



**BRIGADE
TEXAS DIVISION
SONS OF CONFEDERATE VETERANS**



QUARTERLY REPORT

CAMP NAME: _____ CAMP #: _____ CITY: _____

QUARTERLY REPORT FOR: (Check appropriate box below)

Sep-Nov ☐ Dec-Feb ☐ Mar-May ☐ Jun-Aug ☐ Year _____

NUMBER OF MEMBERS:

Total Camp Members _____ Division Life Members _____ IHQ Life Members _____

Number of Cadets _____ Number of Friends of the Confederacy _____

Number of New Members _____ Number of Members Transferred In _____ Out _____

DEATH OF ANY MEMBER: YES NO

List Name	SCV Member No.	Date of Death
_____	_____	_____
_____	_____	_____
_____	_____	_____

CAMP ACTIVITIES: (Since last Quarterly Report)

Programs: (Include Title of Program and Presenter)

Parades: (Include Name, Date, City of Parade. List Camp Participants and Appropriate Details)

EVENTS: (Related to the Camp or its Members – List by Date)

ADDITIONAL COMMENTS:

Respectfully submitted,

Camp Commander and/or Adjutant

HERITAGE DEFENSE REPORT

CAMP NAME: _____ CAMP #: _____ CITY: _____

QUARTERLY REPORT FOR: (Check appropriate box below)

Sep-Nov ☐ Dec-Feb ☐ Mar-May ☐ Jun-Aug ☐ Year _____

OPENING PARAGRAPH: (Introduction to Report)

HERITAGE DEFENSE ITEMS: (Since last Quarterly Report, broken down by date – be as detailed as necessary regarding times, places, names, etc. regarding the event or occurrence to include end result, action taken or anticipated, etc.)

SUMMARY OR CONCLUDING PARAGRAPH: (This paragraph will focus on the Commander's Analysis of the Heritage Defense situation within his Area of Responsibility and his view of the impact/actions he contemplates in the short-term future and what, if anything, the Camp / Commander needs from Higher HQ to assist the Camp in meeting current or future challenges.

Respectfully submitted,

Camp Commander and/or Adjutant

NOTE: Submit these Reports together to the Brigade Commander by the suspense date he has designated.