



NORTHEASTERN CONFERENCE BRIGADE SEVENTH-DAY ADVENTIST MEDICAL CADET CORPS

COMMANDER'S Monthly Report

Month of: 20

TYPE OF REPORT: Company Commander Detachment Commander Battalion Commander

NUMBER OF FUNCTIONING CONGREGATIONS WITHIN YOUR TERRITORY:

NUMBER OF ORGANIZED UNITS: Companies Platoons Squads

MEMBERSHIP

CURRENT ACTIVE MEMBERSHIP: D-Company E-Company F-Company

NEW RECRUITS ENROLLED:

CURRENT INACTIVE MEMBERSHIP:

SEPARATED MEMBERS

TOTAL MEMBERSHIP:

NEW UNITS FORMED:

Platoons Squads

Platoons Squads

Platoons Squads

Platoons Squads

Platoons Squads

Platoons Squads

LEADERSHIP MEETING ATTENDANCE: YES NO NONE HELD

MEMBERSHIP ASSEMBLIES' ATTENDANCE: YES NO NONE HELD

UNIFORM INSPECTION RESULT: 100% UNIFORMED 75% UNIFORMED 50% or LESS UNIFORMED

COMMUNITY SERVICE ACTIVITIES/CHURCH ACTIVITIES:

MCC ACTIVITIES AND RESPONSES:	
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MCC EMERGENCY RESPONSE MOBILIZATION:	
TYPE OF MOBILIZATION	
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TYPE OF IN-SERVICE TRAININGS CONDUCTED (BRIGADE or BATTALION):	
NUMBER OF SELF STUDY TRAININGS (FEMA) COMPLETED:	
FEMA #	NAME OF THE COURSE

NARRATIVE COMMENT/SUGGESTIONS/HIGHLIGHTS:					
<p> </p>					
SUBMITTED BY:					
COMPANY COMMANDER'S SUBMISSION: <table border="1"> <tr> <td>Printed Full Name</td> </tr> <tr> <td>Rank</td> </tr> <tr> <td>Assignment</td> </tr> <tr> <td>Date</td> </tr> </table>		Printed Full Name	Rank	Assignment	Date
Printed Full Name					
Rank					
Assignment					
Date					
BATTALION COMMANDER'S SUBMISSION					
<input type="checkbox"/> Signing for company review Printed Full Name					
Rank					
Assignment					
Date					
CHIEF OF STAFF'S REVIEW:					
Printed Full Name Samuel Santiago					
Rank Colonel					
Date					

BRIGADE COMMANDER'S REVIEW:	
Printed Full Name	Brigadier General Gordon M. Jones
Date	
Brigade Commander's Comments/Orders:	
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