

United Daughters of the Confederacy®

MONUMENTS AND MEMORIAL MARKERS COMMITTEE ANNUAL REPORT

September 1, 20 _____ – August 31, 20 _____

Chapter name and number _____

Division or Chapter Where No Division (CWND) name _____

The following questions refer to Confederate monuments and memorial markers. Monuments include: boulders, obelisks, pillars, slabs, statues, or other permanent structures erected as a memorial. Memorial markers include: permanent signs, plaques, tablets. Monuments and memorial markers are placed in memory of an individual Confederate, a specific group of Confederates, or to mark a Confederate historic site. Securely attach to this form the appropriate brochures, newspaper articles, photos, programs, or other documentation. If more space is needed, use reverse of this sheet.

1. Number dedicated _____ rededicated _____ Total _____
Describe in detail, including location(s) and date(s). _____

2. Number repaired _____ beautified _____ Total _____
Describe in detail, including cost, location(s) and date(s). _____

3. Number purchased and erected or installed (report also to Historian General) _____
Describe in detail, including cost, location(s), and date(s). _____

4. Number of programs or ceremonies held at a Confederate monument/memorial marker:
sponsored by Chapter _____ participated in by Chapter _____
Describe in detail, including location(s) and date(s). _____

5. Visits to Confederate monuments/memorial markers:
by Chapter as a group _____ by individual Chapter members _____
List location(s) and date(s) visited by each. _____

For Chapter use. Enter Chairman's name, address, telephone, and e-mail in space below. Complete this form; send to the appropriate Division-level person by the Division deadline of _____

For Division/CWND use. Enter Chairman's name, address, telephone, and e-mail in space below. Compile Chapter reports; complete this form; send to General Committee Chairman by September 15.

Number of Chapters in Division _____ Number of Chapters reporting _____

Chairman contact information. _____