



**DISTRICT: AUXILIARY VISITATION REPORT FORM**

Date of Visit: \_\_\_\_\_

AUXILIARY NAME: \_\_\_\_\_ NO \_\_\_\_\_ DISTRICT \_\_\_\_\_

LOCATION: \_\_\_\_\_  
Address City Zip Code

Has the current installation report been mailed to Department and entered into Malta? Yes \_\_\_\_\_ No \_\_\_\_\_

If the office of President, Treasurer or Secretary has changed has the changed been reported to Department and National Headquarters? Yes \_\_\_\_\_ No \_\_\_\_\_

Does the Auxiliary hold monthly business meetings? Yes \_\_\_\_\_ No \_\_\_\_\_ When?

\_\_\_\_\_ Average attendance at monthly business meetings \_\_\_\_\_

Are the meetings conducted according to the National Bylaws and Ritual? Yes \_\_\_\_\_ No \_\_\_\_\_

Are the current Bylaws and Ritual used during the meetings? Yes \_\_\_\_\_ No \_\_\_\_\_

Are the officers familiar with their duties? Yes \_\_\_\_\_ No \_\_\_\_\_

Membership to date \_\_\_\_\_ Previous year's membership as of June 30<sup>th</sup>, \_\_\_\_\_

Are the current Department General Orders from the President and her message read when received? Yes \_\_\_\_\_ No \_\_\_\_\_

Is the office of the Treasurer and President bonded? Yes \_\_\_\_\_ No \_\_\_\_\_ By Whom? \_\_\_\_\_ Exp.Date \_\_\_\_\_

Does the Secretary and Treasurer keep books according to our By-Laws? Yes \_\_\_\_\_ No \_\_\_\_\_

Does the Treasurer read the report as a part of the Order of Business? Yes \_\_\_\_\_ No \_\_\_\_\_

Is the Treasurer's report incorporated in the Secretary's minute book? Yes \_\_\_\_\_ No \_\_\_\_\_

Are the books of the Treasurer and Secretary audited according to the Bylaws? Yes \_\_\_\_\_ No \_\_\_\_\_

What is the date of the last audit? \_\_\_\_\_

Are the books signed by the trustees when audited? Yes \_\_\_\_\_ No \_\_\_\_\_

Is the quarterly audit read by the Trustees and voted on at the meeting? Yes \_\_\_\_\_ No \_\_\_\_\_

Is the audit report incorporated in the Secretary's minute book? Yes \_\_\_\_\_ No \_\_\_\_\_

Does Trustee #1 mail each quarterly audit to the Dept. Treasurer as required? Yes \_\_\_\_\_ No \_\_\_\_\_

Have all the chairman been appointed to correspond with the National and Department Programs? Yes \_\_\_\_\_ No \_\_\_\_\_

Is the Auxiliary participating? Yes \_\_\_\_\_ No \_\_\_\_\_

Do all the chairman fill out year-end report forms? Yes \_\_\_\_\_ No \_\_\_\_\_ (ask them if they do this)

Do all officers and chairman turn records and properties over to their successor? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you consider this Auxiliary to be in good working order? Yes \_\_\_\_\_ No \_\_\_\_\_

Visiting Officers Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I certify that I have visited this Auxiliary and find them to be in good working order.

\_\_\_\_\_  
Name of District President or Visiting Officer Date of Visit

**Copy to: Auxiliary President, District President, Department President, Department Chief of Staff**