |                                      |                   |                                                         |                                                              |
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|     |                                                                                   |                                                         |                                     |                           |                                      |                   |                                                         |                                                              |



**Sea Services-Related Events** (i.e. Homecoming, Air show, Fleet Week, Birthday Ball, etc.)

Did your Council hold sea services-related events (NOT awards)?  Yes  No  If **Yes**, How many? \_\_\_\_\_

If yes, please list all sea service events below. If your council supports more activities, please provide a separate listing.

Event Name: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Support Type: \_\_\_\_\_

Event Name: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Support Type: \_\_\_\_\_

Event Name: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Support Type: \_\_\_\_\_

Event Name: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Support Type: \_\_\_\_\_

Event Name: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Support Type: \_\_\_\_\_

**Council Ship Commissioning and Adoption Activity**

1. Was your Council involved in the commissioning or decommissioning of a ship/command/unit this year?  Yes  No

If **YES**, how many? \_\_\_\_\_

2. List all ships/command/units commissioning or decommissioning events and funds raised in support of the event(s).

Event Name: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Funds Raised: \$ \_\_\_\_\_  Commissioning?  Decommissioning?

Event Name: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Funds Raised: \$ \_\_\_\_\_  Commissioning?  Decommissioning?

Event Name: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Funds Raised: \$ \_\_\_\_\_  Commissioning?  Decommissioning?

3. Did your Council adopt a ship/command/unit this year?  Yes  No If **YES**, how many? \_\_\_\_\_

## Sea Services-Related Family Support

Did your Council provide support to local military families?  Yes  No

**If Yes:** List your Council's sea services family support activities (e.g. financial, career, morale). If your council supports more activities, please provide a separate listing.

Activity Name: \_\_\_\_\_ Date: \_\_\_ / \_\_\_ / \_\_\_  
Support: \_\_\_\_\_

Activity Name: \_\_\_\_\_ Date: \_\_\_ / \_\_\_ / \_\_\_  
Support: \_\_\_\_\_

Activity Name: \_\_\_\_\_ Date: \_\_\_ / \_\_\_ / \_\_\_  
Support: \_\_\_\_\_

Activity Name: \_\_\_\_\_ Date: \_\_\_ / \_\_\_ / \_\_\_  
Support: \_\_\_\_\_

## Sea Service-Related Awards (i.e. Sailor or Spouse Awards and Scholarships – *not youth groups*)

List your Council's sea services awards or scholarships to service and/or family members, if applicable, If your council supports more activities, please provide a separate listing.

Award: \_\_\_\_\_ Date: \_\_\_ / \_\_\_ / \_\_\_

Award: \_\_\_\_\_ Date: \_\_\_ / \_\_\_ / \_\_\_

Award: \_\_\_\_\_ Date: \_\_\_ / \_\_\_ / \_\_\_

Award: \_\_\_\_\_ Date: \_\_\_ / \_\_\_ / \_\_\_

Award: \_\_\_\_\_ Date: \_\_\_ / \_\_\_ / \_\_\_



4. List all ships/commands/units adopted or supported in 2016.

Ship/Unit/Command Name: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Event/Support Type: \_\_\_\_\_  Supported?  Adopted?

Ship/Unit/Command Name: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Event/Support Type: \_\_\_\_\_  Supported?  Adopted?

Ship/Unit/Command Name: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Event/Support Type: \_\_\_\_\_  Supported?  Adopted?

### Public Education Activities

1. Did your council hold joint meetings with local civic groups or veteran organizations? (i.e. Rotary, VFW, etc.)  Yes  No

2. List all joint meetings with other civic groups or veteran service organizations:

Event Name: \_\_\_\_\_

Organization: \_\_\_\_\_

Date: \_\_\_\_\_

Attendance: \_\_\_\_\_

Event Name: \_\_\_\_\_

Organization: \_\_\_\_\_

Date: \_\_\_\_\_

Attendance: \_\_\_\_\_

Event Name: \_\_\_\_\_

Organization: \_\_\_\_\_

Date: \_\_\_\_\_

Attendance: \_\_\_\_\_

Event Name: \_\_\_\_\_

Organization: \_\_\_\_\_

Date: \_\_\_\_\_

Attendance: \_\_\_\_\_

Event Name: \_\_\_\_\_

Organization: \_\_\_\_\_

Date: \_\_\_\_\_

Attendance: \_\_\_\_\_



3. Did your Council make presentations to local schools?  Yes  No If YES, how many? \_\_\_\_\_

Event Name: \_\_\_\_\_  
Organization: \_\_\_\_\_

Date: \_\_\_\_\_  
Attendance: \_\_\_\_\_

Event Name: \_\_\_\_\_  
Organization: \_\_\_\_\_

Date: \_\_\_\_\_  
Attendance: \_\_\_\_\_

Event Name: \_\_\_\_\_  
Organization: \_\_\_\_\_

Date: \_\_\_\_\_  
Attendance: \_\_\_\_\_

Event Name: \_\_\_\_\_  
Organization: \_\_\_\_\_

Date: \_\_\_\_\_  
Attendance: \_\_\_\_\_

4. Did your Council conduct sea services seminars/panel discussions?

With industry partners?  Yes  No If YES, how many? \_\_\_\_\_

With other civic organizations?  Yes  No If YES, how many? \_\_\_\_\_

At a local college or university?  Yes  No If YES, how many? \_\_\_\_\_

5. List seminar / panel discussions:

Event Name: \_\_\_\_\_  
Attendance: \_\_\_\_\_

Date: \_\_\_\_\_

Event Name: \_\_\_\_\_  
Attendance: \_\_\_\_\_

Date: \_\_\_\_\_

Event Name: \_\_\_\_\_  
Attendance: \_\_\_\_\_

Date: \_\_\_\_\_

Event Name: \_\_\_\_\_  
Attendance: \_\_\_\_\_

Date: \_\_\_\_\_

6. Did your Council submit op-eds or letters to the editor in local publications?  Yes  No

If YES, how many? \_\_\_\_\_

**Please submit any copies that were published with annual report submission.**





7. Did your Council display a Navy League information or membership booth at any public education activities?  Yes  No  
If **YES**, how many? \_\_\_\_\_

Event Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Activity: \_\_\_\_\_ Attendance: \_\_\_\_\_

Event Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Activity: \_\_\_\_\_ Attendance: \_\_\_\_\_

Event Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Activity: \_\_\_\_\_ Attendance: \_\_\_\_\_

Event Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Activity: \_\_\_\_\_ Attendance: \_\_\_\_\_

8. Did your Council publish a newsletter?  Yes  No If **YES**, what is the frequency (monthly, quarterly, etc.)? \_\_\_\_\_

a. Newsletter name: \_\_\_\_\_

b. In what format is the newsletter published?  Electronic  Print  Both

c. In what format in the newsletter created (e.g. Mail Chimp, Constant Contact, Luminare, etc.)? \_\_\_\_\_

9. Did your Council have an active Speaker's Bureau?  Yes  No If **YES**, how many? \_\_\_\_\_

10. Did your Council have any other public education activities?  Yes  No If **YES**, how many? \_\_\_\_\_

Event Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Activity: \_\_\_\_\_ Attendance: \_\_\_\_\_

Event Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Activity: \_\_\_\_\_ Attendance: \_\_\_\_\_

Event Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Activity: \_\_\_\_\_ Attendance: \_\_\_\_\_



**Advocacy and Legislative Outreach**

- 1. Did your Council participate in legislative grass roots program(s)?      Yes       No       **If Yes:** How many? \_\_\_\_\_
- 2. Did a Council member(s) give a presentation to Member(s) of Congress or their staffers?      Yes       No       **If Yes:** How many? \_\_\_\_\_
- 3. Did your Council send letters to Congress on Navy league issues?      Yes       No       **If Yes:** How many? \_\_\_\_\_
- 4. Did your Council invite a Representative to speak at Council event?      Yes       No       **If Yes:** How many? \_\_\_\_\_
- 5. Did your Council give recognition to a Member of Congress?      Yes       No       **If Yes:** How many? \_\_\_\_\_
- 6. Did your Council distribute Legislative Updates to Council members?      Yes       No       **If Yes:** How many? \_\_\_\_\_
- 7. Other activities (advocacy or Legislative Outreach, e.g. Navy League presentations):  
Yes       No       **If Yes:** How many? \_\_\_\_\_

List all Congressional and any other Advocacy and Legislative Outreach activities:

Event Name \_\_\_\_\_  
Activity \_\_\_\_\_ Date    /    /

Event Name \_\_\_\_\_  
Activity \_\_\_\_\_ Date    /    /

Event Name \_\_\_\_\_  
Activity \_\_\_\_\_ Date    /    /

Event Name \_\_\_\_\_  
Activity \_\_\_\_\_ Date    /    /

Event Name \_\_\_\_\_  
Activity \_\_\_\_\_ Date    /    /

